



# Umoya omuhle

*A whole systems approach to infection prevention and control for drug-resistant tuberculosis in South Africa*

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TB is one of the leading causes of death in South Africa.

According to the WHO, **19,000 people** were diagnosed in 2016 with **drug-resistant tuberculosis (DR-TB)**, making South Africa one of the highest burden DR-TB countries in the world.



## AIM

This project aims to inform, develop and project the potential impact of a health systems intervention to improve IPC for DR-TB taking into account infection risk, clinic infrastructure, work practices, and facility stewardship in Western Cape and KwaZulu-Natal provinces.

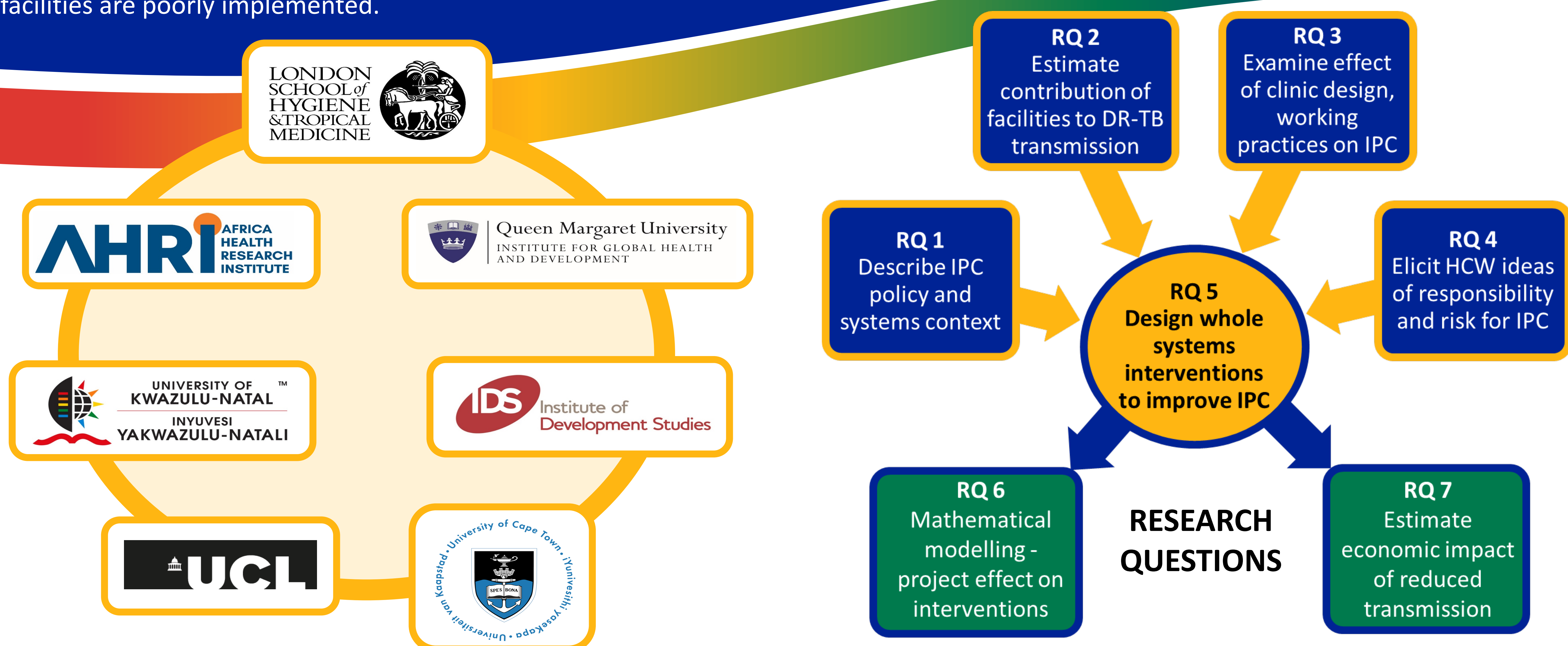
Using an interdisciplinary approach, it will examine the social, biological and infrastructural dynamics of transmission.

