

Integrating TB and HIV Services in Rural Northwest Cambodia: Making it Work!

Presented by

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CORE SOTA

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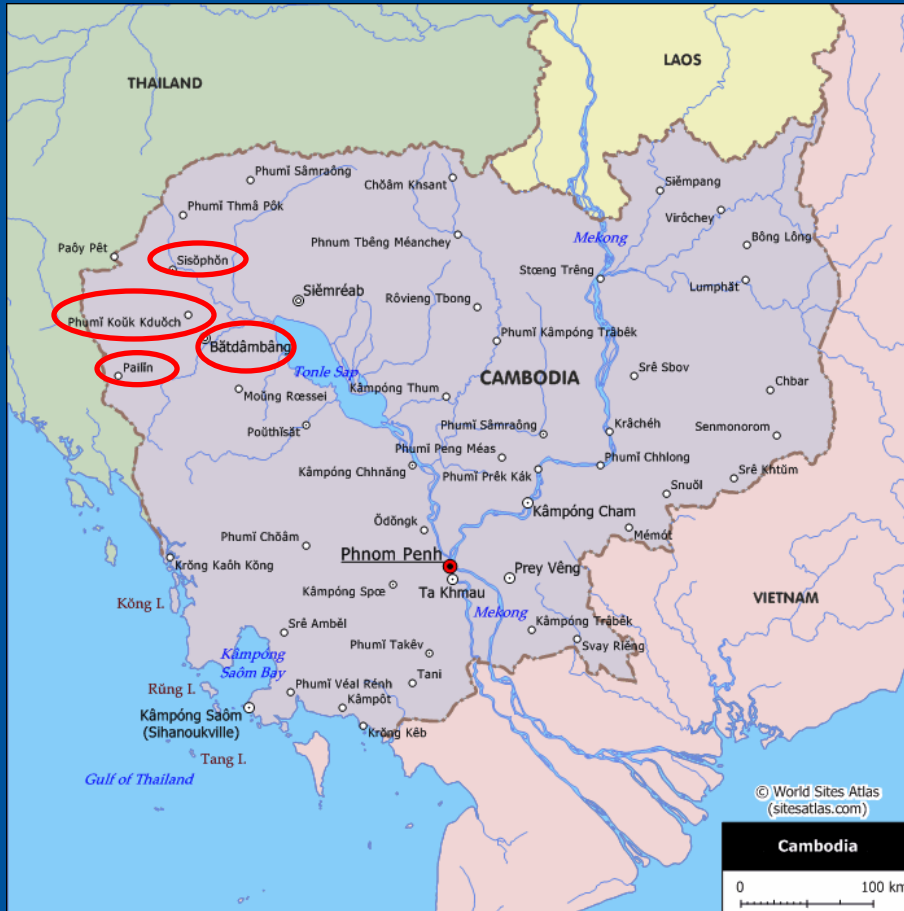


TB and HIV in Cambodia

- High burden TB country
- 11th in incidence per capita
- TB incidence 495/100,000¹
- HIV prevalence is 0.9%, which is highest in SE Asia
- In 2007, 7.8% of TB patients were HIV+
- In 2002, HIV prevalence contributed ~13% of the incident sputum smear+ cases²



Northwest Cambodia



- Last Khmer Rouge stronghold
- Poor access to health facilities
- Poverty
- Large migrant populations
- HIV epidemic hotspot



TB & HIV Problem

- Low screening rates for TB & HIV
 - Economic barriers to access services
 - Stigma towards PLHIV
 - Lack of referrals between testing & treatment sites
 - Active case finding not part of national TB program
 - Not perceived as important
- National TB & HIV programs: limited coordination



- Provision of transport vouchers
- Create referral pathways for HIV and TB clients
- Integration into home-based care (e.g., Community-DOTS)
- Health Systems Strengthening, including increasing coordination and expanding human resource capacity
- Advocacy, Communication and Social Mobilization (ACSM)
- Training and small grants program for PLHIV



Target groups:

