

Regional Consultative Meeting- West Region

Partnership for TB Care and Control

11-12 August, 2017

Indore, Madhya Pradesh

Report

Background and objectives:

The "Partnership for TB Care and Control (PTCC) brings together civil society across the country on a common platform to support and strengthen India's national TB control efforts. It seeks to harness the strengths and expertise of partners in various technical and implementation areas, and to empower affected communities, in TB care and control. It consists of technical agencies, non-governmental organizations, community-based organizations, affected communities, the corporate sector, professional bodies, media and academia. Developing a common understanding and agreement among the key stakeholders for involving partners in TB

About the Meeting:

Regional Consultative Meeting of Partner, West region organized on 11 to 12 August 2017 at Hotel Treebo Daksh Residency, Indore, Madhya Pradesh. CSOs from various States of west region Maharashtra, Madhya Pradesh, Rajasthan and Gujarat were participated in the consultative meeting.

Outcome:

- Issues related to civil society engagement identified and solutions to challenges explored with action that civil society can take
- Develop a work plan for increased participation of civil societies in RNTCP at the state and district level.
- New partners joining the Partnership increased
- Increasing communication between partners and the Secretariat
- Gaining ownership of the Partners of the Partnership

Organization:

The event was organized by PTCC. The partners and organizations working in the states of Maharashtra, Madhya Pradesh, Rajasthan and Gujarat were participated. Total 35 participants participated in the consultative meeting.

Proceedings:

11th August:

Inaugural session:

Mr. Mohanadoss Paul, Secretary PTCC welcomed the participants. He presented the welcome address and the objective of these regional consultations and achievements from such meetings. He also highlighted the increase in members in PTCC and encouraged the participants for inclusion in partnership and contributing for the noble cause. This was followed by a round of self introduction. Guest attended the program was Dr. Vijay. Chajlani, District TB Officer, Indore. He began with a brief back ground of Indore and its health infrastructure. Dr. Chajlani shared about his experiences working in the health scenario of Indore and the achievements of RNTCP. He also congratulated the CSOs for their active contribution in TB eradication. He also emphasized on the goal of India to eliminate TB by 2025.

After the inaugural session Ms. Sanchita shared the participants, the folder containing the agenda, local travel claim, newsletter editions and the feedback forms. She then proceeded to give an introduction to the Partnership, structure, objectives, its progress and future plans. She shared about various activities of PTCC and its achievement and briefed the participants about the training of TB Advocates and how the TB Advocates are contributing towards TB elimination in their respective areas. She shared information about partners of PTCC from different states and their role as PTCC partner. She encouraged the CSOs to become partner of PTCC and contributing towards TB eradication.

Basic on Tuberculosis and Recent development in TB care and control:

The session was delivered by Dr. Salil Bhargav. He shared the details of recent development in Tuberculosis control and various programs of RNTCP. He explained about the TB scenario in India about basic of TB, DOTS provision, roll out of daily regimen, MDR TB, and prevention getting drug resistance TB. He also discussed about the role of CSOs in addressing the challenges and gaps in the State and how collaborately CSOs can supplement the RNTCP programme and also discussed on engaging private practitioners. He motivated the CSOs on mobilizing and engaging private practitioners in TB control program. Dr. Bhargava shared about the initiative of Lions and how it working for TB services and how CSOs can connect with them.

Presentation by CSOs on their Organization activity and experience sharing & State wise consultations:

After the tea break the session on experience sharing and presentation on CSOs activities began. In this session participants presented about their organisation details and their activities on health and TB control. Participants were from different organisations of States of Maharashtra, Madhya Pradesh, Rajasthan and Gujarat. They shared about activities of their organisation and what they are doing at field level for TB control. They also presented various success stories of their TB control intervention program as, mobilising media, highlighting the District level issues by print media, nutrition support towards TB patients and counselling support. The session continued till post lunch session. Various activities highlighted by participants on TB control are:

CETI: Indore, Madhya Pradesh

Ms. Sangeeta from CETI presented about work of CETI in TB control. The vision of CETI is to make Indore first TB free District. She shared about CETI's working process and structure. She shared about the activity and achievement of the organisation.

