

# Bottlenecks in ICF/IPT implementation in Zambia

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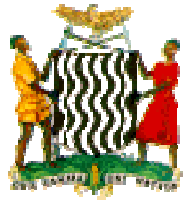
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Tuesday, March 22, 2011



# Map of Zambia





# The vision of the Ministry of Health



*“to ensure equity of access to cost-effective, quality health care as close to the family as possible” .*

Tuesday, March 22, 2011



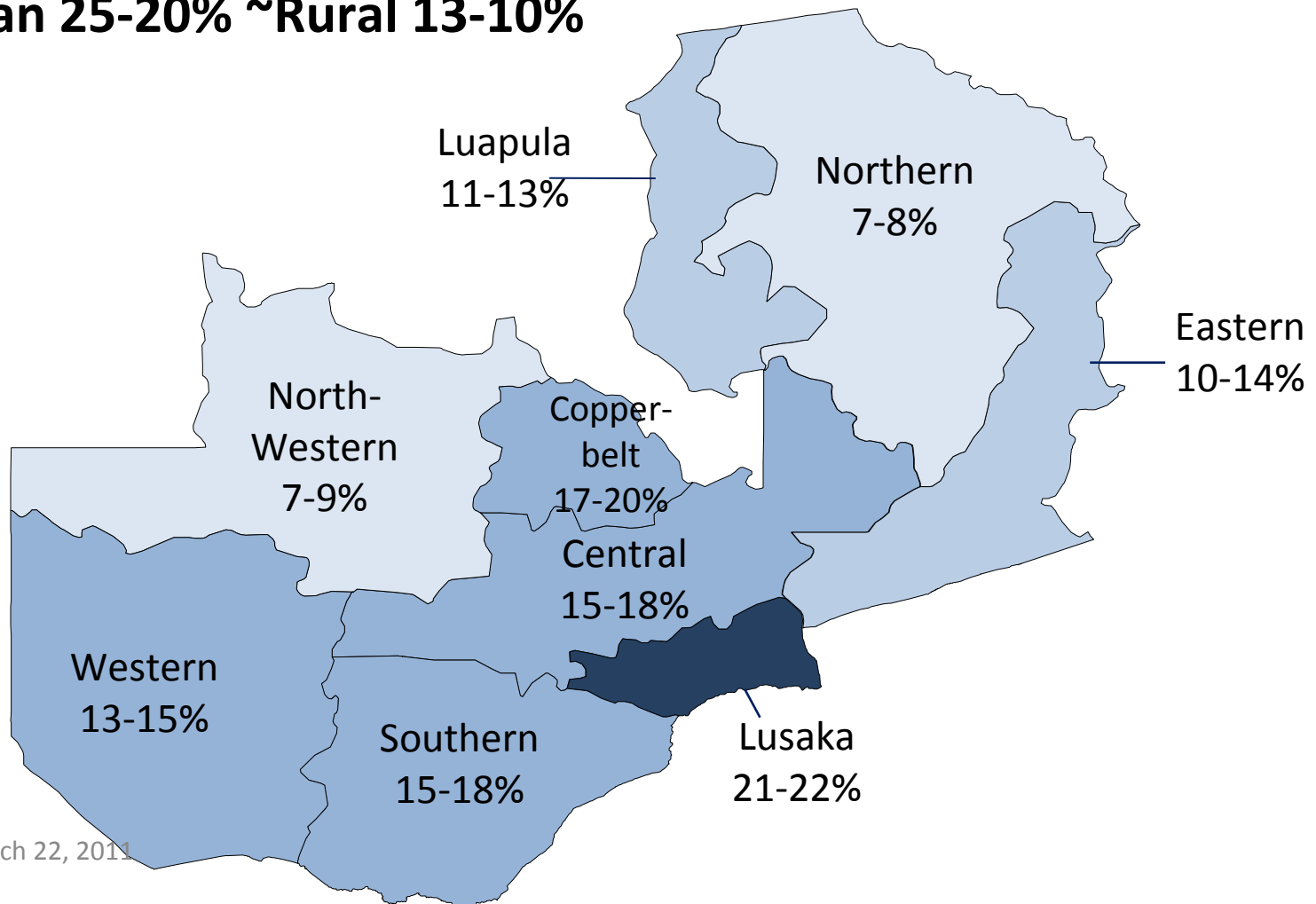
# ZAMBIAN SITUATION

- Population 13.2 million
- HIV prevalence 14.3%

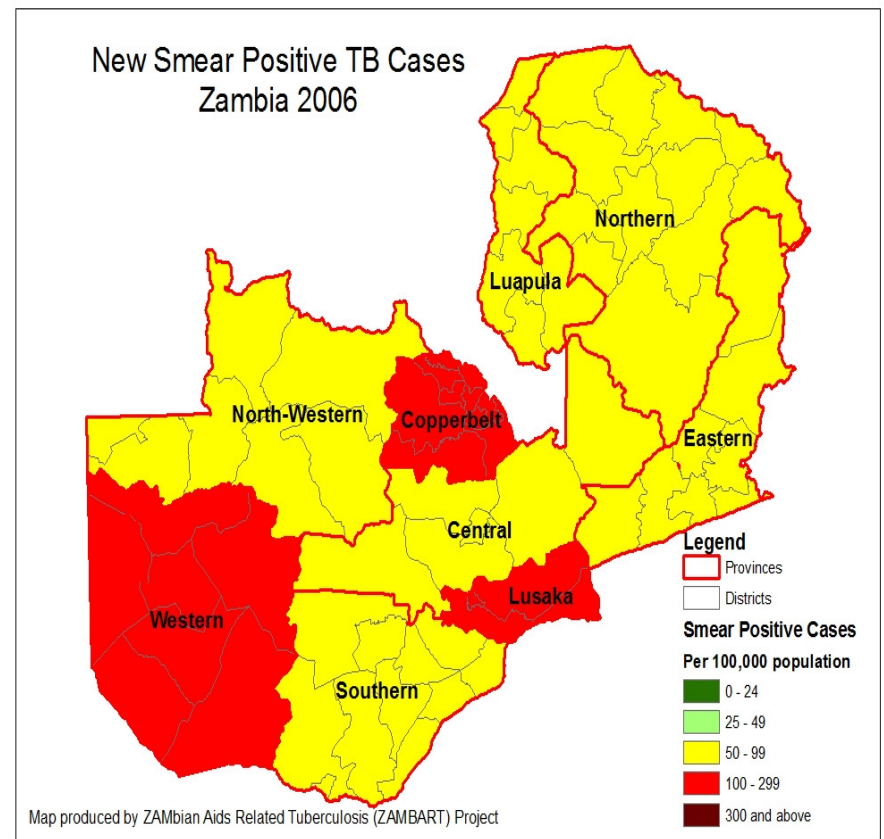
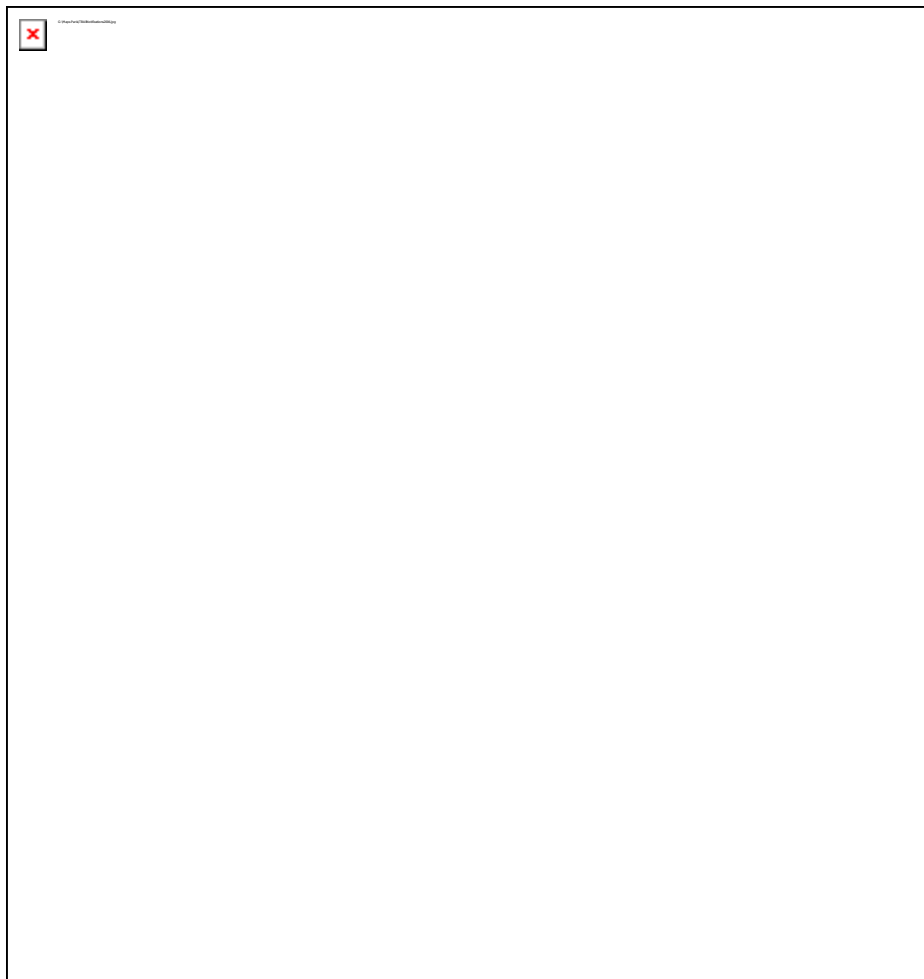


