Burden of tuberculosis in people who use drugs

- Drug users are at increased risk of TB compared to general population (risk 10-30 x higher)
  - Risk increased if
    - also living with HIV (5-10% per year cf 5-10% lifetime for HIV-)
    - history of imprisonment (TB rates 10-50x general population)
    - shooting gallery manager

- HIV is the single greatest risk factor for developing TB disease
- TB commonest cause of death in people living with HIV in many parts of the world
WHO/UNAIDS/UNODC Joint Policy
Policy recommendations

• Joint planning
  - Multisectoral planning
  - Human resource development
  - Operational research

• Package of care
  - Combination HIV prevention
  - Prevention of TB through IPT and infection control
  - Harm reduction services
  - Intensified case finding for TB and HIV (PICT)
  - Optimal treatment of TB and HIV
  - Managing co-morbidity

• Overcoming barriers
  • Integrated models of care
  • Adherence support
  • Co-morbidity
  • Provide & link with prison services
Integrated TB/HIV services from policy to action – The need for activism
Advocacy/Activism

• A set of targeted actions in support of a specific cause

• A strategic process to influence positive political, social, economic and cultural change – UNAIDS

• Directed at influencing policy, laws, regulations, programmes, or funding allocations

• Essentially, getting someone influential to do what you want them to do…preferably for positive public good
The power of advocacy

HIV

• First HIV isolated from human sample from Kinshasa 1959
• History of strong political advocacy/activism
• Strong global awareness
• Rapid test on finger prick or saliva in minutes, simple and accurate
• Dozens of new drugs to treat HIV
• US research budget for HIV $3000 million (global at least $8bn)

TB

• TB thousands of years old
• Recent adoption of advocacy/activism
• TB a forgotten disease
• Diagnostic test more than 120 years old, tedious & inaccurate
• No new TB drugs for >40 years
• Global research budget for TB $455 million

HIV and TB: Activism in 2 Pandemics. Harrington CID 2010:50 (S3) S260-266
TB and drug use
The perfect storm

Increased vulnerability

- HIV
- Malnutrition
- MDR/XDR
- Chronic lung disease

Drug user

- Detention
- Social mixing
- Poor housing
- Stigma/inequity
- Lack of awareness
- Hepatitis
- Lack of outreach

Increased exposure

Reduced access to treatment
Ukraine case study

- Former injecting drug user on opiate substitution therapy (OST)
- Diagnosed with TB
- Cannot get OST in TB hospital
- Cannot get TB treatment as outpatient or outside of the TB hospital
- Has to choose between OST and TB treatment
- TB doctor said he would rather discharge a drug user on no treatment, knowing that the risk of death is high, than risk the development of drug resistant TB through poor compliance.
Advocacy strategy

- Know the issues – science and policy literacy
- Set goals, objectives, targets
- Identify key stakeholders/target audience
- Develop networks of support
- Consider how best to communicate issues to stakeholders

Networking for policy change – a TB/HIV advocacy training manual
Know the issues

• Magnitude of the problem
  - Better data
  - Ongoing M&E

• Contributing factors
  - drug use, poverty, overcrowding

• Know your epidemic and response

• Funding needs

• Research needs
Know the issues
Civil society science & policy literacy

- TB health literacy/activism among people living with HIV
  - Treatment Action Group
  - TAC, ICW

- OSI Public Health Watch projects
  - Supported 53 individuals and organizations in 38 countries to conduct monitoring and advocacy of policies on TB and HIV
  - Holding implementers accountable

- Stop TB Partnership Challenge Facility
  - Civil society engagement in advocacy and social mobilization to raise awareness and shape TB policy at local and national levels
  - Third round
Joint Action for Results
Outcome Framework  UNAIDS 2009 -2011

4. Prevent people living with HIV from dying of TB
5. Protect drug users from becoming infected with HIV
TARGETS

• 50% reduction in TB deaths among PLHIV by 2015 compared to 2004 baseline

• Protect all drug users from getting infected with HIV and ensure that all HIV infected drug users have access to HIV treatment and care by 2015
First TB/HIV advocacy capacity building workshop for people who use drugs - Bangkok  WHO, UNAIDS, ANPUD
Challenges and next steps

Challenges
• Funding
• Technical support
• Legitimacy at national level

Next steps
• Second capacity building workshop
  - Liverpudlian declaration
• Developing a network
• Develop a sense of outrage
  - No more drug users dying from TB
• Vienna
• Resource mobilization
• “Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever does”

Margaret Meade