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## Collaborative Survey on TB Awareness with Anklachh PHC under the India TB Free Movement

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### ABSTRACT:

Tuberculosis (TB) is an infectious disease caused by *Mycobacterium tuberculosis*, commonly affecting the lungs. All health care professionals including the pharmacists provide a valuable public health role in promoting community awareness of TB particularly in reducing stigma attached to TB. Thus, creating awareness at a community level could play a vital role in control and prevention of TB. Tuberculosis (TB) prevalence surveys provides the most accurate measure of the burden of disease and data for monitoring disease trends over time. This survey is being conducted to find out how much awareness is present in the population of Anklachh PHC and how much more awareness and improvement is needed amongst the people. Therefore, some questions related to their health and daily habits are added in the questionnaire so that the people can be guided accordingly. Questions related to their daily habits like exercising, consumptions of any products like gutkha are also asked so that their physical health can also be known. They were also be asked about the PHC services and asked about awareness of those schemes and the help provided by the PHC and the ASHA-workers. Questions related to the TB disease, the symptoms, and the precautions are also added. So that we can get a graph of how many of them do have the knowledge about the disease, know their symptoms and precautions so that they can fight against TB and also help their family and spread awareness amongst others. Data collected from 245 person during. Impact of the education session showed a significant knowledge improvement about TB from 1.59% (pre-education) to 49.67% (post-education).

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### INTRODUCTION

Tuberculosis is a communicable chronic granulomatous disease caused by *Mycobacterium Tuberculosis*. It involves the lungs but may affect organ or tissue in the body.<sup>[1][2]</sup> Sign and symptoms of active TB are following: Fever, Night sweats, Malaise, Fatigue, Weight loss, Blood-streaked productive cough, Pain in chest.<sup>[3][4]</sup> Tubercle bacillus or Koch's bacillus called *Mycobacterium Tuberculosis* cause Tuberculosis in the lungs and other tissues of human body.<sup>[5]</sup> Transmission usually is direct by inhalation of airborne

organism in aerosols generated by exposure to contaminated secretion of infected individuals.<sup>[1]</sup> When someone who has TB, coughs sneezes, talks, laughs, or sings, they release tiny droplets that contain the germs. If you breathe in these germs, you can get it. TB isn't easy to catch. You usually have to spend a long time around someone who has a lot of the bacteria in their lungs. You're most likely to catch it from co-workers, friends, and family members.<sup>[6]</sup>

**Schemes and polies produce by government**

The Revised National Tuberculosis Control Programme has potential for synergies with other strategic national priorities. For example, household air pollution can be reduced by replacing traditional fuels for cooking with LPG provided through Pradhan Mantri Ujjwala Yojana (PMUY).

India's UHC programme Ayushman Bharat, together with other development schemes, such as Swachh Bharat Mission, Pradhan Mantri Awas Yojana, Poshan Abhiyaan, Skill Development Programmes such as Pradhan Mantri Kaushal Vikas Yojana etc., will also complement MoHFW's efforts towards ending tuberculosis in the country.<sup>[7]</sup>

**TB Corpus Fund:** To accelerate TB control efforts 'Bharat Kshay Niyamtran Pratishthan' (India TB Control Foundation) is proposed. Activities like nutrition support for TB patients, active case finding in prisons, slums, tribal area, sputum collection and transport in difficult areas will be carried out.<sup>[8]</sup>

The drug used in the treatment of tuberculosis are classified into:

**First line drugs (FLDs):-** (used in standard therapeutic regimen) Isoniazide, Rifampicin, Ethambutol, Pyrazinamide, Streptomycin.

**Second Line Drugs (SLDs):-** Ethionamide, Para-amino salicylic acid(PAS), Cycloserine, Viomycin, Kanamycin, Amikacin, Capreomycin, Thiacetazone, Ciprofloxacin, Ofloxacin, Rifabutine.<sup>[9][10]</sup>

WORLD TUBERCULOSIS DAY is celebrated each year on March 24 to increase efforts to end the global tuberculosis epidemic.

