Ammal Report 2011-12







ANNUAL REPORT 2011-12

About REACH

Every day, on average, Tuberculosis kills a 1000 people in India. This is 1000 deaths too many, 1000 people who could have been cured if they had been aware of the symptoms of TB, if they had been diagnosed earlier, if they had received the right treatment, if...

An acronym for Resource Group for Education and Advocacy for Community Health, REACH was established in 1999 in response to the rolling out of the Revised National TB Control Program (RNTCP) in Tamil Nadu. Managed by an executive committee, REACH has been a key partner and leader in the fight against TB.

REACH has a broad mandate which includes support, care and treatment for TB patients as well as research, advocacy, public education and communication. We work with a range of partners including the RNTCP, local government officials, private hospitals, community-based providers and private practitioners among others.

"I recall an early brainstorming session chaired by Prof.M.S.Swaminathan, where many stakeholders had come together. The consensus was that we should support the national programme, by improving knowledge of TB services and acting as an intermediary between service providers and those who needed to access them. This was really our collective vision and the starting point for our work".

- Dr. Nalini Krishnan, Director, REACH

Although TB is a disease that can affect anyone, REACH focuses its energies on providing support to those from poorer economic backgrounds. The rationale is simple – we believe that we must step in and provide access to information and services where there are few other options.

In the years since its inception, REACH has been involved in several projects including those supported by USAID and the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM) in Round 1 and Round 9.

In this report, we are proud to share with you our work in the last year (2011-12).



Where we began...

From the REACH team...

Our work continues.

As in the thirteen years since our inception in 1999, REACH continues to focus on providing timely care and treatment for those affected by TB in Chennai, primarily through our network of dedicated private practitioners. We have also expanded our work under Project Axshya, a unique civil society initiative to strengthen TB care and control in India and now work in 12 districts across Tamil Nadu We continued to innovate in our work with the media, supported by the Lilly MDR-TB Partnership and launched TB Tales, India's first short film competition on TB.

As we look back at the last year, we ask ourselves these important questions:

- Has our work been effective in reducing TB deaths in the community?
- Did our patients find it easy to get their DOTS treatment, without any delay?
- Have our awareness programs brought the desired changes in the mindset of people, towards 'cough', for example?
- Have our partnerships brought us any closer to our goal of a world free from TB?
- What next? How do we move ahead?

And most of all, have we been 'successful'? And how do we measure this?

Controlling tuberculosis remains one of the biggest public health challenges that India faces today. We are yet to achieve universal access to TB diagnosis and treatment; patients continue to shop around for a diagnosis, spending heavily out-of-pocket; social-economic issues like poverty and alcoholism are still impediments; and stigma often rears its ugly head.

But there is a silver lining, in fact, more than one! Individuals and organisations have forged strong, vital partnerships, particularly through Project Axshya. TB is in the public domain more than over and therefore, on people's radars. Personally, REACH is delighted to note that our efforts, small and big, have contributed towards this new synergy, at the local, state and national levels. But we also recognise that we need to sustain this energy and build even stronger links among civil society groups. We look forward to new opportunities and challenges in the upcoming year!

"Do not go where the path may lead, go instead where there is no path and leave a trail" Ralph Waldo Emerson

Our activities at a glance

PPM or Public-Private Mix in Chennai City

- Assisted **1,286** chest symptomatics with TB counseling through our field officers in the 12 zones of the city.
- Initiated **675** patients on DOTS treatment in Chennai.
- Referred 115 TB cases to other districts of Tamil Nadu for diagnosis and treatment.
- Conducted **185** programmes and sensitised **16,773** people from different backgrounds and target groups on TB.
- Attended to **166** calls on our TB Helpline and provided the appropriate information.
- Achieved a cure rate of 86% and a success rate of 87% among our registered cases
- Referred 80 people from the ABAN /REACH Minjur DOTS centres of whom 25 were diagnosed as TB cases

Project Axshya

- Worked in 12 districts of Tamil Nadu to improve access to appropriate RNTCP services.
- Trained **48** trainers on RNTCP and DOTS for both non-governmental and community-based organisations.
- Training 19 trainers on Soft Skills for Health Staff.
- Sensitised **109** Non Government Organisations about the RNTCP and available schemes.
- Trained **1563** health staff on Soft Skills to help them improve their interpersonal communication and thereby strengthen the program.
- Sensitised **282** NGOs about the RNTCP and DOTS program.
- Trained **653** rural health care providers on symptoms, diagnosis and DOTS treatment.
- Created 12 TB patient forums to focus on issues related to TB care and control.
- Distributed over **10,000** posters and **15,000** leaflets on the TB 'Patient Charter', informing patients of their rights and responsibilities.
- Trained and partnered with **10** community radio stations from across India, who each broadcast over **60** episodes on tuberculosis in over **5** languages.

REACH Lilly MDR-TB Partnership Media Programme

- Awarded **8** Media Fellowships to local language journalists to identify and report on locally-relevant TB stories.
- Announced TB Tales, India's first short film competition on TB, and received **27** entries from across India.
- Presented the annual REACH Lilly MDR-TB Partnership Media Awards, recognising the efforts of 4 journalists for excellence in reporting on TB.

REACH PPM Project in Chennai

Our PPM work is the backbone of REACH. Since our inception, we have been supporting private practitioners and PPM Hospitals in Chennai to adopt DOTS for TB patients. This network of doctors has increased from 30 to 500 over the last decade and we hope to evolve it into a more sustainable model for TB control.

