Government of Karnataka launches program to involve Gram Panchayats in public health initiatives with KHPT and USAID support

The Karnataka state departments of Rural Development and Panchayat Raj (RDPR), and Health and Family Welfare have joined in partnership with KHPT, with the support of the United States Agency for International Development (USAID), to launch the Graama Panchayath Arogya Amrutha Abhiyana (GPAAA), a first-of-its-kind initiative in the country to involve Gram Panchayats more proactively in addressing issues of public health.

The GPAAA integrates the COVlD Muktha Graama Panchayath (COVID-free Gram Panchayats) and Ashaya Muktha Graama Panchayath (TB-free Gram Panchayat) campaigns with the aim of leveraging the strengths of Panchayats to make villages TB and COVID-free. As a long-term goal, they will also address vulnerabilities including Non-communicable diseases, Maternal, neonatal and child health issues, elimination of child marriages, and malnutrition, among others.

The GPAAA was launched by Shri K S Eshwarappa, Minister, RDPR at Suvarna Soudha in Belagavi on August 30.

More information on the GPAAA can be accessed here, and a short video on the initiative may be accessed here.

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 the urban poor, tribal communities, migrants, and mining and industrial workers, for increased case notification and successful TB treatment outcomes.

Community Engagement

Market labour sensitized and screened for TB at two yards in Mahabubabad

The BTB Block Coordinator in Mahabubabad conducted a large awareness meeting for all the hamalis (load-carrying labourers) at two market yards in the district on July 29. The District Market Officer and Market Chairman were sensitized on the hamalis' and tribal workers' vulnerability to developing TB. They arranged a meeting of all the hamalis and BTB staff explained the basics of TB and free services available under the National Tuberculosis Elimination Programme (NTEP). The hamalis were also screened for symptoms.

The Market Officers allowed announcements to be made over loudspeaker in two yards and agreed to establish Health Information Centres at both yards.

Community structures mobilized for NTEP mobile testing drive

BTB staff in Mahabubabad had a discussion with district NTEP staff about a decline in case notifications in the previous two months due to fewer functional Designated Microscopy Centres (DMCs) in Mahabubabad. The NTEP staff formed four special testing teams for a mobile testing drive in July, each comprised of 2 lab technicians, a district monitoring person, the Senior Treatment Supervisor, and TB nodal supervisor of the concerned area. The action plan at each DMC was to collect sputum from each presumptive case, which would be tested when the special mobile unit arrived in that area. This special drive was conducted in 18 peripheral health institutions in two weeks. BTB staff leveraged community structures to mobilize people in the area for screening and testing. Over two weeks, 361 presumptive cases were tested and 17 were diagnosed as TB-positive.

Community structures support COVID vaccination and surveys in Karnataka

Members of Rani Abbakka Self Help Group, Kunti Nagar, Belagavi, collectively advocated with the local MLA, Mr. Uday Patil and the Taluk Health Officer of Belagavi, Dr. Shivanand Mastiholi, for the provision of COVID vaccines to residents in their area. As a result, 300 people were vaccinated in a single-day vaccination drive undertaken by the MLA with support from the community structure.

The BTB Ballari district team and the community structures supported a total of 60 COVID surveys undertaken by the Department of Health and Family Welfare in the district in July and August. They supported ASHAs during their household visits for the identification of symptomatic persons. In addition to the survey, the community structures, along with the district team, referred 1699 persons for vaccination, of which 1445 were vaccinated. Additionally, 342 individuals were referred for COVID tests, of whom 276 were tested, with 18 testing positive.

In Bengaluru, community structures, along with the BTB team, facilitate the screening of 3527 people for COVID and TB, of whom 723 were referred for COVID tests. Out of these 723 people, 264 were tested and 25 tested positive for COVID. Further, of the total 3527, 758 were referred for COVID vaccination, of whom 679 were vaccinated.
**Government Engagement**

**BTB central team shares project update and vision with DDG, NTEP**

On August 20, the central BTB team met with Dr. Sudarshan Mandal, Deputy Director-General, Central TB Division (CTD), Ministry of Health and Family Welfare, and his team in Delhi to present an update on the BTB project and its future vision. Dr. Nishant Kumar, Joint Director (Public Health), CTD, and Ms. Sumitha Chalil and Ms. Sophia Khumukcham, Consultants, Community Engagement, WHO NTEP Technical Support Network, CTD, were also present.

