Advocacy, communication and social mobilization (ACSM): your ally in TB prevention and care efforts

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Dubrovnik, 28 May 2009
Challenges to TB Control in the Region

- Socioeconomic crises—past and present
- Inefficient services and poor funding
- Slow adoption of DOTS
- Disaffected health care staff
- Poor drug use practices (providers and patients); emergence of MDR-TB
- Lack of effective educational strategies
- HIV epidemic emerging
- Stigma and discrimination
- Weak or struggling civil society—TB patients have few advocates
- Poor social support for vulnerable populations

All of these can be addressed by ACSM!
What is ACSM?

Advocacy (A)

• Building political commitment and influencing policymakers to ensure sustainable financial support, policies, and other resources

Example: advocacy to ensure ministerial orders, funding allocations, and policies support the WHO European Regional Plan to Stop TB
What is ACSM (2)

Communication (C)

- Improving TB-related awareness, knowledge and attitudes and encouraging positive behavior change to increase the likelihood of early detection and treatment success.

- Improving interpersonal communication and counseling between patients and program providers.
Communication examples

Training providers on communication skills to improve client-provider relationships.
Social Mobilization (SM)

- Community engagement and action to ensure sustainability, self-reliance, and integration of TB control into overall community priorities.
- Influencing social norms and creating more favorable environments in which affected communities can have a role in guiding TB control interventions.\[1\]

Stigma and discrimination

• Stigma greatest barrier to care for people with HIV and/or TB
  – HIV associated with drug use, sex work
  – TB associated with prisons, alcoholism, homelessness

• Providers unsupported, lack information
ACSM is interlinked
Challenges

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Advocacy
Communication
Social Mobilization
ACSM objectives must be:

• Data driven (needs assessments through surveys, interviews, focus groups, observation, etc)

• Measurable and achievable

• Tied to overall TB control program goals
The Power of ACSM

• Mobilizing political commitment and resources for TB.
• Improving case-finding and treatment adherence.
• Combating stigma and discrimination.
• Empowering people affected by TB.