Very briefly, our PPM work encompasses the following activities and services:

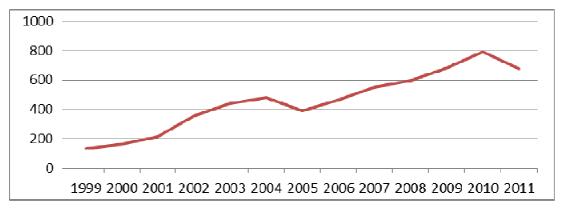
Patient Care: counseling, provision of DOTS at PPM centers, case initiation, address verification visits, monitoring, retrieval of patients who have stopped treatment and providing patient aid support.

Networking Initiatives: Routine visits to Private Practitioners, periodical visits to RNTCP officials, interacting with pharmacists and community.

Awareness Programmes: Regular programmes to improve community knowledge about TB including symptoms, diagnosis and treatment, for various groups of people at different locations across the city.

CASE REGISTRATION

Zon e/ Yea r	19 99	20 00	20 01	200 2	200 3	20 04	200 5	200 6	200 7	200 8	200 9	201 0	2011
1								100	92	92	104	103	81
2								87	100	86	116	113	92
3								3	5	6	4	9	7
4								2 7	39	25	28	30	18
5								45	58	40	28	50	3 7
6								58	63	59	68	92	89
7								32	38	39	38	20	10
8								2 7	25	21	2 7	38	29
9								15	19	20	44	60	59
10								71	113	101	98	80	66
MIN								0	0	35	25	4	17
MD K								0	0	74	104	193	170
To- tal	131	161	211	356	442	482	389	465	552	598	684	792	675



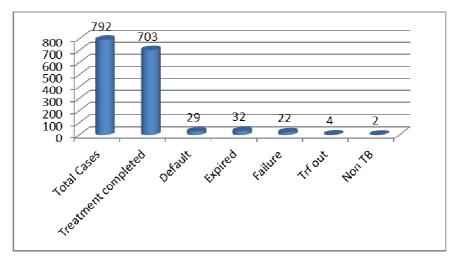
Graphical Representation of Total Cases

PERFORMANCE OUTCOMES 2010

Type of TB	Total Cases	Cured	Complet- ed treat- ment	Default	Ex- pired	Failure	Transf- erred Out	De- clared Non TB
New Smear Positive Cases	261	226	1	11	11	11	1	0
Smear Positive Cat 2 Cases	74	44	0	12	7	10	1	0
Sputum Negative & Extra- Pulmonary cases	457	O	432	6	14	1	2	2
Total	792	270	433	29	32	22	4	2

Cure Rate: 86%

Success Rate: 88%



Patient Outcomes 2010

REACH-ABAN DOTS CENTRE

In the last year, REACH has established a new DOTS centre in Minjur, a peri-urban area in North Chennai, with support from ABAN CARES.

In the year since the centre was established, we have referred 80 people, of which 25 were diagnosed with TB and initiated on treatment.



REACH has also organised 92 programmes in and around the Minjur block area, reaching out to almost 5500 people in the community.



In other news...

- > As part of our monitoring process, we held monthly review meetings to assess our own performance. For instance, the April meeting was held at Hotel Raj Park and focused on the importance of accurate and regular documentation. Ms Suraksha Giri, Executive Secretary, REACH led this session, reinforcing the need for the team to improve how we maintain records and document stories from the field.
- > Staff members also attended a rigourous performance appraisal and had an opportunity to interact with senior management.
- > REACH bid farewell to the State TB Officer Dr.C.Udayashankar on his retirement. We remain very grateful to Dr Udayashankar for all his support to REACH, particularly when we first launched Project Axshya in Tamil Nadu.
- > We also bid farewell to Ms.Poominchitratthi, Field Officer, who resigned due to personal reasons after eight years of service.
- > We held our annual 'Light of Hope' concert in September, as a gesture of gratitude to all our partners, donors and supporters. The eminent Carnatic vocalist Mrs. Vijayalakshmy Subramanian enthralled the audience with her singing. Mr T.T.Srinivasaraghavan Managing Director, Sundaram Finance, was our guest of honor.
- > Finally, the REACH team went for a picnic to Sun Resorts in Mahabalipuram, near the beach. Some informal games, races, some heartfelt sharing—a good time was had by all! Each staff member received a New Year Calendar with a unique message along with a Megamart gift voucher for Rs.500.



Workshops and Trainings

2 October 2011

Street Play Training by Shruthi Devi

The REACH staff participated in a half-day workshop on street play techniques, led by Shruthi Devi.

12 October 2011

Public-Private Partnerships (PPP) in health programs: opportunities and challenges
The Department of Humanities and Social Sciences, IIT Madras, APAC-VHS and MSG Strategic
Consulting Pvt. Ltd are working to develop a White Paper on 'Public-Private Partnerships (PPP) in
health programs: opportunities and challenges'. This initiative is supported by USAID (Delhi).
Sheela Augstine, and Anne Sureshkumar represented REACH and made a brief presentation on our
PPM work.

17-18 January 2012

Community Systems Strengthening

Sheela Augustine and Vidya participated in this two-day workshop held under Project Axshya, along with around 40 representatives from NGOs around the state. The workshop focused on planning for sustainable and effective systems at the grassroots and community level.

28 January 2012

IIT Dissemination Workshop

Anne Sureshkumar and Kalaivani attended this follow-up workshop and presented the important points to be included in the paper and their observations and experience.

Visitors to REACH

4 January 2012

Meeting with team from US Consulate

Officials from the Chennai US Consulate including Mr. Maxwell. J. Hamilton Political/Economic Officer and Sheral S.Patel, Medical Officer met Dr.Nalini Krishan and team for discussions on public health delivery mechanisms in rural areas.

