Preparation Checklist for TB Disease Prevalence Survey WS

Country: Date: Prepared by:

To make the workshop fruitful to you and your country with the purpose of developing an outline of the survey protocol that will enable you to have access to funding, or to brush up your existing draft and go a step further, we would kindly ask you to prepare yourself with some reading material and that you bring to the workshop some important data. The availability of population datasets (both computer file and paper) and an assessment of the laboratory capacity are essential items without which your participation in the workshop will not be productive.

Recommended reading:

☐ Your country (the NTP and/or the WHO country offices) should have received by now a recent publication (red book) named "Assessing tuberculosis prevalence through population-based surveys". If you have not received it, please contact the WR office. We strongly recommend that you read it before coming, as it will facilitate your work during the workshop.

☐ In the January 15 issue of the Lancet Infectious Disease journal, there is an article published by some members of the Task Force of Impact Measurement: C Dye et al. Measuring tuberculosis burden, trends, and the impact of control programmes (in attachment). It's an overview of the methods used to measure the burden of TB and the impact of TB control globally and for specific regions. The strengths and the weaknesses of each of the methods are fully discussed and will help you to understand the background of why TB disease prevalence surveys are needed in some countries.

General:

☐ Country map with states/provinces, preferably with transportation network (roads, boats, etc)

☐ Exclusion areas and criteria: List of areas of the country where it seems impossible to carry out field activities in coming two years, due to security or other reasons.
If you already have some draft/outline of the survey protocol, please bring it.

Estimates of TB disease prevalence:

If you have some data/estimates other than those which will soon be published in the 2008 WHO TB annual report, such as data from a sub-national study, please bring them with you.

Sampling Framework:

Population data is essential to define the sampling framework. You need to bring such data to the workshop.

It is essential that you bring population data and details of the administrative structure of your country:

- Most recent census data or most recent projections of the population counts, and their respective computer files. The Department of Population of a country and/or the UNFPA local office often publish the population dataset in a CD file. Please contact them to obtain it. The accompanying printed book is also useful to know the contents.

- Other estimates of the population counts (The Ministries of Health may have their own population data, even if your country does not have a recent census data)

Administrative structure here means "levels and units" such as 3 Regions, 20 provinces, 76 districts and 20 cities and 1500 villages. It would also be useful to bring population data by age-groups. If this is not available, it would be important to know the proportion of the population "under 15" and "15 or more", preferably by administrative unit, but at least for the national level.

Do not worry if population counts for the last sampling unit such as village are not available in the population dataset you have. Quite often in other surveys, detailed population information was sought after the upper level sampling unit, such as district, was selected.
**Stratification:**

- If your country is interested in having TB disease prevalence results stratified by "Urban and Rural" or other types of strata, **strata-wise population datasets** should be made available. If you can provide us with definitions of which districts-villages are urban or rural, we can easily produce a **strata-wise population dataset** from the census or population data file.

**Lab Capacity:**

**Laboratory capacity** is often a defining factor influencing the survey design and schedule. 5,000 slide examinations and almost the same number of culture examinations, or even more, are likely to be necessary during the study period, which may last for 6 to 8 months (depending on the design). According to the capacity of lab, we need to modify the survey design. You will need to have some idea of current lab capacity to know needs of technical assistance and further investment.

- No. of smear examinations in 2006 or 07:
- No. of culture examination in 2006 or 07:
- How many lab technicians will be available full-time for smear microscopy during the survey period. _____.
- How many labs are performing culture examination?
<table>
<thead>
<tr>
<th>Name</th>
<th>Place(city)</th>
<th>Culture methods</th>
<th>No of technicians*</th>
<th>Capacity(Max.) Tubes /month</th>
<th>Remarks</th>
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Please discuss following issues with your lab colleagues:

- □ What are the limiting factors identified by the TB lab to support the survey operations (other than budget)? Examples: Human resources, incubator capacity.

- □ Which organizations or institutes (in your country and abroad) are providing technical support on TB lab:

- □ Are there any plans to expand the culture capacity of your country in the coming two years?
Do you have an idea of how many days would be necessary to send a sputum sample from the most distant region of your country to the central laboratory for processing?

What are the usual means of transportation and the average time from collection of the samples to processing of the cultures?

**Budget (see p115 of the red book)**
It might be useful to have some idea of at least the following prices/costs:

- Average salary for technical staff (when necessary to pay):
- Per diem for field operation:
- Cost to rent a 4WD car for (6) months:
- Averaged cost to organize a local workshop in your capital city (ex. with 50 (30) participants for 3 days and/or 5 days) :
Organizations and Human Resources:

☐ Which national institutes/organizations are potential candidates to carry out the field operations? (ex. NTP and central TB hospital, Tropical research institutes)

(Below is only for countries that have already started some preparation)

Although it depends on the method of the survey, typical survey operation need to have some core staff members per team, in addition to supporters and assistants from the local unit.

1 Team leader (preferably a medical doctor, although this is not a full requirement)
2-4 Census workers/Interviewers
1 Radiographer (technician):
1 X-ray Assistant
1 Physician - radiologist to screen X-ray:
1 lab assistant (2 lab technicians if microscopy is done in the field)
3 drivers

Please, enumerate the sources of such staff, and, if possible, the total number of field teams.
**Preparation and Logistics:**

Countries that experienced surveys found that the availability of cars and X-ray machines suitable for field operations are often bottlenecks. If you have already started preparing for the survey, please provide us with some information on procurement and logistics, including the following issues.

Three 4WD cars are usually needed per team. Can they be borrowed or do they need to be rented?

X-ray equipment for field use

Fresh sputum sample transportation to culture lab

Thank you.