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## WORLD TB DAY ISSUE

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## TB Mukht Bharat

Dr. Sudarsan Mandal, DDG, Central TB Division

Back in 2020, the National Tuberculosis Elimination Programme (NTEP) got off to a good start. That is until March when the COVID-19 pandemic suddenly commenced. The programme calibrated the unfolding health crisis and issued timely programmatic guidance to all the States/UTs. It suggested measures to cater to the TB patients as highest priority. In all the States/UTs, TB services continued unabated, in spite of the raging pandemic. The programme staff at the national, state, district, sub-district level continued to provide exemplary service and delivered results in the most testing of the circumstances. I sincerely congratulate your resolve and dedication.

This year we started with renewed confidence that NTEP will recover in places wherever it has registered a drop in the wake of COVID-19 and continue to sustain the momentum in other places, in our ultimate objective to eliminate tuberculosis from the country by 2025. Alas, the resurgence of COVID-19 in March this year and onset of a second wave of the pandemic has put a strain on the programme yet again. However, we need to take this battle head-on and prepare ourselves. It is going to be an uphill task. But together we can. However, we must also be careful and prioritise the safety of each one of us, especially, staff in the field.

I am sure that the recently issued advisories by the programme to the states will facilitate planning for the challenging days ahead. In this special edition of the Nikshay Patrika, you will find glimpses of the World TB Day commemoration across the country, how TB elimination goals in the states are picking up pace, innovations in the systems and processes and multi stakeholder participation in the fight to eliminate TB from India.

Thank you.



Editorial

## When India decides, India Does

VV Sundar, WHO-NTEP Consultant  
(National Communication)

**“Plan B’ might have been ‘Plan A’ all along.”**  
 The quote sums it all up.

In the recent memory, if there was an event that required obsessive over planning and needed more of Plan B for a Plan A – it surely was the World TB Day Commemoration event held on 24<sup>th</sup> March 2021, held at the Dr. Ambedkar International Centre, New Delhi amid the resurgence of Corona-19 pandemic.



This year’s marquee event was extraordinary in more ways than one. The term “pre-planning” appeared to have no end in sight with the ever evolving and altering ground realities and situation. For once, staying paranoid during the entire planning and execution process proved to be a boon.

Just as we began to feel a little sense of relief that this all-consuming pandemic is now behind us, thanks to the advent of the vaccine, the COVID-19 decided to rear its head once again and confound us coinciding with the event dates. The cases began to show an upward trend again in March. We were staring at an ominous situation. All the plans and preparations could possibly unspool. A national event of this scale and more than a thousand invitations sent to attend the event could be in jeopardy. A huge gathering and execution of a live multi-tiered event with a duration of 9 hours end-to-end were, to put it mildly, a gargantuan task.

After witnessing the lacklustre year 2020, filled with unprecedented disruption to the public life - it began to feel as if finally in 2021, it would be the return of

“relevance of the audience” in a physical setting at an event venue, unlike the short-lived “virtual” events devoid of any tactile experiences, that of late had become the ‘new normal’.

Thinking proactively and at the same time be realistic and setting one’s sight high saved the day. Nearly, seven hundred guests attended the World TB Day event in person with adherence to COVID protocols. The audiences included several NGOs, TB Champions and the community, corporates, international partners, stakeholder groups, media and the civil society.

Dr. Harsh Vardhan, Union Minister for Health and Family Welfare inaugurated “World Tuberculosis Day” commemorations along with Shri Ashwini Kumar Choubey, Minister of State, Health and Family Welfare. Dr. Vinod Paul, Member Health, NITI Ayog, Shri Rajesh Bhushan, Secretary of Ministry of Health and Family Welfare, Prof. Balram Bhargava, Secretary DHR & DG ICMR, Dr. Roderico H. Offrin, WHO representative to India and other senior dignitaries were also present at the occasion. The event was streamed live on social media platforms including Twitter and Facebook. In this year’s event, awards for best performing states/districts towards TB elimination were introduced for the first time.



Twelve partner organisations put up their stalls in the atrium area. A photo exhibition on the theme of “Courage and Resilience”, extraordinary stories of TB survivors was also displayed. The event took place under the overall theme of “Azadi Ka Amrut Mahotsav”. India TB Report 2021 along with other four books were released during the event by the dignitaries. The “TB Mukta Bharat” campaign was formally launched on the day. Three Videos

were launched by Ms Arti Ahuja (AS & DG) on TB related Stigma theme, produced and broad casted on MTV India. Five TB Champions were awarded for campaigning for the causes in their states. Two TB champions narrated their riveting stories of the trials& tribulations and their grit and determination to overcome this disease. Best Performing States based on State TBI Index were shortlisted and 6 States/UTs received the awards for their overall performance on achieving TB reduction goals. Lakshadweep (UT) and the district of Budgam (J&K) were declared TB free.