9 January 2012

Visit by Mr.Paul Sommerfeld, Chair, TB Alert

Mr.Paul Sommerfeld, Chair, TB Alert, U.K visited some of the project sites and participated in a roundtable discussion on the role of advocacy in the fight against TB; this was attended by officials from other organisations including NIRT.

21 February 2012

Visit by Dr Evan Lee, Vice President of Global Health Programs and Access, Eli Lilly & Co. Ltd. Dr Lee and Ms Sunita Prasad, Consultant, MDR-TB and CSR at Eli Lilly were in Chennai to visit the REACH projects, particularly those supported by the Lilly MDR-TB Partnership. Dr Lee also led a discussion around emerging challenges in TB control later that afternoon for a small group of key stakeholders.

22 February 2012

Visit by US students organised for Dr.Suresh, Sundaram Medical Foundation

A team of ten students were sent by SMF to understand our work. Anne Sureshkumar briefed them on the PPM project and they visited CSI Rainy and also met Community DOT Providers in the field.

Stories from the Field

Priya: My decision to attend a Talk TB session saved My Father's life

Was it going to be worthwhile, was the first thought that passed my mind when we were called for a session on TB in-between our tailoring sessions at OASIS, the NGO at which I undergo tailoring classes. Walking into the hall and settling down for the talk quite reluctantly, little did I realize that this session would turn out to be a life saving event for my father.

As Mr. Ramjee, the Field Officer at REACH, kept rolling out facts about the disease he seemed to have caught my attention and I soon realized that TB was something I should be aware off. He told us that one off the strongest ways to fight the disease was to talk about the disease to as many people as possible.

That sounded quite do able and I decided to get involved actively in talking about TB. I set off by talking about TB to everyone I knew in my immediate neighborhood, including my family. Both I and my dad realized that he exhibited symptoms. When he was tested he was positive. I was shocked but at the same time I was very thankful that I made the right decision at the right time.

Today my father is on treatment and is heading on his way to recovery. Happy am I that I spoke about the disease and will continue to do so. Thanks to Mr. Ramjee for his inspiring talk about the disease.

- OASIS is an NGO involved in TB control through the GFATM Project in REACH.

Mariappan: Her kindness and compassion changed our lives

"My life is happy again with my wife back in it" gushes' Mariappan gleefully. When I started TB treatment my wife left me because of my excessive indulgence with alcohol and my related irresponsible behavior. Her absence shattered me and I started to get irregular with my treatment. It was then that the REACH Staff Deena stepped into our personal lives beyond her relationship with us which was confined to my treatment needs.

She became our family counselor and through her sincere and kind efforts started to bridge the gap between me and my wife. My wife finally came back to me and I also quit alcohol. Today I am cured of TB and my relationship with my wife has been saved. Our lives have changed, thanks to Deena.

Stay healthy and happy!

Hi! I'm Swathy. I'm in class twelve. A couple of months back TB came as a devastating shock to me. My teenage world of books, friends and fun crumbled down. I felt isolated and let down. "TB affects only alcoholics and smokers. Then how did it happen to me?" was the first question that sprang up in my mind.

Now I know Tuberculosis gets people with low immunities and that it can happen to anyone. Me, you or anyone else. My treatment is on and I am on my way to cure. DOTS is healing me steady. The treatment process has been absolutely comfy with no hitches at all. DOTS is patient friendly and makes treatment accessible at the patients convenience. Things are kept discrete when a patient feels it's necessary. I haven't leaked this to my friends till now. I don't want to. The reasons are complex.

Thanks to DOTS, Tuberculosis hasn't kept me away from my happy life anymore. So eat well, keep healthy and stay happy.









PROJECT AXSHYA











REACH continued its work as part of Project Axshya, supported by the Global Fund to fight AIDS, Tuberculosis and Malaria (Round 9). Project Axshya seeks to improve the reach, visibility and effectiveness of the national TB programme through increased civil society involvement. One major objective is to engage communities and community-based care providers in 374 districts across 23 states by 2015 to improve TB care and control, especially for marginalised and vulnerable populations including TB-HIV patients.

In the second year (2011-12), we expanded our work to 12 districts across Tamil Nadu, working through a network of 48 MNGOs (Mother Non-Governmental Organisations). We also worked closely with the State health system to make TB services accessible to the marginalised and vulnerable populations in the State.

Most of all, we have been able to energise key leaders and functionaries at the community level as well as Community-based Organisations (CBOs) and Rural Health Providers (RHPs) to participate in district-level TB forums, thereby establishing a framework for community and civil society engagement in TB control.

Project Axshya has generated a wealth of human resources for TB care and services at the district and sub-district level. In the coming year, we will continue to work closely with these individuals and groups and hope to sustain their active involvement beyond the project period. Some key activities as part of Project Axshya include:

Sputum collection & Transportation:

Quality-assured sputum smear microscopy is the backbone of TB diagnosis. As a first step in this process, Rural Healthcare Providers were trained by Project Axshya; technicians at hospital laboratories were simultaneously trained to collect the sputum in the right away. At the same time, community volunteers were taught the importance of transporting sputum cups to the nearest diagnostic centre, on time. This has been underway at the general outpatient unit at the Government Siddha College in Tirunelveli district, and has so far resulted in the collection and transportation of 45 samples. Of this, four were sputum positive and have been initiated on treatment.