- Health facility staff
- Village-based volunteers

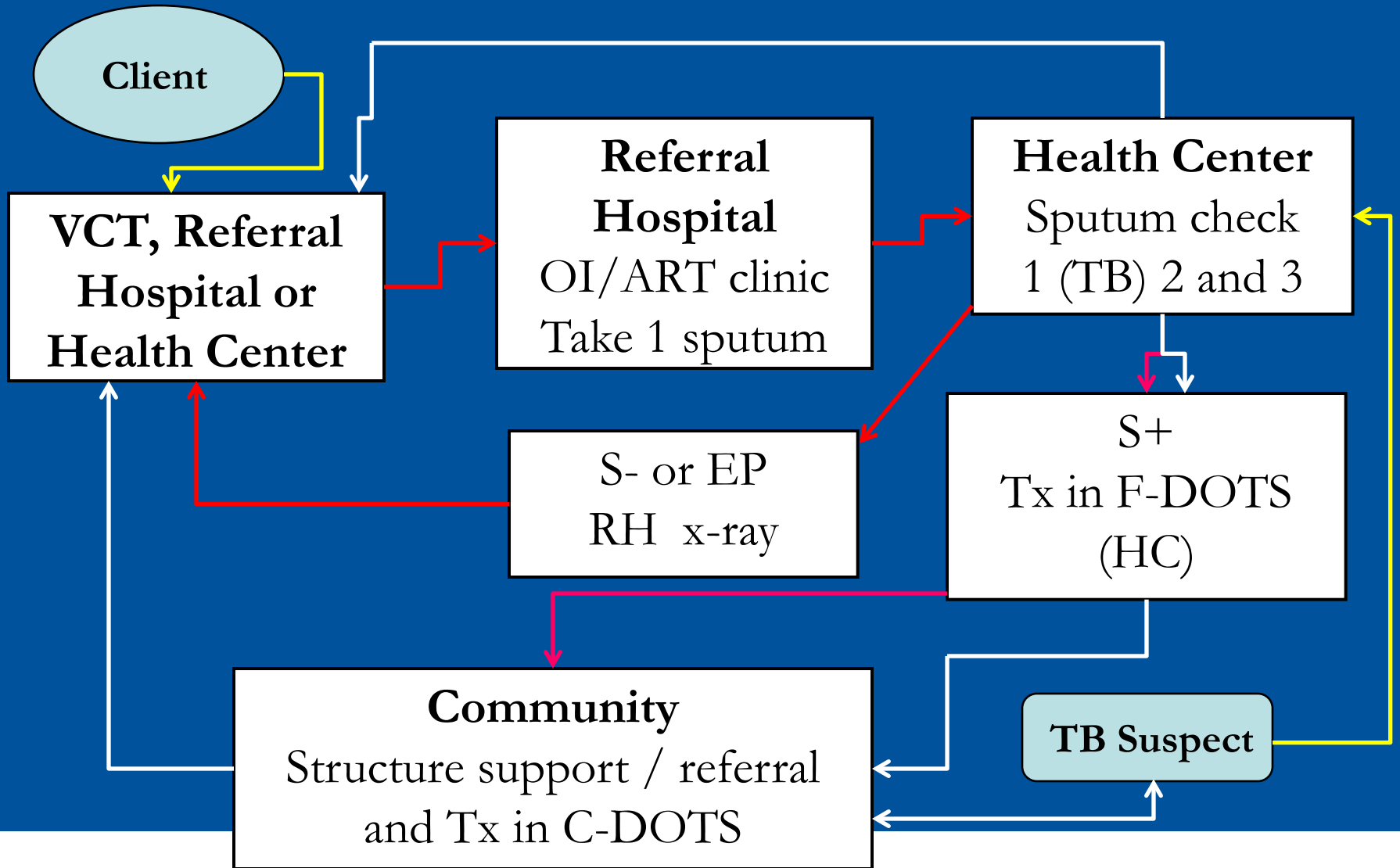
Issues:

- TB/HIV care and treatment
- Referral pathways
- Counseling
- Follow-up

Method: Quality assurance



Reducing Missed Opportunities





Advocacy, Communication & Social Mobilization

- Special events and campaigns
- Involvement of religious leaders & pagodas
- TB messages at PLHIV support group sessions
- Community mobilization for:
 - Active case finding
 - Referrals
 - Education on TB and HIV
 - Care, support & follow-up of patients (DOT watchers)

