«Trust» advice bureau

Target group:
- PLHIV
- PLHIV/TB
- Former prisoners
- IDUs
Statistical overview

- Year end 2009: 1262 PLHIV on D register at AIDS Centre;
- Includes 266 HIV/TB cases;
- 17 new HIV/TB cases detected in Q1 2010;
- 68 PLHIV deaths at year end 2009 including 22 HIV/TB cases;
- 230 patients on TB chemotherapy (isoniazid) in 2009;
- 71 patients on TB chemotherapy during Q1 2010;
- 15 HIV/TB deaths in Q1.
Multidisciplinary team

- Social worker
- Psychologist
- Lawyer

Patient
Role of team members

- **Psychologist**
  - Psychosocial counselling of PLHIV and their close contacts.
- **Social worker:**
  - motivational counselling for TB prevention
  - assessing patient's lifestyle and requirements for adherence to treatment regimen
  - offering support to the patient's family
  - advice and support in diagnostic phase (fluorography, overall radiogram of the lungs, AFB examination of sputum smear).
  - provision of welfare assistance in the form of food packs and health packs for 50 HIV/TB clients during supportive treatment.
- **Lawyer:**
  - client advocacy
  - legal advice and support
Expected outcome

- Establishment of an effective model for delivering medical, social, psychological and legal assistance to TB/HIV patients
- More information for PLHIV and vulnerable populations about the warning signs of TB and the impact of the disease among PLHIV, IDUs, former prisoners and sex workers
- Access by PLHIV to HIV/TB prevention and treatment services
- Advocacy and human rights in an HIV/AIDS context
- One-stop medical facility for PLHIV/TB providing full range of services
- Motivating physicians to provide high-quality medical services to PLHIV/TB
- Ensuring project buy-in from physicians and nurses
- Ensuring programme buy-in from PLHIV
Constraints

- No TB specialist at AIDS Centre
- Recipient population is socially marginalized
- Clients are drug- and alcohol-dependent
- No residence permit or fixed address
- No work, financial precarity
- Geographical remoteness and dispersion of medical facilities providing services
- Stigmatized by employers
- Stigmatized by health workforce, refusal to admit inpatients
- Passive attitude of PLHIV towards their problems
- No advocates for PLHIV
Achievements

- Client trust nurtured
- Clients motivated for HIV/TB prevention and treatment
- Partnership with physicians at AIDS Centres, medical institutions, neuropsychiatric clinics and user-friendly surgeries
- Successful treatment of TB patients forms a bridge to supportive treatment
### Better access to HIV/TB prevention and treatment

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<th>Social support</th>
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<tr>
<td>Intensive early detection of TB (access)</td>
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<td>Harm reduction</td>
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Thank you for your attention