



TUBERCULOSIS PROFILE



Tuberculosis is a major public health problem in Mozambique. In 2004, WHO ranked Mozambique 19th among the world's 22 high-burden TB countries. According to the *WHO Global TB Report 2006*, Mozambique had nearly 90,000 TB cases in 2004, with an estimated incidence rate of 460 cases per 100,000 people. The number of TB cases in Mozambique is likely to increase further over the next few years due to HIV/AIDS. The TB-HIV co-infection rate is high, with 48 percent of adult TB patients testing HIV-positive. Multidrug-resistant TB, largely caused by non-adherence to drug regimens or inappropriate drug regimens, is further exacerbating Mozambique's TB epidemic.

Health services for TB control and prevention in Mozambique are inadequate in terms of coverage, access, and quality of care, mainly due to the lack of infrastructure and to limited human capacity. TB and HIV/AIDS are among the government's health priorities. The government launched the National TB/Leprosy Program (NLP) in 1977, and by 2003, the NLP had developed a comprehensive plan for expanding use of Directly Observed Therapy, Short-Course (DOTS).

Country population	19,423,920
Global rank out of 22 high-burden TB countries	19
Estimated number of new TB cases	89,384
Estimated TB incidence (all cases per 100,000 pop.)	460
DOTS population coverage (%)	100
Rate of new sputum smear-positive (SS+) cases (per 100,000 pop.)	88
DOTS case detection rate (new SS+) (%)	46
DOTS treatment success rate in 2003 (new SS+) (%)	76
Estimated adult TB cases HIV+ (%)	48
New multidrug-resistant TB cases (%)	3.5

Note: All data are for 2004 except where noted otherwise.
Source: Global Tuberculosis Control: WHO Report 2006.

USAID Approach and Key Activities

USAID support for the NLP began in 2001. USAID funding for TB activities in Mozambique has risen from \$150,000 in 2002 to \$1 million in 2006. With rising co-infection rates, the increased support will help strengthen TB-HIV/AIDS collaborative activities. The KNCV Tuberculosis Foundation, a USAID partner, is taking the lead in developing and implementing TB-HIV/AIDS activities, which will be closely coordinated with the NLP, the national HIV/AIDS program, the Tuberculosis Capacity Assistance Project (TB CAP Project), and nongovernmental organizations.

The main components of the USAID program are TB-HIV/AIDS collaborative activities, community-based DOTS (CB-DOTS) expansion, and laboratory strengthening. Activities include:

- Developing annual work plans with the TB-HIV/AIDS coordinator
- Improving the skills of TB-HIV/AIDS health workers and the internal referral systems for both diseases
- Developing monitoring and evaluation tools for TB-HIV/AIDS programs

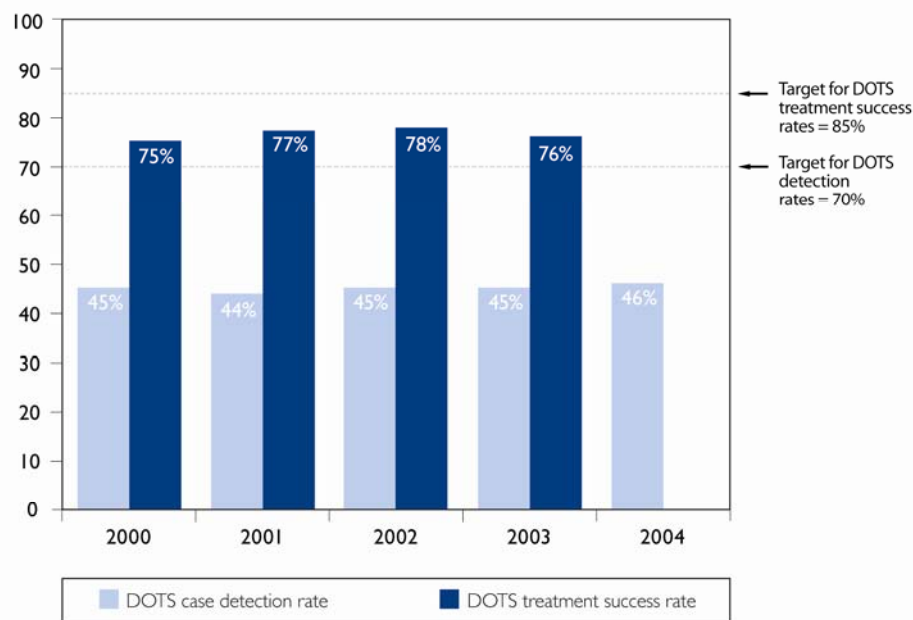
- Organizing and conducting stakeholder meetings and workshops on CB- DOTS
- Developing guidelines for CB-DOTS
- Upgrading the National Reference Laboratory and establishing laboratory quality assurance guidelines
- Strengthening and improving the management capacity of the NTLP
- Supervising NTLP monitoring and evaluation activities at the regional and provincial levels

USAID Program Achievements

USAID's assistance has contributed to addressing TB prevention and control. In FY 2005, USAID support improved the capacity to implement DOTS. Working closely with the Ministry of Health, WHO, and the U.S. Centers for Disease Control and Prevention, USAID negotiated the design of a new TB activity that will provide assistance to TB laboratories, support the expansion of DOTS, and facilitate the integration of TB and HIV/AIDS activities. Program achievements include the following:

- Transferred the responsibility to coordinate, manage, and implement TB-HIV/AIDS activities to the NTLP's newly installed TB-HIV/AIDS Coordinator
- Revised the national TB-HIV/AIDS guidelines
- Developed TB-HIV/AIDS training modules
- Supported the development of monitoring and evaluation (M&E) tools and indicators, as well as supervision of M&E at all levels
- Developed referral systems for co-infected TB-HIV cases

Case Detection and Treatment Success Rates Under DOTS



Note: DOTS treatment success rate for 2004 will be reported in the 2007 Global Report.
Source: Global Tuberculosis Control: WHO Report 2006.

Partnerships

Partnerships are one of the most important elements in combating TB in Mozambique. The Tuberculosis Coalition for Technical Assistance (TBCTA Project), including the KNCV Tuberculosis Foundation and WHO, is providing technical support to the government, with TBCTA Project supporting the development of a national TB-HIV/AIDS control plan. In 2003, the Global Fund to Fight AIDS, Tuberculosis and Malaria awarded Mozambique \$15 million for DOTS expansion.