

How to Increase Access of Migrants to TB Diagnosis & Treatment in Kazakhstan?

B. Babamuradov¹, Zh.K. Ismailov¹, A. Trusov¹, P. Zhazibekova², Zh. Zhandauletova¹, N. Osmanova¹, I. Yuzkayeva¹, M. Sianozova¹
¹Project HOPE, Almaty, Kazakhstan, ²National Center of Tuberculosis Problem, Almaty, Kazakhstan.

Labor Migrants Lacked Access to TB Services

In Kazakhstan, one of the world's highest MDR-TB burden countries, the large influx of labor migrants lacked access to TB services due to lack of information and legal, financial, and language barriers. In 2014, Project HOPE began a GFATM-funded program in 7 pilot sites.



Key Interventions to Reach Migrants with TB Services

Network of Migrant-Friendly Health Facilities



Information Channels via NGOs, government, & mass media



Migrant Outreach & Referral System

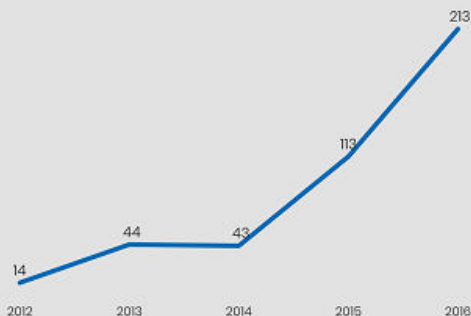


60,000+ reached in 2 years

Results

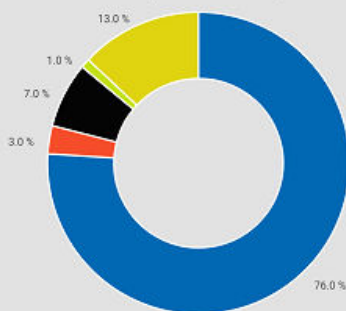
- Screening increased from 1,710 in 2015 to 15,183 in 2016
- Reach increased fourfold from 11,991 in 2015 to 47,488 in 2016
- 72% of all external migrants with TB in Kazakhstan were detected in program pilot regions in 2016

5-Fold Increase in TB Detection Among External Migrants (2014-2016)



76% Treatment Success Among External Migrants

Cohort (Q3-4 2015- Q1-2 2016)



• Treatment Success • Treatment Failed • Died • Lost to follow up
• Referred to home country

Recommendations:

- * Reach migrants where they are
- * Use different channels to disseminate information
- * Establish a network of migrant-friendly facilities
- * Engage partnerships for reach & sustainability
- * Establish regional trans-border cooperation on TB control and treatment