

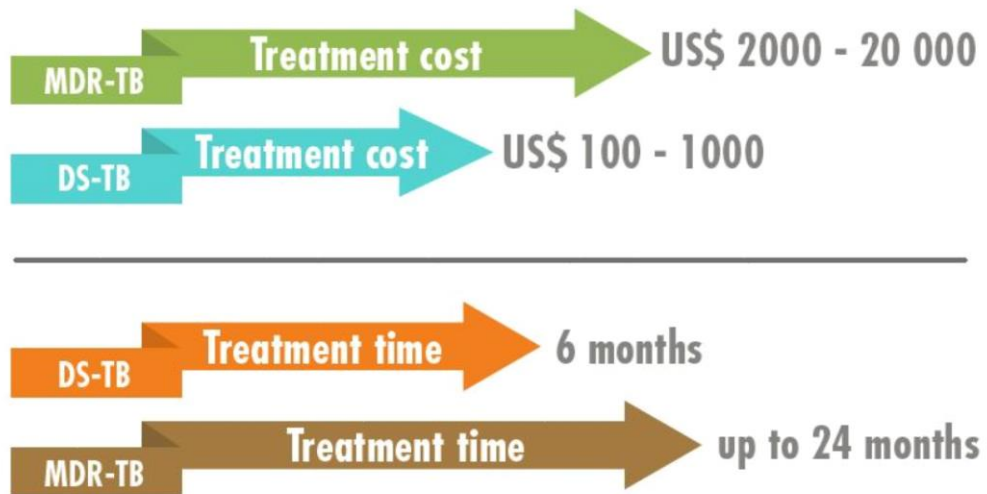


SOUTHERN AFRICA TB AND HEALTH SYSTEMS SUPPORT

SATBHSS Project Update - August 2017

This newsletter provides updates on the implementation of the Southern Africa Tuberculosis and Health Systems Support (SATBHSS) Project which works towards improving coverage and quality of key TB control and occupational lung disease services in project participating countries (Lesotho, Malawi, Mozambique & Zambia). The project also strengthens regional capacity to manage the burden of TB and occupational lung diseases in Southern Africa.

Cost of treating TB per patient



Doubling efforts to tackle the burden of Occupational Lung Diseases and TB in the mines

Johannesburg, 10 July 2017 – Mine workers risk their health to produce the wealth that comes from the mines and we have a responsibility to look after them and their communities in Africa. According to South Africa Department of Health Director General, Madame Precious Matsoso, access to treatment and compensation for occupational lung diseases and TB must be tackled not only from the miners' perspective but also include other vulnerable professions such as health workers who expose themselves while providing treatment to the patients.

Countries must invest in appropriate protective equipment to prevent the spread of occupational TB and put in place compensation procedures. Furthermore, as the region with the highest burden of TB in the world, Madame Matsoso urged Southern African Development Community (SADC) countries to take leadership by investing in research and development for newer, safer TB regimens with shorter treatment time because current treatment of TB is still reliant on regimens that were developed a long time ago.

"The SADC region can pull resources together to invest in research and provide incentives to scientists to find innovative regimens that will reduce the treatment time for TB from 18 months to only 3 months", the Director General said.

Madame Matsoso was speaking at the NEPAD Agency during the opening of a regional Knowledge Exchange on Occupational Health and Safety, and Mine Health Regulation organized by Southern Africa Tuberculosis and Health Systems Support (SATBHSS) project in collaboration with the South Africa Departments of Health, Mineral Resources and Labour. The aim of the Knowledge Exchange is to strengthen regional capacity to



Tb and occupational lung diseases can cause the above damage to the lungs

manage the burden of TB and occupational diseases in the mining sector and is taking place in South Africa from 10 – 15 July 2017. The Knowledge Exchange is hosted by South Africa with participation from SATBHSS project implementing countries; Malawi, Lesotho, Mozambique and Zambia.



Participants viewed modern equipment at different centres within Johannesburg

During the opening remarks, World Bank (WB) representative, Senior Public Health Specialist Melusi Ndhlalambi emphasized that TB control is a major public health and economic development issue that requires governments to dedicate resources to tackle it forcefully. TB knows no borders so tackling it is no longer a national issue, but also a regional one and approaches must realign accordingly. He further stated that the

support from the World Bank is a response to galvanize national efforts to ensure a regional approach is utilised that brings countries to work collaboratively.

Mr Ndhlalambi said that African countries must use innovative and evidence-based solutions to tackle TB. Hence, events such as this Knowledge Exchange not only provide learning opportunities but are also critical in identifying bottlenecks and finding practical solutions to these challenges. He also stated that the knowledge exchange will help to deepen the multi-sectoral synergies at country level, as well as between the countries in the implementation of the SATBHSS project.

NEPAD Agency Head of Health Programmes, Margareth Ndomondo-Sigonda who was speaking on behalf of the CEO, said that working together collaboratively, beyond geographical boundaries will help to tackle the burden of TB in Africa. She stated that the regional knowledge exchange will bring about a paradigm shift in the manner regional and national programmes address the burden of TB in Africa and will become a model that other regions shall endeavour to implement to end TB by 2030 in the continent.