TB forums

TB forums are local bodies formed to design local issues related to the TB programme. They function as platforms for advocacy and social mobilization. Presently, most forums function independently, meeting once in three months. TB forum members have raised several issues directly with district TB Officers, including gaps in service provision and challenges faced by TB patients. In Tiruvallur, for instance, the TB forum drew the attention of local administrators to a the performance and attitude of a particular Medical Officer. The local president proactively followed up on this complaint and the errant Medical Officer showed improvement, especially in treating patients more respectfully. In addition, TB forum members have generated Rs.80000 from the sale of TB stamps, released by the District Collector of Tiruvallur.

Patient charter

The patient charter aims at promoting a TB patients' rights and responsibilities and has been both developed and displayed in close coordination with the state health system. About 8400 Posters and 3000 pamphlets on the patient charter have been distributed across 12 districts. At the state level, the patient charter was released by the State TB Officer while at district level, District Collectors, DTOs, DD-HS and other District officials were involved in the dissemination. The charter is displayed in DMCs, PHCs, GH, Village Libraries, Village Administration office, Ration shops, NGO offices and other Public Places. In fact the patient charters displayed in the Cuddalore district withstood the "Thane storm", a hurricane that blew over the southern coast of Tamilnadu in December 2011!

Soft skills training for health staff

Under Project Axshya, district health staff at government health centers (treatment supervisors, laboratory technicians, village health nurses, etc.) underwent soft skills training. A subsequent review was conducted with 272 trained health staff in groups of 15 to 20 after a period of three to six month gap, using a specially-designed assessment tool. The general consensus among the health staff was that it was one of the most useful all trainings that they had undergone. They found sessions like counseling and stress management particularly interesting and useful. They remarked that the training had helped them in both their interaction with patients, colleagues, supervisors as well in their own personal lives. The trainings were received so well that many of the district TB officers and medical officers have evinced keen interest in participating in similar trainings.

State-level consortium for TB patient care formed

In a bid to make tuberculosis treatment in Tamil Nadu more patient-centric, a state-level consortium for patient care and rights was formed by DACT Trust, Rainbow TB Patient Forum, REACH and CHAI (Catholic Health Association of India).

Through Project Axshya, REACH and CHAI facilitated tuberculosis patient forums in 22 districts in Tamil Nadu. The network of NGOs and CBOs that has been formed through the state level consortium will build on the project Axshya initiative to increase capacity for patients to advocate for their rights and to focus on seeking nutritional care and social support to patients. The group will also push for more involvement from non-governmental organisations in the state, to pitch in for tuberculosis control.

The community says...

"Through this Project, I have gained rich experience on TB. The percentage of involvement in the TB Program has increased to 60% after Project Axshya. In my organisation, we have trained 320 Members on TB. They are all based at 40 to 50 villages and they are acting as community volunteers as well and will function as Community DOT Providers in the future."

- Mr. Karthikeyan from an NGO in Cuddalore

"We are happy to inform you that REACH is implementing the AXSHYA project in Tiruvallur District since April, 2010 and this is really supporting & increasing the visibility of RNTCP at District level. The capacity building at all levels and Community Outreach Program, Soft skill Training for the Staff & the community workers and the functioning of the TB forum...."

- Dr Lakshmi Murali, District TB Officer, Tiruvallur

Activity		ulative 1- Mar'12)	Outcomes
	Target	Achieved	
Training of Trainers (TOT) for NGOs/CBOs/PPs	44 (2)	48 (2)	Increase in knowledge of the NGOs/CBOs on TB
TOT for Health Staff on Soft Skills	15 (1)	19 (1)	DMC & TU staff in Districts trained on Soft skills, through the Master trainers. This will help in- crease the case detection and decrease default rates
NGO Sensitising program on RNTCP	96 (4)	109 (4)	NGOs aware about the RNTCP schemes & encouraged to apply for the RNTCP schemes.
Training of Health Staff in Soft Skills	1275 (51)	1563(51)	Improved interpersonal communication of health staff, which will improve case detection and re- duce default rates
Select and Train Local NGO Net- work	240 (12)	282 (12)	NGO staff knowledge level increased, they in turn will improve awareness among communities
Training of CBOs	240(12)	282 (12)	Knowledge level on TB increased among People Living with HIV/AIDS
Formation of District TB Forums	12	12	TB forums will meet and function as powerful advocacy & mobilisation agents for those affected by TB
World AIDS Day/TB DAY	20	20	Increase in overall awareness of community on TB
Training of Rural Health Care Pro- viders	480(16)	653(16)	Improved referrals, improved case detection and lowered default rates
Patient Charter		Posters – 10000 Leaflets- 15000	Improved patient knowledge on their rights and responsibilities, thereby increased cure rates
QJM – ICTC & DMC	56	56	Increase in Cross Referrals, which in turn increases the number of co-infection cases detected
Quarterly Review Meeting (CBOs)	52	50	Increased referrals & follow-up of defaulters
Quarterly Review Meeting (RHCPs)	49	44	Increase in cross referrals to promote DOTs Providers
Quarterly Review Meeting (TB Forum)	56	56	Increase in Cross Referrals, which in turn increases the number of co-infection cases detected
Sputum Collection & Transporta- tion		One district (75 samples)	
			Reduced default rate
Retracing Initial Defaulters		74	Assess the soft skills of health staff, case detection
Half Yearly review of Health Staff	32 (480 par- ticipants)	21 (291 partic- ipants)	and default rate.
Training of PLHA, District Level Network	2 (60)	2 (66)	Increased knowledge level on TB among People Living with HIV/AIDS

Community Radio

This is a unique activity by REACH under Project Axshya, with the objective to involve India's fledging community radio network in the fight against TB. In the second year of the initiative, we continued to work closely with radio stations across the country, working to create awareness about TB among local communities through innovative radio programming. We identified and trained ten stations from across the country, including those based in urban and rural India and operated by NGOs and universities. After an intensive training programme, all ten stations produced and broadcast a 16-part series on TB. Each half-hour episode looked at one TB-related issue, ranging from the basic 'How does TB spread?' to 'TB and HIV' or 'the role of community volunteers'. Each episode was repeat-broadcast multiple times (sometimes as many as 4) to amplify the impact and attract more listeners.

