



PHOENIX Study

Talking Points and Considerations for PHOENIX Study Staff

- **TB is *curable*, and *preventable*.**

For example: One of the best ways to prevent TB is to provide preventative therapy to people who are not yet symptomatic but have been exposed to TB.

- **TB treatment is safe and has many benefits.**

For example: Treatment is safe, simpler, and shorter than ever before. Treatment can stop the spread of TB, and protect household contacts from transmission.

- **Quick diagnosis and initiation of treatment is important.**

For example: People with active TB who are on effective therapy and maintain good drug adherence quickly feel better and are less likely to transmit TB to others.

- **Families can take actions and proactive measures to support treatment efforts & lower the risk of TB spreading in their household.**

For example:

- Actions and proactive measures taken by family members can lower the risk of TB spreading within the home (e.g., ensuring good ventilation by opening windows, wearing a surgical mask).
 - Families can help family members with TB to complete treatment, get cured, and return to a healthy life by providing social and psychological support.
 - Consider avoiding the term “infection control” which sounds both overly technical and kind of scary.
- **Avoid describing MDR-TB as “fatal” & MDR-TB treatment as “difficult” or “dangerous.” Instead, emphasize new advancements in MDR-TB treatment.**

For example:

- There are new treatments for MDR-TB that are less toxic and easier to tolerate. Moreover, within the next few years, the duration of MDR-TB treatment is expected to be greatly reduced—maybe to as little as 6-9 months.
- MDR-TB is not a death sentence, and with proper counseling, support, and on-treatment monitoring, most people can finish treatment for MDR-TB with a successful outcome.



PHOENIX Study

Talking Points and Considerations (continued)

- **Frame participation in the PHOENIX study as a way for participants to:**
 - Receive support during MDR-TB treatment
 - Protect their family members through preventive therapy
 - Help to beat MDR-TB in their neighborhood and community
 - Highlight what the study offers to different types of family members
 - Do something courageous and positive for their family and community
 - TB preventive therapy is a way to “TB proof” your family and protect them from TB, just like fireproofing can protect your home from fires, or childproofing a room makes a home a safe place for an infant or young child
 - TB preventive therapy is a way to “shield” healthy family members from TB. Just as an umbrella shields you from the rain or the ozone layer shields the earth from the sun’s harmful rays, taking TB preventive therapy can put a shield around the household and protect its members from TB. (Make sure the message doesn’t imply family members need to be shielded from people with MDR-TB, which could be stigmatizing.)
- **Provide participants with clear information on TB patient support services.**

For example:

 - Provide support services that are available as part of this trial or through referral to other local services or organizations
 - Emphasize the importance of good counseling and mental healthcare and emotional support
- **Provide informational materials that focus on health and wellbeing.**
 - Remind participants that the study isn’t just about healthy members of the household taking TB preventive therapy, but also about ensuring that the family member with MDR-TB is cured and gets back to good health-while protecting other family members from getting sick.



- Include information on when the family member with MDR-TB might feel strong enough to pick up domestic responsibilities again.
- Share information regarding potential side effects and what those side effects might mean for household roles and responsibilities (e.g. early in treatment someone might be too tired to perform their normal tasks within the household but may regain their strength after just a few weeks on effective treatment.)
- **The household is not the only place where TB can be spread.**
 - Emphasize that TB can be transmitted in any close quarters where people spend a lot of time together, from offices to schools to boarding houses to public transportation. This can help shift the blame and guard against people thinking that their family member with MDR-TB has endangered them or put other members of the family at risk by spreading infection.
- **Be prepared to discuss the gender dynamics related to TB and TB treatment.**
 - Emphasize that due to gender dynamics, women with MDR-TB may be more at risk of being cast out of their household if their status is disclosed.
<https://qz.com/africa/1590320/the-gendered-realities-of-the-tuberculosis-epidemic/>
 - Staff should be aware of the local systems around culture, gender, and patriarchy, and how those systems impact women in the context of TB and TB treatment.
 - Staff should consult with their CABs around the best way to address gender and patriarchy in their study materials.