



The Damien Foundation in Guatemala

Supporting the National Tuberculosis Control Programme

The Damien Foundation supports the national tuberculosis control programme in 7 out of 26 regions selected for sanitary measures. Patients may be diagnosed in district health centres or hospitals. Sputum from suspected TB patients collected from units in peripheral areas is sent to the main health care centre for examination. The “units in peripheral areas” are medical stations, voluntary health motivators and mobile teams who are extending health coverage. The teams are subcontracted by the government. They give consultations and vaccinations in very isolated areas, far away from health care centres. The people who live there are mostly indigenous.

There is a laboratory in each centre where tuberculosis can be diagnosed and a nurse is in charge of treatment and follow-up of patients with tuberculosis. Where a case is more complex a doctor is there to assist the nurse. At provincial level, a nurse will supervise the implementation of programmes for each district. At national level, a small team deals with the assessment, follow up, training in shifts and supervision of health care personnel at all levels, but especially of those working in regions selected for sanitary measures.

The Damien Foundation team supports these activities in all 7 regions. The team provides valuable technical assistance and contributes towards continuously increasing the health centres’ human resources potential through regular supervision and training of health care personnel. The government provides the medicines, workers’ wages and most of the laboratory equipment. The Damien Foundation provides additional laboratory equipment and the means for transport as well as conceiving and printing motivational and educational material for the population.

Challenges, poor health insurance coverage and HIV/AIDS

Not even half of Guatemala’s inhabitants live near a health care centre. To enable the other half who are unable to get there to receive health care from health motivators and mobile teams, the government has appealed to NGOs. A great deal of lobbying, training and organisation will be needed to fully involve all the partners in the fight against tuberculosis.

People who are cared for outside health care centres appointed by the Ministry of Health do not always have access to DOTS services. We shall have to work more closely with social security, jails, the private sector and other sectors so that all patients can receive treatment under DOTS. In the capital and in other regions too, almost 20% of patients with tuberculosis and tested for HIV-AIDS came out seropositive. Getting the two programmes to work more closely together will be a challenge. So any patient with tuberculosis who asks for it can be examined and if found to be

co-infected with HIV-AIDS and tuberculosis, receive proper care including receiving anti-retroviral drugs if necessary.

Summary

Start of the project	1993
Local partners	National Tuberculosis Control Programme
Project type	Only tuberculosis
Population covered in 2006	4,948,366
Patients detected and treated in 2006	1,344 tuberculosis patients
Expenditure in 2006	€ 99,216