Cambodia

During 2012, we treated another 3,996 TB patients in the 3 provinces where we work, Svay Rieng, Kompot and Kandal, bringing the total number of patients treated to 38,458 since initiating community-based TB care in Cambodia in the three district hospitals of Svay Rieng Province in 1994. The program approach, which was adopted by the Cambodian National TB Program, and has been expanded to all of Cambodia’s 10 provinces, is credited with a major role in the drop in TB prevalence between 2002 and 2011 in Cambodia by the World Health Organization.

CHC’s AIDS programs delivered primary HIV care for 4,100 adults and 1,000 children in urban and rural Cambodia in 2012. CHC’s rural AIDS program was the first to integrate TB and AIDS care in the country, providing a global model for the treatment of TB and AIDS. In Phnom Penh, the pulmonary ward at the Khmer Soviet Friendship Hospital, the largest public hospital in Cambodia, has been transformed into a center of excellence for TB and HIV care for training and research and admitted more than 700 patients in 2012, serving more than 3,300 patients since its opening in 2005. More than 1,110 children have received medical, nutritional, educational and social care from the Maddox Chivan Children’s Center as of the end of 2012. That program is integrated with the CHC’s Khmer Soviet Friendship Hospital’s pediatric ward and the Sullivan outpatient center, which provides primary care to more than 400 HIV+ children.

116 patients have been placed on drug-resistant TB therapy in 2012, bringing the total cases treated by CHC to 401 since CHC began the nationwide program in 2006. CHC established drug-resistant TB care in the country of Cambodia and continues to provide clinical care for patients suffering from drug-resistant TB in partnership with the National TB program.

CHC’s Community-Based Health Insurance (CBHI) program, established in 2011, now provides nearly 34,000 vulnerable individuals with subsidies for their health care, thus providing protection from the financial ruin that often accompanies the illness of a child or other family member.

Ethiopia

As of December 2012, more than 600 patients were initiated on treatment for drug-resistant TB in GHC’s two program sites at St. Peter’s Hospital in Addis Ababa and at Gondar University Hospital in Gondar, in the north of the country. The program has one of the best records of cure/completion and adherence to care in the world and is being recognized as a model to scale-up and access drug-resistant TB care in Africa and in other resource-poor settings.

GHC continued to work with the architectural firm Graft based in Berlin and RAAS in Addis Ababa on the construction of the Zahara Children’s Center in Sebeta, on the outskirts of Addis Ababa. The center will help meet the needs of the thousands of children infected with or affected by TB and HIV, and will be a center to treat drug-resistant TB in children. The Zahara Center is modeled on the GHC’s Maddox Chivan Children’s Center in Cambodia where over 1,000 HIV infected or affected children have been cared for in a unique multi-sectoral program of medical, nutritional, and educational services.