While distributing the medals and certificates to awardees, Dr. Harsh Vardhan noted, “This is a historic day for India as one UT and one district have been declared TB-free. This is just an initial step in the direction of a bigger dream of eliminating TB from India. I am confident that next year we shall have more States, UTs and Districts stepping up to the challenge and laying such claims”.

Best Professional Award was also given away to the Professional Association working in the field of TB. Private Sector Notification – Hospitals and Lab were also recognised.

The Union Health Minister and Minister of State, Ministry of Health and Family Welfare also released several reports. These included the much-awaited India TB Report 2021, Guidelines for programmatic management of Drug Resistant Tuberculosis in India, a Guidance document on Strategy to End Stigma and Discrimination Associated with Tuberculosis, Collaborative framework for management of Tuberculosis in pregnant women and National Framework for a Gender-Responsive Approach to TB in India. TB Aarogya Sathi Application for citizens/ TB patients and an application for patients attending to NITRD were also launched at the event along with the iDEFEAT TB Project and Corporate TB pledge. TB Aarogya Sathi Application was designed to be a one-stop solution for the information related to TB.



The following Partner organisations pledged their commitments on the occasion – WHO (India), Global Fund, USAID, The UNION, Corporate TB pledge by Medanta etc.

Dr. Harsh Vardhan in his speech said, “We are working tirelessly to mitigate the impact of the pandemic and regain lost momentum. We have adopted pre-emptive strategies like the integration of TB and COVID-19 bi-directional screening, ramping up laboratory services, diagnostic and treatment capacity upgrades and procedures for co-located testing for TB and testing for COVID-19 (among notified TB patients) at health centres and hospitals to boost surveillance and TB case finding efforts.”

Shri Ashwini Kumar Choubey said, “On the occasion of World Tuberculosis Day, I congratulate all of you who are here today to witness this important event. India has made significant efforts in the direction of eliminating TB under the dynamic and able leadership of our Honourable Prime Minister, Shri Narendra Modi. I appreciate TB champions who have won their battle against Tuberculosis and are now trying to change society with their efforts. I appeal to all the leaders to make it a Jan Andolan. I am confident that we will be successful in our fight against Tuberculosis also.”

Dr. V. K. Paul, Member (Health), NITI Aayog noted, “This is a truly remarkable day. Despite the stress of COVID, the journey to strengthen the efforts of TB continued. COVID-19 has taught us many lessons. We have learned to change our behaviour. This enables us to bring other behaviour change in individual and society.”

Dr. Roderico H. Offrin, WHO representative to India said, “The theme of World TB Day this year is ‘The clock is ticking. We must use setback during last year due to COVID19 to step up our efforts to end



TB. India has launched a Jan Andolan to end TB and this commitment has been backed by budgetary allocation, infrastructure, and resources. The efforts have almost doubled. TB initiatives at the central level have been percolated down to States, Districts, Blocks and Gram Panchayat levels. Both Shri Rajesh Bhushan, Secretary (Health) and Ms. Arti Ahuja, Additional Secretary (Health) recounted the thematic areas of TB programme and expressed their commitment to end TB by 2025 towards a TB Mukht Bharat. At the start of the programme, Shri Vikas Sheel, Joint Secretary delivered the welcome speech and presented the "Recent Updates of NTEP". A vote of thanks to the dignitaries was delivered by Dr. Sudarsan Mandal, DDG, Central TB Division, MoHFW in the end.

Earlier in the day the event began on an electrifying note with a flute instrumental Jugalbandi performance by Sangeet Natak Akademi Award recipient Pandit Ronu Majumdar. It was followed by Nukkad Natak

on the theme of TB. Later, a scintillating Kathak dance performance and Sufi dance enthralled the audience. The Central TB Division team along with the interns of Amity University put up a rapturous rap song performance and lit up the stage. After the awards function, the programme ended with the last segment of cultural programme planned for the evening – a musical performance by Ali Brothers and troupe. "The end of a melody is not its goal: but nonetheless, had the melody not reached its end it would not have reached its goal either".

As the saying goes all endings are also beginnings. The World TB Day commemorations underlined the fact that individual and collective action can together make goals achievable, no matter how invincible they may seem. This year's event came to an end with the resolve to end TB in the country by 2025 and with one reverberating message - "when India decides, India does."