# HIV Prevalence in Zambia

**Female 18-16% ~Male 13-12%,  
Urban 25-20% ~Rural 13-10%**



# MAP SHOWING DISTRIBUTION OF ALL FORMS OF TB & CASES PER PROVINCE





# TB/HIV Situation 2010

- The program notified 46,367 all forms of TB.
- Smear positive 12,012 (27%)
- Retreatment 5,931 (12%)
- Children 254 (1%)
- Tested for HIV 37,769 (81%)
- HIV Positive 25,564 (68%)
- Put on CPT 19,656 (77%)
- Put on ART 12,170 (48%)



## Overview of the ART Programme

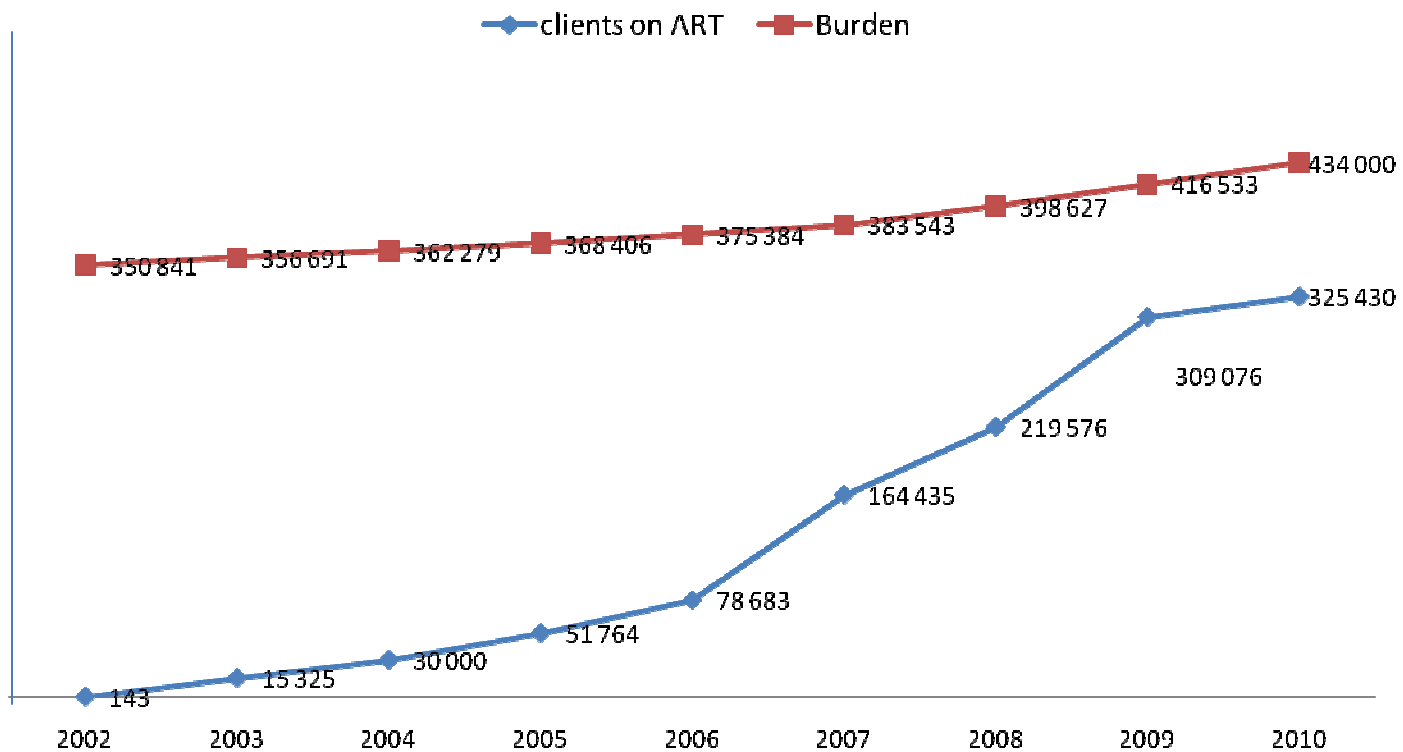
- Zambia has a population of ~ 13 million
- ~ 1.2million are living with HIV
- 14.3% prevalence (ZDHS 2007)
- New adult infection rate 1.6% per year (NAC 2009)
- Currently ~450 sites offering ART to over 350,000 clients
- Funding support followed from Global Fund, USG PEPFAR, and CHAI, UNITAID.





# Actual Numbers of Patients on ARV's

## ART scale up in Zambia September 2010





## Projected Number of Patients on ARV's

Patient Numbers	2009	2010	2011	2012	2013	2014	2015
Adults on ART	250,295	305,528	329,689	350,977	367,362	378,178	386,688
Pediatrics on ART	20,800	24,039	25,128	25,057	23,996	22,738	21,930
Total on ART	271,095	329,567	354,817	376,034	391,358	400,915	408,618
Mothers on PMTCT-only	35,668	38,218	44,050	47,122	50,180	53,244	53,519
Babies on PMTCT-only	26,000	35,488	33,037	40,054	45,162	50,582	50,843



# Bottlenecks from Zamstar experience

- Procurement of drugs was taking too long due to the complex procedure the GDF uses to procure TB drugs.
- Clinicians expressed fears about INH resistance but most of them changed their perception after orientation training.
- Some sites recorded loss to follow up probably due to long distances from the health facility.



# Bottlenecks from Zamstar experience

- Most communities wanted to access IPT but could not because IPT there is no MOH policy of giving IPT to people living with HIV outside the pilot sites.
- Staff attitude to administer IPT
- Staff shortage
- With TB programme as the lead, inadequate uptake by ART programme
- TB work up form a stand alone form



# Bottlenecks from Zamstar experience

- Some health workers view this as a vertical program
- Lack of tools in the HIV section to capture data



Thank you