

Grant ROU-T-RAA: Summary of achievements

The ROU-T-RAA grant was designed to support the implementation of the TB NSP 2015 -2020, thus contributing to the achievement of reduction in TB incidence and mortality in Romania. Over an initial period of 12 quarters (April 2015 – March 2018) with an extension of other six months (until September 2018), the grant funded projects implemented by both the PR and its sub-recipients (four NGOs and the National Institute for Pneumology “Marius Nasta”).

Provision of full-course quality assured treatment of patients with MDR/XDR TB

The project (anti-TB drugs procured by RAA through GDF mechanism for the NTP) designed for treating the MDR and XDR cases was implemented by National Institute “Marius Nasta”.

By 30 September 2018, a total number of 530 MDR / XDR TB patients have been enrolled in the cohort 7 DOTS-Plus project. 688 patients with MDR / XDR TB received social support (social vouchers of 80 Lei / month) to support their adherence to treatment.

Scaling up of rapid TB diagnostic:

Romanian Angel Appeal Foundation (RAA) procured and distributed laboratory equipment for rapid TB diagnostic (12 GeneXpert; 2 LPA; 2 MGIT) and the necessary consumables (5600 Genexpert kits, 11800 MGIT liquid cultures, 2000 ABG line 1 MGIT tests, 1248 LPA line 1 and 96 LPA line 2 tests). The project was implemented by the National Institute “Marius Nasta” and by the end of this grant all the equipment was donated. Another GeneXpert equipment was purchased for rapid TB testing of PWID diagnosed with HIV at the infectious diseases clinic and was finally donated to the Institute of Infectious Diseases "Matei Bals".

Development of national TB guidelines:

A series of national guidelines have been developed, as follows:

- The National TB Guidelines for Children
- The National Guidelines for TB / HIV-AIDS Case Management,
- The Standards for bk laboratories (including minimum conditions for ensuring the safety and efficiency of laboratory activities);
- Procedures and operational standards for the TB network of laboratories;

During the grant three meetings of the National Laboratory Working Group were carried out and the activity of TB diagnostic laboratories by rapid techniques of TB and TB MDR was assessed within the GLC Missions.

Centralized TB equipment and consumables plan and Procedures for monitoring implementation of operational standards have been finalized in line with the WHO recommendations, endorsed by the Ministry of Health and published in the Official Gazette, as ratification of guidelines.

All the equipment purchased with GF funds will continue function with the procurement of the necessary consumables purchased by the Ministry of Health from the national budget and/or the NTP from the EU Structural Funds or Norway Grant (projects implemented in the next years).

Integrated community support interventions for key and vulnerable populations, delivered by NGOs

Poor populations living in rural areas:

One of the key actions of the grant was the testing of patient-centred interventions in six counties (Bucharest, Arges, Constanta, Dolj, Neamt, Maramures), through:

- Developing a model of integrated services provided by a multidisciplinary team of three specialists (TB doctor, social workers, and psychologist). Their main task was to assess TB patients' risk of treatment non-adherence, provide them with psychosocial support while hospitalized, prepare them for treatment continuation in the community and connect them with community services that could provide them further help (e.g. community health workers acting as DOT supporters, peer-supporters working by phone, social services etc.)



Support group for MDR-TB patients organised in Bisericani Centre by the multi-disciplinary team

- Reduce patients' risk of treatment default by providing them with adherence incentives (depending on their risk of defaulting) for continuing the treatment in ambulatory, at the TB dispensary.

Together with this support, patients also received DOT adjusted to their needs: at the TB dispensary by Tb nurses, for the patients living close to the dispensaries OR in the community, by a community health worker or a family doctor, for the patients living in rural or remote areas. Patients with a very high risk of defaulting also received support from peers in the form of regular (psychological) counselling and monitoring over the phone.