## Revised Advisory to States/UTs to mitigate 2<sup>nd</sup> wave of COVID-19 on NTEP

**Dr. Sudarsan Mandal, Deputy Director General,  
Central TB Division, MoHFW**

The recent and immense surge in the COVID-19 cases in the country has yet again posed colossal challenges for the health systems in general, particularly for the National TB Elimination Programme (NTEP). The programme staff is once more inundated with a plethora of service demands in the wake of this upsurge. Consequently, it is important to proactively curb any further deterioration in the targets set for the programme. It is requested that this advisory be read along with the advisory issued by MoHFW on 14<sup>th</sup> April 2020, titled as "Guidance note for enabling Delivery of Essential Health Services during the COVID-19 Outbreak". The current advisory aims to reiterate the salient points of the advisory mentioned vide supra, in the context of the status of the NTEP as under:

- Delivery of DOTS to TB patients, through ASHAs/ANMs/Health Volunteers to be ensured, with minimum or no travel.
- Routine screening for presumptive TB cases to continue at primary level facilities with diagnostic services to be provided uninterrupted at designated facilities as per advisories issued by National Tuberculosis Elimination Programme.

- Screening for new onset fever/cough/breathlessness and risk communication on COVID should be done.

To meet these services following may be considered accordingly suiting the local circumstances:

1. Mapping of all existing Health Facilities (city/district/ block-wise) in the public, not for profit and private sectors to be undertaken.
2. States could also involve not-for profit/private sector in the provision of non-COVID essential services, particularly for secondary and tertiary care, where public sector capacity needs to be supplemented.
3. Mobile Medical Units (MMUs) could be utilized for delivery of services, especially follow up care duly following physical distance norms and appropriate protection measures for the health workforce.
4. Suspected COVID patients and other patients requiring ambulatory care, should be encouraged to utilize tele-platforms, mobile apps, web-applications, video-calls, tele-medicine etc to determine the need to visit a Health Facility/Hospital/ Fever Centre.

5. Where feasible, those due for any of these services, would be asked to come to peripheral facilities (SHCs/PHCs/UPHCs, including HWCs/ Urban Health Posts) on dates/times, decided at local levels and informed telephonically or through ASHAs.
6. Home-visits by ASHAs should be optimized to provide follow up care to all beneficiaries in a particular household/hamlet/mohalla during one visit and avoid making repetitive visits to the same house/mohalla. Primary healthcare team at SHC, including HWC must be encouraged to follow up with patients on treatment for TB.
7. All health care workers including front line workers are to be provided personal protective equipment and trained in standard protocols for Infection Prevention Control and should adhere to advisories for infection prevention, personal protection and physical distancing norms, for facility level care, outreach visits or home-based care.
8. Patients on treatment for TB, would be provided up-to 2-3 months' medicine supplies at a time as prescribed by medical officers. The medicines may be delivered at home through frontline workers/ volunteers during the period of the lockdown/ restricted movement, provided patients are stable. Patients may be advised to contact MPW/ CHO where available or PHC-MO in case of any complications.
9. To ensure uninterrupted supply of medicines, consumables and rapid diagnostic kits, alternate models may be explored.
10. Incentives given to the beneficiaries under the existing schemes (NPY, Tribal Support, Treatment Supporter, Private-Provider Incentive) may be prioritized at least for beneficiaries for whom validated bank accounts are available.

The States/UTs are requested to take into account local circumstances and strategize the delivery of NTEP services. Central TB Division would extend all possible support and discuss/help any case specific issues to support the State/UT in achieving the NTEP targets.

All the States/UTs are requested to strategically plan and expedite measures to improve performance across key indicators of the NTEP.

## **Adoption of Persons with Drug Resistant Tuberculosis**

**Shweta Bajaj, Senior Programme Manager  
(TISS Saksham Project)**

Saksham is a project of the Tata Institute of Social Sciences funded by the Global Fund since 2008 to support Central TB Division, Ministry of Health and Family Welfare in its fight against HIV and TB. It introduced Saksham Pravaah "professional counselling" for Persons with DR TB (PwDRTB) in Maharashtra, Gujarat, Karnataka and Rajasthan in August 2016. A total of 214 professional and trained counsellors placed at the District TB Centres in all districts of the 4 states. As part of Jan Andolan Saksham proposes to Adopt Patients Living with DR TB (PwDRTB) in all the 4 states.

### **Key Features of the adoption scheme:**

1. Focus will be on PwDRTB from the marginalised, tribal communities, most at risk, HIV comorbid, elderly, TG, homeless with gender specific linkages.
2. Adoption will be prioritised on need assessment based economic (upto 5000/- rural and upto 10,000/- urban) and nutritional challenges. Districts will be decided based on existing patient load in co-ordination with NTEP.
3. This scheme will be applied for all newly registered PwDRTB from April 2021.

### **Nutrition Support**

1. Nutrition (monthly staples) will be provided for entire household. The Counsellors will drive adoption of the family with local NGO/CSR/Private Donors/Religious Institutions. The homeless PwDRTB will be linked with local restaurants / mess for hot meals or to Anganwadi for inclusion under mid-day meal scheme.

