



Annual Report 2019





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TBAI acknowledges the support of the following:

- » Governments of Andhra Pradesh, Delhi, Haryana, and Telangana
- » NTEP
- » District units of NTEP
- » STOs of Andhra Pradesh, Delhi, Haryana and Telangana
- » TB Alert - UK

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- » Stop TB Partnership

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Abbreviations used

ACF	Active Case Finding
CBNAAT	Cartridge Based Nucleic Acid Amplification Test
CCM	Country Coordinating Mechanism
CHW	Community Health Worker
CS	Community Structure
CSR	Civil Society Representative
DR-TB	Drug Resistant TB
DS-TB	Drug Sensitive TB
HIC	Health Information Centre
IEC	Information, Education, Communication
KOL	Key Opinion Leaders
NTEP	National TB Elimination Programme
TBAI	TB Alert India
RHCP	Rural Health Care Provider
RNTCP	Revised National Tuberculosis Control Programme
UK	United Kingdom
TB	Tuberculosis

Note to readers

TB Alert India (TBAI) is pleased to share the Annual Report of 2019 with you. This Annual Report is an account (narrative supported by data) of the difference that TBAI has made in the reporting year to people affected or infected by TB through a process of continuous evolution and innovation.

We are living in a time when there is international and national commitment towards eliminating TB. India has in fact committed to ending TB by 2025, while the rest of the world has indicated 2030 thereby demonstrating very strong levels of commitment on the part of Government of India. In tune with this commitment TBAI too has been sensitive and responsive, and designed programmes that can enable fulfilment of India's commitment to end TB.

The eco-system

Revised National TB Control Programme (RNTCP) has now become the National TB Elimination Programme (NTEP) which is inclusive and rights-based and supports all the needs of TB patients.

The TB eco-system is now geared up to offer a patient-centred Continuum of Care approach. This approach calls for inclusion and involvement of all stakeholders, beginning with the patient, his/her caregivers, healthcare providers and indeed the community at large. TBAI, along with support from donors and the National TB Elimination Programme (NTEP) has enabled this.

TBAI works closely with local state governments in several states of India on prevention, awareness, diagnosis, referrals and treatment support. Working to a clear strategy that is informed by the three core pillars of the End TB Strategy of the WHO, TBAI has adopted an integrated approach that cross-cuts the thematic areas.

In the reporting year, TBAI's sharp focus on the stakeholder involvement, inclusion of private providers in the care continuum, strong patient involvement in and support for TB care and treatment has yielded results and the impact data indicates.

None of this would have been possible without the patronage of the government and TBAI thanks the Governments of Telangana, Andhra Pradesh, and Haryana for the support and encouragement accorded to us. We also extend thanks to all our donors, and communities and associates for their unstinting support and trust in us. We will continue to engage with you all and we urge you to follow our progress and continue to encourage us. Please do join hands with us in our efforts to eliminate TB.

Best regards,

Board of Trustees and Staff of TB Alert India.

Read on for a more complete narration of the year's activities.

Introduction

In the reporting year, TBAI sharpened focus on the various activities that constitute the **Continuum of Care approach** by holistically designing activities that included measures for prevention, early diagnosis, and complete cure and reduced TB incidence in the long run. Additionally TBAI engaged a wide range of stakeholders in order to spread awareness on the preventable and curable nature of TB in order address stigma and encourage the people with TB symptoms (PTS) to seek treatment on time.



About TB Alert

TB Alert was registered in the United Kingdom (UK) in late 1998 and launched at the Houses of Parliament on World TB Day (24th March) 1999. The charity was set up by people who felt that with its long tradition of TB work, there should be a greater response in Britain to the resurgent threat of tuberculosis, which was declared a global emergency by the World Health Organization in 1993. Active trustees of include several leading UK-based TB experts. Currently, TB Alert is present in the UK, India, Malawi, Zambia, Zimbabwe and Southern Africa.



About TB Alert India (TBAI)

TB Alert India (TBAI), the Indian arm of TB Alert works to the vision of a 'TB Free India'. It aims to prevent morbidity and mortality associated with TB by providing holistic TB care i.e. addressing psycho-social and economic aspects which affect uptake of TB testing and treatment. Transparency, quality consciousness, responsiveness and integrity are the key values and guiding principles of TBAI.