The activities were implemented by NGOs (UNOPA in collaboration with MDR-TB Patient Association and CPSS - Centre for Health Politics and Services) and the main indicators reached during the implementation of the projects are as follows:

- 8,464 TB patients were evaluated / reassessed for inclusion in the Global Fund programs of which: 6,661 patients were assigned to receive services for one of the Global Fund programs (i.e. social vouchers for adherence to treatment, psychological counselling; social counselling, support groups, peer support).
- 2,644 patients received psychological counselling by face-to-face meetings or by phone calls; 2,316 patients participated in support groups organized by psychologists in multidisciplinary teams; 2,952 patients with TB (evaluated with high or medium-risk of non-adherence to treatment) received 6,315 informative and counselling sessions with the social worker; 703 high- risk patients included in the project benefited from peer support to maintain adherence to treatment;
- 4,069 patients with TB and evaluated with medium risk of non-adherence benefited from DOT in dispensaries and received social support (50 lei social vouchers) in order to increase their adherence to treatment.
- 896 patients evaluated with high risk, received a bigger social support (80 LEI social vouchers), DOT, counselling and telephonic peer support.
- 1,777 patients with TB benefited from DOT at home and received social support (50 lei social vouchers) with the support of 439 volunteers identified by CPSS in communities. The volunteers identified 1,937 TB suspects, of which 9 were confirmed with active TB;
- 48 patients identified as IDUs received psychiatric support to increase adherence to treatment (116 sessions).

Services targeting PWID and homeless population (Bucharest only)

In order to address the key populations from Bucharest, IDUs and homeless, there have been developed two projects:

1. TB symptom screening, TB related IEC and other services (social, counselling, legal) for the homeless in Bucharest, followed by the accompanying of TB suspects to the dispensary, for diagnostic. The project implemented by Save the Children Organization had the following results: 3,263 homeless people were informed and educated about TB; 802 homeless people were identified and accompanied at medical facilities to test and detect TB cases 118 homeless people who have been diagnosed with active TB and other 87 (95 detected) who have started prophylactic treatment receive support services to increase adherence (social incentives, DOT, peer educators, psychosocial counselling)
2. Provision of harm reduction (needle exchange, condom distribution), HIV/HVB/HVC rapid testing, TB symptom screening, IEC, vaccination for HVA and HVB and other services (social, counselling) to 2,500 people who inject drugs in Bucharest, followed by the referral or

accompanying of TB suspects to the dispensary, for diagnostic. The project implemented by Anti Aids Association – ARAS had the following results:

- No. of unique IDUs who have been contacted and received at least one service: 5,904
- No. of IDUs benefiting from the minimum package of services (HIV, HVB, HVC, TB information, education and counselling), condoms and syringe exchange: 4,446
- No. of distributed syringes: 2,019,543 (cumulative from FG and other sources)
- No. of distributed condoms: 808,373
- No. of HIV-tested CDI: 664
- No. of RDI tested HVB: 643
- No. of HVC tested HVC: 647
- No. of IDUs vaccinated for hepatitis A and B: 355
- No. RDI refer to / accompany health and social services: 466
- No. of CDI receiving TB screening: 2922
- No. of CDI refer to TB diagnosis: 1117
- No. of IDUs accompanying the medical diagnostic network: 510
- No. of TB diagnosed with TB: 124
- No. of RDI receiving the support service package for adhesion: 120



The outreach services for IDUs living in Bucharest, run by ARAS

Effect of exposure to psychosocial interventions on TB patients' treatment outcome

According to monitoring data, over 50% of all TB cases notified between 2015 – 2018 in the six counties have been reached with psychosocial interventions funded through the Global Fund grant. A statistical analysis was performed by RAA, looking at the effects that exposure (or non-exposure) to the Global Fund program had on the treatment outcomes of TB patients notified between 2015 and 2017 in six counties (Bucharest, Neamț, Constanța, Maramureș, Argeș, Dolj).

