





THE ACCOUNTABILITY LEADERSHIP BY LOCAL COMMUNITIES FOR INCLUSIVE, ENABLING SERVICES (ALLIES) PROJECT



About ALLIES Project

The Accountability Leadership by Local communities for Inclusive, Enabling Services (ALLIES) project was implemented by REACH between 2019 and 2024, with support from the United States Agency for International Development (USAID), in 15 districts of four priority states - Chhattisgarh, Jharkhand, Odisha and Tamil Nadu.

The project strove to create an enabling environment for TB elimination by leveraging community action as an ally to build a culture of accountability and empower communities, including those most marginalised.

Central to the ALLIES project was the Community Accountability Framework (CAF), intended to improve the Quality of Care (QoC) and Quality of Services (QoS) for people and communities affected by TB by adopting a solution-oriented, community-led monitoring approach.

Key Objectives

- To create a cadre of powerful community leaders to advocate for rights-respectful, gender and age-responsive TB services
- To establish community-owned mechanisms to monitor quality of TB care and services, and give feedback to the programme for timely responses, helping institute accountability and strengthening community empowerment
- To generate local solutions and resources for enhanced social support
- To enable environments for TB elimination at state and national levels

ALLIES intervention districts of Tamil Nadu VELLORE TB Units KRISHNAGIRI 10 TB Units CUDDALORE COIMBATORE 8 TB Units TB Units VILLUPURAM 16 TB Units TRICHY 15 TB Units

Results at a Glance

Quality of TB care and services improved in

82 TB Units and

facilities of **6**districts through
CAF

17,472 people with TB provided feedback on quality of care and services through CAF

205,633

people in the community received support and information on TB

644 TB survivors trained as TB Champions

425 healthcare workers and National Tuberculosis Elimination Programme (NTEP) officials trained on Achieving Excellence in TB Care and Services (AETBCS) curriculum

Representatives (ERs), including 8 Members of Legislative Assembly (MLAs), 2 Members of Parliament (MPs), 2 Mayors, 998
Panchayati Raj Institution (PRI) members and 55 Councillors sensitised. A total of 730 (69%) of them engaged through awareness campaigns, resource mobilisation and TB-related platforms.

25 companies joined the Employer-Led Model (ELM) and signed the Letter of Intent/Corporate TB Pledge

129 journalists sensitised through media roundtables

TB Champions in Tamil Nadu

The ALLIES project created the first pool of trained TB Champions' in Tamil Nadu and designed a wide range of trainings to improve their knowledge and skills to empower them to advocate on behalf of those affected by the disease.

Capacity Building Initiatives at a Glance

- Training of 587 TB survivors to become empowered TB Champions² through REACH's flagship curriculum 'From TB Survivors to TB Champions' as a first step in the capacity building of communities.
- Training of 369 TB survivors and Champions on Rights-based Approaches to TB and Health to develop an understanding of the rights of people with TB.
- Training of 113 TB Champions on TB and Disability to understand the nuances of disability and associated stigma.
- Leadership training of network leaders to enable them to lead survivor-led networks.³
- Communication skilling of TB Champions to become skilled communicators.

- Counselling training of TB Champions to build their counselling skills
- Gender Sensitisation training to help TB
 Champions understand the gender dimensions
 of TB and help them identify gender-responsive actions at the community level.
- Data for Action training for TB Champions to help them understand the fundamental concepts of interpreting data and designing effective advocacy.
- Organisational Development and Advocacy
 training of network members across Tamil Nadu
 to develop an understanding on the importance
 of advocacy in TB response, and to orient them on
 the concepts of organisation.
- Livelihood training of network members on skill building/income generation to foster livelihood opportunities for them.

TB Champions



Shared stories and issues faced by the TB affected communities



Availed **opportunities** at the local/field/ district/state/national levels to share their achievements



Participated in a plethora of **programmes** and engaged with diverse audience to sensitise them on TB



TB Free Tamil Nadu Survivors Led Network

REACH facilitated the formation, development and strengthening of the TB survivor-led network in Tamil Nadu named TB Free Tamil Nadu Survivors Led Network. Over the years, the network has grown in strength with an expanding membership. It has now become an independent registered entity.

Key Highlights

- State-level network registered in October 2023 in Vellore
- District Chapters established in Chennai and 6 ALLIES districts
- Two representatives from each district nominated for State
- Board and 14 Governing Members heading the State Network
- 2,425 members enrolled in District Chapters
- Capacity building initiated for enrolled network members
- District and state-level members participating in various TBrelated forums and meetings
- Livelihood trainings and opportunities, and linking with social welfare schemes initiated by District Chapters

¹ TB Champion model was first designed and piloted in 2017-18 through USAID-supported Call to Action project.

² A TB survivor who completes the flagship 'From TB Survivors to TB Champions' training and is willing to work in the community is referred to as a TB Champion.

³ Survivor-led networks play a critical role in advocating for the protection of rights of people with TB. The TB Champions rely on their networks to provide them with safety, identity, collective power, and a platform through which they can expand their impact and partner as powerful entities with other stakeholders.

