VIRTUAL INNOVATION SPOTLIGHT

COMMUNITY-LED MONITORING & ACCOUNTABILITY IN THE TB & COVID-19 RESPONSE
ONEIMPACT
JUNE 3, 2020
5:30-6:30 PM (CEST)

QUESTIONS & ANSWERS SUMMARY

1. Can you share more information regarding how OneImpact has worked to balance real time data, engagement of stakeholders, and rights-based response (i.e., securing the privacy of users of the technology – who I understand are people on TB treatment and may also be members of populations that are particularly vulnerable and marginalized?)

Ensuring data privacy and security is necessary to achieving the aims of community-led monitoring. Examining human rights law and norms, and relevant legal considerations is a requirement to inform the intervention and to protect those who are already marginalized and vulnerable. STP provides guidance to countries on these important considerations.

2. How does OneImpact intersect, if at all, with community-based data collection and reporting on TB service delivery platforms? In other words, do community providers have to have multiple apps for reporting service delivery and to report some of these systemic issues?

Community service providers and people affected by TB are different users.

   a. Community service providers provide TB community services. Their activities are monitored and reported regularly to NTP.
   b. People affected by TB report barriers (availability, accessibility, acceptability, and quality) to the services (at community or health facility levels).

Community Health Workers will therefore fulfil government reporting requirements, but both sets of data should intersect to drive a community and people centered approach to TB.

3. Can you clarify if OneImpact is designed for use by patients or by community health workers? Or both?

OneImpact can be used for both. OneImpact consists of

   a. App – this is for people with TB. They also design it. It is theirs.
   b. Inbox – this is for first responders to monitor barriers as they are reported. It is also an accountability mechanism.
   c. Accountability dashboard – this is for community advocacy networks, in addition to other stakeholders

4. Can you please share any challenges that countries need to be aware of and prepare for to implement and roll-out OneImpact for TB, HIV, malaria, and COVID-19?

   It is important to be mindful of the following:

   a. People affected by TB must be aware of their rights before they claim them. As such empowering people affected by TB on Know your Rights is central to the intervention.
b. Starting small is important. The intervention is new in TB and the tool is novel so testing both is important before taking to scale.

c. Data use is a challenge. It is important from the onset to decide which information is important to which stakeholder and agreement should be made on when data should be shared and for what purpose to make sure that it gets used.

5. Can OneImpact be used even if you do not have a smartphone or are unable to download the app?

To download OneImpact a Smartphone is required. However, a browsers version or integrations into different social media - WhatsApp/Telegram/Linechat is possible. Reporting barriers can also be managed through a USSD channel. Both of these options would have to be negotiated with Dure Technologies.

6. Beyond who can use OneImpact, can you clarify how it supports beneficiaries monitoring services and frontline service providers monitoring program indicators? These are two different processes with different objectives.

The objectives of OneImpact CLM are as follows:

**Individual level**

a. To engage people affected by TB to monitor the availability, accessibility, acceptability, and quality of the TB response.

**Monitoring, surveillance, and advocacy**

b. To strengthen the TB M&E system with community reported data.

c. To strengthen community advocacy with evidence.

**Programmatic Management of TB**

a. To respond to the needs of people affected by TB in real time
b. To inform the design of programmatic interventions.

c. To evaluate interventions.

d. To overcome the barriers preventing people from being diagnosed, treated or reported in an efficient and effective manner.

7. Can OneImpact be used in countries such as China and Korea?

Yes

8. Is OneImpact compliant with the European Union’s General Data Protection Regulation?

OneImpact is not operational in the EU. As such this is not a requirement. However, each country is required to comply with local laws.

9. How does OneImpact address complying with country specific data security policies and protocols?

Complying with applicable laws and regulations is a requirement. OneImpact implementers must comply with all applicable law. STP provides guidance to countries to ensure compliance.
10. How can countries, communities and people affected by TB roll-out and use OneImpact now, including in countries like India?

Please contact STP (caoimhes@stoptb.org) so that we can commence discussions.

11. Can OneImpact be used for tele-medicine consultations online?

OneImpact CLM is an intervention and platform driven by and for communities. As such it does not include tele medicine consultations, which would have to engage the formal health sector.

12. What has been the NTPs reaction and involvement thus far in the implementation and roll-out of OneImpact?

NTPs are supportive of the intervention. The process requires their continuous engagement throughout. The intervention enhances community engagement and ensures a community and rights-driven approach to TB, which advances national efforts towards the targets and commitments contained within the United Nations Political Declaration on TB. NTPs have played a role in aligning the intervention with national priorities, approving the technical content in the APP, refining the CLM indicators and using the data.

13. Can OneImpact be accessible and used in remote areas where the network connection is poor and unreliable?

Some of the modules work offline and can be used anywhere. Furthermore, barriers to access can be reported in real time even when the network is unstable. Once a connected to the network the information will be automatically registered.

14. Is there capacity for OneImpact to be adapted for TB and COVID-19?

OneImpact has already been adapted for TB and COVID 19. For more information please contact caoimhes@stoptb.org

15. In the countries with plenty of barriers and problems in the TB response, the NTPs are not happy to have people affected by TB have the ability to bring up the problems related to TB services and care. What can be done to address this?

The process and intervention require the continuous engagement of the NTP. While the communities drive the process, the process engages the NTP from the onset to get their buy-in, support and commitment so that they to act upon the data and information shared.