Appreciating KHPT’s community engagement model, Dr. Mandal sought KHPT’s support to lead several initiatives at the national level, including facilitation for community engagement, Patient Support Groups and TB forums, both at the state and the regional level. The CTD also sought KHPT’s support in developing a set of criteria to recognize the work of state programs to eliminate TB.

**BTB staff in Telangana train NTEP staff on conducting Care and Support Group meetings**

The BTB team held training programs at Hyderabad and Sangareddy on July 16 and August 17 for a total of 81 persons, including 14 Medical Officers (MOs) and 14 Senior Treatment Supervisors (STTs), with the participation and support of Dr. S.Vijaya Kumar and Dr. G. Rajeswari, the District Tuberculosis Control Officers (DTCOs) of Hyderabad and Sangareddy respectively. The DTCOs suggested that all the MOs and STTs invest time to help patients by conducting Care and Support Group (CSG) meetings.

In Warangal, a district-level training session on conducting CSG meetings was held on July 9 for TB nodal supervisors from 24 Primary Health Centres and NTEP staff. Dr. Mallikarjun, DTCO, explained the importance of psychosocial counselling and peer support to patients and suggested the treatment supervisors not use technical words while counselling a patient. The session concluded with an action plan of participants for conducting CSG meetings. As a result of this training session, 5 new CSGs were formed in Warangal.

**MEPMA supports BTB for community engagement in Warangal Urban**

BTB staff in Telangana conducted an orientation session for community organisers and Town Level Federation resource persons on July 29 in the Warangal Urban office of the Mission for Elimination of Poverty in Municipal Areas (MEPMA), in consultation with MEPMA Project Director Mr. Badru and District Mission Coordinator Ms. Rajitha Rani. The three-hour session was attended by Dr. Mallikarjun, DTCO, who emphasized that TB should be a topic discussed in each meeting of the Self-Help Groups (SHGs). Mr. Badru stated that MEPMA has a reach of 170,000 and that they will ensure maximum awareness. He also said that SHGs will coordinate with BTB and NTEP for meetings, awareness events and screening camps. He shared a circular with all SHGs on coordination with BTB on awareness meetings and screening activities.

**District NTEP and BTB teams in Karnataka trained on community engagement and Care and Support Groups**

The BTB team organized a two-day training from July 28-29 on the Community Engagement approach and the Care and Support Group component for the Ballari district NTEP staff and the project team. The training was attended by 40 representatives of the district NTEP and nine BTB team members from Ballari.

Another such training was held for the district NTEP staff at Sandur block on August 9, with 44 participants. This training also included Medical Officers, Senior Health Assistants, Lady Visit Health Visitors, Mid-level Health Providers (MLHPs), and civil society organizations.

**Assam Community Coordinator sensitizes panchayats on TB and gender-inclusive community development**

Ms. Deepa Tiru, works as a Community Coordinator at Dibrugarh. It was during one of her routine visits for Focus Area Mapping that Deepa met Mr. Manoj Sonowal, the Panchayat President from Dainijan village, who invited her to the Gram Sabha meeting to sensitize participants on TB. This was followed by another invitation to a similar meeting at the Khanikar Panchayat.

Responding to the request, Ms. Tiru facilitated sessions on basic of TB as a disease, its prevention and treatment at two such panchayat meetings on the Citizen Charter at Dainijan (29th July) and Khanikar (30th July) villages respectively. She also sensitized participants on the need to have women’s representation to enable the democratization of health care and holistic development in communities.

