

## Breaking the Barriers

Breaking the Barriers (BTB) is a four-year project, supported by the United States Agency for International Development (USAID), which aims to develop innovative and effective behaviour change operational models that improve coverage of specific populations vulnerable to TB, such as urban poor, tribal communities, migrants, and mining and industrial workers, for increased case notification and successful TB treatment outcomes.

### Government Engagement

#### Former Health Minister Dr Harsh Vardhan appreciates KHPT's community structures initiative



**Dr Harsh Vardhan, former Minister for Health and Family Welfare, at the partners' meet**

At a national level TB Mukh Bharat partners' meet on June 24, Dr Harsh Vardhan, former Minister for Health and Family Welfare, Government of India commended KHPT on its work with community structures. "To train 3395 leaders from the community is the correct approach...if we train even one community leader, we can reach many more with the messaging for behaviour change. I wish KHPT the very best," he said, after a presentation of partners' initiatives. State Minister for Health and Family Welfare, Shri Ashwini Kumar Choubey, also appreciated the work done by community structures.

The meeting highlighted the need for partners to work closely with the government, especially with the Panchayati Raj structures, through meetings, training and advocacy. KHPT, which is working with the Karnataka government to support COVID Task Forces at Gram Panchayat level, plans to leverage this engagement for TB elimination. This would include campaigns on TB Mukh Panchayats, adapting the community structure module into a task force training module and modifying the Patient Support Group module to suit the needs of Village Health Sanitation and Nutrition Committees (VHSNC) and Gram Sabhas.

#### Sharing project progress with the NTEP

The Breaking the Barriers (BTB) team had an hour-long annual progress meeting on May 6 with leadership from the National Tuberculosis Elimination Programme (NTEP), during which updates on the development of behaviour change solutions, the mapping of vulnerable populations, major achievements in community engagement, the qualitative study undertaken by ICMR-National Institute for Research in Tuberculosis, and collaboration with the state NTEP were shared.

Dr. Nishant Kumar, Joint Director (Public Health), NTEP; Ms. Sophia Khumukcham National Consultant-Community Engagement; and Ms. Sumitha Chalil, National Consultant-Community Engagement, WHO NTEP Technical Support Network, attended the event. Dr. Nishant Kumar appreciated the team's progress and committed to sharing KHPT's Community Structures Engagement toolkit and Patient Support Group toolkit with all state NTEP officials, with a foreword from the NTEP. The NTEP team also expressed interest in the findings of the behaviour change solutions study.

#### NTEP launches KHPT's Community Engagement toolkit

##### Sustaining the Response to Tuberculosis at the Grassroots



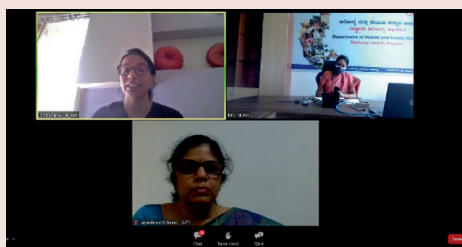
Community Engagement Models  
A Toolkit  
USAID KHPT

The NTEP on May 27 launched the Community Engagement Toolkit developed by KHPT under the USAID-funded Tuberculosis Health Action Learning Initiative (THALI) project with a foreword from Dr. Nishant Kumar, Joint Director, (Public Health), NTEP. In the foreword, the NTEP urged partners across the states to use the toolkit to guide their community engagement activities and institutionalize community engagement and patient support

groups in state and district TB programs. The Overview ([here](#)), Community Structures ([here](#)) and Patient Support Groups ([here](#)) modules are available in Hindi and Kannada as well.