Programmes also connected listeners to locally available TB services. RNTCP officials including State and District TB Officers were often guests on the radio shows, answering questions from listeners and directing them to the right centres for diagnosis and treatment. In addition, all the stations were mandated to organise one community meeting a month (eight in all), thereby proactively reaching out to new listeners while sustaining the interest of regular listeners. These meetings provided opportunities for the stations to increase the listenership base; they also became platforms for open discussion of any TB-related issues and clarification of any prevalent myths or misconceptions. Meetings were held at local schools or colleges, community halls, homes of community leaders, health centers etc., and in many cases, RNTCP or other government health officials were present to answer questions.









REACH Lilly MDR-TB Partnership Media Programme

www.media4tb.org

The REACH Lilly MDR-TB Partnership Media Programme began in 2010 with support from the Lilly MDR-TB Partnership, and with two key objectives—to improve the quality and frequency of media reporting on TB and thereby, improve the quality and accuracy of information on TB that is available in the public domain.

Media Fellowships

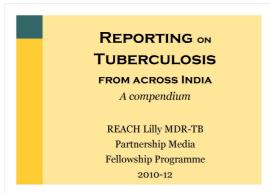
The Media Fellowships were constituted to provide working journalists from local language newspapers with support to undertake in-depth analysis of various aspects of TB in India. The Fellowships are intended to encourage journalists to explore TB as a critical public health concern, by identifying and developing stories that remain untold.

2011-12 Fellows

Abhay Kumar Nema, Indore, Madhya Pradesh Amarjeet Pal, Indore, Madhya Pradesh Dayashankar Mishra, Jaipur, Rajasthan Raju Kumar, Bhopal, Madhya Pradesh Rakesh Malviya, Bhopal, Madhya Pradesh Ranjith Chathoth, Kozhikode, Kerala Peerzada Arshad Hamid, Srinagar, Jammu and Kashmir









Media Awards

The REACH Lilly MDR-TB Partnership Media Awards were instituted to recognize excellence in reporting on TB from across India, in English and local languages. All entries are evaluated by an eminent jury including, in the last year, Dr. Ashok Kumar, Deputy Director General (TB), Ministry of Health and Family Welfare, Govt. of India; Dr. Nevin Wilson, Director, The Union, South East Asia; Dr. Sowmya Swaminathan, Deputy Director, Tuberculosis Research Centre; Dr. Jaya Shreedhar, Health Communications Consultant and Dr. Arjun Rajagopalan, Vice Chair, REACH and Chief of Staff, Sundaram Medical Foundation.

In the 'English' category, we had our first-ever tie between independent journalist Peerzada Arshad from Jammu and Kashmir and Kounteya Sinha of The Times of India, New Delhi. Arshad's lucid and comprehensive story 'TB awareness still a challenge in Kashmir' was published in Kashmir Newz where he identified challenges for TB control in the strife-torn state. Sinha's story, 'TB? You can't be positive', in The Crest edition of The Times of India drew attention to the potential consequences of inaccurate serologic tests to diagnose TB. A special citation was awarded to Anuradha Mascarenhas of The Indian Express, Pune for her unrelenting efforts in reporting on the disease.

In the 'local language' category, the first place was won by Ranjith Chathoth of Mathrubhoomi, Kerala who highlighted the dangers of incomplete treatment and the second place by Dayashankar Mishra, who delved into the TB burden on marble factory workers in Madhya Pradesh's Katni.

TB Tales

In 2011, we announced 'TB Tales', India's first short film competition on tuberculosis, open to both amateur and professional filmmakers! REACH received over 25 entries from across the country, in different genres including fiction, documentary, docu-drama and animation. The winning entries were chosen by a diverse jury including actor Suriya, film director Gautham Menon, Dr P R Narayanan, Former Director, Tuberculosis Research Centre, Blessina Kumar, Activist and Vice Chair, Stop TB Partnership Board and Dr Subhash Yadav, Technical Officer, The Union South East Asia Office.







The award for the first place was given to Jagdish Vaidyanathan, from Kumbakonam, for his film 'Mei: The Truth'. Through a touching narrative, the film tells the story of a single parent, diagnosed with tuberculosis. Eventually, he finds comfort from an unexpected source, his young son. The second place was bagged by Rhea Lobo, from Chennai for her film, 'Fight TB! Stay Beautiful'. Told through an engaging narrative, the film looks at the gender-based stigma related to tuberculosis in India. The third place was awarded to Elangovan for 'TB-Free India: An Ongoing Journey', a documentary about a day in the life of a DOT provider in suburban Tamil Nadu.

In addition to these awards, citations were also given to K. S. Mohanarao for his film '*I am fine*', Radio Mattoli for their film '*Curing love*' and Rajkumar for his film titled, '*TB*'.

WORLD TB DAY 2012: A Report

On the occasion of World TB Day 2012 (24 March), REACH organised and participated in several activities, at the local, state and national level.