2. Minimum duration of nutrition support will be for 6 months. Follow up assessment will be undertaken for its extension, if needed. Overall goal is to achieve optimum nutrition (staple food items) for the PwDRTB and family.
3. In a quarter maximum of 20 patients will be selected under this scheme and based on donor support. (Per person expenditure is Rs 1200 per person and Rs.3000-3500 for family of 4).

#### **Linkage to Government Schemes (Health, Education, Insurance, Livelihoods):**

1. Councillors will undertake assessment of eligible GoI schemes and link them with the patients based on socio-economic profile during registration (for various existing livelihood, income generation schemes and for opening bank accounts, Aadhar Card).

#### **ADR Management:**

1. Linkage to 108 ambulance services using TB treatment card during any major ADR and gender specific response mechanism in place. Basic ADR to be managed at the PHC level.

#### **Culture Follow up:**

1. Counsellor will prepare, and monitor Culture and sputum follow up calendars.

#### **Reporting:**

1. A real time tracking sheet to record and report, Counselling services offered, ADR management, Nutrition and Social Protection Schemes linkages will be provided on a monthly basis. Culture follow up data will be reported periodically.

## **A Unique Initiative Towards TB Free Village**

**Dr. Mahesh MG (District TB Officer, Koppal)**

How to eliminate TB at the village level? By actively adopting villages and launching interventions at the community level to detect-treat-prevent TB. Many a time, while planning initiatives, private practitioners in the villages are often overlooked. Their sub-optimal engagement in TB program is a deficiency. Due to lack of coordination, preconceived notion, prejudices against the private sector have hampered the results for a "TB Free Village" initiative.

Koppal situated in the northern part of Karnataka has adopted the "TB Free village" initiative by uniquely involving private doctors/NGOs in the community engagement activities such as raising awareness, engage marginalised population, screening, detection, counselling, treatment adherence and follow-up till the patient is cured.



This model encourages private practitioners to adopt villages to advocate about completion of the TB care cascade and contribute to eliminating TB. The "TB free village" adoption model aims to achieve

completion of TB cascade of care thereby contributing to the improvement of TB quality indicators like Drug-resistant TB (DRTB), death rate and success rate.

#### **Key Elements of this model:**

##### **1. Early detection of the TB:**

Approximately 60% of the Indian population is seeking care from the private sector. Under this initiative, private practitioner visit the villages to conduct camps for presumptive TB screening, creating awareness and participate in the active case finding activities being conducted at the village level by the public sector for early detection. Private practitioner conducts camps in the specified villages once in every fortnight.

##### **2. Complete Treatment:**

The private practitioner also contributes to treatment adherence by ensuring nutrition support, counselling, and addressing co-morbidity like Tobacco, Alcohol, Diabetes, and HIV. He links the patients with Tobacco cessation centres and Alcohol de-addiction centres as needed.

##### **3. Prevention:**

Private practitioner educates about cough hygiene practices in the community to prevent the spread of infection. Tuberculosis prevention therapy

(TPT) is monitored by the private practitioner and administered to the TB contact children and PLHIV.

Engaging the Private sector in the “TB free village” adoption model in TB care and prevention is unique as their involvement can be a boon in bridging the gaps by ensuring early access to diagnosis, treatment till the completion of the cascade of care.

This model increases the public and private sector accountability as a community advocate for the National TB program. It contributes to reducing the out-of-pocket treatment expenditure of the patients.

It has also brought a dramatic shift in TB diagnosis and in successfully achieving TB-related targets set in the SDG and “End TB” strategy.

## Sustaining Momentum Towards End TB

**Dr. Mahesh MG (District TB Officer, Koppal)**

The Koppal team actively identifies District level celebrity/influencers who can raise awareness among the community against TB, advocate diagnosis, adherence to completion of treatment, sensitise people on stigma and improve communities overall social responsibility towards their members. Pujya Sri Gavishree Swamiji is a prominent religious leader and is contributing to this cause through his active involvement in the programs conducted for engagement and TB elimination efforts. Such activities have helped boost the district TB program achieve case notifications, achieve a reduction in MDR rates and deaths.

On the occasion of World TB Day, the team organised a Cyclothon rally in a COVID compliant manner. This activity was led by Deputy Commissioner, Mr Vikas Kishore Suralkar. Over 600 cyclists participated in the rally of 20 km within the town to raise awareness on TB. All these efforts are contributing to improving the program visibility and resulting in improved case notifications. Koppal has seen an 86% increase in case notification in the last two years. The team will continue to sustain the momentum to achieve the targeted goals.



## Accelerating Efforts Towards End TB by 2025

**State NTEP Team, West Bengal**

West Bengal has a total of 37 districts and 464 TB units in the state. The pandemic has underlined the urgency to fight against TB and strengthen the NTEP even further.