World TB Day is a day to educate the public about the impact of TB around the world.<sup>[11]</sup>

#### **Action for INDIA TB free movement**

By Launching TB-Free India Movement on 13th March, 2018 at the Delhi End TB Summit, Hon'ble Prime Minister of India reinvigorated the Government's commitment to eliminate TB by 2025, five years ahead of the global target. The Ministry of Health & Family Welfare (MoHFW) has developed a National Strategic Plan (2017-25) for elimination of TB in the Country by 2025 which outlines 'Multisectoral Action' as one of the key strategies.<sup>[11]</sup>

#### **a. Role of government**

Ministry of Health and Family Welfare, Government of India has announced the scheme for incentives for nutritional support to TB patients. This scheme will be called "Nikshay Poshan Yojana".<sup>[7]</sup>

MoHFW has launched the Direct Benefit Transfer (DBT) scheme for nutritional support to Tuberculosis patients called as 'Nikshay Poshan Yojana' (NPY) from 1st April, 2018. The scheme has been introduced with a purpose of providing monetary assistance to TB patients for meeting their nutritional needs. The scheme is expected to reduce out-of pocket expenditure of TB patients, increase TB notifications and motivate patients to complete full course their treatment.<sup>[11]</sup> Under the scheme, Rs. 500 per month is transferred to the bank account of TB patients (diagnosed and notified after 1st April 2018) for the entire duration of their treatment. One of the objectives of the inter-ministerial coordination is not only to provide an access to quality TB services to the populations served by other Ministries / Departments but also to extend such benefits available under RNTCP for holistic, patient-centric care.<sup>[11]</sup>

#### **Role of PHC in treatment of TB**

**Revised National Tuberculosis Control Programme (RNTCP):-** All PHCs to function as DOTS Centres to deliver treatment as per RNTCP treatment guidelines through DOTS providers and treatment of common complications of TB and side effects of drugs, record and report on RNTCP activities as per guidelines. Facility for Collection and transport of sputum samples should be available as per the RNTCP guidelines.

**Role of medical officer:-** He/she will provide facilities for early detection of cases of Tuberculosis, confirmation of their diagnosis and treatment. He/she will ensure that all cases of Tuberculosis take regular and complete treatment. Ensure functioning of Microscopic Centre (if the PHC is designated so) and provision of DOTS.

**Job Responsibilities of Health Assistant Male:-** Check whether all cases under treatment for Tuberculosis are taking regular treatment, motivate defaulters to take regular treatment and bring them to the notice of the Medical Officer, PHC. Ensure that all cases of Tuberculosis take regular and complete treatment and inform the Medical Officer, PHC about any defaulters to treatment.

Job Responsibilities of Laboratory Technician: Carry out examination of sputum Preparation, staining and examination of sputum smears for Mycobacterium tuberculosis (wherever the PHC is recognized as microscopy centre under RNTCP).<sup>[12]</sup>

**Methodology**

Survey type Generally survey can be conducted in two ways:

- b. Questionnaire
- c. Interview

In this survey we have chosen questionnaire way. For that we have prepared different questions to get a brief idea about the awareness about TB in population.

The Survey method is the technique of gathering data by asking questions to people who are thought to have desired information. A formal list of questionnaires is prepared.

Survey method includes the collection of data, information, idea, precautions and awareness regarding TB disease.

This includes knowing their status regarding TB disease and their Perspective towards disease and patient.

We have tried to visit Maximum home with ASHA workers and asked them to give us the information by the means of questionnaire which we have prepared.

Questionnaire includes their general information, Daily Habits which may Relate TB disease, Their Knowledge about TB and its medication, patient’s responsibility and Social Discrimination towards TB patients.

By questioning this we can get the idea about their self-awareness and we can give them all possible information and make them aware towards the TB Disease and its treatment, Government Schemes, Programs and push them forward under **INDIA TB FREE MOVEMENT**.

