

## Community engagement through community preparedness and community volunteers

The World Health Organization (WHO), ENDTB strategy and programme guidelines of India also emphasize on need to engage and empower communities for TB care. The TB control programme has been focusing on community engagement as an important strategy for TB control and elimination. However while this is used as a terminology little is known as to what this really entails in order to be a successful intervention strategy.

The NIRT has been actively involved in community engagement through various research studies. The role of Self Help Groups as a potential task force has been documented and published. This project was carried out in two blocks of Thiruvallur district covering all village panchayats. It was found that 84% of the



self-help group women were able to involve in spreading TB awareness. A significant proportion had involved in identification and referral of symptomatics. Their role has proved effective in identification and referral of TB symptomatics and as DOTs providers. The Targeted intervention project carried out in 4 states with NIRT coordinating the project in Gujarat has resulted in showcasing the importance of community engagement to promote the reach and utilization of TB services in remote tribal areas through the Mobile vans equipped with digital X rays and sputum



collection. The community volunteers were selected through a participatory approach using influential acceptable persons within the community, NGOs, and the health services. They were trained on TB and served as a link between the community and the

TB programme. Their role included spreading TB awareness, identification and referral of TB symptomatics to the vans for further investigations.

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We have also found school children as a promising group to serve as TB ambassadors for TB control. As part of this project several IEC materials are developed which are student friendly. An interim analysis done showed that there was a significant increase in the level of TB awareness among the students and it was also reflected that majority of the students had shared that TB message to others like their own families, friends, neighbors and relatives. It is very encouraging to find that the students are very actively involved in TB control in their own capacities.



The NIRT has worked on a community driven model to evaluate and strengthen health services. Currently we are involved in the TB free Chennai project with the Chennai Corporation and have been helping them in the community preparedness activities. This is crucial before the implementation of any programme which includes Active case finding, any operational or implementation research planned.

Furthermore the NIRT has been involved in various community awareness programs in and around Chennai from the urban slums, school and college students, NSS programme managers, ICDS workers, mothers of anganwadi children, brick kiln workers, old age homes, corporation conservancy workers, irular tribal area, JAT community, prisoners, prison officials.

Various strategies are used depending on the target population from visuals such as movies, animated films, posters, street plays, villu pattu, puppet shows and interactive sessions



We also have a community Advisory Board (CAB) to guide and direct research activities ensuring that ethical principles are maintained and interests of the communities are not compromised.

For the success of any programme unless the communities are prepared through well designed TB sensitization programmes the reach of any of the programs would remain far from satisfactory. Experiences from health visitors and investigators have revealed the reluctance to provide sputum for testing for fear of being stigmatized, the lack of awareness and misconceptions on TB with many who still attribute TB as a heredity disease, a disease that only affects the poor and especially the man, that girls with TB cannot get married, TB treatment is expensive and unaffordable etc. The NIRT has not only supported the TB sensitization activities but has also helped in identification of community volunteers through a community participatory approach, training of the volunteers and reviewing the activities of the volunteers.

Against this back ground the NIRT can support in capacity building activities for community engagement through support in training and capacity building 2. Reviewing and monitoring activities 3. Providing the IEC materials that we have developed 4. Support in any community awareness programmes through our team at NIRT which

has a villu pattu, training of community volunteers for promoting TB awareness through role plays and skits 5. Training of community volunteers on assessing and reporting the gaps in TB services so that timely interventions are done to improve quality of services