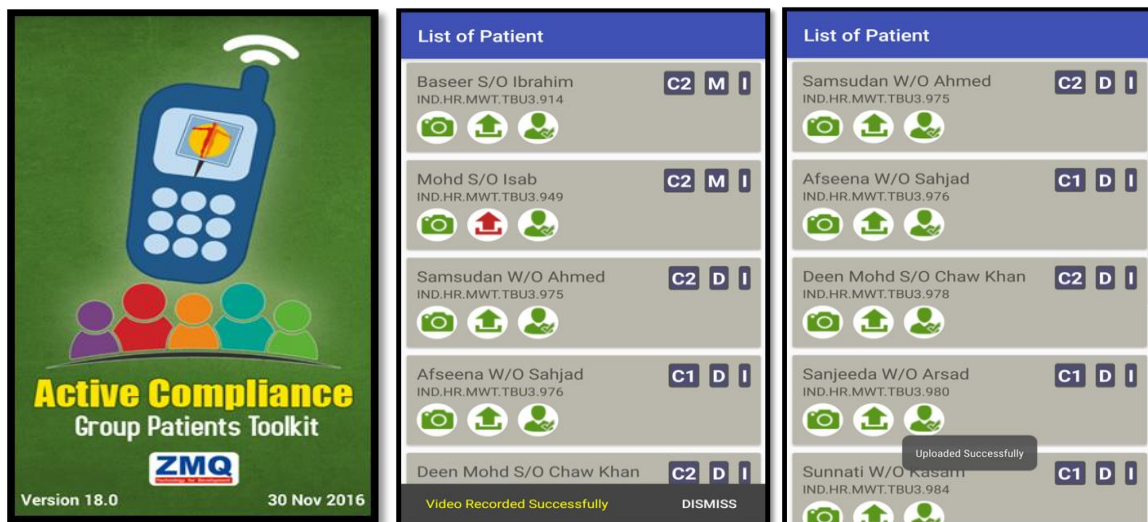


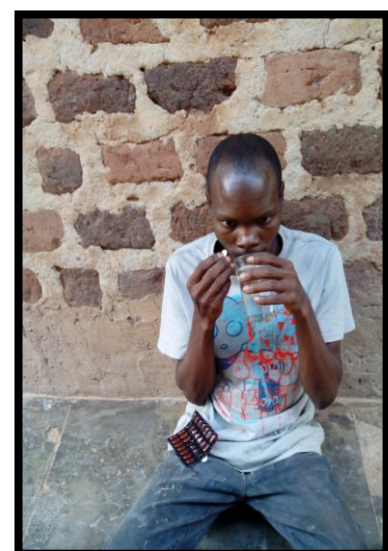
Active Community-led Supervision

ZMQ during its pilot implementation reached to the conclusion that, even if there is a wide penetration of the mobile phones on the ground, but still there are many groups like women, elderly, young Children; who do not have accessibility to mobile phones or do not understands the usage of the device. Such groups cannot be left out from the system as they belong from the most vulnerable categories. With the idea of reaching out to the most of the people, ZMQ made a toolkit called “Group Active Compliance” (GAC).



Group Active Compliance Toolkit

As the name suggests this tool is especially developed for the community volunteers for reaching out to the group of patients in the community (at home) or in the dispensary (at site). Community volunteers walks down with their device to the patient(s) house to report their compliance. Most of the patient who agrees for at-home treatment adherence, but do not have education or access to mobile phones are enrolled under this system. This system not only helped in reaching out the large number of patients but many patients were more satisfied with the fact that somebody is coming to meet them and talk to them as generally TB patients are secluded from the group and generally kept in isolation.



Compliance Reporting by Group Active Compliance in Mewat, Delhi and Uganda

The stigma attached to TB results in demotivation to the extent that patient leaves hope to live. During our visit to the field one patient said to field coordinator- “बेटा तुम रोज़ मुझसे मिलने आते हो इसलिए मैं दवाई खाता हूँ। नहीं तो इस उम्र में मैं क्या करूँगा ठीक होकर। मुझसे तो कोई बात करने वाला भी नहीं है।” - सुब्बे खान, 70 वर्ष