TBAI has a clear strategic approach to:

- 🌀 Increase access to information about TB, TB testing and TB treatment;
- 🌀 Work with service providers, disease affected people and communities;

- ☞ Build the capacities of local communities and other stakeholders to tackle TB;
- ☞ Integrate TB management approaches with that of other infections such as Diabetes and HIV/TB and into other social development themes;
- ☞ Address social determinants of TB i.e. poverty, malnourishment and economic support.

TBAI is aided in its work by a diverse funding base that includes multilateral, bilateral, corporate and other donors and a strong team of frontline workers. TBAI is working at present in Telangana, Andhra Pradesh and Delhi and Haryana in India. TBAI has served as the Civil Society Representative (CSR) for TB on India's Country Coordination Mechanism (CCM) from 2012 to 2015.

Activities

TBAI focussed its interventions during the reporting year on the following core areas:

- ☞ Identification, followed by referral, testing and diagnosis;
- ☞ Treatment adherence and outcomes;
- ☞ Stakeholder engagement - private providers, informal healthcare providers, government functionaries, general communities;
- ☞ Awareness generation;
- ☞ Linkages to social support services;
- ☞ Capacity building.

Each of the activities was in line with the areas as listed above. The premise was that as TB is preventable and curable, every activity must be directed towards either promoting prevention, or effective and complete cure. It was also important to ensure that the patient and his/her family was informed, aware and actively cooperated with the healthcare providers, as well as got the best and comprehensive support in the form of medication, nutrition and counselling.



TBAI adopted an inclusive approach by enlisting support from all stakeholders however close or distant they might be from the patient. This was made possible through specially designed projects which were integrated with strategic activities that addressed all the critical elements of the TB continuum of care. It also included the first point of care, which varied from the designated government facilities, private healthcare providers, or informal healthcare providers. TBAI worked with all these stakeholders to provide vital bridge support services, which could connect the patient more closely to the providers and enable completion of treatment. This also helped in notification and by working directly with communities, TBAI enabled reduction of stigma and spreading of accurate awareness on TB.

Outputs and outcomes

While the outputs are clearly visible from the numbers, the outcomes are in the form of greater awareness in the communities and healthcare providers, greater linkages between the government healthcare system and the private providers, and empowered patients who are not advocates and champions in their own right and are continuing the fight against TB.



CS volunteer taking TB awareness class to school children

Key areas of focus

Create
awareness on
symptoms,
diagnosis,
treatment and
other aspects of
TB

Promote
early detection
and treatment
adherence

Engage with
key stakeholders
who directly
or indirectly
influence the
response to TB

Pursue
operational
research to
design,
implement
and scale up
innovative
models of TB
care & support



Build
capacities of all
stakeholders

Address
social
determinants
of TB i.e.
malnutrition,
poverty and
economic support

Integrate
TB management
approaches with
that of other
conditions such as
Diabetes and HIV/
TB

The numbers, the impact



AWARENESS GENERATION

254746

People made aware of TB through *Kalajathas*, IEC shows, interpersonal communications and other events



STAKEHOLDER ENGAGEMENT

7632

STAKEHOLDERS
ENGAGED

Key Opinion Leaders (KOL)
Community Structures (CSs)
Private healthcare facilities
Formal & Informal Private Providers
TB Advocates



CAPACITY BUILDING

5753

People trained on a range of themes related to TB care and prevention

**TB
a!ert
INDIA**

for a future without tuberculosis





IDENTIFICATION/ REFERRALS AND NOTIFICATIONS

Referred	19104
Tested	18466
Diagnosed	2224
Notified	31775
DS-TB	31283
DR-TB	492
People with TB notified to NTEP	33999



CARE AND SUPPORT

40,801 people with TB received Psychosocial counselling
20,833 TB patients on treatment received Treatment adherence counselling and support
359 TB patients receive nutritional support



PARTNERSHIPS WITH NTEP & OTHERS

Active Case Finding (ACF) supported	564
World TB day programmes	32
Trainings and Meetings	60