“The Clock is Ticking”- the theme of World TB Day this year conveys the urgent need to tackle this disease. Several events were organised in the state to mark the day and spread awareness about TB in the community. On the occasion, The Director of Health Services, Department of Health and Family Welfare, West Bengal spoke about the devastating effects of TB on health and its social and economic consequences. He underlined the importance of the participation

of all stakeholders both government and non-government in the elimination efforts of this deadly infectious disease from the community. The State TB Officer spoke on the importance of improving the referral numbers from the OPDs and periphery by the field staff and to widen the net to notify TB cases. Intensifying TB screening, active case finding among the vulnerable population and TB-COVID Bi-directional screening is the need of the hour, he said.

Several districts in the state organised rallies on the occasion of World TB Day, school quiz programmes, sensitisation programme with private practitioners, nursing staff and chemist shop owners, inspirational



speech made by TB Champions, Mask Selfie Campaign, distribution of information leaflets and puppetry show were some of the key highlights.



(Sensitization of nursing students at DTC Medinipur East, World TB day Observance at State level, Rally at Barorangkua, Nandigram)

## Gujarat #TBTARGETS2022

Team NTEP, Gujarat



World TB Day was observed from March 23<sup>rd</sup> to 26<sup>th</sup> across the state. In the state capital Gandhinagar, activities were organised at the Commissionerate of Health & Vidhan Sabha.

Mask Selfie campaign was the key highlight. Honourable Nitin Bhai Patel, Deputy CM; Dr. Jayanti Ravi, Principal Secretary, Health and Family Welfare Department; Dr. MA Pandya, Mission Director, NIHM, Dr. Dinkar Raval, Additional Director, Public Health, Gandhinagar; Dr. Nilam Patel, Additional Director (Family Welfare) and the staff participated in the event.

On DD Girnar television channel of Doordarshan a Live phone in programme was held to spread awareness about NTEP services. Two programmes were aired on 24<sup>th</sup> & 26<sup>th</sup> March, respectively.

Each district in the state also held events respectively to reiterate their commitment to fighting TB involving all the stakeholders. From increasing public awareness about TB through the rally, school quiz competition, natak, seminar, ASHA meeting, CMEs etc the programmes also stressed the need for participation and contribution from every stakeholder including political leaders, NGOs, PPs, ICTC Counsellor, Social Worker, ASHA Worker, IMA etc.



## Prepared for the Fight against TB

Team DTC Kolhapur

Kolhapur received its first CBNAAT Gene Expert Machine for TB/COVID-19 recently. CBNAAT machines are being used for testing both COVID-19 and Tuberculosis. It is a boon especially under a pandemic situation such as the one we are currently facing. The funds for the purchase of the machine and the construction of the lab were granted by the District Planning Committee. It was executed under the supervision of Dr. Usha G Kumbhar, District Tuberculosis Officer including the District Surveillance Officer and Additional District Health Officer.



CBNAAT Inauguration by Hon. Guardian Minister of Kolhapur; Mr SatejPatil; Commissioner of Kolhapur (KMC) Dr. MallinathKalshetti; Collector of Kolhapur Mr Doulat Desai, District TB Officer Dr. U.G. Kumbhar,

The machine is powered by Cartridge Based Nucleic Acid Amplification Test (CBNAAT) technology. It can conduct 340 tests in a day and takes 45 minutes each for the test results. The test systems are developed based on separate cartridges and therefore the different tests can be conducted simultaneously such as TB, MDRTB, SwineFlu along with COVID-19. It comes with an additional advantage where you do not need to specially train the lab technicians to operate it. It has proved to be a handy tool for bi-directional screening of suspected COVID and tuberculosis cases. The acquisition of the CBNAAT machine has speeded

up the diagnosis of a greater number of patients and their early detection.

Aside, it is worth mentioning that corporate through their CSR funds are contributing to the programme. Kirloskar Oil Engines Ltd provided (650) Infection Prevention & Control Hygiene Kits worth INR 3,57,500/- to the District TB Centre, Kolhapur for their utilisation by MDR TB patients. Similarly, seven social and corporate organisation collectively gave 620 Protein Powder Tiffin for TB patients worth INR 1,51,400/- under CSR activities.



Handover of Infection Prevention & Control Hygiene Kits; Distribution of Protein Powder Tiffin

## Intense TB Elimination Drive

**Dr. Sunil Kumar M, Kerala State TB Officer/Director-STDC**

Kerala State TB Cell conducted the World TB Day event & TB Survivors meet virtually on 24<sup>th</sup> March 2021 from 4.00 PM to 6.00 PM.