In New Delhi

Media Awards, 23 March 2012





In the run-up to World TB Day on 24 March, the REACH Lilly MDR-TB Partnership Media Awards 2012 were presented at the Nehru Memorial Museum and Library in Teen Murti Bhawan, New Delhi to recognize outstanding and effective reporting on tuberculosis (TB).

The awards were presented by the chief guest, Hon'ble Minister of State for Rural Development Ms Agatha K. Sangma. The winners were felicitated by the Guests of Honour– Ms Supriya Sahu, Information and Broadcasting Ministry Joint Secretary, and Dr Ashok Kumar, Deputy Director General, Health and Family Welfare Ministry's Central TB Control Division. Prof. M. S. Swaminathan, eminent scientist and Member of Rajya Sabha, was also present in his capacity as the Chairman of REACH. The Lilly MDR-TB Partnership was represented by Mr. Bart Peterson, Vice President, Corporate Affairs and Communications, Eli Lilly and Company. Dr. Nevin Wilson, Regional Director, The Union and Dr. Jaya Shreedhar, Health Communications Consultant also participated.

Ms. Sangma urged the media to use its power judiciously and for development. Ms Sahu advocated a bottom-up approach to health communication and advocacy, and spoke of India's vibrant media landscape.

Congratulating the award winners, Prof. Swaminathan said, 'These journalists have been messengers of hope in this fight against tuberculosis. There is misinformation and inappropriate use of drugs. All kinds of media can play an important role in information dissemination.'

'Effective media campaigns can be critical instruments which can motivate behavioural change. To all the journalists here- keep the fight alive!' urged Mr. Peterson. A compendium featuring stories by Fellows from the Media Fellowship programme was released on the occasion.

In Chennai

Community Meeting, 18 March 2012

REACH organised a community event inviting all patients, DOT Providers, doctors, lab technicians, pharmacists and other well-wishers who have been supporting the PPM project in Chennai, Tamil Nadu.

The main objectives of the event were:

- To launch the initiative "Talking TB in the Park"/"Poogavill Pesuvom TB Pattri" which was designed to talk about TB to people who visit parks in the city. This took place for two weeks from 18-31 March in the evenings.
- To release the Information Pamphlet on TB designed for distribution at the Parks
- To release the REACH Newsletter World TB Day Special Issue "Reaching Out"
- To honor the special people who have contributed to TB control from the city.

The chief dignitaries were Dr. Arunagiri, State TB Officer, Dr. P. Kuganantham, Corporation Health Officer, and Actor Sivakarthikeyan. The programme started with the skit by the REACH staff "Adeyngappa Tea Kadaiill oru Sambavom". The skit revolved around how Azhagamma who runs the "Adeyngappa" tea stall and 'Nursamma' get the highly indifferent "Enekkenna Ekambaran", the panchayat leader, and his aide Veerasamy to dedicate themselves to the cause of eliminating TB and the theme of World TB Day falling on March 24, "Stop TB in my lifetime'. The skit readily connected with the audience with its blend of thought-provoking humour and compelling logic.

REACH also honoured the everyday heroes who compassionately touched the lives of many people through their several small acts for TB control. Everyday heroes are those people who give of themselves without being asked. They are the often unnoticed faces in the fight toward better health. Twelve individuals from around the city were felicitated for their contributions towards the community by Dr. Kuganandam and Actor Sivakarthikeyan.

These special heroes were:

Mr. Mohammad Rafi, aged 28, from Tiruvotriyur has proactively referred 12 patients, three of whom were started on DOTS. He also provides DOTS from his pharmacy.

Mr. Chella Pandian and his two brothers graciously extended the hospitality of his Pandian hotel by providing free meals to TB patients on treatment in the Basin Bridge area.

Mr. Yogaraj, a Lab technician, age 27, has only a single patient he provides DOTS to. He has made an impression on our staff and the patient with his sincerity and enthusiasm.

Ms Jessintha, a housewife, age 31, with great responsibility and compassion gives DOTS to an elderly patient who is blind. She goes to his home whenever needed and gives him his tablets

Age places no restrictions on *Mr. Radhakrishnan* who at 68 volunteered to be a DOT provider to patients. He carries out his duties with responsibility and with the support of his sons.

Mrs Nirmala, age 30, apart from being a DOT provider proactively identifies patients who may need treatment. She motivated a patient that defaulted from treatment to start taking his medicines again. *Mr. Saravanan*, a pharmacist, has not wavered in his dedication for the ten years he has supported REACH. He has been a DOT provider and has referred patients for treatment.

When *Mr. Sekar*, age 55, found out his watchman had TB, instead of firing him, he became his support system, becoming his DOT provider and covering any additional medical expenses.

Mr. Sasikumar, a barber, took an elderly patients' care upon himself by motivating the patient to complete treatment and making sure he took all his doses. After giving the patient his medicines he often stays awhile to talk to him and reassure him.

Mr. Senthilraj, a pharmacist, age 40, has been a DOTS provider for the past 5 years. He currently has three patients under him and says he would be happy to provide DOTS for any number of patients.

Mr. Thirumal from Minjur, age 37, once a patient himself, shares his experiences at advocacy events with great zeal, encouraging more people to "talk TB".

Mr. Shankar from Medavakkam, age 28 is already a Makkala Nala Paniyar for the NREGA. He has referred 4 cases patients and is also a DOT provider. He has helped spread awareness about TB in the community.

