

Activities

Hope for Future Generations organized a sensitization meeting for community leaders, women groups and other stakeholders with the aim to explain the project, objectives, activities and expected outcomes. This resulted in gaining the support of many stakeholders and, in the long run, ensured its sustainability. Additionally, the stakeholders took on the responsibility of monitoring the activities of the health agents.

People in these communities have a lively religious life, hence it was very important to establish a dialogue and collaboration with religious leaders and centres (church, mosque, etc.). Audience in these settings showed great interest in TB educational talks. Cured patients participated giving testimonies of their survival story, access to treatment and treatment adherence, as well as vulnerability to discrimination.

30 community based agents (volunteers) were trained to go from house to house educating families on TB. For monitoring and record purposes HFFG provided the volunteers with forms to record their visits. House-to-house TB/HIV campaigns by volunteers reached more than 750 people in the communities.

HFFG created drama troupes in the beneficiary communities that were educated on TB and HIV: causes, symptoms, mode of transmission, treatment, prevention and reduction of stigma. Based on the trainings, the drama members adapted themes about stigma, eliminating myths, the availability of free treatment, infection and symptoms. Their performances were able to reach out to 3,000 fellow citizens.

HFFG facilitated the creation of 5 advocacy clubs, and organized a media training on TB/HIV reporting and advocacy education for personnel from various media institutions. The journalists trained organized advocacy programmes on the radio that they co-moderated with cured TB patients.

Outcomes

The outcomes identified by the grantee were: (a) increase in voluntary TB/HIV screening, (b) early detection and referral for treatment by volunteers and advocacy club members, (c) good dissemination and accessibility to information, (d) myth reduction, (e) leaders became responsive to the needs of communities by listening to them, (f) communities acquired advocacy skills to demand their rights to quality services, (g) the slogan "seek early treat for TB" and "support people with TB" have become common messages, (h) PLWHA networks regularly screen their members during support group meetings, and (i) theatre troupes continue to educate communities during community meetings. Another important outcome is ownership and sustainability. The community's activities are sustainable because the drama clubs ask for a contribution from the audience at the end of their performances which they use to do other activities.

The Internal Review Team that visited HFFG in September 2009 was able to confirm that community members were very much aware about TB and, most importantly, were empowered to take action. Ownership was a fact, community members do activities themselves and report back to HFFG. Its activities contributed to the NTP Strategy by increasing access to treatment and organizing numberless TB/HIV collaborative activities. The NGO worked closely with chiefs and mother queens, as well as in schools. HFFG had a solid monthly monitoring system and ensured the continuation of key TB grant activities by integrating them into existing HFFG projects on other health issues.