Mrs Sigonda said that by the end of the five (5) days, participating countries will have gained the necessary knowledge, and learnt from each other so that they can contextualize this knowledge and implement similar evidence-based initiatives.

East Central and Southern Africa Health Community (ECSA-HC) representative, Ivandra Chirime reminded participants that one of the biggest challenges we face in occupational diseases is weak expertise and there is need to strengthen this. Therefore, gatherings such as this one are

Knowledge Exchange participants were able to view the Aerosol, a smoke and dust photometer



critical in identifying the necessary measures to strengthen this area in many countries. She reaffirmed that ECSA-HC and NEPAD Agency as regional coordinators of the SATBHSS project are available to provide technical support to the countries in occupational health to save lives and end TB by 2030 in Africa.

Heads of delegations from the SATBHSS project participating countries welcomed the initiative to host a regional knowledge exchange and were looking forward to learning more especially on the on-stop –shop to gain knowledge and exchange ideas that will help to strengthen their efforts to tackle the burden of TB. South Africa has put in place a one-stop-shop where miners can access TB and occupational lung disease services in one place. The one-stop-shop not only deals with administrative issues in treatment and compensation but also reduce the long process of paper work and standing in queues. Countries participating in the knowledge exchange are urged to do the same and incorporate the one-stop-shop concept in to their health systems in addition to solving administrative hurdle of access to treatment and compensation.



Strengthening laboratory systems, cross border surveillance key to ending the TB epidemic

Increased globalization combined with the emergence and re-emergence of infectious diseases such as Tuberculosis has created an increased risk of disease transmission across international borders. In efforts to address this challenge, East Central and Southern Africa Health Community (ECSA-HC) organized the inaugural regional meeting of the Community of Practise (CoP) on Laboratory and Surveillance to improve cross border collaboration in surveillance of Tuberculosis and other priority diseases and strengthen laboratory systems for effective response.

The meeting took place in Maputo, Mozambique from 22 – 25 August 2017 as part of the implementation of the Southern Africa Tuberculosis and Health Systems Support (SATBHSS) Project. The project aims to improve coverage and quality of key TB control and occupational lung disease services in targeted geographic areas of Lesotho, Malawi, Mozambique and Zambia, and strengthen regional capacity to manage the burden of TB and occupational diseases in the

Southern African Development Community (SADC).

During the meeting, Terms of Reference (ToRs) for the CoP were adopted by SATBHSS project countries. The countries also acknowledged existing weak disease surveillance and worked together to develop the first draft of the Framework for Cross-Border Integrated Disease Surveillance and Response. This process was guided by technical experts from ECSA-HC who will further go ahead to refine the document and circulate to the countries for final review.

In attempts to increase synergy, the CoP meeting also noted there are already existing cross-border collaborative committees and activities such as the Zimbabwe-Mozambique-Zambia cross-border initiative and agreed to leverage and strengthen these initiatives for better disease surveillance and response. In addition, the meeting explored the possibility of zoning neighbouring districts in the cross-border areas. As a result, it was agreed that

Countries receive support in operational research activities

Experts from Lesotho, Malawi, Mozambique and Zambia have provided country information that will feed in to the process of completing the proposal development for the Cost-Benefit analysis and health impact studies which will be implemented and coordinated with technical support from the East Central and Southern Africa Health Community (ECSA-HC). ECSA-HC also provided support towards the development of a comprehensive, and inclusive plan to introduce client satisfaction tracking in routine TB services and will help to improve service delivery and care for patients.

The information from the countries was collected over a three week process of country consultations from 21 August 2017 with M&E Specialists and country co-investigators for Training Needs



Members of the Community of Practise (CoP) on Laboratory and Surveillance at the 1st meeting in Maputo, Mozambique

ECSCA-HC in collaboration with the countries and other stakeholders will facilitate the establishment and operationalization of cross-border zonal committees beginning with the project countries.

SATBHSS project countries also agreed to adopt and implement the laboratory network score card audit approach developed by the African Society for Laboratory Medicine (ASLM) and the Association of Public

Health Laboratories (APHL) to assess the functionality of laboratory networks. The scorecard compliment the World Health Organization (WHO) Joint External Evaluation (JEE) for International Health Regulations (IHR) co-capacities but focuses specifically on laboratory systems and how they effectively contribute to disease detection, management, surveillance and response. The scorecard covers 9 core

Assessment and Health Impact/Cost benefit Analysis Studies. Other country level stakeholders (partners) were also engaged.

During the consultations, countries also received support on issues related to M&E and research in order to strengthen their capacity as per country request. The countries also benefitted from the technical support provided for the baseline assessment initiation which sets the framework and mechanisms for measuring impact and contribution of the SATBHSS project interventions.

These activities were conducted in line with one of the key components (component 3) of the Southern Africa Tuberculosis and Health Systems Support (SATBHSS) project support to improve operational research and Monitoring and Evaluation (M&E) in project countries. The focus of the project is to provide operational research support on priority issues as identified above to strengthen capacity to manage the burden of TB and occupational diseases in the project countries.

components; (1) Political, legal and regulatory framework; (2) Structure and organization; (3) Network coverage and rapid response; (4) Laboratory Information Management System (LIMS); (5) Infrastructure; (6) Human resources; (7) Quality of the laboratory system; (8) Biosafety/biosecurity; (9) Priority diseases.

