



Everyone knows what it's like to face and engage difficulties as we go about our daily lives. We can take pleasure in meeting these life hurdles in a creative way, and the same is true of meeting the challenge of worldwide eradication of TB. From its previous experiences in dealing with the problem of TB, ASD has taken the following lesson: Never stop learning, never stop doing, never give up on your passion and most importantly, never give up on yourself. Putting this philosophy to the test with our TB REACH Wave 2 project, the Association for Social Development (ASD) and KNCV jointly developed an innovative approach to help conquer TB by augmenting our free Chest Camps using infotainment.

The infotainment is designed as a street theater performance staged the day before the Chest Camp is held. The script employs recognizable domestic characters portrayed by local volunteers and, most importantly, patients from the community who have been successfully treated for TB, and by the relatives of these patients. This serves to enhance a sense of community ownership and to personalize the story for the audience, which comes from all walks of life, with media and district stakeholders particularly encouraged to attend, emphasizing the importance of the activity. Through these familiar characters, various stigmas and false concepts related to TB and its treatment are communicated to the audience in an entertaining, non-threatening, and easily understood fashion.

After the performance, the concerned Regional Coordinator conducts a Question and Answer session with the audience, to assess how much the performance has helped them to learn and understand about TB. A detailed briefing about TB is given to conclude the activities.

The day following the performance, a TB REACH team arrives to set up the Chest Camp. A mobile laboratory is established with all the appropriate equipment and reagents as well as recording and reporting tools. As the villagers assemble, laboratory technicians and Social Mobilizers start symptom screening, followed by sputum smear microscopy. To maintain the flow of community members to the camp, volunteers continue making announcements through megaphones every half hour, broadcasting basic information about TB.

This intervention has been a great success. When the target (urban) health facilities are compared to the non-target (rural) facilities, the proportional increase (difference between target and non-target health facilities) was 16% and 21% for all TB forms and SS+ PTB respectively. This outcome is likely to be maintained as health education messages about TB continue to be communicated in a convincing and entertaining way.

Pakistan

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Association for Social Development (ASD) and KNCV



Stop TB Partnership
TB REACH



FINDING AND TREATING PEOPLE WITH TB IN THE WORLD'S POOREST COMMUNITIES

TB REACH

The first wave of projects
increased case detection
by an average of 26%
compared to
the previous year

More than nine million people around the world become ill with tuberculosis (TB) each year. About one-third of them fail to get an accurate diagnosis or effective treatment and are more likely to die from this curable disease.

By supporting the many partners working in the field, TB REACH offers a lifeline to people among this missing 3 million by finding and treating people in the poorest, most vulnerable communities in the world. In areas with limited or non-existent TB care, TB REACH supports innovative and effective techniques to find people with TB quickly, avert deaths, stop TB from spreading, and halt the development of drug resistant strains.

- TB REACH was launched in 2010 and will run until 2016, thanks to a CAD\$ 120 million grant from the Canadian International Development Agency.
- TB REACH is committed to getting funds to our partners with a very short turnaround time.
- TB REACH has committed nearly \$50 million to partners working on 75 projects in 36 countries covering a wide range of interventions.
- Preliminary analysis from Wave 1 shows that efforts of partners led to an increase of 26% in TB case detection over an area of 100 million people, while some areas saw increases of more than 100%. The average cost per person covered is US \$0.15.

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