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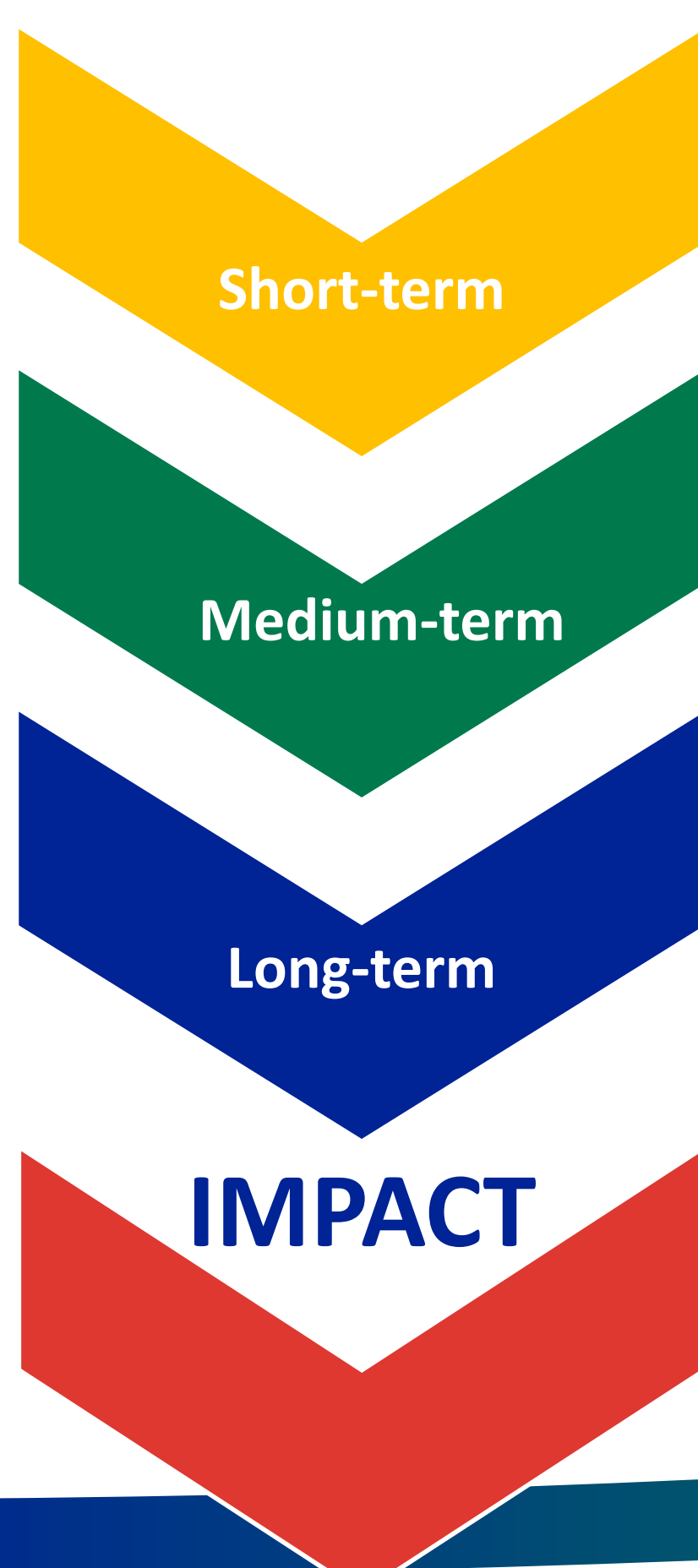
means 'good air' in Zulu, and embodies the project vision of bringing a 'breath of fresh air' to current thinking on infection prevention and control

## BACKGROUND

DR-TB transmission happens in hospitals and clinics, but it is not known how much this exposure contributes to transmission overall. Existing guidelines for airborne infection prevention and control (IPC) in health facilities are poorly implemented.



## PATHWAYS TO IMPACT



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POLICY (policy and decision makers)	PRACTICE (programme managers)	ADVOCACY (healthcare workers, people with DR-TB)
Research findings related to potential policy changes	Discussion of infection risk and mitigating strategies	Discussion of enablers and barriers to IPC for DR-TB
Proposals for changes to national or provincial policy	Proposals for changes to national or provincial practice guidelines	Proposals for positive shift to promote IPC for DR-TB as an occupational health issue
Policy changes informed by research findings	Practice changes informed by research findings	Change of risk perceptions and behaviours related to IPC for DR-TB
Strengthen the evidence base around IPC interventions; trace policy-to-practice process; prioritise investments	Inform the development of IPC intervention design and elements	Foster a paradigm shift towards local stewardship and effective use of information to prevent nosocomial transmission of DR-TB

This project contributes to the GCRF challenge areas of 'Equitable Access to Sustainable Development' and 'Good Governance and Social Justice' by promoting locally appropriate, systems-based approaches to sustainable health and wellbeing for both patients and health workers in South African health facilities.

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