Advocacy and Communication of the *Three I’s for HIV/TB* Toolkit for the Southern African region

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- 2008: Discussion on “Strengthening advocacy by improving clarity on the Three I’s for HIV/TB”

- FAQs process initiated at WHO Geneva

- 2010: Review of FAQs reveals persisting challenges with accessibility and clarity

- WHO supports development of toolkit containing accessible and scientifically accurate training and advocacy materials to promote the accelerated implementation of the Three I’s for HIV/TB.

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Stakeholder Consultation on the *Three I’s* for *HIV/TB*

- A joint ownership initiative to ensure that toolkit is contextually relevant, accessible and responsive to gaps and opportunities.

**Aims:**

1. Bring stakeholders up to speed with updated WHO guidelines
2. Identify obstacles and opportunities with respect to accelerated implementation of the Three I’s
3. Inform the development of the toolkit in accordance with regional needs

- Structured group work focused on developing innovative educational or implementation strategies for case studies simulating real-life situations
Key needs as highlighted at meeting

- Lack of cohesion between the response to the two diseases as well as other social issues prevents a holistic response to the epidemics

- The need for more simplified communication of guidelines for use at the grassroots level

- Staggered and unclear communication between national level TB programs and ‘the trickling down’ of communication to local stakeholders – prevents a shared responsibility

- Poor contact tracing and limited TB case finding in congregate settings

- IPT is still limited to pilot sites, with poor communication of the findings

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Key principles behind development of a toolkit

• Knowledge trickling down to service delivery level—from policy to practice

• Creation of demand through knowledge transfer—recognition of rights and benefits

• Fostering a sense of joint responsibility and agency

• Placing science within a social context
Way forward ... the Three I’s for HIV/TB Advocacy Toolkit

Timeline for toolkit development:

• 4 weeks – Development of draft toolkit

• 3 weeks of National piloting of the draft toolkit in Zambia, Swaziland, Lesotho and Botswana

• 3 weeks - Finalization of toolkit based on piloting review

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Three I’s HIV/TB
Advocacy Toolkit

The toolkit, includes a variety of resources to be used by health care workers, civil society, and community stakeholder at large. It includes:

1. FAQs on the *Three I's for HIV/TB* for health workers and communities
2. Glossary to define scientific terms
3. Congregate settings examples to highlight the impact of TB in settings outside of health facilities
4. Posters to promote the adoption of the Three I’s for HIV/TB to be used both by health facilities and the community at large
5. **Checklists** for patients and communities as well as health workers

6. **Presentation** on HIV/TB and the *Three I's for HIV/TB* to summarize existing scientific research and promote evidence based advocacy

7. **Best practices** which provided a collection of good-practice case studies to support implementation of different elements of the *Three I’s for HIV/TB*
BEST PRACTICE EXAMPLES OF COMBATTING TB IN SOUTHERN AFRICA

Botswana • Lesotho • South Africa • Swaziland • Zambia
The Three I’s Super Heroes

BE A HERO
FIGHT TB!

TB HEROES

2PT (Therapeutic Preventive Therapy): A pill a day keeps TB away
IC (Infection Control): Stop TB from spreading in the air
ICF (Integrated case finding): Find and treat cases of TB
INFECTION CONTROL... in action

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Importance of simplistic, but ‘catchy messaging’
A pill a day stops TB from multiplying…If it gets into your lungs, “get it while it is sleeping”
Intensified Case Finding (ICF)

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Country pilot review outcomes on the draft Toolkit

- Health care workers, government representatives, community stakeholders and civil society undertook in-country workshops to review the draft toolkit.

- Most of the comments were made regarding the FAQ’s, posters, flowcharts, best practices and the Booklet. Some comments were with regards ‘clarity’ – esp. with IPT recommended uptake; *(at least ‘6’ months but for ‘36’ months or lifelong)*

- *Three I’s for HIV/TB* toolkit is underway and the toolkit will be made available to participants during this week, at this meeting.
We would like to thank our partners and the WHO for all their support and technical assistance during this project. We would like to thank our civil society partners;

- Swaziland Positive Living
- BONELA (Botswana),
- ADRA and Partners in Health (Lesotho)
- MATRAM (Mozambique)
- TALC (Zambia)

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Thank you

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