INITIATIVES AT THE 50TH UNION LUNG CONFERENCE, HYDERABAD



Panel Discussion on Civil Society Role in Success of RNTCP in India



Poster Presentation



Ms Claire Foriani, UK Film & TV Actress, Ambassador to 50th Union Lung Conference visits TB Patients

d Events

OTHER IMPORTANT EVENTS



Participants in 'All Hands On Deck in the Fight against TB'



Visit by Stop TB team



Evaluation team of THALI meets the TBAI team



THALI team in Seva Mela rally

Stakeholder voices

“CHW counselling services were helpful for me as I recovered more easily because of the advice and support I got. I learnt I had to eat regularly and even after I have completed my treatment I have support available to me. I know the importance of nutrition and regular treatment.” – **Yasmeen Sulthan**, *Malakpet TU*.

“THALI services are very important to high-risk patients because they have no proper support and knowledge on treatment. Counselling from community health workers (CHW) and follow-ups helped me to complete my treatment. I am in touch with the CHW even after completion of my treatment for any small health problems. It is a relief.” - **Pullamma (50)**, *Malakpet TU*.

Jungapalli Pushpalatha (28) lives with her two children aged 6 and 7, in Karimnagar. She works as a sweeper in a private school hostel. Pushpalatha visited Thirupathi, the Rural Healthcare Provider (RHCP) for help as she was suffering from a persistent fever and cough for over a month. Thirupathi screened her and suggested a TB test. Fearing stigma she avoided going to the facility and bought herself some medication from the local pharmacy, which gave her symptomatic relief. The FC tracked her through the mobile app, reached out to Pushpalatha and after counselling, convinced her to get tested. Pushpalatha was diagnosed clinically (chest X-ray) and confirmed biologically (CBNAAT) the next day. Giving due consideration to her weakened condition, the FC and provider did home visits and found she was skipping doses owing to weakness and lack of nutrition. The FC mobilized resources from local donors for extra nutrition for her and this helped Pushpalatha complete her treatment and resume normal life.

K. Nageshwar Rao, *Kothapet TU, Vijayawada*



“I was scared and my family was depressed after I was diagnosed with TB and I hesitated to attend patient support group (PSG) meetings. After counselling by THALI staff, I attended a meeting in Kothapet TU. As I listened to the conversations between patients and the Senior Treatment Supervisor, Medical Officer and THALI staff confidence came into me because I knew that if I wanted support it would be available to me as well. These meetings encouraged and guided me to complete the treatment successfully and I also started sharing my thoughts. Later, I was asked by TB Alert India and the Government TB programme staff to participate in PSG meetings and build the morale of other TB patients by sharing my experiences. I visited patient’s houses and counselled them and their family members on stigma, treatment adherence and nutrition. During the lockdown period because of COVID 19, I served TB medication to two patients and followed up through treatment adherence and they have completed their treatment successfully.”

Nagamani, *Bhagat Singh Nagar, Vijayawada*



“Our association consists of 400 registered masons. Azmath, the community health worker from THALI met me and explained the THALI programme. We were hesitant at first thinking it was a waste of time, but the THALI team participates in monthly meeting to educate us about TB. We allowed them to attend and understood that since our workers consume alcohol and tobacco, and may suffer from malnutrition, we are all at risk of getting TB and spreading it to other members.”

We decided to work with TB Alert India to screen our members and work towards their recovery if they were found to have TB. Because many of them suffered from regular fever and cough, we encouraged THALI to educate them on the symptoms of TB and the importance of testing. We opened a Health Information Centre (HIC) in our premises. We were given a weighing machine, posters on TB, and referral forms to note down the details of persons with symptoms.

I also counselled a few TB patients in the association and in my area about quitting alcohol, eating proper food, maintaining hygiene and taking medicines regularly. We have referred 48 persons with symptoms, 9 of whom were diagnosed with TB and who have now successfully completed treatment. The President of the association and I were felicitated by district TB officials. I was also invited to share my views at the World Lung Health Conference held in Hyderabad in 2019.”

Sri Ramula Suresh, *Thapi Mesthri Association, Warangal Urban District, Telangana*



SOCIAL SUPPORT



TESTING





TREATMENT SUPPORT



STAKEHOLDERS ENGAGEMENT





CAPACITY BUILDING





CS meeting

Kalajatha

AWARENESS





TB Alert India

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