Since the early 1990s, tuberculosis (TB) outbreaks in many countries in Eastern Europe have been reported in prisons, where TB rates are 10 to 100 times higher than in the civil system. While Ukraine has been working over the past decade to improve its TB control system in both the civil and prison systems, the pre-trial detention system, comprised of overcrowded centers called SIZOs, has rarely been included in these improvements. This is because SIZOs fall between the prison and civil TB control systems and, until detainees are convicted, responsibility for their care can be unclear.

In May, 2013, PATH initiated a project entitled "Increasing TB Case Detection In The Ukrainian Detention System" with support from the Stop TB Partnership-WHO TB REACH Wave 3 grants program. This project aims to increase the bacteriologically confirmed TB cases among pre-trial detainees in three SIZOs in Ukraine, in the regions of Kherson, Mykolaiv, and L'viv. PATH is implementing this work in partnership with the All-Ukrainian Network of Organizations Working in the penal System (PSN). Together, we work in close co-ordination with the National TB Program (NTP) and the State Penitentiary Service of Ukraine, which has demonstrated strong political commitment to improving early TB case detection in the Ukrainian detention system.

In most of Ukraine's 33 SIZOs, TB case detection is limited to fluorography (miniature x-ray) screening as part of a routine medical examination upon entry. Smear microscopy is indicated if fluorography or symptoms suggest active TB. Follow-up algorithms for detainees with presumptive TB are poorly developed and treatment may not become available until after sentencing, when the detainee is either transferred to a prison TB hospital or released.

To address this situation, PATH is focusing its efforts on developing and applying up-to-date screening and diagnostic algorithms, with related systems improvements, for intensified case finding (ICF) and referral for TB in the three target SIZOs. Specifically, as part of a step-by -step implementation plan, PATH and PSN have developed and pre-tested a verbal screening tool that contains questions regarding existence and duration of symptoms and other potential risk factors. In addition, we conducted a series of intensive trainings in TB case management for SIZO-based health care providers, based on the recently adopted National Protocol of TB Case Management. To strengthen laboratory management and the quality of the diagnostic process within the intervention SIZOs, laboratory staff have been trained in





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Early TB Case Detection in Three Pre-Trial Detention Centers (SIZOs) in Ukraine: A New Model

sputum microscopy, culture, drug susceptibility testing (DST) and quality control/quality assurance. PATH has also conducted training of trainers (TOT) workshops on TB case management and on voluntary and diagnostic counseling and testing (VCT/DCT) for HIV, thereby creating a team of 28 trainers who will be able to provide further training to relevant prison, SIZO and civil health systems staff. Finally, thanks to TB REACH support, a separate room in each SIZO was renovated and equipped for screening. Ventilated workstations for smear microscopy, as well as thousands of containers for smear collection and slides for smear microscopy were procured. Laptops were also provided to each intervention SIZO. These are used for maintaining the unified electronic database developed by PATH to track screening and case detection information.

