

**FREE TB** 

# Free TB - Freeing children from the burden of tuberculosis in Sierra Leone

In Sierra Leone, tuberculosis (TB) remains a major public health challenge, with 298 cases per 100,000 inhabitants, making it the sixth leading cause of death in the country. Yet, fewer than a quarter of cases are tested, and preventive treatment for children under five, who are particularly vulnerable, has still not been implemented. The Ebola and COVID-19 outbreaks have weakened TB control services and increased community mistrust toward the health system. However, the TB-Speed project, led by Solthis in Sierra Leone between 2017 and 2019, demonstrated the effectiveness decentralizing pediatric tuberculosis diagnosis, paving the way for improved screening and care.

#### Some challenges:

- Socio-economic factors influence the diagnosis and treatment of tuberculosis, as the disease remains associated with poverty, stigma, and other social inequalities.
- One of the major challenges lies in the limited knowledge of healthcare professionals about childhood tuberculosis and the low index of suspicion.

## **KEY INFORMATIONS**

Project Duration: 4 years

Beneficiairies: 1 district hospital, 30 community health centres, 131 health posts, 75 maternal health posts,

628 health workers trained in TB screening in primary care, 30 health workers trained in TB treatment at the TPT, 13 health workers trained in TB confirmation,

90 community mobilisers trained in TB screening and referring patients to the right services,

80,000 children under five consulted in health establishments throughout the project, NLTCP beneficiaries through technical assistance, the provision of tools and the general improvement of services.

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**Funding source: AFD** 

Partners: CISMAT-SL, NLTCP, LIIRH

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Area of intervention: Bo district, Sierra Leone



# **OBJECTIVES**

#### **General objective:**

To contribute to reducing tuberculosis-related mortality in children under five in Sierra Leone.

# **Specific objective:**

To improve the prevention, diagnosis, and access to treatment for tuberculosis in **children under five in the Bo district**, through the implementation of a decentralized operational strategy.



## **EXPECTED RESULTS**

- 1. TB care provision (including preventive treatment) is improved and a referral pathway for diagnosis is put in place for children under 5.
- 2. Community action for access to TB services for children under 5 is improved and reinforced
- A strategy for access TB care provision for children under 5 is operationalized and results are shared towards national transition and scaling-up.



## **MAN ACTIVITIES**

- Organisational diagnosis workshops.
- Healthcare providers training.
- Establishment of a transport system for children with suspected tuberculosis to the district hospital.
- Material support for the diagnosis of paediatric TB.
- Tutoring and experience sharing.
- Participatory community assessment.
- Strengthening Civil Society Movement Against Tuberculosis-Sierra Leone's organizational capacities.
- Strengthening Civil Society Movement Against Tuberculosis-Sierra Leone (CISMAT) community mobilizer's capacities on paediatric TB.
- Operationalizing and flowing up on systematic TB screening in Bo district.
- Raising awareness of childhood TB within families and the community.
- Carrying out operational research to fuel reflection and enable political decision-makers to make informed choices.
- Valuation and dissemination of evidence from operational research and project monitoringevaluation at national and international levels.
- Securing financing and ownership of the intervention by national actors and partners.







