

# Assessing the engagement of civil society, nongovernmental and community organizations

## Engagement of civil society, nongovernmental and community organizations

*Objectives:* at the end of the assessment, reviewers should comment on –

- how civil society organizations are engaged in TB efforts, including their participation in situation analyses, and the development of guidelines and policy;
- the role of different civil society organizations in TB efforts;
- what actions need to be taken to improve the involvement of civil society organizations.

*Background:*

Compared with governmental organizations, civil society organizations have the advantages of being autonomous, being able to influence both community and governmental institutions, having knowledge and understanding of local circumstances, and having the flexibility to adapt to local situations. Their capacity to function in geographical areas that are difficult to reach offers a unique opportunity to improve early case-detection and treatment. It also offers an opportunity to systematically extend activities aimed at TB prevention, care and control beyond health facilities and to areas and settings where national TB programmes cannot reach (for example, in conflict zones and prisons). Civil society organizations are diverse in terms of their size, capacities, the scope of their missions, geographical coverage and areas of work and interest.

*Location:* offices of civil society organizations at the central, regional or local levels; offices of the national TB programme at the central, intermediate or local levels

*Staff to be interviewed:* health service managers at the intermediate health level, staff at health facilities, staff or volunteers at civil society organizations, advocates and activists for TB control, TB patients

*Assessment*

- a. Have national guidelines been established for engaging with civil society organizations?
- b. Is the implementation of activities to engage civil society organizations aligned with national guidelines?

## Framework for conducting reviews of tuberculosis programmes

- c. Do the national guidelines address the following issues?
  - i. Are the types of civil society organizations clearly defined, as well as the roles and responsibilities of all stakeholders?
  - ii. How is regular capacity building ensured?
  - iii. How is a regular contact maintained among health services and civil society organizations?
  - iv. How are issues of community motivation and personal motivation addressed?
- d. Was a situation analysis of TB-service delivery conducted in dialogue with civil society organizations to determine how their contributions might complement the TB programme's capacities?
- e. Have tools and guidelines for monitoring and evaluating community involvement been developed? Are data on community engagement being captured in the national TB programme's registers? If not, are data on community engagement being regularly reported to the national programme (for example, quarterly)?
- f. To what extent are planning and supervisory activities conducted jointly by the civil society organizations and the national TB programme?
- g. Have there been opportunities to build on existing community initiatives (for example, those addressing HIV or AIDS, development, education or agriculture)?
- h. How is continuing capacity building ensured among smaller community-based and patient-based organizations through their links with larger international and national NGOs?
- i. Are plans for implementation and scale-up of engagement available (that is, do the plans start with implementation and then address fine-tuning in demonstration areas)?
- j. How is information on the contribution of community engagement generated in order to maintain and strengthen this engagement in TB care and prevention activities?

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Indicators for: <b>Assessing the engagement of civil society, nongovernmental and community organizations</b>		
<i>Indicator</i>	<i>Calculation</i>	<i>Source of information</i>
Number of new TB patients diagnosed and notified who were referred by community-based health workers or volunteers expressed as a percentage of all new TB patients notified in a basic management unit during the same period	<p>Numerator: number of new TB patients referred for diagnosis by community-based health workers or volunteers and notified in a basic management unit during a specified period</p> <p>Denominator: total number of new TB patients notified in the basic management unit during the same period</p>	TB suspect register, treatment cards, TB treatment register
Proportion of new TB patients successfully treated who received support for treatment adherence from community-based health workers or volunteers	<p>Numerator: number of new TB patients successfully treated and provided with support for treatment adherence from community-based health workers or volunteers in the basic management unit during a specified period</p> <p>Denominator: total number of new patients given treatment support by community health workers or volunteers during the same period</p>	TB treatment register
Number of and percentage of all civil society organizations that are represented in national or subnational (for example, district) technical or policy bodies	Ask staff of the civil society organizations whether they have been represented in at least one meeting of the national TB programme's technical or policy body during the	Administration records

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of the national TB programme	past 12 months	
Number of and percentage of all civil society organizations that received technical support for institutional strengthening during the past 12 months	Staff at organizations should be asked whether they received technical support for institutional strengthening during the past 12 months	Administration records