Following the session, one of the panchayat members from the nearby Khanikar Tea Estate invited Ms. Tiru to visit their village. There, she interacted with eight TB survivors. They were pleased to hear about her work on sensitizing communities in order to create an enabling environment for TB patients. They assured their full support to BTB initiatives, and Ms. Tiru looks forward to including them in her community engagement activities in collaboration with the state NTEP.
**Telangana and Assam BTB teams hold media workshops**

KHPT, in close collaboration with TB Alert India (TBAI), held a media workshop in Hyderabad on August 21, attended by 35 journalists from the print and electronic media. The aim of the workshop was to orient media representatives about TB and services available through the NTEP. The dialogue focused on how effectively the media can influence community behaviour and practices and bring a transformation in TB elimination efforts. Dr. A. Rajesham, Joint Director and State TB Officer, Telangana, was the Chief Guest for the event. Other panelists from NTEP included Dr. S. Vijay Kumar, Hyderabad; Mr. S. Jitendra, State IEC Officer; and Mr. Vasu Prasad, Technical Officer, NTEP. Dr. Sukriti Chauhan, Advocacy and Program Lead, KHPT; Mr. Sanjeev Joel Kumar, senior journalist; Mr. Vikas Panibatla, CEO, TBAI; and Mr. Ramesh Dasari, Head Programs, TBAI were part of the workshop.

In Assam, the virtual event was organized by the State Tuberculosis Cell, part of the workshop. Panibatla, CEO, TBAI; and Mr. Ramesh Dasari, Head Programs, TBAI were also part of the workshop.

**BTB Patrika newsletter highlighting project initiatives launched across Assam intervention districts**

The ‘BTB Patrika’ is a newsletter created by the BTB team in Assam to showcase activities and innovations undertaken by the team as part of their on-field implementation and provide visibility to BTB efforts in the district. Dr. Madhu Ram Boro, District TB Officer (DTO), Baksa, launched the newsletter in the presence of the state and district NTEP teams on August 3, and allotted a space to display the Patrika within the district NTEP premises.

A similar effort was initiated in Kamrup (Metro) and Dibrugarh, with active participation from Dr. Mridul Bharati Nath, DTO, Kamrup and Dr. Riktom Borgohain, DTO, Dibrugarh, along with the NTEP teams. Encouraged with the BTB Patrika idea, Dr. Nath encouraged the Tobacco Control Programme team to start a similar initiative.

**State teams elicit support of religious leaders to spread awareness on TB**

In Warangal Urban, the team sensitized 6 Hindu religious leaders, 4 Muslim maulanas and 5 Christian pastors on the basics of TB. The BTB team also briefed the religious leaders on their role in influencing the community and motivating them to improve health seeking behaviour. In Hyderabad, 15 religious leaders were oriented on TB. Important IEC material on TB was also placed at identified areas, with the support from the leaders. Similarly, in Mahabubabad, 3 Hindu leaders, 1 Muslim leader and 3 Christian leaders were identified and sensitized. Videos and community interface activities were conducted to ensure reach.

Multiple videos of religious leaders addressing the challenges of TB and stigma around it were filmed, and placed on multiple social media platforms and WhatsApp.

In Bihar, 45 interviews and 3 group meetings were conducted with religious leaders, and these were widely covered by the media.

**Jan Andolan Activities**

*In Assam*, the team had 41 interactions with religious leaders. Mr. Khyanamanda Vikhuk, a monk, has expressed his support to sensitize communities on TB. He also assured the team that his monastery committee in Kamrup Metro will help and support the project in the days to come. The Uzaan Bazar Hanuman Mandir priest in Kamrup assured further sharing of messages to the communities. Ms. Shami Barla, President of CNI Church Women Fellowship was made aware about critical aspects of TB and agreed to disseminate the same to the community.

In *Mahabubabad*, the district NTEP and the BTB team consulted Mr. Raghuvaran, District Panchayat Officer, to bring together PRIs for TB elimination and ensure that the Jan Andolan campaign reaches remote villages in the district. An online orientation session with district level officers and Mandal Panchayat officers was conducted on the role of Sarpanches and the role to be played by Panchayat officers in TB elimination. PRI staff agreed to conduct Nikshay Gram Sabhas in all Gram Panchayats every month. They also agreed to coordinate with BTB and NTEP for local awareness events.

**Panchayati Raj Institutions (PRIs) engaged for TB awareness**

In *Mahabubabad*, the district NTEP and the BTB team consulted Mr. Raghuvaran, District Panchayat Officer, to bring together PRIs for TB elimination and ensure that the Jan Andolan campaign reaches remote villages in the district. An online orientation session with district level officers and Mandal Panchayat officers was conducted on the role of Sarpanches and the role to be played by Panchayat officers in TB elimination. PRI staff agreed to conduct Nikshay Gram Sabhas in all Gram Panchayats every month. They also agreed to coordinate with BTB and NTEP for local awareness events.

