Mr Martin Mberikwazvo is an artisanal small-scale miner (ASM) from Shurugwi district who fell very sick in July 2022 and decided to seek treatment at the USAID-supported Occupational Health Clinic (OHC) in Gweru. He was diagnosed with TB after having submitted sputum for TB and under-going a chest X-ray. He was started on TB treatment immediately and adhered to his treatment for 6 months. "I am very pleased about my recovery journey, I was gladly assisted at Room 10 Gweru OHC," Mberikwazvo reflects gladly. "I have now fully recovered and I can go about my daily chores. I encourage all my colleagues who work in the mines to go to Room 10 and get screened." Under the Kunda-Nqob’i TB (KN-TB) Project, Baines Occupational Health Services (BOHS) runs two occupational health services in Gwanda and Gweru. Services provided include TB and silicosis screening, treatment and support for clients just like Mberikwazvo.

Making sense of TB data training in Chirumanzu District

The National TB Control Program (NTP) in partnership with The Union Zimbabwe Trust (UZT) conducted a 7-day training for Chirumanzu District health workers on TB and TB-HIV data collection, analysis and use at local level. The specific objectives of the training were to develop skills for the collection of good quality data and evidenced based decision making and planning. After the training, health workers are expected to be able to identify performance strengths and weaknesses and develop action points to address identified challenges. TB review meetings and support supervision visits will be data driven, a departure from the traditional methods of just assessing the processes. This is expected to improve the overall performance of the TB program at local level and promote local ownership of TB interventions and outcomes.

15,013 members of the community reached with TB awareness and sensitization last week in the 8 KN-TB districts

Artisanal Miner encourages screening of fellow miners

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Community staff inch towards screening target

Community Based Volunteers (CBVs) in the eight districts reached and screened 95% (5,487) of the targeted clients for TB. They presumed 343 (6%) clients whom they referred to the health facilities. Among those presumed a total of 20 (6%) TB cases were notified and all were initiated on TB treatment and enrolled on palliative care. Of significance, Kwekwe and Gweru districts notified a total of 14 TB patients during the week under review through the efforts of CHWs in the 2 districts.