Tuberculosis (TB), now the leading infectious cause of death worldwide, is a key contributor to morbidity and mortality among children in Africa. While many countries in the continent have developed national strategies to address childhood TB, implementation of these strategies in practice lags. National guidelines for the management of childhood TB can strengthen health service delivery and improve diagnosis and treatment. Because sick children frequently present to Maternal and Child Health (MCH) platforms, it is critical that MCH and TB services are linked and leveraged by clear guidance on the optimal interaction between these services.

To better understand whether childhood TB guidelines can inform the roles and responsibilities of MCH providers and to identify opportunities for strengthening them and related tools, the United States Agency for International Development’s (USAID) Africa and Global Health Bureaus and the African Strategies for Health (ASH) project assessed existing childhood TB guidelines in 13 countries in Africa. Technical and organizational elements were systematically extracted and analyzed from countries’ most recent guidelines. This brief provides a summary of findings and makes recommendations for revising outdated guidelines and strengthening them to improve service delivery and reduce the burden of TB in children.
Prioritization of Technical and Organizational Elements within Guidelines

Guidelines, together with tools such as algorithms, emphasize diagnosis, treatment and prevention of TB in children. The diagnostic emphasis suggests that current guidelines are most useful at a hospital level. Limited explicit reference to service organization and the use of primary level MCH programs to identify and manage childhood TB cases causes significant delay in diagnosis and treatment. The rhetoric of childhood TB may further discourage MCH providers from making an effective contribution to and taking on a larger role in childhood TB programming.

In 2014, the World Health Organization revised global recommendations for the management of TB in children to include guidance on the roles and responsibilities of health workers at various levels of the health system. As national programs update guidelines to respond to suggested changes, key recommended areas of focus include: (1) strengthen guidelines with clear and specific roles and responsibilities by level and cadre, including MCH programs, and (2) adopt and clarify rhetoric that encourages MCH providers to identify symptoms of TB in children and reduce diagnostic delay.

The ASH project improves the health status of populations across Africa through identifying and advocating for best practices, enhancing technical capacity, and engaging African regional institutions to address health issues in a sustainable manner. ASH provides information on trends and developments on the continent to USAID and other development partners to enhance decision-making regarding investments in health. ASH is funded by USAID’s Bureau for Africa and implemented by Management Sciences for Health.