The meeting Chaired by Dr. Rajan N Khobragade, Principal Secretary, H&FW Govt. of Kerala. Dr. Saritha R.L, Director of Health Services welcomed the gathering. Dr. Sunil Kumar M, State TB Officer briefed the progress made so far in "Peoples Movement Against TB" in Kerala. Mr Chaman, Mrs Usha Varghese and Mr Joseph the TB champions shared their experiences and views of TB Elimination in Kerala. High-level State officials, public dignitaries from various sectors, State NTEP team from all districts and TB Champions across the state attended the function virtually.

State TB Cell & State Task Force jointly organised Continuing Medical Education (CME) Programme as part of the World TB Day Commemorations 2021, on 21<sup>st</sup> March 2021 from 9.30 AM to 4.00 PM. through online platform. High-level International/ National / State officials, Professor and HOD's from various MCH's, DTO's, MOTC's & Block TB Elimination Officers etc attended the sessions.



Newspaper Advertisement

Quarter page TB awareness advertisement in 4 Major Newspapers through FPD Malaysia Manorama, Mathrubhumi, Deshabhaskari and Kerala Kaumudi in all Kerala edition.



TV & Radio spots and Newspaper advertising

Goodwill Ambassador, Padma Bhushan recipient and famous film actor Mohanlal's public health messages were broadcasted in Malayalam television and radio channels and official social media pages on the occasion of World TB Day. Print advertisements were carried in major newspapers (Malayala Manorama, Mathrubhumi, Deshabhimani and Kerala Kaumudi) to increase awareness of TB in the state. A radio campaign through eight AIR stations for 50 days was also executed.

As part of World TB Day, all 14 Districts carried out programs as designed by State TB Cell, such as: a) TB Elimination Board meetings b) district-level TB

Preventive Therapy awareness programs c) Meetings with representatives of medical stores in the districts to ensure monitoring of Schedule H1 registers d) district level meetings of Coalition of Professional associations and Consortium of Pvt Hospitals e) various awareness programs for the public f) ensuring the outstanding performance of STEPS Canters in private hospitals g) Tuberculosis Unit level meetings and honour the individuals who have made outstanding contributions to tuberculosis prevention activities h) State and District/TU level TB Survivor's meetings for enhancing the TB Elimination activities in the state.

## User-Centric Innovations

Dr. Vinod Kumar, DTO, Gurgaon

Data is a powerful tool to make effective decisions. If the same is not available on time it can lead to a lack of proper analysis, monitoring and supervision of public health programme services. The staff at Peripheral Health Institution (PHI) in Gurugram were found facing difficulty in using and extract actionable data from Nikshaya Portal. This created several issues including pendency at both public and private sector health providers. It resulted in less than desired outcomes and impacting district performance and its overall ranking on several parameters.

Noticing this situation Gurugram district TB officer, Dr. Vineet Kumar attempted to find a solution to the problem. He shortlisted few key detrimental metrics and simplified the reporting format so that PHI staff can find it easy to work with it. These modifications helped reflect the exact status of the patient and the pendency in the system.



It was aptly called "The TB mirror" and consisted of parameters such as new TB case notification over a selected date range, all pending post notification services like number of patients not yet put on treatment, number of patients not yet tested for CBNAAT, number of patients not yet tested for comorbidities like HIV & blood sugar and number of patients with pending bank account details. The PHI wise pendency's were generated, and the staff took the lead to clear the pending works since. By providing the PHI staff with the line list of patients awaiting care and services also made the bottlenecks immediately visible and addressable. This brought forth a rapid resolution to the cases and better and timely delivery of patient care in the public health system.

Encouraged by the outcomes, a similar "mirroring" for the private partners and corporate hospitals who act as standalone practitioners followed. In due time, positive results started

to pour in, and the district improved its overall ranking.

Seeing its efficacy, the Gurugram TB district team was motivated to create more such mirrors as monitoring and action tools. Chemoprophylaxis mirror, Comorbidity mirror, MDR-TB mirror being some of them, further improved the reporting mechanism. Chemoprophylaxis mirror keeps under 6 years child contacts on the radar till Isoniazid Preventive Therapy (IPT) is started by PHI incharge. Comorbidity mirror flags delay in the start of treatment of comorbidities (e.g., HIV or Diabetes etc) after their detection.

MDR TB mirror reflects not only delay in regime modification following resistance detection by LPA, but also any lacking follow-up services to MDR TB patients.

This user-friendly innovation has been found to be effective and useful by WHO partners and state headquarters and the same is being now recommended to other districts as well.

“Mirrors” were designed by DTO Gurugram Dr. Vineet Kumar MD along with his team PPM cum ACSM coordinator Mrs Poonam and Mr Sachin data entry operator.