"Poongavill Pesuvom TB Pattri: Awareness events at city parks

This event was designed to talk about TB to people who use the parks of Chennai. Permission was obtained from the Parks Department, Ripon Buildings, Corporation of Chennai to do an awareness initiative on TB at several parks over a two-week period. These city parks included Shanmugaraya Park near Kaladaipet Market Bus Stop, Perambur Park near the Bridge, May Day Park near Chindadripet and Panagal Park at T-Nagar, among others. The REACH team put up a Kiosk in the Park from where special information pamphlets were distributed to people. Using a loudspeaker, TB messages were announced by the team via skits and songs.

REACH also participated in a mass rally and a formal function organized by the State TB Office of Tamil Nadu to observe World TB Day.









REACH Supports the Making of a Short Film on TB



Amongst the various activities that REACH has initiated to support the State TB Office in TB control, we also supported the State TB Office in conceptualising and producing a short film on TB. The movie gives out TB messages through a starry line of celebrities from the Tamil film industry and sports personalities. REACH facilitated the shoot for the movie by coordinating with these stars. REACH also produced the script for the movie.

The film features famous Tamil cine stars like Devaiyani, Parthibhan, Sneha, Kishore, upcoming star and heart throb of today's youth, Sivakarthikeyan, comedian, Vivek and Santhanam, cine and TV fame actor Vijay Adhiraj, and folk artist Anitha Kuppuswamy.

Sports personalities include national squash player, Joshna Chinnappa and cricketer Badrinath.

The film can be viewed here: http://www.youtube.com/watch?v=7coL9xes9Nc&feature=email

Conferences and Consultations

- > Dr Nalini Krishnan was nominated to the PPM Core group of the WHO Stop TB Partnership, Geneva and attended the core group meeting and the 7th Meeting of the Subgroup on PPM for TB Care and Control, 23-24 October 2011, Lille, France
- > Dr Nalini Krishnan was nominated by the Central TB Division, Ministry of Health and Family Welfare, GOI to a working group to develop a National Strategic Plan (2012-17) for Revised National Tuberculosis Control Programme on Advocacy, communication and Social Mobilization
- > Dr Nalini Krishnan attended a National consultation on developing public-private collaboration strategies for RNTCP, 17-18 Feb, New Delhi.
- > Dr Nalini Krishnan is a Member, Working Group, Partnership for TB Care and Control, India

REACH is a member of the Stop TB Partnership, WHO, Geneva. REACH is a member of the Partnership for TB Care and Control, India.

A team from REACH including Dr Nalini Krishnan, Dr Ramya Ananthakrishnan & Ms Anupama Srinivasan attended the *World Lung Health Conference 2011*, held in Lille, France in October 2011. REACH presented the following papers at the conference:

- > Feasibility of Bringing in Default Patients for Re-Treatment within DOTS Program in Chennai, India (Poster presentation)
- > Involving Community Radio Stations in ACSM Activities for TB Control: A Field Report from Tamil Nadu (Poster presentation)
- > A Public Private Mix (PPM) Partnership Model for Augmenting TB Control efforts in Chennai, India: Role of an Intermediary (Non-Governmental Organization) in building the PPM model (Poster presentation)
- > Marketplace ACSM Activities to Increase TB Suspects Referral A Field Report from India (Poster presentation)

Dr Ramya Ananthakrishnan participated in a panel discussion in the International Entertainment Education Conference held in New Delhi in November 2011, and presented a paper on 'Using Film and Involving Film Celebrities for Public Health Messaging: A Report from Tamilnadu'.

Finally...

In an effort to strengthen our web presence, REACH launched a new web site (www.reachtbnetwork.org) in June. The website is equipped with web 2.0 tools, such as blogging and microblogging for easy dissemination of our projects and activities. The website will also house all our IEC materials in an easily downloadable format as well as recent reports and publications.

We also inaugurated our Twitter account (@SpeakTB) on World TB Day 2012. We have since begun to document our battle against tuberculosis in less than 140 characters – follow us!





Balance Sheet 2011-12

	AS AT 31.03.2011			2,41,740.39	54,324.60 10,25,000.00	2,900.00 2,500.00 1,25,000.00	850.00 10,279.84 8,000.00	71,847.00 65,917.00 1,26,405.00 1,72,429.00	18,691.10	1,505.00 18,780.75 14,91,678.60	39,68,764.52		(6)
	AS AT 31.03.2012			4.09,347.61	54,324.60	2,900.00 2,500.00 1,25,000.00	850.00 10,279.00 24,500.00	2,98,834.00	1,77,702.10	1,531.00 1,518.75 12,03,690.60	37,41,215.90	As per report attached for M.R.Narain & Co. Chattered Accountants	P. Anand (M.No.16189)
н 600002		45,562.22 49,330.95 3,28,610.19	16,506.04	30,661.79									Glennal Comment of Charles
RESOURCE GROUP FOR EDUCATION AND ADVOCACY FOR COMMUNITY HEALTH BALANCE SHEET AS ON 31.03.2012 NO 9/5 State Bank Street, Il Floor, Mount Road, Chennai 600002	ASSETS	FIXED ASSETS Office equipment Furniture Computer	Gross amount	Less: Depreciation	INVESTMENTS. Fund growth option (at cost) Fixed Deposit	ADVANCE AND DEPOSITS Security deposit Telephone deposit Rent advance	Water deposit Prepaid expenses Staff Advance	Interest Accued On Fixed Deposit International Union Against Tuberculosis I.T. Refund Due TDS	CASH AND BANK BALANCES Cash on hand Balance with Central Bank of India -REACH Relance with Contral Bank of India -Inc.	posance with Andria Bank A/c 8153 Balance with Andria Bank A/c 8153 Balance with Bank of Baroda-USAID Balance with Central Bank of India -GFATM		Executive Secretary Mrs. Suraksha Giri	CAMP
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RESOURC	AS AT 31.03.2012	21,20,273.17	21,52,311.29	•	12.99.894.60	2,84,510.00	4,500.00				37,41,215.90	Vice-President Dr.Ravi Subramaniam	
	LIABILITIES	CAPITAL FUND Opening balance Add: Corpus Contribution Add: Excess of Income over Expenditure		GFATM Reserve A/c	GFATM Account Funds Received Axshaya Project - Round 9	Lilly Outstanding Liabilities (Schedule V)	John Joyce - DC					President Dr.S.Sivamurugan	Place: Chennai Date: 2 AUG 2012