Community Accountability Framework

The Community Accountability Framework (CAF) is a community-led monitoring model, which adopts a solution-oriented approach to improve QoC and QoS for people and communities affected by TB. Envisaged as a bottom-up approach to the WHO Multi Sectoral Accountability Framework, CAF is based on the key principles of integrity, inclusivity, effectiveness and actionability. In Tamil Nadu, CAF formally began in April 2021 and was implemented in 82 TB Units in six districts.

Multi-step 'Identify-Ideate-Implement' approach with three distinct stages



Identifying gaps using a structured tool



Ideating potential solutions at the health system and community levels



Implementing collaborative solutions involving either individual actions and/or health systems strengthening

17,472 people with TB (35% women) provided feedback to trained TB Champions

20% elderly interviewees (age more than or equal to 60)

84% interviewees were on treatment at the time of CAF interview

23% interviewees had extra-pulmonary TB

Note: The data above pertains to the period April 2021 - June 2024.



Impact of CAF on Quality of TB Care & Services

78

19% improvement

in proportion of people with TB who got their test results within 3 days of giving their sample for testing



23% improvement

in proportion of people with TB who were initiated on treatment within 3 days after diagnosis

Oct - Dec 2021 (n=1881)

Apr - Jun 2024 (n=1138)

82

22% improvement

in proportion of people with TB who were able to locate healthcare providers at the facility



36% improvement

in proportion of people with TB who met staff within half an hour of visiting the health facility

425% improvement

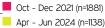
63

in proportion of family members of people with TB counselled on TPT*

98 in

26% improvement

in proportion of people with TB whose sputum was tested after completion of IP phase of treatment



*The baseline period is April - June 2022 (n=1822)

1375% improvement

59 with of Ho

in proportion of people with TB who were aware of Ni-kshay Sampark Helpline Number



71% improvement

in proportion of people with TB who reported that their friends and community behaved kindly towards them

Comprehensive Assessment Tool

In the final year of the project, a Comprehensive Assessment Tool (CAT) was added to the CAF tool to additionally assess people with TB for vulnerabilities, disability, age and gender-based challenges, and Quality of Life. A total of 4,567 people with TB were interviewed with the CAT tool. Among them, 35% were women, 21% were over 60 years old, and 20% were illiterate.

Key Findings from Interviews

- Other illnesses/diseases reported among people with TB: 3.8% had anaemia, which is higher among women (6.4%); 9% had hypertension, with a significantly higher prevalence (18.6%) among those over 60 years old; and 25.6% had diabetes, with a slightly higher prevalence among males (27.8%) than females (21.5%).
- Smoking/Alcohol consumption: Around 13% of people with TB reported having a habit of smoking and/or alcohol consumption, with a significantly higher prevalence among males (more than 20%).

- Disabilities: 2% of people with TB reported having some kind of disability, with 92% of them having had it prior to their TB diagnosis and 8% developing the disability during their treatment.
- Support needed by vulnerable populations:
 55% of persons with disabilities and 39% of elderly individuals required travel support from their residence to a health facility, while 34% of women needed to be accompanied by a guardian during their health facility visits.
- Challenges/Issues faced: 27% of people with TB experienced difficulty in walking (slight or serious problems), 20% faced challenges with daily activities such as dressing or washing themselves, 35% reported experiencing pain or discomfort, and 31% suffered from anxiety or depression.

TB Champions provided comprehensive support to people with TB, including initial counselling, linkages to relevant health departments for testing and further support, assistance with applying for government schemes and more.

REACH-ALLIES' contribution has been instrumental in bringing the state one step closer to achieving a TB elimination status. The project empowered TB survivors, transforming them into Champions who supported treatment adherence and facilitated nutritional support for people with TB.

Dr. Asha Frederick

Additional Director of Medical & Rural Health Services (TB) & State TB Officer, Tamil Nadu

TB Champions' contribution has been tremendous - in motivating people with TB, participating in community awareness programmes and facilitating nutrition support. They are enablers, supporting, even as DOTS Providers and Treatment Supporters.

Dr. S. SavithriDistrict TB Officer, Trichy

Engagement with Key Stakeholders



Achieving
Excellence in TB
Care and Services
425 NTEP officials
were trained on the
AETBCS curriculum
to build their
knowledge and skill
competencies to
deliver high-quality,
people-centred
care.

Sensitisation and Engagement of Elected Representatives

TB Champions engaged with 1,065 ERs, including 8 MLAs, 2 MPs, 2 Mayors, 998 PRI members and 55 Councillors, and sensitised them on the enormity and scale of TB burden, the profound personal ramifications faced by those affected, and underscored the potential contributions they could make.