## Felicitating Best Districts of Haryana

Team NTEP Haryana

Global public health days offer great potential to raise awareness and understanding about health issues and mobilize support for action, from the local community to the international stage. World TB Day, falling on March 24<sup>th</sup> each year is commemorated to raise public awareness about the devastating health, social and economic consequences of tuberculosis, and to step up efforts to end the global tuberculosis epidemic. Tuberculosis is easily curable, but it can lie dormant and undetected for years, so it is important to spread awareness. The theme of this year’s 2021 World TB Day is: “The Clock Is Ticking”.

The head of State TB Cell Haryana, Dr. Veena Singh,(ADGHS) has called for the engagement of all the partners, stakeholders, community leaders and NGOs to unite and act like “The clock is ticking”. The following activities were conducted at the State Level: Health talk on TB in Haryana and way forward to eliminate TB by Dr. Veena Singh, ADGHS, Haryana; Mask selfie Campaign and social media activities, TB Champions shared their success story;pride march by Saksham Trust(A transgender group), inclusion of celebrity endorsements to popularise the TB Messages, Nukkad Natak performance, and felicitation of three best-performing districts during the year 2020 for outstanding achievements under NTEP.

In a virtual programme conducted to mark the occasion - Mr. Guy Marks, Executive Director/ President: International TB Union Deputy Civil Surgeons (TB), Presidents of local Rotary clubs, Inner wheel Clubs, Rotaractors, Interactors, RCC, and IRC Society also participated.

Besides the above state activities, all 22 Districts of Haryana has celebrated a week long activity w.e.f. 18<sup>th</sup> to 24<sup>th</sup> March 2021. The below-listed activities were undertaken:

Orientation workshops at the block level, TB screening camps at old age Homes/Jails/Orphan homes; School events such as debates, quiz, poster making, painting competition on TB etc.; Making of TB Jingles in urban(e-rickshaw) and rural areas etc.



Webinar on World TB Day 24.3.2021 at STDC Haryana- Ms. Deepali Rajput, Miss India Universe Runner up 2019, Radio Jockey Mr. Manav, Dhanjay Chauhan of Saksham and State TB Cell Haryana



Mr. Guy Marks, Executive Director International TB Union during Webinar on World TB Day 24.3.2021 at STDC Haryana

## Jammu Bags Bronze Medal

Team Jammu

Jammu received a Bronze medal for a 20% reduction in TB incidence in district Udhampur. It was adjudged by the Sub National TB Certification process by the Govt of India. The State TB Officer, Dr. Sanjay Turki received the award from Hon'ble Union Health Minister, Dr. Harsh Vardhan and Minister of State for Health, Shri Ashwani Choubey, in a gala event held

in New Delhi held at the Dr. Ambedkar International Centre on the World TB Day, 24<sup>th</sup> March 2021. In the Jammu division TRUNAAT machines for TB testing were inaugurated and a mask selfie campaign was organized to drive the TB Harega Desh Jeetega message.



State TB Officer Jammu, Dr. Sanjay Turki receiving Bronze Medal from Union Health Minister Dr. Harshvardhan and MOS Health Sh. Ashwani Choubey; Programme review by DDC Chairman & Deputy Commissioner; Inauguration of TRUNAAT Machine on the eve of World TB Day 2021

## Painting the Town Blue

Dr. J. Lavanya, District TB Officer, Chennai

Officers along with the public, cured TB patients, NGOs, College students and Professors.

Continued Medical Education (CME) on recent updates in TB was conducted at Kilpauk Medical College on 22<sup>nd</sup> March and Madras Medical College on 25<sup>th</sup> March and with keynote presentations by The Program Officer, NTEP and WHO Consultants, for PG Students, HODs, Associates and Assistant Professors of all departments. "A formation of END TB 2025" was performed by the NTEP staff to reiterate their commitment towards the elimination of TB.



Illumination of iconic Ripon Building of Greater Chennai Corporation with blue colour on 24<sup>th</sup> March 2021.

The Chennai district consists of 36 TB Units. Various awareness programmes on account of World TB Day were organized in the city to increase awareness levels regarding TB. The renowned iconic Ripon Building which houses Greater Chennai Corporation was lit up in blue colour to deliver a message of solidarity to End TB from Tamil Nadu. TB patients received nutritional supplements in the form of dry fruits, pulses, and eggs etc. A large number of people participated in the Signature Campaign for TB free Chennai and this included Zonal Medical Officers, Zonal Health



City Health Officer addressing the NTEP staff of Chennai at Communicable Diseases Hospital, Tondiarpet, Chennai

## Resilient march towards 2025

Dr. Asha Frederick, STO, Tamil Nadu

Tamil Nadu has been one of the front-runners towards ending TB in the country. The Principal Secretary Health for Tamil Nadu, J. Radhakrishnan led the 'Mask for the Masses' campaign at Stanley Medical College along with Director of Medical Education, Deans and State TB Officer Dr. Asha Fredrick. The event was marked by the release of state-specific guidelines for Programmatic Management of Latent TB Infection (PM-LTBI) and Operational guidelines for State-level Difficult to Treat TB Clinic (S-D3TC). Tamil Nadu is the second state in the country to have a state-specific guideline document for LTBI and the first in the country to have started an S-D3TC under the umbrella of National Level D3TC.

