CATALYZING PEDIATRIC TUBERCULOSIS INNOVATIONS (CAP TB) IN CÔTE D’IVOIRE

CONTEXT
The Elizabeth Glaser Pediatric AIDS Foundation (EGPAF) has been supporting HIV and AIDS care, treatment, and prevention programs in Côte d’Ivoire since 2005 at both the clinical and community levels. Since 2017, EGPAF has worked on integrating new care and treatment models for childhood TB with funding from Unitaid through the Catalyzing Pediatric TB Innovations (CaP TB) Project. CaP TB is a four-year project (running from October 2017 to September 2021) implemented in 10 countries (Cameroon, Côte d’Ivoire, Democratic Republic of Congo, Kenya, Lesotho, Malawi, Tanzania, Uganda, Zimbabwe, and India), which aims to improve the identification, diagnosis, and treatment of active and latent TB in children, while scaling up the use of new, more effective and child-friendly anti-TB formulations.

In Côte d’Ivoire, the National TB Program (PNLT) has indicated that there were 21,034 (4.8% prevalence) new relapsing cases of TB in 2018, of which, 1,014 were children aged 0 to 14 years. This is not only an important number of children in need of treatment, it is also an indication of a low capacity to find TB in children, as we would expect one out of every 10 patients would be a child with TB to be a child. TB care and treatment services are highly centralized and funding for its pathology in children is insufficient despite the support and recommended prioritization from Global Fund, U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), World Health Organization (WHO) and World Bank.

CAP-TB IN CÔTE D’IVOIRE
Aligning with the goals of the PNLT in Côte d’Ivoire, the CaP TB project is implemented in 45 health facilities within six health regions and 13 health districts: Abobo-Ouest, Abobo-Est, Anyama, Koumassi, Port Bouet Vridi, Marcory-Treichville, Adjamé-Plateau-Atéccoubé, Yamoussoukro, Bongouanou, Daoukro, Arrah, M’Batto and Dimbokro.

The implementation of CaP TB activities at health facilities occur in progressive phases:

- **Phase 1 (January-December 2019):**
  - Implementation in 17 health facilities in and around Abidjan
  - Lessons learned documented to inform phase 2

- **Phase 2 (January 2020 to September 2021):**
  - Scale-up the remaining 28 health structures
IMPLEMENTATION

Pediatric TB identification and treatment, supported by CaP TB, is implemented in existing child wellness centers (health facilities where vaccination, growth monitoring, nutrition, and early infant follow-up occur). To implement this project, health care workers have been trained on TB screening, sample collection, documentation, client counseling, use of presumptive diagnosis and confirmatory diagnosis (including X-ray and GeneXpert diagnostics), treatment management and strengthened community engagement, in all supported sites.

ADVOCACY

The CaP TB project will generate political, financial, and technical support in order to identify and implement innovative actions for the prevention, diagnosis, and treatment of TB in children nationwide. EGPAF will support the Ministry of Health and Public Hygiene (MSHP) and its relevant partners to prioritize all the essential components of TB service delivery in national health strategies and plans. EGPAF will advocate for the scale-up of best practices in order to improve active case finding, the integration of TB care outside the traditional TB service delivery outlets, clinical diagnosis, as well as the optimal use of TB drugs for active and latent TB.

TRANSITION

EGPAF, in collaboration with the PNLT, will develop a transition plan to ensure ownership and sustainability of efficient child TB care services. This plan will also encourage the diagnosis and treatment of TB in children becomes a top priority in the national policy documents and that adequate funding is provided for TB interventions, drugs, and other strategic input, as needed.

At the global level, the CaP TB project seeks to increase the number of children diagnosed with active TB and receiving first-line treatment.

In Côte d’Ivoire, the objectives are to:

- Screen approximately 182,260 children in multiple entry points in health facilities as well as in the community
- Ensure access to 2,948 children GeneXpert based diagnostic
- Diagnose 760 TB-infected children
- Initiate treatment for nearly all of the 760 TB-infected children (at least 695 children diagnosed with TB should be started on treatment)
- Offer preventive TB treatment to over 4,657 children

The EGPAF-implemented CaP TB project was made possible thanks to Unitaid’s funding and support. Unitaid accelerates access to innovation so that critical health products can reach the people who most need them.

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