Activity:

- CETI providing technical support for TB control in 13 states of India to Rotary India National TB Control Program.
- Lions have chosen TB Control Project in Lion District G – 1, 323, by this from July 2017 CETI is providing technical support in 38 revenue districts in Madhya Pradesh. Soon Lions international is going to start TB control work in all over India.
- Increase TB Notifications by Doctors.
- Develop TB Hot Line with Rotary Club.
- Increase School Awareness for TB
- Advance TB awareness and patient advocacy in slums
- Share Stories with Media on Website about TB
- Quality improvement programme for RNTCP's Tuberculosis Units
- Increase participation of NGOs and other Association.
- Active case finding – Mission LKDB (Lambi Khasi Dhima Bukhar)

GRAVIS: Jodhpur, Rajasthan

Mr. Rahul Sharma presented about the profile and structure of GRAVIS, Jodhpur, Rajasthan. He presented about the major activities of GRAVIS, its activities on TB and accomplishments.

Activities: Activities of GRAVIS is on Water and food security, Primary Education, Women Empowerment, Mineworker welfare and Community Health. Under community health Community eye care, Prevention and control of pneumoconiosis, Geriatric health, TB control Reproductive and Child health and HIV/AIDS prevention and control. He also briefed about the sandstone mining around Jodhpur. Jodhpur is a mining area and people are prone to silicosis. Its activities on Tuberculosis are: awareness generation camps, prevention against occupation diseases, Symptomatic Screening & Referral, Gram Kalyan Samiti (GKS), Community Meeting, Strategic Dialogue with Government, Observation of World TB Day. Changes happened because of their effort are: A large population is covered through multiple activities, TB – HIV testing together through rapid HIV testing program, Pneumoconiosis prevention board established for welfare of miners, Occupational health is on priority and compensation to victims and two ways dialogues with community, government and other stakeholders.

ARAVALI: Jaipur, Rajasthan

Mr. Varun Sharma presented about ARAVALI. ARAVALI is working in partners in all 19 mining districts. Its activities on Tuberculosis are working with district TB officer to enhance the outreach of the program in 8 mining districts. Working closely with RSHRC, Nutritional support program, Entitlement support program and Regular update state health department about misdiagnosis. Advocating for TB services they are doing Convergence with different departmental scheme for nutritional security of TB/ tubero-silicosis patients, Sensitizing all relevant stakeholders to promote regular health checkups in natural stone industry, Work with all supply-chain actors and Establishing child labour Free Zones in Natural stone processing area. Changes that have happened due to intervention are: Aware community about the difference between TB and silicosis, Reduce possibility of misdiagnosis, Strengthening of x-ray facilities at district hospital, Increase availability of medicines for symptomatic treatment under free scheme, over 15000 families are covered under livelihood programs and over 18000 families are benefited with range of 1.2 to 2.3 Lac Rs under AKAK (asset building).

Prahar Samajik Sansthan, Pauni, Maharashtra:

Mr. Sahid Ali presented about the Prahar its profile and about various activities. Prahar Samajik Sansthan organising various activities in Bhandara district of Maharashtra. Various activities of Prahar are sports activities, Awareness activity, Involving Programme of Nehru Yuva Kendra, De-addiction, Axshya Project (On Tuberculosis), organizing Blood Donation Camps and Counseling Center.

Activities on Tuberculosis:

Axshya Samvad (active case finding/door to door visit), Symptomatic Identification, Sputum Collection and Transportation, Patients Counseling, Link With Sanjay Gandhi Niradhar Yojana, Nutrition Support, Med-Media Activities, Sensitization to TB patients on Role and Responsibility as per Patients Charter and Rally on Special occasion. The organisation is also advocating for TB patients enrollment in Sanjay Gandhi Niradhar Yojana. They have enrolled 7 TB patients under this scheme. He also shared about various success stories of Prahar bringing TB patients in to DOTS regimen and providing nutrition support to needy TB patients.

