Facilitator Notes for Module 6 Plenary Discussion: Supporting Adherence to TB Treatment

Setting the scene
Simply offering a Directly Observed Therapy (DOT) programme is not enough. Patients must agree to participate in taking their medicine and continue to adhere to the treatment regimen through the full course of treatment. Incentives and enablers may help them do this. **Incentives** are small rewards given to patients to encourage them to either take their own medicines or keep their clinic or field DOT appointments. **Enablers** are those things that make it possible or easier for the patients to receive treatment by overcoming barriers such as transportation difficulties. Incentives and enablers may help patients adhere to and complete treatment.

Incentives and enablers should be chosen according to the patients’ special needs and interests, or the patients may not care if they receive them. For example, if the health care worker knows that transportation is a problem, he or she could offer bus or taxi fare as an enabler. If transportation is not a problem, then he or she should offer something that is needed. Learning as much as possible about patients will help to identify their needs and interests and better motivate them to complete treatment. The best time to begin using incentives is after a good relationship has been established with a patient. Enablers, however, may be vital to the initiation of treatment and should be provided when treatment begins. Always start by talking with patients to learn about their needs.

Though many programmes have shown success using incentives and enablers, some health care workers disagree about whether or not incentives should be used. The attitude one has about incentives is important. Some health care workers do not like using incentives because they think patients should want to get well and should consider it their duty to take their medicine. They believe that incentives are bribes. The use of enablers or incentives may draw into the question the patient’s motivation for seeking and agreeing to treatment.

At times, patients may also feel that the health care worker is trying to bribe them into accepting treatment. When incentives are used with an attitude of caring and concern for the patient, the patient will be less inclined to question the health care worker’s motives. The reason for using incentives is to motivate the patient to complete treatment. Above all, incentives and enablers are not a substitute for a high-quality relationship with patients based on trust, effective communication, and mutual respect.

Facilitator summary
Incentives may work, but one has to account for several factors before using them. There should be a supportive environment for the use of incentives and enablers to be seen in context. Part of this context is an understanding of and sensitivity to local norms and customs and how one should observe these if incentives and enablers are to be used. Ethical considerations should also be taken into account.

Tip
Remind delegates that there are no right or wrong answers. In addition, delegates should consider what is in their span of control as they participate in the discussion. After the plenary discussion, distribute the Supporting Adherence to TB Treatment Delegate Handout.