Introduction: In March 2004, the Coordinating Board approved a proposal for the creation of a formal Working Group on Advocacy and Communication. The Working Group is proposed to be constituted of two sub-groups – 1) Sub-group on Global Advocacy and Resource Mobilisation, and 2) Sub-group on Program Communication, Social Mobilisation and Country Support. Since then, the Partnership Secretariat, in consultation with the Chair ad interim of the Working Group, has formulated the basic TORs, membership criteria, governance structure, and also compiled a roster of potential members/experts who will be invited to form the Working Group. As recommended at the CB Meeting of March 2004, the membership roster includes individuals and institutions with technical expertise in advocacy/communication, representatives from each of the other six Working Groups, regional/country representatives, and key TB technical partners. A smaller core group is also being constituted to coordinate/facilitate various start-up processes. The first meeting of the full Working Group is being planned for the first half of December 2004.

Summary: Since holding the first Experts’ Consultation on TB Communication and Social Mobilisation in June 2003, and the Advocacy and Communication Task Force Meeting in September 2003, the Stop TB Partnership has seen a rapid build-up of demand and interest in this constituency as evidenced by discussions at the two WHO Regional Advisers Meetings in 2004, STAG 2004, reports from several country missions/visits, specific requests from NTPs, and initiatives being developed by several technical partners including IUATLD, KNCV, TBCTA and PATH to name a few. Responses to a recent questionnaire sent out by DEWG to all 22 HBCs has reiterated the fact that a number of the HBCs still do not have a national TB advocacy and communication plan. At the same time, consultations and inputs from a number of experts who have interacted with the Partnership Sec over the past one year has indicated the need for more data and analysis from a social-behavioural perspective, including operations research in various settings. The year 2003-2004 has also seen the emergence of national Stop TB partnerships, the Resource Mobilisation Task Force, the NGO and civil society led MDG Campaign, linkages with PLWHA groups to advocate on TB-HIV co-infection, and the forging of partnerships with several agencies specialising in advocacy, communication and social mobilisation. Additionally, 2004-2005 will be a key year for the Partnership, as Global Plan-2 is prepared and released, with epidemiological and cost projections to achieve the 2015 MDG targets for TB control.

An update on the process and progress made in the formation of the Working Group on Advocacy and Communication will be presented, along with issues of strategic significance, on which guidance from the Board is sought.

Decisions requested from the Stop TB Coordinating Board
While the Advocacy and Communication Working Group will take on the task of detailing out a strategic long-term vision and an overarching work-plan for this constituency of the Stop TB Partnership, further guidance and suggestions are sought from the Board on the following key areas of work:

1. Articulation of strategic goals and streams of work for the A&C constituency, particularly with regard to the input to Global Plan-2.
2. Harmonization and coordination of A&C initiatives and interventions across partners, donors, specialized support agencies, country programs and emerging national partnerships.
4. Strategic collaboration at global and country level, between the MDG Campaign and the Stop TB Campaign.

Next steps and time frame

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