



## TUBERCULOSIS PROFILE



Bolivia ranks second among countries in the Americas with a high tuberculosis burden. According to the *WHO Global TB Report 2006*, Bolivia had nearly 20,000 TB cases in 2004 and an estimated TB incidence of 217 new sputum smear-positive (SS+) cases per 100,000 people. Bolivia first implemented Directly Observed Therapy, Short-Course (DOTS) in 1999. DOTS population coverage reached 60 percent in 2004. Approximately 71 percent of the estimated new SS+ cases were detected, with 81 percent of those treated successfully.

The Prevention and Control of Communicable Diseases Unit of the Ministry of Health (MOH) operates the Bolivia National TB Control Program (NTP). The NTP's objectives are to increase case detection and treatment success rates. To meet these objectives, the NTP needs to maintain its TB training program for nursing and medical university students; continue TB diagnosis and treatment training for health care workers; increase the number of locally trained personnel; increase public TB awareness through mass media campaigns; and engage the private sector and nongovernmental organizations (NGOs) in delivering DOTS services.

Country population	9,009,045
Estimated number of new TB cases	19,568
Estimated TB incidence (all cases per 100,000 pop.)	217
DOTS population coverage (%)	60
Rate of new sputum smear-positive (SS+) cases (per 100,000 pop.)	69
DOTS case detection rate (new SS+) (%)	71
DOTS treatment success rate in 2003 (new SS+) (%)	81
Estimated adult TB cases HIV+ (%)	0.7
New multidrug-resistant TB cases (%)	1.2

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

### USAID Approach and Key Activities

For the past few years, USAID has assisted the NTP through the Programa de Salud Integral (PROSIN), the Programa de Coordinación en Salud Integral (PROCOSI), the Asociación Protección a la Salud (PROSALUD), and SERVIR, a program in the Yungas Valleys. Between 2000 and 2005, USAID funds for TB programming in Bolivia averaged \$621,000 per year.

USAID assistance included the following activities and interventions:

- Strengthening the TB laboratory network to improve monitoring and supervision
- Purchasing laboratory equipment for local, regional, and national TB laboratories
- Promoting improved DOTS coverage through community mobilization, including the private and NGO sectors
- Training in DOTS for local and departmental TB teams in the public health sector

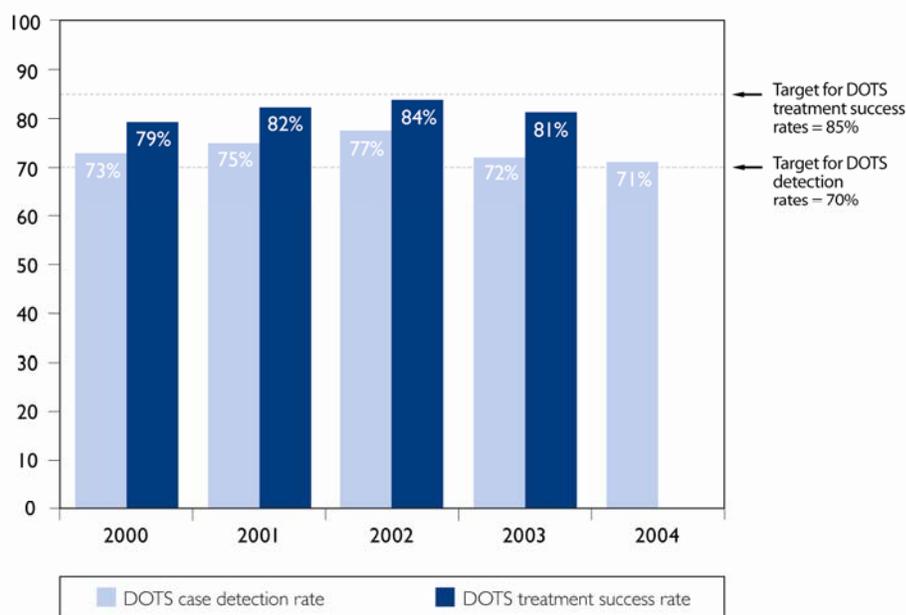
- Training to improve DOTS services in 27 PROSALUD clinics in high-prevalence areas
- Conducting periodic analyses of epidemiological trends, including HIV prevalence among people diagnosed with TB in high-HIV prevalence areas
- Implementing TB training in health universities and health networks through a tested CD ROM program
- Implementing radio and television campaigns to raise TB awareness

### USAID Program Achievements

Using the DOTS methodology, USAID and partners treated about 20 percent of all TB cases in the country in 2005. USAID's assistance and support has led to improvements in TB prevention and control activities through the following achievements:

- Strengthened the DOTS activities of NGOs that provide health services in coordination with the NTP
- Treated 1,250 TB patients under DOTS during FY 2005, of which 20 percent were directly treated by a local NGO as part of the integrated alternative development efforts in the Yungas Valleys
- Continued to implement and certify the new Community DOTS (C-DOTS) project in the Chuquisaca, Tarija, and Santa Cruz regions to reach TB patients in isolated communities and municipalities (Bolivia is the first country in the Americas to have this project in place)
- Established the DOTS Plus protocol for treating multidrug-resistant TB with a cure rate of 90 percent based on a final negative bacteriological status
- Assisted the Bolivian Office of Laboratory Accreditation to certify the TB laboratory network
- Financed equipment for 10 laboratories across the country
- Trained nurses and community health workers in C-DOTS in the Chuquisaca, Tarija, and Santa Cruz regions
- Trained nursing and medical students in TB in three universities
- Increased the number of social and municipal leaders committed to fight TB in their municipalities and communities

### 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 Bolivia. The Pan American Health Organization and the International Union Against Tuberculosis and Lung Disease, along with USAID, provide technical support to Bolivia's TB control effort. Other partners are the U.K. Department for International Development and the World Bank-funded Health Reform Project. The Global Fund to Fight AIDS, Tuberculosis and Malaria awarded \$5.6 million in round-three funding for TB activities in Bolivia, and the second phase of its implementation will start in 2007.