### Leveraging Technology for TB Screening

#### MD NHM Karnataka launches initiative to use artificial intelligence for TB screening



**Dr. Arundhathi Chandrasekhar, MD NHM, Karnataka (top right) launches the STAR initiative**

KHPT, in collaboration with the Karnataka State TB Office (STO), Association of Public Health Technologists (APT), and Qure ai Technologies Pvt. Ltd. will implement 'Screening for TB Using Artificial Intelligence at Remote Radiology Facilities' (STAR), an initiative using Artificial Intelligence (AI) for TB screening using X-Rays in district hospitals. On June 8, Dr. Arundhathi Chandrasekhar, Mission Director (MD), National Health Mission (NHM), Karnataka launched the STAR initiative at a virtual event. The event was also attended by Dr. Ramesh Chandra Reddy, Joint Director, TB, STO; Dr Balu P.S., Professor & Head, Department of Community Medicine, JJM Medical College, Davangere; Dr. Shazia Anjum, NTEP-WHO

Consultant; Dr Reuben Swamickan, Division Chief, Tuberculosis and Infectious Diseases, USAID India; Mr. Prashant Warier, CEO, Qure. ai; Mr. Madhav Joshi, CEO, India Health Fund, and Mr. Mohan HL, CEO, KHPT.

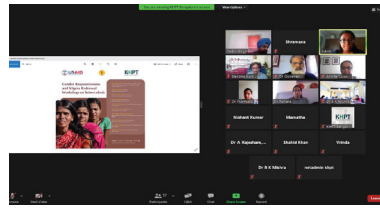
STAR will cover the five districts of Koppal, Bellary, Bagalkot, Belagavi and Chikkaballapur in Karnataka, which including four districts under the BTB project.

At a press briefing on June 28 in Bengaluru, Dr. K Sudhakar, Hon'ble Minister for Health and Medical Education, Karnataka, applauded KHPT's STAR AI initiative. The project received a mention in several English and Kannada newspapers and news websites.



**Dr. K Sudhakar's mention of STAR covered in a Kannada daily**

### KHPT conducts workshop to address gender and stigma barriers in alignment with TB Mukht Bharat and Jan Andolan themes



#### Speakers at the gender responsiveness webinar

KHPT highlighted the Jan Andolan theme of Gender and TB at a virtual workshop titled 'Gender Responsiveness and Stigma Redressal Workshop on Tuberculosis' on June 4 in collaboration with USAID and the NTEP. The workshop enabled a discussion on gender and stigma as barriers to accessing healthcare and completing TB treatment. The speakers at the workshop were expert resource persons with extensive experience in public health, women's issues and rights, TB, and allied fields.

The opening remarks were made by Dr Nishant Kumar, Joint Director (Public Health), NTEP; Ms. Amrita Goswami, Project Management Specialist, USAID, India, and Dr. Parthana B S, Strategic Lead, TB Theme, KHPT. Panelists included, Dr. Oommen George, Team Lead, NTSU-TB ACSM, NTEP; Ms. Blessina Kumar, CEO, Global Coalition of TB Activists; Dr. Dalbir Singh, President, Global Coalition Against TB, and Ms. Mallika Biddappa-Tharakan, Results Delivery Officer and Lead, Knowledge Management, KHPT.

State Tuberculosis Officers (STOs) from the BTB states of Karnataka, Telangana, Assam and Bihar shared their state-specific experiences around the issue of gender and stigma. The STOs present at the workshop included, Dr. N. J. Das, STO, Assam; Dr. B.K. Mishra, STO, Bihar, and Dr. A. Rajesham, STO, Telangana. The Karnataka STO office were represented by Parashuram Patil, DRTB and HIV Coordinator, NTEP, Belagavi. The recording of the session can be accessed [here](#) and the report can be accessed [here](#).

### KHPT hosts Facebook Live event with State TB Office and Department of Women Development and Child Welfare, Telangana



#### Dr Rajesham, STO, Telangana and Ms. Karanam, WDCW Department, Telangana at the Facebook Live event

KHPT organized a Facebook Live event titled 'Making Health Systems Gender Responsive' on June 29, in collaboration with TB Alert India, the State TB Office, Telangana and the Department of Women Development and Child Welfare (WDCW), Government of Telangana. The event featured a conversation between Ms. Swetha Karanam, Child Development Project Officer, WDCW, and Dr. A. Rajesham, State TB Officer, Telangana. Dr Rajesham spoke about the state NTEP's efforts to work with the WDCW Department towards Active Case Finding. He highlighted the importance of the proper implementation of the Employer-

Led Model, through which working women must be allowed by their employers to avail of treatment at their workplace, and receive regular payments. He also pointed out the critical role that women as trainers and educators can play in reaching out to a larger population, and how the state has created TB clubs with women TB champions, ASHAs and teachers who spread information on the TB disease during Gram Sabha meetings. Ms. Karanam spoke about how the state NTEP has been proactive in TB awareness, diagnosis, treatment and counselling at the various shelter homes run by the state government for women in distress, survivors of violence, and trafficking. Ms. Faraha Sheikh, a TB Champion, also spoke of her journey as a TB survivor at the event, encouraging others to get timely testing and treatment and not stigmatize TB patients. The recording can be accessed [here](#).