Due to these efforts, ERs and, in particular, Panchayati Raj Representatives:

- Facilitated additional nutrition support as Ni-kshay Mitras to people with TB
- Extended access to social security benefits like Pradhan Mantri Awas Yojana
- Actively participated in TB awareness programmes and NTEP activities like Active Case Findings and Mobile Diagnostic Unit Camps
- Ensured display of TB-themed artworks outside panchayat offices
- Supported TB Champions to represent and discuss TB agenda in Gram Sabha Meetings

Sensitisation of Industries on Employer-Led Model for TB Care and Services

A strategic and collaborative approach has been taken to engage with industries through the ELM, which promotes a responsive approach of employers to the needs of people with TB and their family members, and promotes policies inclusive of their needs. In Tamil Nadu, a total of 25 industries have adopted this model, collaborating closely with TB Champions and including them in their health and safety training initiatives.



Media Roundtables on TB

A total of three roundtables were organised and 129 print and electronic media journalists were sensitised. The roundtables brought together health officials with journalists, and provided journalists with updated information on TB to encourage ethical reporting on TB.

Engaging Transgender Communities in the TB Response

The ALLIES project engaged transgender communities in TB response. The project organised a programme in Chennai, Tamil Nadu with 17 trans persons from 14 civil society organisations (CSOs). The challenges faced by the transgender communities in accessing health services were identified during the programme.



Special Interventions

Differentiated Care Model

A Differentiated Care Model (DCM) was implemented in 14 Nakshatra Centres in Chennai to deliver personcentred care to address different vulnerabilities.

Trained TB Champions took consent and screened 1,541 people who were newly diagnosed with TB, for a combination of clinical and social vulnerabilities such as alcohol use, smoking, malnourishment, anaemia, migration and living alone. The findings are as follows:

- 72% of those screened reported at least one vulnerability
- **30**% of men with TB reported alcohol use
- 56% of women and 52% of men with TB reported malnutrition as a vulnerability
- **18**% of men and **17**% of women with TB reported migration as a vulnerability.

Efforts were made to link those identified with vulnerabilities to specialised care including deaddiction counselling, expert nutrition counselling and treatment literacy in language of choice, among other support services.

TB in the Elderly

A special intervention was initiated on February 15, 2024 in Vellore to operationalise a care model for elderly people with TB. It was later expanded to Cuddalore and Villupuram in June 2024.

 Total 1,647 elderly people were screened for TB symptoms by the TB Champions at the health facilities. Out of this, 156 presumptive elderly



people with TB were identified and tested, and **2** people were diagnosed with TB.

 A total of 86 elderly people with TB were interviewed to assess the unique requirements of each elderly person undergoing TB treatment.

TB Champions supported elderly people with TB with services covering various needs such as psychosocial support, transportation, existing health issues, nutritional necessities, and access to social schemes.

Youth-led Campaign to End TB

Launched on National Youth Day, the campaign involved young TB survivors-Champions who led grassroot level activities and sensitised fellow youths and other stakeholders on TB, and engaged them to work together.

The three-month campaign included a range of activities from school and college level programmes to rallies, art and wall paintings, skits and more, and culminated on World TB Day.



Other Highlights

TN-KET

As part of the TB deathfree initiative Tamil Nadu Kasanoi Erappila Thittam (TN-KET), 26 trained TB Champions were involved in a pilot exercise from January to June 2023. They provided counselling to triage 145 positive individuals with TB at the time of diagnosis and supported those with severe undernutrition through nutritional supplementation. 74 individuals were identified for further follow-up on admission support. 54 of them were successfully admitted to peripheral centres. TB Champions played a lifesaving role for 167 people with TB by providing nutrition support, including F75, throughout the treatment period.

Livelihood Initiatives

Five TB Champions in Coimbatore started a homemade cold-pressed oil-making unit with the support of BOSCH-CSR unit which made a contribution of INR 2.5 lakhs in October 2023. The TB Champions produce coconut, sesame and grapeseed oils, generating an average monthly income of INR 2,500, of which 5% is contributed to the District Level Network. TB Champions of Trichy and Vellore were started on preparation of home-based bathing soap, hair oil, tooth powder and washing powder by an organic products company. In other districts, initiatives included Villupuram's jute bags, Cuddalore's nutrition powders and Krishnagiri's Balkoa (a sweet recipe). Sales are conducted locally and products are exhibited at government meetings and event stalls. One TB Champion in Coimbatore even started a beauty parlour with seed money of INR 35,000 from a non-governmental organisation (NGO) and is successfully running the business, earning an average of INR 10,000 per month.

Additional Nutrition Support by TB Champions towards Ni-kshay Mitras

During the CAF process, the need for additional nutrition support for people with TB emerged. Through personal stories and stakeholder engagement, 79 TB Champions in six districts of Tamil Nadu identified and sensitised local donors including family members of TB-affected communities. NTEP staff, doctors and health department staff, school teachers and employees, NGOs and clubs, PRI members, industries, Government staff and individual well-wishers Over 369 donors provided nutrition support for an estimated value of INR 20,63,035 lakh to over 4368 people with TB between November 2021 and July 2024.





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All photographs in this report that feature TB Champions and/or people with TB are used with full, informed consent.