

ACSM	Challenges	Recommendation	Action by Civil Society	VOTE(5)
1.	Political will varies from state to state and hampers successful implementation of TB care and control at the state, district, and local levels.	Sensitization and Advocacy	<p>Advocate with elected representatives/parliamentarians to increase political will.</p> <p>The Partnership should prepare a Report card for all the states-( Eli Lilly)</p> <p>Facilitate patient driven support groups, attached to or hosted by DOTS providers, and support a national patient network ( WCC)</p>	<p><b>A(4/6)</b> <b>B (2/6)</b></p>
2	Distribution channels of IEC materials	Proper distribution and dissemination of IEC materials	<p>CSOs will facilitate the process from distribution points and provide feedback to program about community response.</p> <p>Partnership to provide feedback to the CTD on the use and distribution of IEC material ( Eli Lilly)</p> <p>Identify material that would be more effective if the message was developed/delivered by members of the targeted audience (WCC)</p> <p>Seek and engage the participation of patients and their families in design and development of all communications for more effective messaging(WCC)</p> <p>Establish two way distribution channels, engaging patient support groups to feed into the communication process through a mHealth network run by patients themselves(WCC)</p>	<p><b>A(4/6) B(2/6)</b></p>
3	Recognition and acceptance of CSOs by the local government.	Joint sensitization and advocacy to increase the visibility of ACSM efforts	<p>Joint efforts by RNTCP and CSOs to sensitize the local authorities.</p> <p>Issue Call for TB community advocates that have been cured locally, provide training and</p>	<p><b>A(4/6) B (2/6)</b></p>

			employment, and facilitate their role as spokespersons and local health mobilisers, etc.(WCC)	
4	Inadequate operational research to document good and innovative approaches that empower and involve patients and affected communities (which study?)	<p>Conduct more operational research</p> <p>Study patient and community development of local operational research, allowing the research to lead to real development (WCC).</p>	<p>CSOs can assist in these research</p> <p>Most CSOs do not have the necessary skills for conducting research. National /renowned institutions should undertake more research.(Eli Lilly)</p> <p>Include the participation of patients in the design and execution of OpResearch( WCC)</p> <p>Support local patient groups to conduct community mapping exercises to lay groundwork for further studies and community mobilisation(WCC)</p>	<b>A(4/6) B( 2/6)</b>
5.	No visibility of the network of cured TB patients (as they can be strong advocates for TB).	<p>Formation of TB patient associations.</p> <p>Media support to be provided by the Govt.(Eli Lilly)</p> <p>Provide proactive support to assure that a national association is accountable to local support groups / patient run chapters so ACSM is not just top down, but also bottom up.(WCC)</p> <p>Facilitate and support the establishment of a CS task force to develop systems of social support AND social mobilisation for all persons diagnosed with MDR-TB, who once cured, could become the 'champions' that are required. Task force should be cured DR patient-</p>	<p>Partnership facilitates the formation at all levels. These associations can be formed at local level like Panchayat. Active members of these associations would be Peer Educators (GRAVIS)</p> <p>Endorsement of RNTCP and Partnership of the Greater Involvement of People with TB (GIPT) Principles. (WCC)</p> <p>Distribute poster version of Patients' Charter for TB Care nationally, in local languages. Request all DOT providers to put poster on walls where patients will see. . (WCC)</p> <p>Partnership facilitates the establishment of a national SMS Hotline for People with TB, run by cured patients, to strengthen the process of mobilization and social support. . (WCC)</p> <p>Partnership supports local SMS based social</p>	<b>A(1/6) B(5/6)</b>

		<p>led(WCC)</p> <p>Endorsement of RNTCP and Partnership of the Greater Involvement of People with TB (GIPT) Principles. (WCC)</p> <p>Distribute poster version of Patients' Charter for TB Care nationally, in local languages. Request all DOT providers to put poster on walls where patients will see.(WCC)</p> <p>Partnership facilitates the establishment of a national SMS Hotline for People with TB, run by cured patients, to strengthen the process of mobilization and social support.(WCC)</p> <p>Partnership supports local SMS based social mobilisation schemes using the recent breakthroughs in mHealth software.(WCC)</p>	<p>mobilisation schemes using the recent breakthroughs in mHealth software. (WCC)</p> <p>Establish a task force to develop systems of social support AND social mobilisation for all persons diagnosed with DR-TB, who once cured, could become the 'champions' that are required. (WCC)</p>	
6.	Role of media in TB care and control is not strategic.	<p>Involving of media with clear cut strategy and plan.</p> <p>Involving people living with TB in all aspects of developing media communications(WCC).</p>	<p>Partnership facilitates regular sensitization and follows up with media.</p> <p>Involving patient representatives to participate in planning and programming (WCC).</p>	<b>A(4/5) B(1/5)</b>