Following the workshop, KHPT ran an online campaign using voices of adolescent TB survivors and frontline workers, as well as infographics to create traction and sustain the focus on the June theme of TB and Women. The campaign reached **70,000** people, with a reach of **300** for the Facebook Live.

### KHPT facilitates media interaction with Bengaluru Urban District TB Office

KHPT organized a virtual orientation led by Dr. Mahesh Kumar, District TB Officer, Bengaluru Urban, with nine leading regional media dailies on May 24. Dr Kumar discussed TB as a disease, as well as the journey of treatment and care for TB patients. He also underscored the critical role that the media can play in not only reaching out to the general population with information on the disease, but also in mitigating stigma and discrimination associated with TB.

## Community Engagement

### Care and Support Groups go virtual to provide uninterrupted support

In Ballari, Karnataka, Community Coordinator Sunitha J worried that the interruption to Care and Support Groups (CSG) due to the lockdown in the state would affect patients' treatment adherence. On May 5, she organized a meeting over conference call in coordination with the district NTEP, in the presence of the Senior Treatment Supervisor, Mr. Gopal. Eight TB patients attended the first meeting, with Mr. Gopal and the BTB team members responding to critical questions raised by TB patients.

The lockdown in Warangal made it difficult for the Urban Primary Health Centres and the BTB team in Warangal to hold CSG meetings for TB patients. The BTB team decided to use WhatsApp; for each of the District Microscopy Centres, a WhatsApp group was formed, comprised of the TB Nodal supervisor, patients, TB Champions, NTEP staff and BTB team members. Twelve such groups were formed in Warangal Urban to facilitate CSG meetings. These virtual meetings were also attended by Senior Treatment Supervisors and Medical Officers.

### BTB teams train student volunteers from Industrial Training Institutes

The BTB team organized two virtual trainings on May 15 and June 11 in Sangareddy with **25** student volunteers from Industrial Training Institutes (ITIs). BTB is working with industrial workers who, due to occupational conditions, are vulnerable to developing TB. These students were oriented on TB and the BTB project, the vulnerabilities of industrial workers, and the role that they can play in addressing the challenges around TB.



### BTB staff hold 'mini' CSG meetings for tribal TB patients in Telangana

The BTB team held mini CSG meetings for tribal TB patients in Mahabubabad, restricting the number of participants to 10 to better maintain social distancing, and moving the meetings from Primary Health Centres to more accessible sites such as sub-centres, schools, Gram Panchayats and community centres across high risk villages. About **78** patients, along with NTEP staff, ANM and ASHAs, and TB Champions, were reached through **37** such meetings in May.



■ A mini CSG meeting in Mahabubabad

### Telangana BTB team hold peer learning meet for staff

The Telangana BTB team held a peer learning and exchange meet facilitated by the state and district leads on May 17 with **21** team members. The aim was to create a platform from which each team member could learn from the others' experiences. Some of the key matters discussed during the meeting included exploring ways to support community structures in identifying TB symptomatic persons, better coordination with district NTEP and health care systems to facilitate testing of TB and COVID, leveraging virtual platforms such as WhatsApp to dissemination information on TB and COVID, and supporting frontline health workers such as ASHAs to reach out to community structures, as well as larger communities, with information on TB.

### BTB team extends support to NTEP in MDR case management during the pandemic



■ BTB team members distribute treatment to an MDR patient

With a significant number of NTEP staff testing positive for COVID-19, the Warangal district NTEP did not have enough people to reach out to Multi-drug Resistant (MDR) TB patients. The BTB team in Warangal stepped in to help distribute medicines to MDR TB patients at Designated Microscopy Centres; they also undertook home visits to ensure they did not discontinue treatment.

