

## Baseline/needs Assessment to strategize TB activities in rural India

**About Project:** Comprehensive, Integrated Person Centric Approaches for TB Elimination in Rural India: The project's objective is to strengthen Tuberculosis (TB) elimination efforts in three highly affected states of Bihar, Telangana and Uttar Pradesh. It aims to establish a sustainable model by engaging and empowering local panchayat raj institution bodies and other allied stakeholders. Project builds the capacities of these institutions who will play a pivotal role in educating communicates, fostering innovations and implementing comprehensive, person-centric approaches to significantly enhance rural TB response. The project is funded by a corporate agency, for a period of approximately 30 months, beginning from January 2024. Through strategic partnership and collaborative activities with NTEP, project seeks to address the unique challenges of delay in TB testing, treatment loss to follow-up, and stigma around TB. Project support and facilitate around 300 panchayats to claim TB free panchayat certification as per the criteria set by NTEP.

### **Need for Baseline/Needs assessment**

**Geography:** Baseline/needs assessment to undertake in rural villages of Bihar, Telangana and Uttar Pradesh as part of project "Comprehensive and Integrated Person Centric Approaches for TB Elimination in Rural India".

**Purpose:** Conducting a baseline/needs assessment of rural villages in health aspects particularly in TB is crucial for understanding the current health awareness and status of health seeking behaviour among rural communities, identifying key health challenges for better planning and to execute interventions. This also helps in understanding the health access issues and community level barriers, and stakeholders' insights for strategy development and this plays a pivotal role in working towards TB free villages.

The core aspects the baseline/needs assessment would be highlighting are but not limited to:

- Illustrating the village profiling covering demographic details, and details of PRI bodies/institutions with key office bearers and their functions.
- Health knowledge with specific reference to Tuberculosis, and access to health care, AND their preferred mode of IEC for health knowledge increase among rural communities.
- Preferred provider details for primary care and subsequently secondary and tertiary care health facilities. Similarly, traditional and alternative medical practices among the rural villages.
- Understanding on Panchayat Development Plan among PRI members and villagers, and both costed non-costed activities of health in specific.
- Most common and frequently hitting diseases among villagers and details of front-line health staff.
- Acquittance with social media platforms, the prominent mode of communication platforms most heard among villagers
- WASH (Water -Sanitation and Hygiene) practices among villagers

- With NTEP/Front line health staff- questions related on probability of using mobile-health for treatment follow-up (such as connect for life, whatsapp etc) can be sought through the assessment.
- Possibility of integrating TB into village level programs (both health and non-health programs) is asked through assessment.
- The key stakeholders and representatives interviewed can be PRI officials and bodies, School development and management committee members, school teachers' women self-help group members, staff at village health sanitation and nutrition committees (VHSNCs), other key opinion leaders such as village heads, ward members etc.,

**Compartments of baseline/needs assessment:** The above-mentioned components would be further thought through while adding additional requirements while compartmentalizing them into 1) Health Infrastructure assessment and barriers in health care 2) Demographic - socioeconomic data and culture sensitivity 3) Health knowledge and practices 4) Village level non-health infrastructure 5) Health needs and priorities and 6) Stakeholder mapping (Resource allocation/community resources and capacities).

**Process and key deliverables:** The identified agency/organization should deliver the following results as per agreed terms and timelines.

- Developing a comprehensive questionnaire/tool while not compromising the above mentioned 6 components for undertaking baseline. However, the agency wish to add additional components as needed based on their experience.
- Undertake Key In-depth Interviews (KII) with PRI members, community level stakeholders/Key Opinion Leaders, Front line health staff, School teachers, Village Development Officers/Village Assistants etc., and can also have Focus Group Discussions (FGDs) as needed.
- Data feeding, validations and data analysis and should submit the baseline study report to TB Alert India.
- The agency should part of strategy/activity development of the project while sharing the first-hand experience from baseline study.

**Expected result:** By addressing these basic requirements, a baseline assessment can provide a fair understanding of the perspectives of rural villagers on health aspects, laying the groundwork for targeted and culturally sensitive health interventions. These results will be used to develop key interventions to augment TB elimination efforts.

**Proposed district and states for baseline study:** TBAI wanted the agency to conduct the baseline assessment across 2 selected districts in UP, 3-4 in Bihar and 2 in Telangana.

**Sample size and estimated timelines:** The agency should propose the required sampling and methodology, and timelines for delivering the baseline assessment report.

**Required skill set:** The individual candidates with relevant experience in taking up operational research, surveys and assessments are encouraged to apply. Kindly submit separately for each of the state indicating your preferred state as each of the state has its unique requirements with different social cultural backgrounds.

**Estimated cost:** Please indicate an estimated cost of the work for each of the state separately.

*Please submit individual CVs to [procurement@tbalertindia.org.in](mailto:procurement@tbalertindia.org.in) on or before 10<sup>th</sup> of March 2024, and subsequently send an email to [rameshdasari@tbalertindia.org](mailto:rameshdasari@tbalertindia.org) informing you have applied in response to the advertisement published in our website.*

**Other notes:** This is on immediate requirement for a period of 1 to 2 months depending up on the sampling size and the methodology we agree.