Shriram Foundation, Dhule, Maharashtra:

Mr. Valmik Sonewale presented about the organisation details. It is working on health, environment, agriculture, vocational training and literacy programme. Organisation is implementing project Axshya in Dhule district and organizing activities like Axshya Samwad, sensitization meetings, sputum collection and transportation, referrals and rural health care practitioners in TB control also advocating for the benefit of TB patients. It conducted meeting with Depo Manager – MHRST for travel concession for TB Patients and advocacy with Chairman of Women & Child Welfare Department for stitching machine for Women TB Patient. It also doing advocacy with NGOs for providing school stationery materials for children of TB patients.

Daang Vikas Sansthan, Karauli, Rajasthan:

Mr. Vikas presented about Daang Vikas Sansthan. The organisation is working in 500 villages of Karauli, Dausa, Bharatpur and Dholpur of Rajasthan. Support in detection of TB in remote area of Karauli, Bharatpur, Dausa and Dholpur districts of Rajasthan.

Activities on Tuberculosis:

Working with district TB officer to enhance the outreach of the program, conducting health Camps, Nutritional support program, "Khanik Prash" to address respiratory illness and Awareness generation among stone workers. Lambi Khasi Dhima.

HEDCON, Rajasthan:

Mr. Mahitosh presented about HEDCON and its activities. He gave a brief overview of HEDCON, its work, mining in Rajasthan and facts and prevention of Silicosis in Rajasthan.

Activities on Tuberculosis:

Awareness Generation sessions.

Outreach medical / screening camps

Trainings of VHWs/ Peer educators/ community organizer Facilitation on diagnosis

Discussion meetings & workshops with government and other stakeholders

Facilitation on Compensation

Distribution of Mask

Achievement so far:

- Formation of 4 strong mineworkers unions, total membership 27000
- Instrumental in the setting up of the first ever Pneumoconiosis Control Board (PCB) in Rajasthan
- Formation of Pneumoconiosis Board at Regional and district level
- Regular check up and identification of silicosis
- Compensation for silicosis patients
- Mine owners have now started displaying information about mine workers working in the mine
- The health services organized by partners have benefited over 100,000 mineworkers till date.
- 10-15% of the mines have now at least one person who knows about first aid
- Mass-scale awareness generation and advocacy

Group Work:

State wise Consultations:

The Session was state group deliberations on challenges in States, prioritizing the issues, challenges and solutions by advocacy and plan of action that can be done through collaborative action with civil society. The groups were

given 2 hours to deliberate on challenges and solutions and plan of action after which each state made a presentation of their deliberations. The presentations were presented in day 2.

The day 1 session ended with a group photograph.

Day 2:

Day 2 began with Mr. Varun Sharma giving a recap of Day 1 and the important discussions that had taken place during the day 1.

The presentations prepared on day 1 for deliberation were as follows:

Group Discussion and State presentation:

Rajasthan:

Objectives:

1. To increase coordination among media and RNTCP through outreach activities.

Activities

- Mapping of electronic, print media and local folk media and create a data bank
- Sensitization workshop for media persons on TB
- Regular sharing of case studies on TB with media

Timeframe: 6months to 12 months

2. To establish linkages and interaction among stakeholders like private practiced medical doctors, PRI members, research institutions, health department and TBAs / RHCPs to eradicate TB in Rajasthan.

