



Independent observer
of the Global Fund

HALF OF THE COUNTRIES WITH GLOBAL FUND-SUPPORTED TB PROGRAMMES DELIVER SERVICES IN PRISONS, BUT SCOPE IS LIMITED

As of the end of 2010, in the 105 countries where the Global Fund financed TB programmes, these programmes delivered services within prisons in half of the countries (53). However the services were limited in scope and scale. There was minimal provision of multi-drug-resistant TB (MDR-TB) services.

These were some of the findings of a study on Global Fund investments in TB services in prisons, conducted by several researchers and published in March 2012.

In the period to the end of 2010, of the \$2 billion in grants that the Global Fund provided for TB programmes, \$558 million was allocated to programmes that included TB service delivery in prisons. TB prevalence rates within penitentiary settings are between five and 50 times higher than the rates observed in the general population.

Nearly two-thirds of the grants providing TB services in prisons were implemented by governments, with the remainder being implemented by NGOs.

Global Fund-supported TB programmes delivered services in prison settings in half of the 36 high-burden countries. High-burden countries are those that had either a high rate of TB or a high rate of MDR-TB, or both. Here is some information on how this broke down regionally:

- The region with the largest number of high-burden countries receiving TB services supported by the

Fund (10) was Eastern Europe and Central Asia (EECA).

- None of the four countries in the Southwest Asia region with both high TB and high MDR-TB status – India, Afghanistan, Bangladesh, and Pakistan – were implementing Global Fund-supported TB services in prisons.
- None of the high-burden countries in Southern Africa – Mozambique, South Africa, and Zimbabwe – were implementing Global Fund-supported TB services in prisons, even though this region has a very high incarceration rate, and a high prevalence of people living with both HIV/AIDS and TB.
- In West and Central Africa, nine countries were delivering TB prison services through Global Fund-supported programmes, although the region has only one high-burden country (Nigeria).

“With the exception of the EECA region, most prison-based tuberculosis programs supported through Global Fund grants offer limited services for prisoners,” the researchers said. “Therefore, there is a need to better define and promote a more comprehensive package of tuberculosis care tailored and adapted to delivery within [prison] settings.”

The information for this article was taken from Donna Lee et al, “Global Fund financing of tuberculosis services delivery in Prisons,” Journal of Infectious Diseases, 23 March 2012. The full article is available only to subscribers.

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