South Africa carries a significant TB burden with about 330,000 people contracting the disease in 2013 (total notified cases). With one of the highest burdens of MDR-TB in Africa, South Africa had about 7,000 notified cases of MDR-TB in 2013, according to the WHO. Also South Africa has one of the world’s worst dual epidemics of HIV and TB, and a growing XDR-TB (extensively drug-resistant TB) problem.

The South African Department of Health launched the National Strategic Plan for TB and HIV in December 2011, which called for the decentralization of TB care. Until that time, TB care typically took place in large hospitals in urban centers. People seeking treatment often faced delays in hospital admissions, long travel, extensive time away from families and work, and other hardships.

The Lilly MDR-TB Partnership in South Africa

Through decentralization, the Department of Health is working to ease TB burden on an already taxed South African healthcare system. The goal is to reduce transmission rates of drug-resistant TB by initiating treatment sooner, improving adherence to treatment regimens, and supporting patients closer to their homes. Over the years, we have worked with numerous NGOs and institutions, and the government at the national, provincial, and local levels. Projects have included healthcare-provider training, with a focus on nurses and community workers, patient

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**Program Officer Profile**

**Name:** Thandekile Essien  
**Country:** South Africa  
**Global Health Program:** Lilly MDR-TB Partnership

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**330,000**  
Number of people in South Africa who were reported to have TB in 2013

**Number 1**  
TB is the leading cause of death in South Africa

**200%**  
Increase in number of MDR-TB cases in South Africa

**7,000**  
Notified cases of MDR-TB in South Africa among notified pulmonary TB cases in 2013
support programs, and advocacy and disease state awareness efforts. Our partnership aims to train nurses in infection control and comprehensive patient care, and conducts operational research to understand which healthcare system factors have the greatest impact in stopping MDR-TB. The partnership also works with provincial governments to support people at risk through outreach to prisons, schools and taxi companies.

1. KwaZulu-Natal
In collaboration with the South African Red Cross, KwaZulu-Natal Chapter, and the outpatient clinic of the King Dinuzulu Hospital Complex, the partnership is working in the Durban area to link people with or at risk of TB to support in their communities, strengthening prevention efforts, and supporting people to improve treatment completion rates.

2. Eastern Cape
The Donald Woods Foundation is helping the Eastern Cape Department of Health decentralize and deinstitutionalize MDR-TB treatment. Together we are working in the Buffalo City region of the Eastern Cape to reduce TB transmission by strengthening prevention and control efforts in local clinics, taxi ranks and prisons and mobilizing community healthcare workers to bring care to people in their homes and schools.

Over the next five years, 20 awareness campaigns will be undertaken targeting taxi ranks, schools, prisons using strategic community door-to-door campaigns including TB screening and material distribution.

What’s next in South Africa?
The Lilly MDR-TB Partnership will continue to support the South African DoH’s strategic plan to reduce the burden of TB. The partnership will also:
- Support the South African Medical Research Council in documenting various TB treatment and control models in support of decentralization.
- Work with DENOSA to develop and evaluate MDR-TB training programs
- Train healthcare workers at community clinics and prisons
- Work with the Donald Woods Foundation and provincial departments of health to support people in at-risk communities through awareness campaigns and door-to-door outreach programs that include TB screening and educational materials
- Provide ongoing technical assistance in the roll-out of decentralization across South African provinces in collaboration with FHI360 and the National Department of Health

Partnership highlights, Phases III-(2012-2017)
We are focused on training and capacity building:

- We are working in KwaZulu-Natal and the Eastern Cape, two provinces with high burdens of drug-resistant TB that are home to 17 million people:
  - Training 120 nurses in infection control and comprehensive patient care, and more than 200 nurses and nurse faculty members on operational research methods
  - Supporting thousands of families in at-risk communities through community-based education and psychosocial services
  - And supporting decentralization efforts at the national level

Key MDR-TB partners in South Africa
- Democratic Nursing Organisation of South Africa (DENOSA)
- Donald Woods Foundation
- Eastern Cape Department of Health
- FHI 360
- King Dinuzulu Hospital Complex
- National Department of Health, South Africa
- South African Medical Research Council
- South African Red Cross Society, KwaZulu-Natal Chapter