In addition, the countries agreed to focus more on quality improvement through laboratory certification and consequent accreditation. This is very important because over 80% of accredited laboratories in sub-Saharan Africa are in South Africa, while the rest of the region

sharing the remaining 20%. ECSA-HC, through SATBHSS will support laboratory systems for the project countries to move faster towards achieving accreditation.

At the end of the meeting the countries developed a work plan for Q4 in 2017 and Q1 in 2018 for the implementation of the various action points with technical support from ECSA-HC. The inaugural CoP regional meeting on Laboratory and Surveillance was attended by 32 representatives from Lesotho, Malawi, Mozambique, Zambia, Tanzania, Swaziland, and WHO Africa Region.

for Information Technology (IT) and Communication with the aim of creating a database of the key personnel that will be responsible for managing and updating country sub-portals to ensure regional learning and knowledge sharing.

The nominated candidates were able to provide comprehensive feedback and expectations on both the website and country sub-portals. The feedback which ECSA-HC and NEPAD Agency has recorded will be consolidated in readiness for presentation to the web-developers at a kick-off meeting in Arusha, Tanzania scheduled for September 2017.

The identified focal persons shall also be very beneficial in activities that have been planned in the future regarding communication, advocacy and outreach at country and regional level. The SATBHSS project knowledge portal is strategic in the implementation of the project to ensure knowledge is captured, shared and used as learning lessons as well as best practice at national and regional level. ECSA-HC and NEPAD Agency will oversee the development of the project knowledge portal and provide support to the countries.

SATBHSS Knowledge Portal to facilitate learning on TB and occupational lung diseases

East Central and Southern Africa Health Community (ECSA-HC) in collaboration with NEPAD Agency successfully conducted joint country consultations to Lesotho, Malawi, Mozambique and Zambia to collect critical information and country expectations for the development of the Southern Africa Tuberculosis and Health Systems Support (SATBHSS) project website and country sub-portals.

The aim of the consultations was to coordinate the development and operationalization of the SATBHSS project website and country sub-portals, and conduct a needs assessment to gather user expectations data. This exercise is in accordance with implementation of project component on operational research and knowledge sharing and was conducted between 16 and 29 August 2017. Prior to the consultations, countries were requested to nominate focal persons responsible

SATBHSS Project records positive implementation progress in 6-months



According to the Semi-Annual Report, the first six (6) months of the implementation of the Southern Africa Tuberculosis and Health Systems Support (SATBHSS) project has recorded positive progress by putting in place systems that are a pre-requisite for facilitating

smooth project implementation at country and regional level during the five (5) year project period.

The SATBHSS project was launched in Maputo Mozambique in December 2016 and is funded

by the World Bank (WB) at a total cost of US\$ 122 million with the aim of strengthening the health sector's response to Tuberculosis and Occupational Lung Diseases in four countries: Lesotho, Malawi, Mozambique and Zambia. The Semi-Annual Project Progress Report highlights some of the key areas of intervention from January to June 2017.

Below is a summary of three areas of progress during the reporting period;

Innovative Prevention, Detection and Treatment of TB

Some of the notable interventions that have been implemented, such as, community sensitization meetings on TB and occupational lung diseases; development of job aides and mentorship tools to assist health care workers in their day to day work; provision of supportive supervision to facilities to review progress and also provide on-site support as part of mentorship; review of sputum collection points mapping; establishing of new sputum collection points; conducting annual district open days; orienting health workers in

systematic TB screening, among others. The project has initiated plans to review the implementation of harmonized guidelines for TB management in order to enhance cross-border referrals and management of TB. Strategic capacity building for the management of Multi-Drug Resistant TB (MDR-TB) is also on-going.



Regional Capacity for Disease Surveillance, Diagnostics and Management of TB and Occupational Lung Diseases

Some of the notable interventions that have been implemented under this component include external quality assessments of microscopy and expert sites; preparatory work

on the procurement of specialized equipment; supporting transporting of appropriate samples to culture and drug susceptibility testing (C&DST) sites; refresher trainings for microscopists on External Quality Assurance among others. Over 100 health workers were trained on various courses including research, laboratory mentorship and audits as well as MDR-TB management.

Regional Learning and Innovation and Project Management

Under this component interventions implemented include those aimed at enhancing and strengthening operations research and knowledge sharing; establishing centres of excellence in TB and occupational lung disease control; strengthen regional coordination, policy advocacy and harmonization.

Over 10 operational research studies have been developed at regional and countries' level which are expected to generate new knowledge to inform policy, practices and programming in the region. Communities of Practitioners have been established and now operational with interaction and rich technical discussion ongoing among the regional and international



The project addresses TB and occupational lung diseases experts. Countries completed the development of concepts that will see the establishment of innovative programs as Centres of Excellence.

Tremendous progress has been recorded on the project so far. For more technical information please read the SATBHSS Semi-Annual Report



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