The predictor's analysis showed that receiving social vouchers for treatment adherence and psychological counseling had a direct impact on a TB patient's probability of being cured.

For example, "new cases" of sensitive TB patients have 80% more chances of being reported as cured if they receive social vouchers for treatment adherence. The chances are 300% higher for patients labeled as "abandon" at the time of notification. Psychological counselling also increases chances of being cured with 40% (Table 1).

Table 1. Predictors of anti-TB treatment success for TB sensitive patients, positive tested in T0 (at diagnostic time)

Predictors of anti-TB treatment success (Patients declared cured)	New cases	Relapse	Abandon
<i>N</i>	2241	503	131
Male patient	1.071	1.159	0.908
Age at the time of registration in the system	0.991*	1.000	1.036*
Patient from rural environment	0.981	0.753	0.935
Patient with known comorbidities	0.857	0.723	1.941
Beneficiary of social vouchers	1.812*	1.693*	4.210*
Beneficiary of welfare assistance	0.919	1.040	1.065
Beneficiary of psychological counseling	1.412**	0.653	1.629
Beneficiary of support group	0.651*	0.833	0.276
Beneficiary of DOT at community level	0.893	1.181	1.176
Constant	2.396	1.189	0.048
Nagelkerke R2	0.04	0.03	0.23

Note: Models of logistics regression with dependent variable "declaring a positive tested patient in T0 as cured" (dummy type variable, 1=yes, 0=no). Tb sensitive patient sample, registered in the system after 2015. The table is specifying Exp(B) coefficients. Those marked by * are significantly different from zero for p = 0.05 and ** for p = 0.1.

Access to social vouchers had the same positive effect among patients with MDR-TB. Additionally, the participation in a support group increases with 100% the chances of a DR-TB patient of being reported as "cured".

Table 2. Predictors of anti-TB treatment completion for MDR TB patients

Predictors of anti-TB treatment success (Patients declared cured)	Exp(B)
<i>N</i>	198
Male patient	0.887
Age at the time of registration in the system	0.976**
Patient from rural environment	1.257
Patient with known comorbidities	0.542
Beneficiary of social vouchers	3.184*
Beneficiary of welfare assistance	0.829
Beneficiary of psychological counseling	0.688
Beneficiary of support group	2.059*
Beneficiary of DOT at community level	1.437
Constant	1.558
Nagelkerke R2	0.17

Note: Models of logistics regression with dependent variable “declaring a positive tested patient in T0 as cured” (dummy type variable, 1=yes, 0=no). MDR TB patient sample, registered in the system after 2015. The table is specifying Exp(B) coefficients. Those marked by * are significantly different from zero for $p = 0.05$ and ** for $p = 0.1$.

First comprehensive study of the Romanian TB system

During 2017 – 2018, the Institute of Pneumoftiziologie “Marius Nasta” performed the first Romanian study describing a health sector under its main areas – human resources, infrastructure and costs. Data from this study will be used by the Ministry of Health to document measures that will be drafted under the Global Fund Transition Grant to support TB sector reform. Given that the data collection was based on an inventory approach, the study is a good source of informing policy makers, in detail, on the gaps and strengths of the system.

Capacity building: First E-learning course on TB treatment adherence

“Adherence to TB treatment – from concept to practice” is the only e-learning course informing Romanian doctors, nurses, psychologists and social workers of cognitive and behavioural techniques that can be employed to support the treatment adherence of TB patients. The course was developed in 2018 by Romanian Angel Appeal Foundation and certified by Marius Nasta Institute of Pneumology. It includes 120 minutes of interactive content, organized over 7 chapters, being designed by a team of four specialists (a psychologist, a social worker and an instructional designer). The final version was reviewed, amended and approved by a medical doctor from the Marius Nasta Institute. 539 participants enrolled over a period of 15 months.

