

Effects of incentivizing TB contact investigation and linkage to treatments

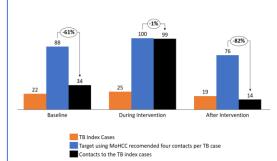
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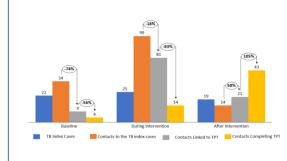
Background: Contacts of TB index have a high risk cases contracting TB, making them an accessible group from which new cases can be quickly identified, treated, and TPT directed [1]. Zimbabwe has suboptimal contact investigation due to lack of human and material resources with an average of one contact per TB case, which is less that the MoHCC recommended four contacts per TB case [2].

Results: At baseline, about one contact per TB index case (34 per 22) was recorded, but this value quadrupled (99 per 25) during the intervention and dropped to one (14 per 19) afterward. Of the 34 contacts at baseline, 26% (9/34) were linked to TPT, with a 44% (4/9) completion rate. During the intervention, TPT initiations increased to 82% (81/99), with a 17% (14/81) completion rate. After the intervention 150% (21/14) initiations with a 205% (43/21) completion rate recorded, including a residual of contacts initiated during the intervention.

Contacts Identification



Contacts Initiated and Completing TPT



Materials and methods: With support from UNITAID, CHAI in collaboration with MoHCC supported the initial scale up of 3HP.

Environmental health technicians (EHTs) from one sentinel site, Highfields Polyclinic in Harare, were capacitated on TPT and provided with performance-based incentives for TB contact tracing and TPT initiations among household contacts of all ages from January to June 2021.

Conclusions: Investments in TPT contact tracing should include capacitation of contact tracers and household contacts on TB and TPT and enablers such as performance-based incentives. Additionally, fostering seamless relationships between EHTs, community and facility-based health care working will strengthen linkages to care, TPT adherence and positive treatment outcomes among identified contacts. This will prioritize contact tracing within the TB control programme and draw Zimbabwe closer to achieving the End TB Strategy goals.

