

# Counseling Tools for initiation of DR-TB Treatment

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# Acknowledgements

- ▶ Training Program from MSF

## Counseling for DR TB Patients



# Objectives

- To list the potential challenges faced by patients on DR TB treatment
  - To describe the different counseling sessions included in the DR TB Patient Support Model
  - To devise a plan for the implementation of DR TB patient counseling in your clinic
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# Looking at the person or the disease?





# We need a shift away from managing the disease only and listen to the person


Counseling focus  
on treatment  
literacy

The patient's  
activity  
revolves  
around  
treatment and  
IC



We often box up every other aspect of the patient's life in order to prioritize the disease

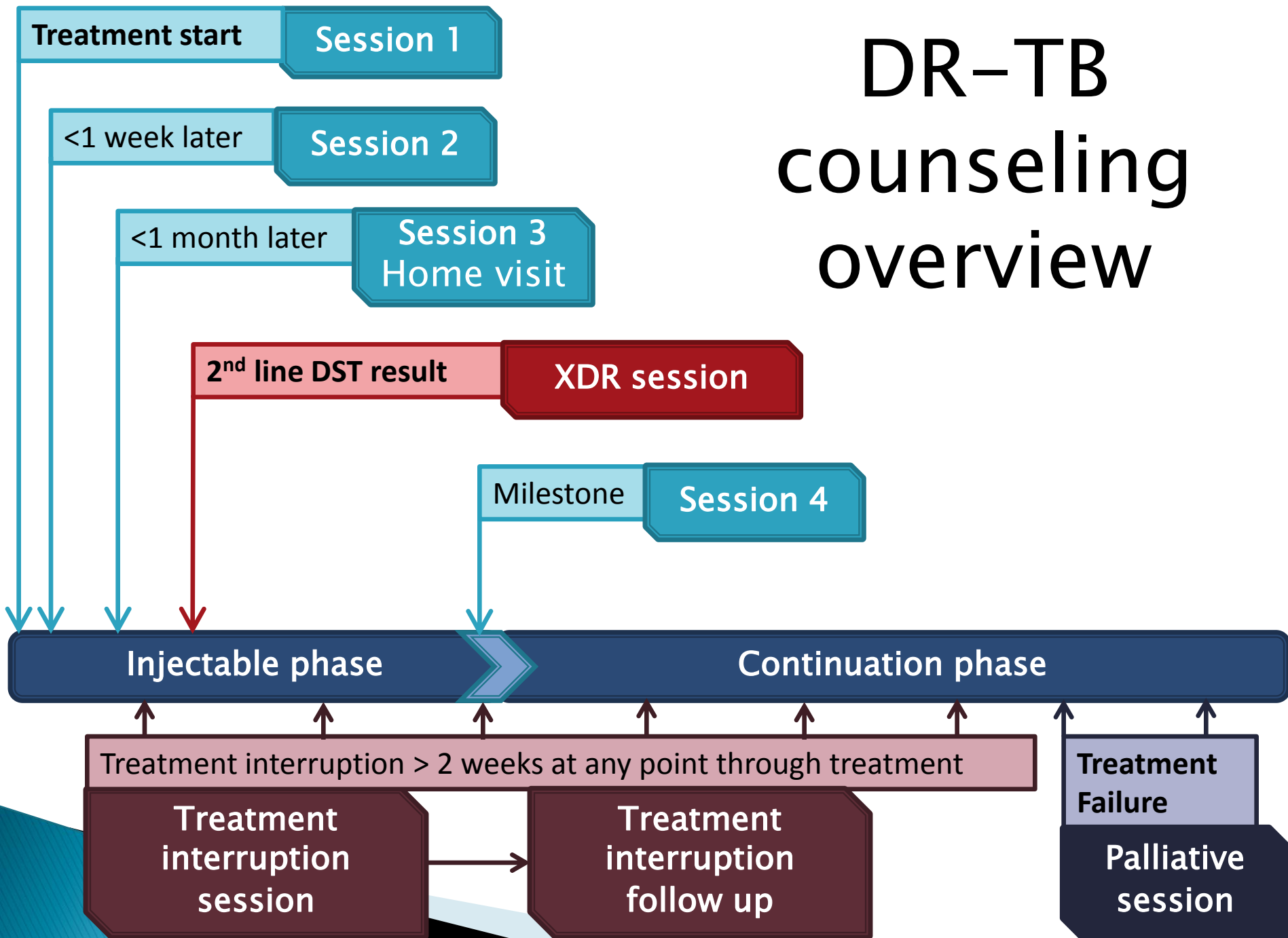
# What approach is adopted in this counseling model

- Patient centred
    - Encourage internal motivation for adherence
    - Focus on both treatment literacy and empowering the patient
  - An assessment tool to assess whether counsellors conducted sessions competently was developed and implemented
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# Why should we listen to patients?