The Mask Selfie campaign and TB Oath were taken up with the staff of the various Directorates of Health as well as at Medical colleges across the state. Looking into the thematic area of enhancing the engagement with the community, the State TB Champions Network was instituted by the State Tuberculosis Officer along with partner organization REACH with 30 TB champions from across the state. These champions who have committed to the fight against

TB, will further strengthen the network as well as act as the bond between the community and the program.

District teams under the leadership of the District Collectors and District Tuberculosis Officers brought the fight against TB to the forefront in their respective districts. The Mask Selfie campaign was a major sensitization event in all the districts across the state. Kanyakumari district had 2 week long activities to commemorate World TB day. The DTO's of Dindigul, Madurai & Trichy led their district with activities including TB awareness talks in FM Radio channels, Patient-provider meetings, nutrition support programs, signature campaigns and competitions to spread awareness and strengthen the commitment by people from all-walks-of-life to End TB.

Mask for the Masses Campaign: Health Secretary J. Radhakrishnan at the tuberculosis awareness programme conducted at Stanley Hospital; Inauguration of the Tamil Nadu State TB Champions Network at Chennai; TB Awareness program on Live FM Radio in Dindigul district; Collector of Nagapattinam District administering the World TB Day Oath.



Mask for the Masses Campaign: Health Secretary J. Radhakrishnan at the tuberculosis awareness programme conducted at Stanley Hospital; Inauguration of the Tamil Nadu State TB Champions Network at Chennai; TB Awareness program on Live FM Radio in Dindigul district; Collector of Nagapattinam District administering the World TB Day Oath.

## Affecting Participation at Villages

Dr. Robin Lotha, STO, Nagaland

Nagaland observed World TB Day in all the districts with the theme "The clock is ticking". Mask selfie campaign with taxi drivers, bus drivers, students, general public and traffic personnel was conducted. The TB Champions in Mokokchung, Wokha, Phek, Tuensang, Zunheboto districts gave their testimonies and encouraged the audience to come forward and test sputum if they have symptoms. In Kohima district, an event was held at Viphoma Village. A short sensitization program was conducted at the Council Hall where Dr. Vezokholu Theyo, Chief

Medical Officer pressed for community participation to eliminate TB. She said that TB is an old disease and is completely curable if treated properly on time.

Dr. Asunu Thong, District TB Officer, speaking on the theme urged the audience to do away with the stigma associated with TB as it can affect anyone, but instead encourage and guide those in need.

Dr. Rupert Peseyie, Dy. CMO and District Immunization Officer encouraged the village people to safeguard their health. A cured TB patient from the

village shared her journey followed by short speeches from the Village Chairman and Village Health Chairman. The Program was chaired by Mr. Neiphrelie, PMDT Supervisor. Following the program, a health camp was conducted by the District TB Officer and Dr. Kethosino Thou, MO, DTC where 40 patients were treated and given free medicines. 15 sputum samples

were also collected to be tested for TB.

Activities were also conducted in districts like Kohima, Mokokchung, Longleng, Phek, Wokha, Zunheboto, Mon, Tuensang and Dimapur with Members of the Legislative Assembly, local leaders, CHOs, religious leaders etc.



Awareness on TB with Guonboras; Health Camp at Anganwadi Centre at Dimapur; World TB Day observed at Viphoma Village.

## 16 Module CBNAAT Launched

Team Surat

Mask selfie campaign by front line workers like police, rickshaw drivers, tempo drivers, nurses and NTEP staff was conducted. Senior officials including Commissioner, Dy. Commissioner, Medical Officer of Health, Chairman Health Committee SMC participated in the event. ACSM materials were displayed at all TB units and media contributed to covering the event.

An award ceremony was held by CTO, Dr. K N Sheladia for Top Notifiers Private Doctors and NGO under Guidance of Dy. Commissioner Dr. Ashish

Naikand MOH Dr. Pradeep Umarigar. Total 3 NGOs and 11 Private Practitioners were given Award and felicitated with mementoes.

16 Module CBNAAT Machine at Hirabag DTC were inaugurated by MOH, Dr. Pradeep Umarigar and TB Champion, Riddhi Viradiya.

Award ceremony for TOP Notifiers in 2020 Private Doctors and NGOs Award; Inauguration of 16 Module CBNAAT Machine at Hirabag DTC by TB Champion Riddhi Viradiya.



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