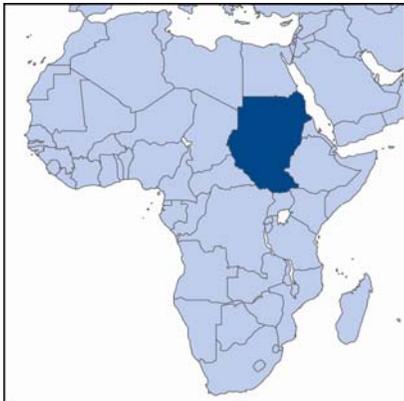




TUBERCULOSIS PROFILE



Tuberculosis is a major cause of morbidity and mortality in Southern Sudan. The TB epidemic is an outgrowth of the longstanding war, which has resulted in poverty, malnutrition, and a large number of displaced populations and refugees. Destruction of health infrastructure, lack of microscopic services, displacement or lack of health personnel have also contributed to the epidemic. In 2004, TB incidence is estimated to be 220 per 100,000 people countrywide, and in Southern Sudan, the nation tuberculosis program (NTP) reported a total of 2,539 cases of which 1,064 were sputum smear-positive (SS+) TB, the infectious type of TB.

Although the exact incidence of HIV/AIDS among TB cases is not known, HIV prevalence appears to be on the rise. Data from limited population surveys show HIV prevalence rates range between one and eight percent among the general population, with higher rates found in border towns. It is estimated that between 15 and 20 percent of all TB patients in Southern Sudan are infected with HIV. This amounts to nearly 4,040 TB patients already living with the disease. Resistance to TB drugs in Southern Sudan occurs in less than two percent of cases, and drug resistance to first line treatment is usually among defaulters and relapse cases.

The recently installed Ministry of Health (MOH) has yet to fully establish itself and faces the challenges of developing health policy and services virtually from scratch. Case detection and treatment in Southern Sudan still rely entirely on the work of nongovernmental organizations (NGOs), with technical assistance from the World Health Organization and dependence on external donor assistance. WHO provides all the TB drugs, technical support, and capacity-building. The Global Fund has also funded six NGOs to expand the TB program. Currently, there are about 20 TB treatment centers in Southern Sudan. Despite low case detection rates and low coverage, treatment outcomes are very promising with treatment success rates at 82 percent and default rates remaining below five to ten percent in most cases.

Country population	35,522,988
Estimated number of new TB cases	47,466
Estimated TB incidence (all cases per 100,000 pop.)	220
DOTS population coverage (%)	82
Rate of new sputum smear-positive (SS+) cases (per 100,000 pop.)	34
DOTS case detection rate (new SS+) (%)	35
DOTS treatment success rate in 2003 (new SS+) (%)	82
Estimated adult TB cases HIV+ (%)	13
New multidrug-resistant TB cases (%)	1.6

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

USAID Approach and Key Activities

The Mission only recently initiated TB activities, and in 2004 and 2005, USAID funds for TB programming in Southern Sudan averaged \$500,000 per year. USAID's support to improve child survival, health, and nutrition in the Sudan includes strengthening the capacity of 20 county health departments and their nongovernmental partners through grants to deliver quality primary health care, including HIV/AIDS and TB services. The program also supports the Government

of Southern Sudan – Secretariat of Health (GOSS/SOH) and the new Sudan National AIDS Council (NSNAC) to provide strategic leadership in health, sanitation, and HIV/AIDS. USAID funds TB activities through the Tuberculosis Control Assistance Program (TB CAP Project).

USAID assistance includes support for the following activities:

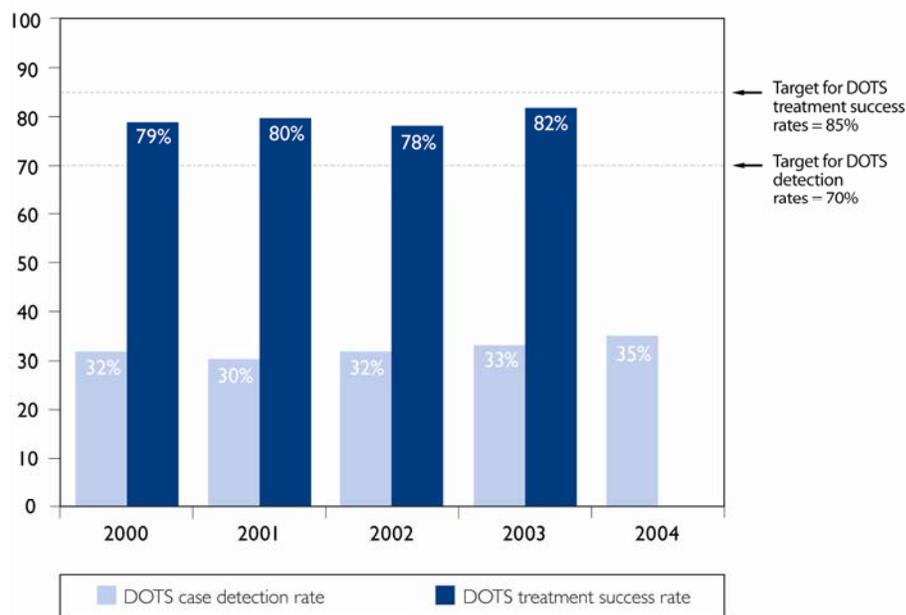
- Strengthening TB program management and rolling out community DOTS strategy
- Improving TB diagnosis and treatment
- Strengthening TB lab networks for quality assurance
- Supporting the integration of existing TB activities into the National TB Program (NTP)
- Providing technical assistance to improve capacity of the MOH and NTP management
- Improving the capacity of state-level supervisors to manage and supervise TB activities

USAID Program Achievements

Although the program is in its first year, USAID’s assistance and support have helped address TB prevention and control in Southern Sudan through the following achievements:

- Supported the MOH to draft a national TB control policy and guidelines with input from all organizations working on TB in Southern Sudan; the policy and guidelines were officially adopted and disseminated in 2005
- Provided funds for the construction of a reference laboratory in Juba

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

USAID works in collaboration with Government of Southern Sudan – Secretariat of Health, the new Sudan National AIDS Council, and nongovernmental partners (both international and Sudanese). USAID also provides support to the NTP through the TB CAP Project implemented by the Tuberculosis Coalition for Technical Assistance (TBCTA Project) under the management of the KNCV Tuberculosis Foundation.

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