# DR-TB counseling overview





# Counseling session plan

## Section A: Overview

**Grey text:** reflects what the counsellor needs to say

**Black text:** reflects prompts, instructions or any information that is helpful for the counsellor

### **A: Overview of Session**

#### **Introduction of facilitator and objective of session**

Introduction of yourself, acknowledge that right now the patient is probably finding it difficult to accept diagnosis.

“It must be difficult for you to accept your diagnosis , but acceptance will help you to get through the rest of your treatment journey.

You will receive 3 counselling sessions and one of them will be a home visit with the family) to cover everything you need to know about DR-TB and also to help you figure out how to keep taking treatment every day.”

#### **[Session Objective] Daily adherence**

#### **Give patient an outline of session:**

During this session we will cover:

- What you need to know about DR-TB
- Planning your DR-TB Treatment Adherence together
- The way forward – what happens from here”

( Counsellors have the option of completing adherence plan at appropriate point [see prompts] during treatment literacy section or completing adherence step after treatment literacy section. )

# Section C: Adherence Tools

- ▶ Identifying 3 reasons to stay healthy and alive:

- Tools–

- adherence plan

Adherence plan (*for patient and carbon copy for patient's file*)

Patient name:

Folder Number:

My 3 reasons to stay healthy and alive:

1. ....
2. ....
3. ....

- A5 size card to write reasons on and add a sticker (the card can be put in a place that the patient looks at frequently so the patient can repeat reasons to themselves each time they see it.)

# Section C: Adherence Steps

## Adherence Step 1 – Getting to the clinic

Review  
adherence  
goal

**“To treat DR-TB you need to take your treatment every day. It is important that you come to the clinic daily to get your medication (injection and pills)”**  
**Once a month you will also have a check up with the doctor in the clinic when you come to take your medication.**

Identify  
barriers

**“What would stop you from coming to the clinic every day?”**  
*( no money for taxi, train not working, its raining when you usually walk, sick child, you feel quite sick yourself.*

Make  
a concrete  
plan

Identify a way the patient will get to the clinic daily  
**“How will you get to the clinic every day?”**  
**Identify a back up method of reaching the clinic daily if the patient experiences a problem** ( These questions are part of the adherence plan. The idea was that as you ask the question here, you can complete the answer on the adherence form.)  
**What solutions can you think of that would work best if one of these things happen?** ( some can help with money, transport, umbrella/ raincoat can be used, a neighbour watch child, inform doctor you too sick to come to clinic-)

# Adherence Steps

3 Components of an adherence step:

**1. Tell the patient the adherence goal**

e.g. To take treatment daily at the clinic

**2. Identify possible barriers to achieving this goal**

e.g. What would make it difficult for you to come to the clinic?

( Help the patient consider thing like rain, weakness, sick children...)

**3. Make a concrete plan**

The patient tells you what it is that they are going to do

e.g. "will walk to clinic daily" or "If it rains my cousin has a car"

**The next step is to write down the plan made by the patient**

- The plan can be written on the document called adherence plan

# Adherence Plan

**Adherence plan (for patient and carbon copy for patient's file)**

Patient name:

Folder Number:

**My 3 reasons to stay healthy and alive:**

1. ....
2. ....
3. ....

**Session 1 after DR TB education session (date)**

Adherence Step 1 A– DR TB Education done ☐

Adherence Step 1 – Getting to appointments

How are you going to get to clinic every day.....

Back up plan to get to appointments daily.....

Adherence Step 2 – Dealing with side-effects:

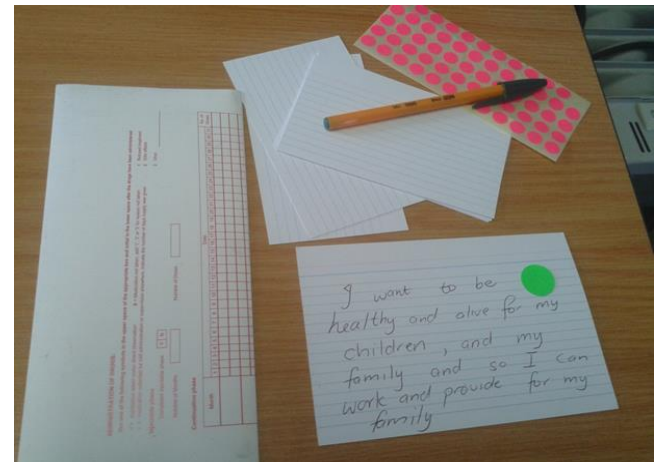
My plan for minor side effects is:.....

My plan for side effects that worry me is:.....



# Summary of the Counseling model

- Standardized structured sessions to ensure all patients receive the same messages
- Patient centred approach
- Information provided is simplified and limited to the essential key points
- Simple strategies are used to engage patients



# Conclusions

- The creation of an individual adherence plan allows patient ownership of their treatment journey
- The counseling guide provides counselors with a structured script of essential messages
- The competency assessment allows for ongoing monitoring of counseling sessions for quality assurance purposes



# Questions?



Thank you.

