Nepal

Japan-Nepal Health & Tuberculosis Research Association (JANTRA)







Community Engagement through A TB REACH Project

Japan-Nepal Health and Tuberculosis Research

Association (JANTRA) is the principle NGO in the field of tuberculosis (TB) in Nepal. JANTRA has been involved in Urban Tuberculosis Control and TB in hard to reach areas through designing effective models and mobilizing Urban TB Volunteers in Kathmandu Valley for the past eight years. JANTRA works in close coordination and collaboration with the NTP, Key Affected Population (KAP) and local stakeholders.

|ANTRA received a TB REACH WAVE 4 grant for "Increased case finding among high risk groups by mobilizing frontline health work forces in Kathmandu valley". With an annual target of screening 81,500 people working as: garbage collectors (15000), presumptive TB patients visiting private pharmacies (60000), street children (2000) and close contacts of index cases (4500), the project seeks to identify an additional 129 New Smear Positive (NSP) cases in Kathmandu valley. As an active member of Nepal TB Control-Network (TBCN) the grant opportunity provided through the Stop TB partnership supports development of affordable and acceptable methods of serving a population often not reached by the regular health system. The organization believes that community participation and involvement of KAP is necessary for

the effective implementation of the TB REACH Project. The project approach, as distinct from the NTP's regular system, emphasizes capacity building in other key stakeholders, including project and NTP staff. The objectives have been: (1) enhancing awareness among target groups about TB; (2) motivating these populations to take part in mobile microscopy camps; (3) detecting additional cases; (4) building social harmony through mutually enhanced understanding between communities and KAP and (5) strengthening the service delivery system within each community.

A joint planning meeting with the NTP and stakeholders was conducted at each project site, to scale up the capacity of local health care providers and volunteers to monitor and supervise the project activity. In order to staff all project sites, 108 local administrative chiefs, 97 health care providers working under the local government, 301 private healthcare providers and 792 TB volunteers were trained and oriented in the project approach and implementation modality. Well-designed community referral forms and formats were distributed to healthcare providers (public and private) and TB volunteers were provided with a sufficient number of sputum containers to collect an early morning sample from presumptive TB patients participating in the mobile microscopy camps. Presumptive TB patients are



referred to TB laboratories by the TB volunteers on a regular basis. This system is closely supervised and monitored by NTP and project staffs. Among the total presumptive TB patients screened in all the communities, 85% participated in the camps. The remaining 15% who were unable to participate in the camps due to household responsibilities and other jobs were visited by TB volunteers who collected samples and relayed them to a nearby laboratory. The July 16, 2014– July 15, 2015 annual report reveals that a total of 168 additional NSP cases were detected from the project sites.

The operational involvement of NTP and key stakeholders from the beginning of the project has enhanced the sense of ownership and accountability for effective TB care and prevention.



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.



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