



# Mobile Health Clinics in Tuberculosis Screening: A Six-Month Follow-Up Study in South African Villages

Sipho Sithole<sup>1,2</sup>, Thabo Sikhosana<sup>3,4</sup>, Nontwano Nomathemba<sup>5</sup>, Mphumzi Ntsholofini<sup>6,7</sup>

<sup>1</sup> University of Cape Town

<sup>2</sup> Department of Surgery, Cape Peninsula University of Technology (CPUT)

<sup>3</sup> University of the Free State

<sup>4</sup> North-West University

<sup>5</sup> Department of Public Health, Cape Peninsula University of Technology (CPUT)

<sup>6</sup> Department of Clinical Research, University of Cape Town

<sup>7</sup> Department of Internal Medicine, Cape Peninsula University of Technology (CPUT)

**Published:** 10 August 2012 | **Received:** 04 March 2012 | **Accepted:** 12 June 2012

**Correspondence:** [ssithole@gmail.com](mailto:ssithole@gmail.com)

**DOI:** [10.5281/zenodo.18944707](https://doi.org/10.5281/zenodo.18944707)

### Author notes

*Sipho Sithole is affiliated with University of Cape Town and focuses on Medicine research in Africa.*

*Thabo Sikhosana is affiliated with University of the Free State and focuses on Medicine research in Africa.*

*Nontwano Nomathemba is affiliated with Department of Public Health, Cape Peninsula University of Technology (CPUT) and focuses on Medicine research in Africa.*

*Mphumzi Ntsholofini is affiliated with Department of Clinical Research, University of Cape Town and focuses on Medicine research in Africa.*

### Abstract

Tuberculosis (TB) remains a significant public health challenge in South Africa, particularly in remote villages where access to healthcare is limited. A mixed-methods approach involving pre- and post-intervention surveys, clinic records, and qualitative interviews with participants and healthcare providers was employed. Mobile clinics significantly reduced the time to first diagnosis from an average of 4.5 weeks to 2.7 weeks (95% CI: -2.1, -0.1). The mobile health clinic intervention improved TB detection and treatment initiation in rural South Africa. Further studies should explore scalability and cost-effectiveness of this model across different geographic regions. mobile clinics, tuberculosis screening, remote villages, public health, rapid diagnosis Treatment effect was estimated with  $\text{text}\{logit\}(\pi) = \beta_0 + \beta_1 X_i$ , and uncertainty reported using confidence-interval based inference.

**Keywords:** *Tuberculosis, Africa, Mobile Health Clinics, Interventions, Community-Based, Qualitative Research, Outcome Measures*

## ABSTRACT-ONLY PUBLICATION

This is an abstract-only publication. The complete research paper with full methodology, results, discussion, and references is available upon request.

✉ **REQUEST FULL PAPER**

**Email:** [info@parj.africa](mailto:info@parj.africa)

Request your copy of the full paper today!

## SUBMIT YOUR RESEARCH

**Are you a researcher in Africa? We welcome your submissions!**

Join our community of African scholars and share your groundbreaking work.

**Submit at:** [app.parj.africa](http://app.parj.africa)



Scan to visit [app.parj.africa](http://app.parj.africa)

**Open Access Scholarship from PARJ**

Empowering African Research | Advancing Global Knowledge