



TUBERCULOSIS PREVENTION IN HIGH RISK GROUPS AND PSYCHOSOCIAL SUPPORT OF PATIENT

Introduction

It is well known that injection drug use is associated with increased risk of HIV and TB. It is estimated that 10% of all new HIV infections are attributable to injecting drug use and about 2.5 million past and current injecting drug users (IDUs) are living with HIV. Among all the estimated 33.2 million people living with HIV, TB is one of the commonest AIDS-defining conditions and the leading cause of death. Both all-cause and TB-associated mortality rates are several-fold higher among drug users living with HIV than among other people living with HIV.

The WHO recommends establishing effective coordination in planning, implementing and monitoring TB/HIV activities through all existing mechanisms at the local levels. The roles and responsibilities of all providers delivering services for drug users should be clearly defined. The education and training should aim to build sustainable effective teams so that all personnel which are in contact with drug users have the appropriate level of skills to encourage them to timely access TB/HIV prevention, counseling, testing and treatment services.(1) TB associated HIV infection in drug users is three challenges in one and affects all dimensions of a person's life: physical, psychological, social and spiritual. Health care together with counseling and social support can help injection drug users cope more effectively with each stage of the TB and HIV infection and enhance quality of life. Identification of needs, making integrated TB and HIV services available to drug users as part of the harm reduction package and the training of adequate personnel, especially social workers and counselors, is an important step taken at the national level to ensure that prevention and psychosocial support becomes a viable part of the care for vulnerable persons, their families and their caregivers.(2)

Considering the importance of TB early detection and treatment compliance among IDUs, USAID Georgia TB Prevention Project intends to support the Georgian Harm Reduction Network (GHRN) and design and implement the training course for social workers and counselors working within the network. Supported by the Global Fund, the GHRN, through 10 harm reduction centers across Georgia, is currently implementing HIV prevention project „Further increase of coverage and quality of preventive interventions targeted at MARPs – IDUs“. Twelve Voluntary Counseling Testing (VCT) consultants, 10 regional coordinators, 38 social workers and 9 laboratory technicians of GHRN have routine and direct contact with

IDUs and serve approximately 3500-4000 beneficiaries per month. GHRN staff is responsible to prevent HIV, hepatitis and sexually transmitted diseases in IDUs. GHRN staff may face TB related problems daily, however they lack knowledge and skills on TB prevention, detection and psycho-social support.(3) In order to fill up this gap and improve counseling skills of GHRN staff on TB related topics, TPP prepared a short-term training program and will ensure integration of TB module into the GHRN's Peer Driven Intervention (PDI) educational program, which is now composed of eight modules and is delivered by GHRN staff to the program beneficiaries.

Goal:

The training program intends to build competencies of social workers, peer educators and community counselors working within the GHRN in TB prevention, early detection, referral and long-term support.

Target Group:

VCT consultants, regional coordinators, social workers and laboratory technicians, who have routine and direct contact with IDUs

Objectives:

By the end of the training program the participant will improve their **knowledge** on the following topics (4;5;6;7):

1. Definition of TB infection-causes and ways of transmission
2. Who is at increased risk of getting TB
3. What are TB symptoms
4. How to protect yourself and others from TB infection
5. What to do if one presents with TB related complaints
6. What are services available in the regions and how to organize referral
7. How people with TB are treated
8. Why is it important to adhere to the treatment regimen
9. How to support people with TB to make sure that they complete treatment
10. Why do people try to hide the diseases and how to reduce TB related stigma

The program participants will improve their counseling skills and will be able to

1. Improve awareness of injecting drug users about importance of TB prevention in vulnerable groups;
2. Inform IDUs about TB symptoms and risk-groups;
3. Encourage timely referral of drug users with TB symptoms to TB facilities;
4. Provide psycho-social support for drug users with active TB diseases;

List of the topics:

1. Get the facts about TB and Its Prevention – Why IDUs are at high risk to be affected by TB;
2. Recognize TB symptoms and detect of TB suspects among IDUs;
3. Benefits of timely referral of drug users with TB symptoms to TB facilities - Why detection of TB at early stages is important for patients and contact persons;
4. TB associated HIV infection in drug users is three challenges in one - Take steps to control TB when you have HIV;
5. Psychosocial support for drug users with active TB at community level – How to avoid treatment default among IDUs;
6. How to protect family members and friends of IDUs with active TB;
7. Identify causes of TB related stigma in your community.

Duration of the trainings:

The training course will last for 8 hours and will be delivered in a small group of 10-12 trainees. The course agenda is outlines in table 1 below.

Table N 1: Tuberculosis Prevention in High Risk-groups and Psycho-social Support of Patients
Agenda

Time	Module	Trainer
10:00 – 10:45	Get the facts about TB and Its Prevention – Why IDUs are at high risk to be affected by TB;	Lali Kupreishvili Tamar Janelidze
10:45 – 11:30	Recognize TB symptoms and detect TB suspects among IDUs;	Lali Kupreishvili Tamar Janelidze
11:30 – 12:15	Benefits of timely referral of drug users with TB symptoms to TB facilities - Why detection of TB at early stages is important for patients and their contacts;	Lali Kupreishvili Tamar Janelidze
12:15 -13:00	Lunch	
13:00 – 14:30	TB associated HIV infection in drug users is three challenges in one - Take steps to control TB when you have HIV;	Lali Kupreishvili Tamar Janelidze
14:30 – 15:15	Psycho-social support for drug users with active TB at community level – How to avoid treatment default among IDUs;	Maia alavidze Zurab Jikia
15:15 – 16:00	Protect family members and friends of IDUs with active TB;	Maia alavidze Zurab Jikia
16:00 – 16:45	Identify causes of TB related stigma in your community.	Maia alavidze Zurab Jikia
16:45 – 17:30	Case discussions	

References:

1. Policy guidelines for collaborative TB and HIV services for injecting and other drug users (http://whqlibdoc.who.int/publications/2008/9789241596947_eng.pdf).
2. <http://www.who.int/hiv/topics/psychosocial/support/en/>
3. Competencies and Job Description of GHRN's VCT consultants;
4. "Get the Facts about TB Disease", Centers for Diseases Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB prevention, CDC, USA,
http://www.cdc.gov/tb/publications/pamphlets/TB_disease_EN_rev.pdf
5. "Protect your family and friends from TB: The TB contact investigation", Centers for Diseases Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB prevention, CDC, USA,
http://www.cdc.gov/tb/publications/pamphlets/TB_contact_investigation.pdf
6. "What you need to know about TB infection", Centers for Diseases Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB prevention, CDC, USA,
http://www.cdc.gov/tb/publications/pamphlets/TB_infection.pdf
7. "Take steps to control TB when you have HIV", Centers for Diseases Control and Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD and TB prevention, CDC, USA,
http://www.cdc.gov/tb/publications/pamphlets/TB&HIV_EN.pdf