



## FINAL EVALUATION

# ZERO TB VIETNAM, EVALUATION OF HEALTH-RELATED FINANCIAL AND OPERATIONAL PERFORMANCE (ZTV HOPE)

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EVALUATION DATES: OCTOBER 2023 - JANUARY 2024



**COUNTRY:**  
VIETNAM



**BUDGET:**  
€450,000



**LEAD ORGANIZATION:**  
Vietnam National  
Tuberculosis Control  
Program

**PARTNERS:**  
Friends for  
International TB  
Relief - FIT; Hai Phong  
Medical University;  
Vietnam national  
respiratory health  
hospital



**START DATE:**  
01/2020

**END DATE:**  
12/2023

## THE PROJECT

### Background

Despite recent progress, Vietnam is a country with a high burden of tuberculosis (TB) and multi-drug resistant tuberculosis (MDR-TB). According to the 2017 TB prevalence survey, TB is four times more common in men than women. Children account for less than 2% of the total reported TB cases, far from the estimated rate of 10%. Tuberculosis preventive treatment (TPT) for people living with HIV newly in care and for household contacts aged under 5 of TB cases are still well below UN High-Level Meeting on TB targets for 2022. These challenges were highlighted in the last mid-term evaluation of the TB National Strategic Plan in January 2023.

### Project operating model

The ZTV Hope project aims to identify TB and MDR-TB cases and put them on TPT in 7 districts of 3 provinces. The main interventions are to organize active TB screening (active case finding [ACF]) in the community among pre-identified risk groups. Screening is carried out through systematic chest X-rays of target populations followed by a GeneXpert test. This process is then complemented by screening of contact cases. The project also compares the performance of the QIAreach TB infection test with the Igra QTF reference test. Finally, the project is looking at the "catastrophic costs" for households affected by TB through a mobile active screening (ACF) and passive case finding (PCF) approach.

## OBJECTIVES

### Overall objective

Carry out an operational research study to assess the impact and efficiency of integrated active TB case finding activities in the community.

### Specific objectives

- ▶ Increase numbers screened for TB cases, TB infection, and people put on TPT through active TB case finding among at-risk populations and TB infection screening among household contacts of TB cases.
- ▶ Compare the performance of the QIAreach test with the WHO Igra QTF reference test and intradermal reaction (IDR) for the diagnosis of TB disease.
- ▶ Compare the catastrophic costs incurred by TB-affected households of active community-based case finding (ACF) and passive TB case finding in health centers.

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## EVALUATION RESULTS

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### Relevance

The project objectives are relevant as they align with international priorities for screening for TB, TB infection and TPT implementation adopted at the 2018 UN High-Level Meeting. They also align with national priorities highlighted in the mid-term review of the National Strategic Plan for TB and efforts to «recover TB» following COVID-19. The QIAreach study provides original and useful data on this new test, which is not yet on the market.

### Effectiveness

The project's effectiveness is demonstrated by it achieving 76% of TB notification targets and 191% of TB infection targets. Performance in screening for TB and TB infection is also satisfactory. Two scientific papers have been published and five presentations have been made at the last Union World Conferences. Effectiveness was also enhanced through the addition of a joint TB screening intervention during COVID-19 vaccinations. Gaps remain, however, in terms of demonstrating earlier detection of TB cases, detection in children and the utilization rates of equipment and mobile teams.

### Efficiency

L'Initiative allocated approximately €400,000 to the screening component of the project, which corresponds to €173 per TB case that is TB identified and put on TPT. This makes the project very efficient compared to the unit costs in other countries. This active screening intervention would not have taken place without L'Initiative funding and is not covered by national health insurance.

### Impact

The additional 5% of TB cases detected and the additional 89% started on TPT decreases TB transmission, incidence and mortality. The screening approach reduces delays to patient care, thereby limiting transmission and mortality, although this has not been measured. The catastrophic costs study provides original data that impacts the TB strategy. The involvement and collaboration of the community and health staff also demonstrate the impact the project has had.

Gaps remain in terms of measuring screening timeframes and early screening and the lack of promotion of active screening at static sites by invitation in addition to the mobile active approach beyond the project.

### Sustainability

The project is sustainable as it has been taken on by the «post-COVID -19 TB recovery» strategy, led by the National Tuberculosis Control Program (NTCP) and funded by the Global Fund, although it does not cover the same areas. This approach has made it possible to catch up with the 30% drop in notifications due to COVID-19 and to return to the 2019 TB case notification rate. National funds from the private sector have also been allocated for active TB screening in the project location.

It should be noted, however, that sustainability is ensured almost exclusively by external funding because active screening and prevention through TPT are not included in the national insurance system (SHI).



## Conclusions and recommendations

Based on the results of the evaluation, it is recommended that:

### 1. The CCM and NTCP:

- ▶ Develops an evidence-based case for centrally mobilizing funding from the national insurance system (SHI) or the national budget for TB prevention through TPT and active TB screening. At the provincial or district level, this argument will be used to mobilize funding from the private sector, people's committees or unions, for example.
- ▶ Urges the national insurance system to stop printing of X-rays in establishments that use digital radiographic equipment and with SHI to develop other control mechanisms, such as storing X-rays in jpeg format on a cloud that is interoperable with VITIMES.
- ▶ Organizes a communications campaign on TB prevention for World TB Day through promoting annual radiograph screening for groups of people at risk.
- ▶ Sets a frequency for radiograph TB screening for at-risk groups.
- ▶ Develops a strategy to encourage men to engage in TB care and prevention services.
- ▶ Investigates risk factors for the progression of TB infection to TB disease in men.

### 2. The National TB Program - FIT and Hai Phong University of Medicine and Pharmacy:

- ▶ Organizes project close out with a statement on its achievements to be shared with L'Initiative, the Global Fund, the People's Committee, the Union of the Elderly, the Women's Union, the Farmers' Union, the Youth Union and other partners to mobilize funds to continue mobile active TB screening among at-risk groups in the project areas.
- ▶ Submits projects on TB prevention to calls for projects from L'Initiative, TB Reach, or other donors.

### 3. L'Initiative and the French Embassy in Vietnam:

- ▶ Supports TB partners (NTCPs, CSOs, universities, etc.) to submit TB projects to L'Initiative's annual call for proposals.

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