PANEL 1: MOBILIZING COMMUNITY IN THE JOINT RESPONSE TO HIV AND TB.

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Well, this is a session on TB in the UNAIDS PCB Meeting! (We are making progress!)

- *Thanks* to all those who have contributed to have this session and starting finally putting TB in the global AIDS agenda!...
1. UNAIDS should strongly encourage national and local programs to transform TB into a strategic issue to work with the communities;

2. UNAIDS should build with its partners the means to support (i) awareness-rising on TB-HIV; (ii) TB-HIV treatment literacy; (iii) and sustainable engagement of NGO and CBO in co-infection related policies;

3. UNAIDS should do that urgently.
Because...

- TB is far the largest killer among people with AIDS;
- Communities are not aware of the problem;
- Tackling TB is the most cost-effective way to reduce morbidity and mortality among PWA;
- The communities are not going to do that by themselves. They ignore the problem!
What AIDS programs have to do with that?

Everything.

• It is on their best interest to reduce morbidity and mortality among PWA;
• It is also on their best interest to spend less to do so.

Therefore:

• Impossible doing that without tackling TB;
• Unrealistic to do so without the communities.
Experience shows

- TB patients’ organizations are not likely to happen in most part of the countries;
- TB *IS* already a major problem for the PWA though is for the AIDS organizations to raise the TB flag;
- Governments which are encouraging *community engagement* in TB-HIV are in fact experimenting visible progress in the control of both diseases: Peru, Brazil, Mexico, El Salvador; Norway and the Netherlands traditionally in TB.
But...

Communities are going to do anything
- If they continue ignoring the problem
  - AS THEY ARE OVERWHELMED AND UNDERFUNDED
- If they are not encouraged to participate in the TB-HIV co-infection related policies.
Existing successful results

- National and local governments supporting community TB and TB-HIV activities: in Peru for a couple of decades; in Brazil since 2002; in Mexico and El Salvador for a couple of years;
- TAG (Treatment Action Group) promoting TB-HIV social mobilization (since 2002) and treatment literacy and advocacy since 2004; TAG’s leadership putting together the Community Task Force, made by empowered AIDS orgs to the Stop-TB Partnership.
- Growing engagement of African AIDS NGO in TB control policies.
- Public Health Watch by Open Society Institute funding (2004 onwards) monitoring of the Interim TB-HIV Collaborative Policy documents and TB policy country reports among the TB high-burden countries;
- PAHO currently mapping and documenting successful experiences in Latin America (2008).
If Governments realize communities can help them achieving their goals in reducing TB incidence, morbidity and mortality and reduce the burden of TB amongst AIDS patients

then

They will naturally support community engagement in TB on a consistent way

But they have to realize that first!
Finally what can AIDS NGO do?

- Raise awareness of the TB-HIV problem in the greater population;
- Identify possible TB cases among AIDS patients with increased diagnostics difficulties;
- Bring these patients to the health system;
- Help complying/adhering to the TB treatment;
- Help completing TB treatment and curing AIDS patients from TB;
- Reduce the burden and the rise of M-XDR TB;
And more!

- Participate and conduct operational and clinical research which ultimately will
  - Help reviewing and renovating TB and HIV related services, with the focus in the patient;
  - Demand and stimulate the development of new treatments and diagnostics for TB and help developing new and more efficient TB drugs, compatible with AIDS treatment;
  - Improving and strengthening the public health systems!
So, why just not let start

Just doing it ?!

Thank you! Obrigado!