## India

Asian Institute of Public Health (AIPH)

Increasing case detection among slum-dwellers of Bhubaneswar and migrant industrial workers of Jajpur district of Odisha, India



To address this challenge, Asian Institute of Public Health (AIPH) identified the state capital of Bhubaneswar and Kalinganar in lajpur district, one of the largest industrial areas of the state, as areas with low TB case notification. AIPH then applied for and received a grant from TB REACH to launch a project to increase TB case detection and promote early diagnosis and treatment in these vulnerable communities. The project covers roughly 500,000 people within these two sites. The operational framework was finalized in collaboration with the state NTP, designated to receive the project's diagnosed TB cases for prompt case notification and treatment initiation.

The project identified, enrolled and trained the informal healthcare providers catering to the slum-dwellers and migrant workers in these areas, training them to identify the early symptoms of TB in their patients. To mitigate the costs associated with seeking TB care, including missed wages and transportation costs, sputum samples from the presumptive TB patients were collected and transported to the project laboratory by a network of community health workers. The two laboratories operating at these two sites are equipped with Xpert® MTB/RIF (Xpert) machines, which provide considerably higher sensitivity of diagnosis and reduce the turnaround time substantially, as compared to traditional sputum microscopy. The Xpert laboratories are located in the main public hospital in Bhubaneswar and in a private steel industry-owned dispensary in Jajpur. The project proactively facilitates initiation of treatment for diagnosed TB patients at the nearest DOTS clinic.



Case detection activities began in November of 2014. By June 30, 2015 the roughly 700 project-trained informal providers had examined 1627 sputum samples from individuals with presumptive TB in the project's two laboratories, and detected 287 MTB–positive cases. Out of these detected cases 258 have already been initiated on DOTS treatment and notified by NTP. The project has contributed 140 newly diagnosed MTB– positive cases to NTP in this period as compared to the corresponding period of the previous year.

## Stop B Partnership

India has a large migrant population which suffers from tuberculosis (TB). One of the main drivers of epidemics in migrant populations is the reluctance to access public health services and the consequent delay in treatment. Several factors contribute to this situation, including the loss of wages while seeking care, prohibitive travel costs, and the lack of awareness of TB and TB care provided by the government. As a result, presumed TB patients first seek symptomatic relief from their "friendly neighbors", or informal healthcare providers. More often than not, these untrained individuals will fail to refer their patients to appropriate public clinics or to diagnose and treat them appropriately. Consequently, these patients go untreated for long periods, which further facilitates the spread of the disease, and contributes to high mortality, and a low TB notification.

## FINDING AND TREATING

FINDING AND TREATING PEOPLE WITH TB IN THE WORLD'S POOREST COMMUNITIES



Government Gouvernement of Canada du Canada

More than nine and a half million people around the world become ill with tuberculosis (TB) each year. About onethird of them fail to get an accurate diagnosis or effective treatment and are more likely to die from this curable disease.

By supporting the many partners working in the field, TB REACH offers a lifeline to these people by finding and treating people in the poorest, most vulnerable communities in the world. In areas with limited or non-existent TB care, TB REACH supports innovative and effective techniques to identify people who have TB, avert deaths, stop TB from spreading, and halt the development of drug resistant strains.

TB REACH has supported a total of 142 projects in 46 countries. To date, 33 million people have been screened for TB in project areas, of which, 1.7 million have received TB treatment, accounting for 856,000 lives saved. Some projects have seen increases in TB notifications of more than 100%.

Our partners are providing evidence for new case finding approaches and are working with community and policy leaders as well as donors such as The Global Fund to integrate those approaches into national strategies that improve TB case detection.

TB REACH was launched in 2010 thanks to a CAD\$ 120 million grant from Global Affairs Canada.

TB REACH acts as a pathfinder, providing fast track funding for innovative projects, monitoring effectiveness and leveraging funding for scale up.



Stop TB Partnership Secretariat Geneva, Switzerland Email: tbreach@stoptb.who.int Phone: + (41) 22 791 46 50 Fax: + (41) 22 791 48 86