Income and Expenditure Accounts 2011-12

<u>11H</u>	Y.E. 31.03.2012 31.03.2011	Rs. p Rs. p	1 25,68,863.75 26,47,100.00	II 1,28,452.00 2,56,929.36	16913 994 00 90 60 220 50	2.39.000.00								1,98,50,309.75 1,19,64,249.86	As per report attached	for M.R.Narain & Co. Chartered Accountants P. Anand (M.No.16189)
RESOURCE GROUP FOR EDUCATION AND ADVOCACY FOR COMMUNITY HEALTH NO 9/5 State Bank Street, II Floor, Mount Road, Chennai 600002 INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH 2012	INCOME		By donations received	By income from investments / deposits	By other income Grant Received	ABAN Cares									Executive Secretary Mrs. Suraksha Giri	Ohennal ACCOUNTY OF THE PROPERTY OF THE PROPER
Sank Street, Il Floo FURE ACCOUNT F	31.03.2011	Rs. p	96,30,481.00		5,63,572.00 29,127.00 g			1,926.00	15,319.00	3,32,200.00	10,718.00	17,075.64 1,03,852.00	8,22,797.06	1,19,64,249.86	Melece Luchran Treasurer E Dr.Nalini Krishnan M	
OME AND EXPENDI	Y.E. 31.03.2012	Rs. p	1,76,00,470.00		9,35,055.00 33,510.00 42,898.00	1,24,283.00	7,630.00	1,043.00	43,681.00	4,14,000.00	17,635.00	30,661.79 1,28,111.00 1,74,340.00	32,038.12	1,98,50,309.75	Vice-President Of Ravi Subramaniar	
NC NC	Sch		≥													
	EXPENDITURE		To expenditure for objects of the	To other administrative expenses:	Salaries and Wages Conveyance expenses Electricity charges	Telephone charges Office Maintenance	Postage and telegram Repairs & Maintenance - Others	Insurance premium Bank charges	Staff Welfare Audit fees	Rent Printing and Stationers	Miscellaneous Expenses	Depreciation Benefit Programme ABAN Charges	Excess of income over expenditure transferred to Balance Sheet		President Dr.S.Sivamurugan	Place: Chennai Date:

The REACH Team

REACH is governed by an Executive Committee which oversees all activities and offers valuable advice and guidance to the rest of the team.

Dr. M. S. Swaminathan, Chairman
Dr. Arjun Rajagopalan, Vice- Chairman
Dr. S. Siva Murugan, President
Dr. S. Ravi Subramaniam, Vice-President
Dr. Nalini Krishnan, Treasurer
Mr. Prakash Idnani, Secretary
Mrs. Suraksha Giri, Secretary
Mrs. B. Madhavan, Executive Member
Mrs. Geetha Ramaseshan, Executive Member
Dr. Ramya Ananthankrishnan, Executive Member
Ms. Anupama Srinivasan, Executive Member

The Team

Dr. Nalini Krishnan, Director Dr. Ramya Ananthakrishnan, Director - Projects, REACH Mr. J Gurumoorthy, General Manager Ms. Sheela Augustine, Programme Manager Ms. Anupama Srinivasan, Technical Consultant, REACH Media Projects Ms. Nalini Karunakaran, Project Coordinator Ms. Anne Sureshkumar, Project Coordinator Ms. P. Vidya, Project Coordinator Ms. Hamsini Ravi, Media and Communications Associate Ms. Neha Lamesh, Project Coordinator (Nutrition) Mr. Dhinakar Sairam, Social Worker Mr. Joseph Soundaraj, Social Worker Mr. Sai Pradap, Social Worker Ms. Mangaiyarkarasi. S, Field Supervisor Mr. S Ramjee, Field Officer Ms. Devi. T, Field Officer Ms. Kalaivani.N, Field Officer Ms. Thulasi. A, Field Officer Ms. Shanthi. K, Field Officer Ms. Deenadhavabari. M, Field Officer Ms. Chitra. M. Field Officer Mr. Jaganathan. R, Administrative Assistant

A parallel team at REACH is dedicated to implementing Project Axshya, supported by the Global Fund to fight AIDS, Tuberculosis and Malaria (Round 9).

Mr. S. Karthikeyan, Manager, Finance and Administration
Mr. K. Kumar, Programme Manager
Mr. M. Ganesh, Assistant Programme Manager
Mrs. Jagga Rajamma, Technical Consultant, Monitoring and Evaluation
Mr. G. Shankar, District Coordinator
Mr. D. Issac Rajesh Sekar, District Coordinator
Mr. K. C. A. John Joyce Rajan, District Coordinator
Mr. A. Alexpandi, District Coordinator
Mr. G. Senthil Kumar, District Coordinator
Mr. Joseph John Kennedy, District Coordinator
Mr. R. Soundarajan, Administrative Assistant

Great things are done by a series of small things brought together.

Vincent Van Gogh

Contact REACH

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