Capacity building: Online toolkits encouraging NGO involvement in TB control

RAA developed an online toolkit for NGOs on how to conduct TB prevention and TB support interventions in the community and TB case finding among vulnerable groups where the target audience were CBOs active in the areas of health, education, community development, social services etc. Starting from the toolkits we conducted a pilot project with the Medical Students Association from Timisoara. The association, starting from our material about IEC activities for the general population, developed hang door IEC materials (with our financial support for printing). All the materials were distributed in the West University Campus, especially in students dorms, and they reached almost 20,000 students.

Major renovation for setting up of a new MDR facility

With the support of the Global Fund, RAA renovated three degraded annex-buildings of Leamna Pneumology Hospital in Dolj County, turning them into a modern facility for the treatment of patients with MDR / XDR TB.



Leamna: before renovation



Leamna: After renovation

Advocacy

The grant allowed the aggregation of an advocacy team coordinated by RAA, whose main results were as follows:

- TB Law – after more than 4 years since developing the TB Bill, two years after registering it at the Parliament and 18 months of advocacy campaign under the GF grant, the TB law was finally adopted at the end of 2018. The application norms are currently in the process of being developed, as this is the final step in ensuring full budgeting and implementation.



Minister of health Sorina Pinteá's delivering her message to the supporters of the TB Bill



Romanian activist Paula Rusu with MP Dr. Florin Buicu in the campaign for the approval of the TB bill

- The HIV/AIDS National Strategic Plan 2019-2021 – it was developed in late 2017 by two RAA consultants and endorsed by the Ministry of Health. It was published in December 2018 for public consultation. However, it did not include the full budget as estimated in the original version. Following pressure from civil society, both national and international, the MoH is currently reviewing the version published, in order to include all the costs estimated for all the services addressing vulnerable groups.
- The Report on TB Medicine Crisis in Romania – published in October 2017, it raised our concerns regarding the availability of MDR-TB drugs in Romania once the GF grant ended in 2018. Following our advocacy efforts, a strong public campaign and support from more than 40 CSOs, both national and international, the Ministry of Health included all the drugs necessary for TB and MDR-TB on the list of compensated medicines and on the price list, thus making it possible to procure them.
- UPR Report – submitted in June 2017 to the Office of the High Commissioner on Human Rights (OHCHR), it included recommendations on HIV/AIDS, IDUs and, for the first time, TB. 5 states sent recommendations to the Romanian Government based on our report.

- Community advocacy for involving local authorities in the fight against TB – the largest awareness and advocacy campaign for TB services carried out at local level. In 2017 and 2018, we organized 32 meetings with representatives from over 250 local communities in 10 counties. The meetings gathered over 400 participants from the representatives of the mayoralties, the Public Health Directorates, the TB Dispensaries, other institutions from the counties.
- TB Europe Coalition - RAA has been a member of the TB Europe Coalition for more than 7 years and since last year we have a member in the Board. We have contributed and co-facilitated two workshops on TB and advocacy, targeting both professionals in the TB field and social welfare field and civil society organizations.
- Social media campaign – we started building the “Parteneriatul StopTB” Facebook page in April 2017 in order to have a good information and awareness channel for the people interested in TB but also to get public support for various calls to action related to the main asks from the advocacy campaign. On special occasions, such as WTBD, we reached over 100.000 users. This helped us mobilize people to sign the petitions, to send letters to the decision makers, to distribute information on TB and HIV/AIDS etc.
- With the support of the Global Fund, RAA organized a study visit to Portugal, inviting members of the Romanian Parliament and representatives of municipal health services, along with TB and HIV activists.

The visit was a success in the sense that after it, Bucharest City Hall, municipal administration of hospitals and medical services included in the strategy for the next years and signed an agreement with the NGOs ARAS, RAA, Carusel and RHRN, for the establishment of the first center of integrated services for IDUs and homeless for the prevention and care of TB, HIV, Hep. B, C.



Romanian delegation visiting the Portuguese Parliament - meeting with MP Ricardo Baptista Leite