## Community Structures' COVID-19 Initiatives



■ Distribution of kits in Hyderabad by a CS

In **Hyderabad**, the Chaitanya Youth Association distributed face masks and dry ration to **20** orphaned children at Darushafa Rainbow home. The Barkas Youth Welfare Society supported **10000** COVID patients by facilitating oxygen cylinders for them. At Langar Houz TB Unit, Vaibhav Mahila Sangham, distributed cooked food to **200** people, including the homeless and migrant workers. Around **211** Community Structure members facilitated vaccinations for **386** community members.

The Mallige Self-Help Group (SHG) and Annamma SHG in **Bengaluru** came together to cook food and distribute it among the vulnerable in their community. While Mallige SHG members distributed **75** food packets, Annamma SHG distributed food packets to **40** members. Community structure members of Prathibha Stree Shakti Sangha in Belthur, Bengaluru, mobilized Attica Gold Company to support **300** underprivileged families in their area with grocery kits worth Rs. 255,000.

A COVID vaccination camp was organized by the BTB team in collaboration with Laggere Primary Health Centre, Bengaluru, at which **15** visually impaired persons were vaccinated. In addition, through various community level activities, community structures reached out to around **2566** people in Bengaluru for COVID-19 screening, of which **546 (21%)** cases were referred for testing, **369 (68% of the referred)** got tested and **60 (16.3%)** were found to be positive. Another **308** persons were referred for COVID-19 vaccination and **295 (96% of the referred)** were vaccinated.

In **Bagalkot**, community structure members coordinated with BTB staff and a local non-profit organization, 'Manjunath Samsthe', to get a pass for the latter's vehicle to transport TB patients to health facilities for testing and treatment.

In **Belagavi**, the Dr. B. R. Ambedkar Yuvak Mandal and the One Nation Youth Club distributed **45** packets of dry ration to the homeless, as well as TB and HIV positive patients in the slums of Belagavi town.

In **Ballari**, the BTB team disseminated information on COVID-appropriate behaviour, treatment and vaccination with the community during TB awareness sessions and door to door visits. About **297** people were reached out through these efforts. The vaccination of **56** persons, including three TB patients and seven TB survivors was facilitated. In addition, the team supported three COVID surveys being conducted by ASHAs.

In **Koppal**, seven community structures covered **100** households through door to door visits and referred **41** cases for COVID-19 testing, facilitating vaccinations for another **42** persons.

## Joint Effort for Elimination of Tuberculosis (JEET)

KHPT implements the JEET project, funded by the Global Fund to Fight AIDS, Tuberculosis and Malaria, implementing private sector engagement initiatives in three districts of Bengaluru.

### Adapting field activities to the COVID-19 situation

JEET was able to identify **1362** presumptive TB patients and notify an additional **963** patients in the last two months inspite of the challenges posed due to lockdown, lack of access to private facilities and most facilities being converted to COVID hospitals.

JEET staff facilitated the testing of **144** samples for TB. They followed up **2600** patients on treatment in the private sector telephonically and in person; of these **248** patients were followed up through video calls for counselling.

Around **45** doctors were identified as being ready to do video consultation for TB patients and patients were linked up to them where needed.

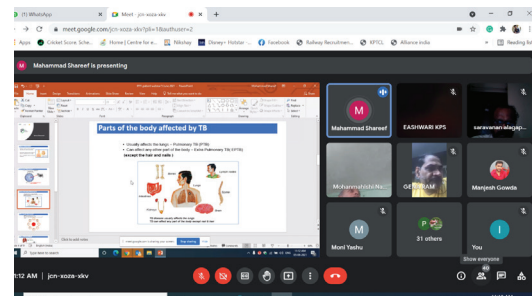
### JEET staff build private providers' capacity through webinars

JEET staff conducted two webinars for healthcare providers; one on June 5 for **34** lab technicians, nurse superintendent and MRD Workers, and another on June 26 for **24** pharmacists. The topics covered included the latest updates on TB and the role of different cadres of healthcare workers in TB elimination.

