



## EMPOWERING COMMUNITIES TO END TB

OneImpact Ukraine

Country Case Study

OneImpact community-led monitoring (CLM) empowers people affected by TB to access health and support services, claim their human rights, and identify and reduce stigma. Through an innovative mobile application, OneImpact CLM encourages and facilitates the participation of people affected by TB in all aspects of TB programming in Ukraine to activate a human rights-based, people-centered response. In doing so, OneImpact CLM supports people affected by TB to successfully complete their TB journey, while strengthening accountability and responsiveness in TB programs, with special attention to gender-related barriers to services and the experiences of key and vulnerable populations.



<p><i>Project Period:</i></p> <p>December 2018 to March 2020</p>	<p><i>Implementers &amp; Key Stakeholders:</i></p> <ul style="list-style-type: none"> <li>√ TBpeople Ukraine</li> <li>√ National TB Program (NTP)</li> <li>√ People w/ TB</li> </ul>
<p><i>Scope &amp; Scale:</i></p> <p>OneImpact Ukraine was implemented in Cherkasy Oblast. The project involved:</p> <ul style="list-style-type: none"> <li>√ 175 people w/ TB</li> <li>√ 33 TBpeople staff</li> <li>√ 49 health facilities</li> <li>√ 20 health workers</li> <li>√ 31 social workers</li> </ul>	<p><i>Activities:</i></p> <p>Activities implemented included:</p> <ul style="list-style-type: none"> <li>√ Needs and feasibility assessment</li> <li>√ Multi-sectoral inception meeting</li> <li>√ CLM framework and OneImpact platform adapted</li> <li>√ Training and launch of OneImpact</li> <li>√ Implementation and data collection</li> <li>√ Monitoring and evaluation</li> </ul>
<p style="text-align: center;"><i>Key Results:</i></p> <p>OneImpact CLM results:</p> <ul style="list-style-type: none"> <li>√ 714 people downloaded OneImpact</li> <li>√ 175 people w/TB downloaded OneImpact</li> <li>√ 44 people w/ TB (25% of all people w/ TB) actively monitored the TB response—i.e., reported a challenge at least once</li> <li>√ 78 challenges were reported by people w/ TB</li> <li>√ 15 people w/ TB informed the content of the OneImpact Ukraine app</li> </ul> <p>AAAQ challenges results:<sup>1</sup></p> <ul style="list-style-type: none"> <li>√ 55% of people w/ TB who reported AAAQ challenges reported <i>quality</i> challenges for TB care and support services at least once</li> <li>√ 39% of people w/ TB who reported AAAQ challenges reported <i>acceptability</i> challenges for TB care and support services at least once</li> <li>√ 32% of people w/ TB who reported AAAQ challenges reported <i>accessibility</i> challenges for TB care and support services at least once</li> <li>√ 7% of people w/ TB who reported AAAQ challenges reported <i>availability</i> challenges for TB care and support services at least once</li> <li>√ 41% of the challenges reported were on <i>quality</i> of TB care and support services</li> </ul>	

<sup>1</sup> The AAAQ framework derives from the international human right to health in article 12 of the *International Covenant on Economic, Social and Cultural Rights*. It requires that health facilities, goods and services are available, accessible, acceptable and of good quality for all.

- ✓ 32% of the challenges reported were on *acceptability* of TB care and support services
- ✓ 23% of the challenges reported were on *accessibility* TB care and support services
- ✓ 4% of the challenges reported were on *availability* of TB care and support services

#### Spotlight on AAAQ challenges results breakdowns:

- ✓ 25% of the *acceptability* challenges reported ( $\approx$  6 challenges) indicated that *people w/ TB experienced stigma from a family member*
- ✓ 25% of the *acceptability* challenges reported ( $\approx$  6 challenges) indicated that *people w/ TB experienced stigma at work*
- ✓ 24% of the *accessibility* challenges reported ( $\approx$  4 challenges) indicated that *people w/ TB did not have enough money for TB care and support services*
- ✓ 24% of the *accessibility* challenges reported ( $\approx$  4 challenges) indicated that *people w/ TB did not want to be seen by other people at the health facility*
- ✓ 59% of the *quality* challenges reported ( $\approx$  19 challenges) were about *drug side effects*

#### Programmatic level results:

- ✓ Availability of innovative adapted digital accountability platform for Ukraine that collects real time data on TB challenges for the first time
- ✓ Availability of data on TB challenges in real time for a more efficient responses at a local level
- ✓ Availability of data on TB challenges for a more informed and people centered approach to TB.
- ✓ Further integration of CRG into the TB response in Ukraine
- ✓ Creation of an evidence base for AAAQ challenges for the first time for advocacy and programmatic decision making.
- ✓ People affected by TB monitoring the TB response and therefore at the heart of the TB response.

#### *Key Outcomes:*

- ✓ TBpeople Ukraine and partners successfully adapted, developed, and implemented OneImpact CLM in the pilot area
- ✓ TBpeople Ukraine effectively used OneImpact CLM data at the individual level to respond to challenges reported by people w/ TB
- ✓ On average, 121 people w/ TB involved in the baseline and end-of-project study reported improvements in their ability to report and obtain responses to their challenges, in their ability to connect with their peers w/ TB, and in the availability, quality and relevance of the information they receive about TB and TB services
- ✓ After the OneImpact CLM intervention, people w/ TB involved in the baseline and end-of-project study reported that OneImpact was their primary source of information about TB and TB services, followed by the Internet and health facilities

- ✓ TBpeople Ukraine and partners have created multi-sectoral teams to address challenges faced by people w/ TB and to strengthen linkages between community and health system

*Lessons Learned:*

- ✓ As a result of OneImpact CLM there is a greater understanding of CRG and the role of CLM in advancing a CRG approach to TB in Ukraine
- ✓ Promoting and protecting human rights must be a specific objective of the intervention
- ✓ Greater understanding of OneImpact CLM and its value among the community and health workers will improve the intervention
- ✓ Country ownership of the OneImpact platform should be augmented to promote greater autonomy for implementers and to reduce the need for technical assistance
- ✓ TBPeopleUkraine must be trained on the SMART set up to fully autonomous
- ✓ Need to consider alternative models (e.g. assisted model) for sustainability purposes
- ✓ Need to link with other CRG interventions in the country to ensure that each is talking and informing the other
- ✓ Need for data quality checks at the intervention and systems level
- ✓ Activating OneImpact CLM data for advocacy and action at the programmatic level was more challenging than responding at the individual level to reported challenges

*Recommendations & Next Steps:*

- ✓ Dure Technology will configure and train TBpeople Ukraine and partners on OneImpact SMART set-up to enhance country ownership
- ✓ TBpeopleUkraine will work with Dure Technology to refine OneImpact platform content, including the first responder inbox and accountability dashboard, in collaboration with people affected by TB, health workers and the NTP
- ✓ TBpeopleUkraine will work with Dure Technologies at Stop TB Partnership to develop alternative models to support scale up plans
- ✓ TBpeople Ukraine will determine with whom to share OneImpact data and for what purpose
- ✓ Dure Technology will develop AI-based chat bot solutions to facilitate continuous community engagement through the platform
- ✓ OneImpact Ukraine will be scaled-up to operate in the entire country, in partnership with the Ministry of Health Public Health Center, the National Health Service of Ukraine, PATH, 100% LIFE, the Alliance for Public Health and National Hotline on HIV/TB