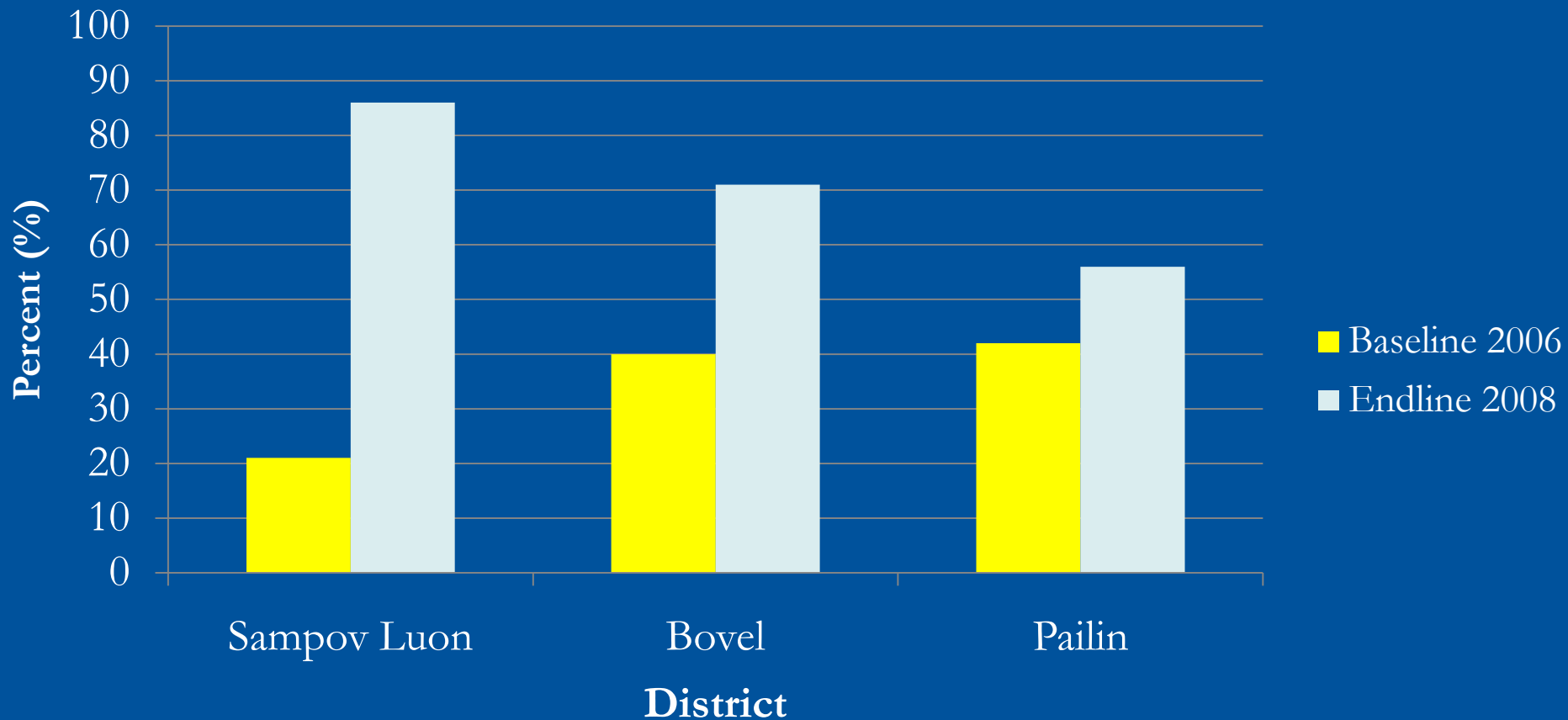




- 98% PLHIV tested for TB
- 71% of TB patients referred for HIV counseling and testing
- TB/HIV clients completed DOTS or C-DOTS treatment



Percent of TB patients tested for HIV





- Address stigma
- Reduce missed opportunities:
 - HIV among TB patients
 - TB among PLHIV
- Involve communities
- Encourage political will for TB/HIV coordination
- Support staff capacity and improvements in communication infrastructure to facilitate timely reporting



1. Global TB Control WHO Report 2009
2. National TB Program, Cambodia MoH TB Report 2007
3. National Tuberculosis Prevalence Survey 2002,
MoH/CENAT

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