## Private sector patients supported through 'Ask Your Doubts' virtual sessions

The lockdown situation in Karnataka restricted TB patients' access to healthcare providers. JEET organized two sessions on Google Hangouts for patients entitled 'Ask Your Doubts' on June 5 and 19. The first meeting was coordinated by Dr Anil from the STO office and on June 19 by Dr Suma, a pulmonologist from Excel Care Hospital. They clarified questions on their treatment, COVID and vaccinations. A total of 101 patients benefited from these interactions.

The JEET team also supported two families with members who tested positive for COVID-19 with oxygen cylinders as well as arranging admissions at COVID hospitals and COVID Care Centres. Treatment Coordinators (TCs) of counselled 57 TB patients with COVID-19 enrolled in private hospitals across Bengaluru City, Bengaluru Urban and Bengaluru Rural districts. Hub Agents shared a COVID-TB bidirectional testing brochure (developed by JEET) to nearly 1500 facilities in the three districts.



An 'Ask Your Doubt' session in progress

## TB Careline

The TB Careline is a free outbound counselling service for TB patients, supported by Indegene Lifesystems Private Ltd.

The TB Careline registered **904** new patients in the May-June period. **572** patients were reported to have completed treatment successfully. **46** patients were reported to have died and **9** patients stopped treatment on the advice of their doctor. **2774** patients are currently on active care. **11077** calls were made by the team for follow up, registration of patients and for post-treatment follow up.

### Careline counsellors facilitate conference calls with TB Champions for patients

The Careline counsellors, in the course of their regular duty, identified patients with more side effects and those who were on the verge of leaving treatment due to various reasons. They decided to organize

conference calls over WhatsApp in groups of 5 for these vulnerable patients, featuring a counsellor and a TB Champion who had successfully completed TB treatment. After some initial handholding, they took a step back to allow the TB Champions to conduct the meeting, share their experiences with the TB patients, motivate patients and answer their questions.

**26** conference calls were made by the team involving **49** patients on treatment, and **29** Champions who had completed treatment. **15** video calls were made by the team involving **63** patients and **15** Champions. After discussing their fears with the TB Champions, the patients were motivated to complete treatment. The Careline counsellors are planning more calls with willing patients, and are planning to invite the PPM Coordinator to answer questions related to welfare schemes such as the Nikshay Poshan Yojana.

## Koppal Careline

KHPT has been operating a Careline in Koppal since January 2021 under the District TB Office's NGO PP scheme. This Careline tracks people across the continuum of TB care. This combines the follow up of presumptives until a diagnosis is reached, of patients until treatment is completed, as well as with the different providers who are registered under NTEP as private providers or frontline workers.

### In the six months of the Koppal Careline's operations:

- 833** ASHAs/ Mid-Level Health Providers have been followed up to identify presumptives. Due to COVID-19, calls to ASHAs were suspended in the May-June period.
- 170** private providers have been followed up. **1986** patients on treatment have been cumulatively followed up for counselling.

### In the May-June period:

- 122** cumulative presumptive cases have been followed up and **111** cases referred for X-ray, CBNAAT testing and doctor referrals to identify persistent symptomatics. **12** cases have been identified after this process.
- 7062** COVID patients and persons tested for COVID-19 have been followed up to identify TB presumptives among them. **23** presumptives were identified and tested. **2** patients with comorbidities were identified for follow up.

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## Voices from the field

I would like to thank the B'TB and the NTEP staff for coming to Seethampeta village to conduct these Care and Support Group meetings for the four of us. We spoke about our health, medication, DBT issues, and infection control measures. These meetings are helpful during such a lockdown situation.

**Daravath Dasya**, TB patient,  
Seethampeta village, Garla TU,  
Mahabubabad

The WhatsApp group video call is an innovative idea to conduct CSG meetings during lockdown. When I heard the idea for the first time, I felt very happy because it was so accessible to all the patients. I have participated in seven virtual CSGMs, clarifying everyone's doubts and supporting them in their treatment journey.

**Vijay Kumar**, Senior Treatment  
Supervisor, DTC-Warangal TU,  
Warangal Urban

We invited TB Champions (to our conference calls) to help patients feel fearless. In the beginning, we would tell them to tell the patients about themselves. Now, all we do is nod and agree at meetings, the TB Champions facilitate by themselves!

**Vijayalaxmi Ganti**, Careline  
Counsellor, Dharwad

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