*In Sangareddy*, 3 meetings were conducted for members of PRIs about TB and the role of Sarpanches and the role to be played by Panchayat officers in TB elimination. PRI staff agreed to conduct Nikshay Gram Sabhas in all Gram Panchayats every month. They also agreed to coordinate with BTB and NTEP for local awareness events.

*In Dibrugarh*, Assam, information about TB and BTB was shared with Boughpara Panchayat Vice President Ms. Bonita Urgan. She further shared this critical information with the communities to ensure redressal of stigma and discrimination.
In Karnataka, the involvement of Gram Panchayat and Taluk Panchayat members in awareness generation and supporting the TB patients with nutrition supplements was a highlight. Nine programs were conducted with the leadership of PRIs and their elected representatives. This reached more than 500 people, enhanced by the outreach of messages on social media handles.

In Bihar, 65 interviews were conducted with PRI representatives. The state team’s efforts in July were covered by 81 publications.

**TB prevention and lung health activities conducted in states in August**

An interview with Dr BK Mishra, State TB Officer, Bihar was organised on Radio City 91.1 FM with RJ Barkha, a prime time slot that is tuned into regularly. The conversation addressed issues of detection, treatment and prevention in an easy-to-understand manner. Radio City reaches close to 52.5 million Indians.

Community level meetings were organised across the key districts in Assam. Out of 300 community representatives sensitized, 75% were women, sending the message that TB is curable and preventable.

**Joint Effort for Elimination of Tuberculosis (JEET)**

**Identification, notification and follow-up of TB patients**

JEET was able to identify 1985 presumptive TB patients and notify an additional 1095 patients in the July-August period. JEET staff facilitated the testing of 783 samples for TB. They followed up 2600 patients on treatment in the private sector in person and telephonically; a total of 10267 follow ups were done for 3777 patients.

**JEET staff conduct webinars for NGOs and patients**

JEET conducted a webinar on the basics of TB and the role of NGOs in TB elimination on July 16. The discussion was attended by 12 NGOs.

The restrictions due to COVID-19 in Karnataka have hampered TB patients’ access to healthcare providers. JEET staff conducted webinars for patients in collaboration with doctors from different private hospitals in Bengaluru to clarify questions on their treatment, side effects, COVID-19 and vaccinations. A webinar on July 3 with Dr Swapna Bhaskar from St Philomenas Hospital attracted 43 patients; on July 19, 27 patients attended an interaction with Dr Soumya from St John’s Hospital; and on July 31, 20 patients attended the webinar Dr Arun from Victoria Hospital.

**KHPT commences Latent TB Infection (LTBI) project**

KHPT has initiated a new project from July 2021, supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), to provide TB Preventive Therapy in 6 districts to household contacts of pulmonary TB patients. The three-year LTBI initiative will be implemented in BBMP, Bengaluru Urban, Bengaluru Rural, Belagavi, Bagalkot and Vijayapura. FIND is the Primary Recipient of the GFATM grant.

**TB Careline**

The TB Careline registered 580 new patients in the July-August period. 739 patients were reported to have completed treatment successfully. 39 patients were reported to have died and 16 patients stopped treatment on the advice of their doctor. 2542 patients are currently on active care. 11725 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 five 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. 28 conference calls were made by the team involving 93 patients on treatment, and 24 Champions who had completed treatment. 5 WhatsApp audio calls were made by the team involving 17 patients and 5 Champions. After discussing their fears with the TB Champions, the patients were motivated to complete treatment.

3,200 calls were made by the team for active case finding of TB amongst COVID patients in Bagalkot

**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 July-August period:

- 1045 ASHAS/MLHPs were followed up to identify presumptives.
- 103 patients on treatment were counselled for adherence.
- 7313 presumptive cases downloaded from Nikshay and were called for follow-up. Of them, 50 were referred and tested for TB and 6 patients were diagnosed with TB.

For more information on the above activities, please contact Vrinda Manocha, Manager-Knowledge Codification and Analysis, at vrinda.manocha@khpt.org