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Community-led TB Interventions: Improving Tuberculosis Services in Rural South Africa

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ABSTRACT

South Africa faces high TB incidence, with 304,000 cases at a rate of 513/100,000 population and 56,000 TB deaths in 2021. Tuberculosis (TB) continues to pose a public health challenge in South Africa, prompting the need for innovative solutions to navigate deeply rooted obstacles. Despite commendable efforts, ongoing issues, particularly treatment adherence and a lack of community engagement, emphasise the necessity for refined interventions. Focusing on improved TB awareness and outcomes resulting from a community-led TB intervention in rural KwaZulu Natal, South Africa. Implemented under the USAID (United States Agency for International Development) Tuberculosis Local Organization Network (TBLON) project, the exercise provides insights into potential breakthroughs in TB management using community-driven initiatives.

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Introduction

This article explores the challenges and responses to TB in South Africa, a country facing high prevalence and mortality rates from this disease. It emphasises the critical need for innovative and transformative methods in addressing TB, mainly through community-led interventions. These interventions are presented as transformative strategies tailored to meet the unique challenges posed by TB in South Africa. Our response involved collaboration with community-based organisations (CBOs) in the rural parts of the province of KwaZulu Natal. By forging partnerships with local CBOs, we harnessed the inherent strength of local communities, tapping into their unique insights, cultural understanding, and community networks through a four-month pilot. This model was pivotal in connecting healthcare facilities with communities, a vital link, mainly when resources were limited due to COVID-19 challenges.

Community Empowerment: A Strategic Approach

THINK engaged four CBOs to address TB challenges within selected communities in Rural KwaZulu Natal. This selection process was underpinned by a rigorous due diligence approach, ensuring that the identified CBOs were well-equipped to contribute meaningfully to the project. This approach aimed to bolster local capacity by strategically targeting and addressing crucial gaps in community TB services.

54 Community Caregivers (CCGs) were empowered through specialised training and became instrumental in bridging the existing TB service gaps in communities. Their roles extended beyond conventional boundaries and encompassed a diverse range of strategies to integrate TB services into the fabric of daily life seamlessly. These dedicated caregivers engaged in proactive door-to-door services, ensuring crucial information reached every household. Moreover, they orchestrated community events that raised awareness and fostered a sense of collective responsibility in the fight against tuberculosis.

Recognising the significance of cultural context, our intervention included workshops involving traditional practitioners. By engaging with these community influencers, we sought to forge connections between modern TB services and traditional practices, fostering a more inclusive and comprehensive healthcare ecosystem. This comprehensive approach was designed to transcend the conventional boundaries of healthcare delivery, embedding TB services within the community's daily experiences and establishing a sustainable framework for long-term impact. Through these innovative strategies, our pilot initiative aimed to address the immediate challenges and cultivate lasting change in how tuberculosis is perceived and managed within the community.

Tracking Progress and Impact

We developed and deployed comprehensive tracking tools for weekly initiative monitoring, ensuring robust oversight. These tools were crucial in monitoring the initiative's effectiveness across various aspects, such as prevention, diagnosis, and linkage to TB treatment. Our methodology was methodical and data-driven, enabling us to assess the scope and influence of our community activities quantitatively.

The tracking tools, incorporating an electronic system set up using REDCap, were meticulously designed to gather critical data points,

offering a detailed view of the intervention's performance. A central aspect of this was the weekly monitoring of community engagement levels, including the number of households visited and individuals actively involved in TB services. This detailed data collection, verified weekly by a coordinator, was instrumental in assessing both the reach and the impact at individual and household levels.

Through these systematic tracking methods, we could observe trends, recognise successes, and identify challenges within the intervention. This informed approach, backed by data, allowed us to adapt and refine our strategies, ensuring the intervention's flexibility and responsiveness to the changing needs of the targeted community. The valuable insights from this process validated our intervention's effectiveness and laid the groundwork for evidence-based decisions. Consequently, this contributed to the sustainable enhancement of TB services and Community-Led Monitoring in the community.

Results and Impact Assessment

Expanded Screening and Community Engagement

The intervention achieved exceptional results, significantly surpassing initial targets by reaching 11,306 households, accounting for a 113% increase over the project's goal. A total of 54,991 individuals underwent TB screening, with 7,494 (14%) showing TB symptoms and promptly referred for further testing. This extensive screening also incorporated COVID-19 assessments, exemplifying a dual-focused approach to address concurrent public health challenges.

Community Care Groups and TB Case Management

Forming 54 Community Care Groups (CCGs) equipped with in-depth knowledge of TB marked a pivotal development in our community engagement strategy. These groups became instrumental in the screening process and in raising TB awareness.

Adherence to Counselling and Linkage to Care

The intervention prioritised treatment adherence, resulting in 2,700 individuals receiving crucial counselling sessions. This emphasis on care and support was further exemplified by successfully tracing and re-engaging 93% (709 out of 765) of previously lost TB patients back into care, with 97% (685 patients) of these successfully linked back to essential health services.

Contact Tracing and Impact on Transmission

A significant accomplishment of the intervention was successfully tracing 2,976 (95%) of the 3,139 identified TB index patients. Furthermore, each of these patients' contacts was provided with essential TB services, ensuring comprehensive care and support within the community [1].

Conclusion

The intervention in KwaZulu-Natal has highlighted the critical importance and effectiveness of community-driven initiatives in public health, particularly in the battle against TB. This journey has demonstrated that when communities lead, they bring unique insights and strategies for addressing complex health challenges like TB.

The successes achieved in KwaZulu-Natal stand as a testament to the potential of community-led interventions. These initiatives have raised TB awareness within the community and played a crucial role in supporting patients throughout their treatment journey. The engagement and mobilisation of the community have led to a more informed public better equipped to address the nuances and challenges of TB.

A critical factor in this success has been the strengthening of CBOs. By focusing on these grassroots entities, the intervention has shown how vital local organisations are in the fight against TB. Their intimate understanding of the community and its needs has enabled them to tailor their approaches effectively, contributing significantly to the overall TB program.

Moreover, the intervention has highlighted that enhancing the capacity of these CBOs is not merely a short-term solution but a critical step toward long-term sustainability. Strengthened CBOs mean a more resilient and enduring response to TB, capable of adapting to future challenges and maintaining achieved gains.

In conclusion, the experiences and outcomes from KwaZulu-Natal offer valuable insights for future public health interventions. They emphasise that empowering and equipping community-led initiatives, mainly through the fortification of CBOs, is beneficial and essential for sustainable health programs. This approach fosters a sense of ownership and responsibility within the community, driving long-lasting change and setting a precedent for similar interventions globally.

Reference

1. WHO Global Tuberculosis Report (2022) https://www.who.int/teams/global-tuberculosis-programme/tb-reports/global-tuberculosis-report-2022.