Activities

- Mapping of stakeholders
- Development of IEC materials to sensitize stakeholders
- Stakeholder sensitization to promote regular treatment on TB through DOTS
- Sharing best practices with stakeholders
- Development of State forum on TB eradication in Rajasthan
- Advocacy with government to update website on regular basis so that data could be used by stakeholders

Timeframe: 12 months to 18 months

3. Advocacy for nutritive support and right to food for TB patients of Rajasthan.

Activities

- Advocacy with government to provide nutritive support (cattle / commodities)
- Nutrition awareness camps among community

- Patients linked with PDS (nutritive supplements should be added)
- Regular follow-up of by patients and report to forums

Timeframe: 12 months to 18 months

4. To identify and train TB volunteers in high risk areas of Rajasthan.

Activities

- Identification of grass-root level TB volunteers by partners
- Capacity building of TB volunteers
- Regular follow-up of volunteers by partners and report to forums

Timeframe: 6 months

Maharashtra:

Objective	Activity	Outcome
Inclusion of partners in Maharashtra	<ul style="list-style-type: none"> ➤ Advocacy with other PTCC partners for active contribution in PTCC through personal visit emails etc. ➤ Inclusion of other NGOs/CSOs working on TB and other health issues. ➤ Include other networks 	<ul style="list-style-type: none"> ➤ Strong network of partnership in State of Maharashtra ➤ Every patient will get complete treatment. ➤ Proper follow up on treatment with patients getting treatment from private. ➤ Reduce stigma and discrimination.
Linking patients in RNTCP , involving private practitioners	<ul style="list-style-type: none"> ➤ Meeting with private practitioners, giving membership in TB Forums. ➤ Felicitate them on Doctor's day for encouraging them to involve in TB control. 	
Reduce Drop out		

Madhya Pradesh: Team presented about the action plan of CSOs in the State.

Partners of Madhya Pradesh presented their action plan. They have shared about their challenges in State and advocacy intervention. They shared about the plan for Indore, Bhopal and Jabalpur area to influence media and political leaders as part of advocacy intervention.

Goal:

A TB Free State Madhya Pradesh

Issue:

Nutritional support for TB patients

IEC- Information education and communication

Objective:

1. Provision in policy to provide ration support for TB patients.
2. Involvement of media, political leaders, religious leaders, social groups, professional groups and corporate
3. Availability of drugs in case of shortage.

Activity 1:

1. Fact sheet on TB.
2. Collection of consents letter from politicians.
3. Submission of consents letters to health minister and CM and concerned departments.
4. Coordination, feedback and follow up.

Activity 2:

1. One to one interaction with reporter and editors
2. Fact sheet as above.
3. Involvement of CSR advocacy meetings

Activity 3:

1. Advocacy with District and State quarterly basis for availability of anti TB drugs.

Outcome:

1. Number of consent letter collected
2. Presentation of fact sheet and submission of consent letter to Health minister, Chief Minister and concern departments.
3. Number of articles and news published on TB.
4. Numbers of stakeholders involved through advocacy intervention.
5. Number of CSR involved.
6. Availability of anti TB drugs.

Gujarat:

Partners and States presented an action plan on advocacy with Milk federation to support the needy TB patients by providing milk and milk products as part of nutritional support. They will also organize various advocacy events with religious leaders and village level leaders to support and strengthen TB care and control. They will implement these activities from September to December 2017.

1. Advocacy with Gujarat Milk federation members in order to support needy TB patients by providing them milk as a part of nutrition support.

2. Advocacy with religious leaders and village leaders and Panchyat Raj members, block level officials

Collecting all the feedback for plans it was decided the States will share the revised plan. After the group presentation session Ms. Sanchita shared about the process of partnering with PTCC, detailed about the submission of documents and also encouraged the participants to share success stories, news, events details to publish in the Partners Speak.

Administrative announcement:

Mr. Vinay discussed with the participants about the travel claim form, auto declaration form and about documents to be submitted for the travel claim by participants. He briefed the documents for bill submissions and other details on reimbursement.

Vote of Thanks:

Mr. Mohanadoss then thanked the participants, team of PTCC and the hotel for their hospitality. The meeting ended with encouragement to join the Partnership and to bring out the voice of civil society in the western region.