We have also distributed pamphlets which was provided by the PHC under TB Control Programme by Government.

➤ Questionnaire:

The survey is divided into two sections of questionnaire and firstly it consists of personal information. Then about the topics which are General information and last about TB information.

**Table no 1: Questions for general information.**

GENERAL INFORMATION	
1.	Name
2.	Age
3.	Gender
4.	Address
5.	Any government ID
6.	Occupation

**Table no 2: Questioner regarding habit and knowledge regarding TB.**

OTHER INFORMATION	
1.	Do you consume any? a. alcohol    b. Smoking    c. Beverages    d. Tobacco, Gutkha
2.	Are you doing Exercise on daily basis? a. Yes    b. No
3.	Do you have any symptoms? a. cough more than 2 weeks    b. fever more than 2 weeks c. blood-stained sputum    d. chest pain e. body weight loss    f. fatigue g. malaise    h. shortness of breath i. night sweat
4.	Are you Aware of TB disease? a. Yes    b. No
5.	Do you have basic information of TB disease? a. Yes    b. No
6.	Do you have any other disease? a. Yes    b. No
7.	Is any of your Family Member is Suffering from TB? a. Yes    b. No
8.	Have you been infected with TB in the past? a. Yes    b. No
9.	Do you have any recent contact with TB patient? a. Yes    b. No

**Table no 3: Questioner regarding TB awareness and PHC.**

<b>ABOUT PRIMARY HEALTH CENTER (PHC)</b>	
1.	Are you Aware of PHC nearby you? <b>a. Yes b. No</b>
2.	Are you referring PHC? <b>a. Yes b. No</b>
3.	Are you in contact with ASHA-WORKER for any disease? <b>a. Yes b. No</b>
4.	How ASHA-WORKER help you?
5.	Are you taking any medicine from PHC? <b>a. Yes b. No</b>
6.	Are you aware of any scheme related to TB, provided by government? <b>a. Yes b. No</b>
7.	Are you aware of funds provided by government for TB treatment? <b>a. Yes b. No</b>
8.	Are you aware of TB free INDIA-2025 Movement by government? <b>a. Yes b. No</b>
9.	Is TB communicable disease or not? <b>a. Yes b. No</b>
10.	Are you taking any medicine for TB disease? <b>a. Yes b. No</b>
11.	Do you prefer DOTS therapy? <b>a. Yes b. No</b>
12.	What is the Frequency of TB medication? <b>a. once in a day b. once in a week c. occasionally d. none</b>
13.	Have you observed any side effect while taking TB medication? <b>a. Yes b. No</b>
14.	Based on your experience would you recommended other patient to take TB therapy? <b>a. Yes b. No</b>
15.	If No, why would you not recommended other, to take TB medication? <b>a. No effect b. Have side effect c. Undesired effect d. None</b>
16.	Patient mental status about disease? <b>a. Positive b. Anxiety c. Depression d. Careless</b>
17.	Which type of test are carried out during the TB treatment? <b>a. skin Test b. Sputum Test c. Chest x-ray d. None of the above</b>

18.	How frequently the sputum test is carried out during the treatment for TB? <b>a. After 2 months b. After 6 months c. none of the above</b>
19.	Which type of food are avoided by patient in disease condition? <b>a. Beverages b. Bakery food c. Tobacco product d. all of the above</b>
20.	Does patient face any discrimination from society? <b>a. Yes b. No</b>

**Results and Discussions**

In this survey 245 people have taken part and respondent the questionnaire which results will be discussed here.

Some personal information like Name, Age, Government id, Address and Occupation which should be kept confidential so cannot be revealed here.

From the survey report, 48.7% females and 51.2% male have respondent the questionnaire.

Table No 4: Results of Short question.

NO.	QUESTIONS	YES	NO
1	Are you doing Exercise on daily basis?	13.90%	86.10%
2	Are you aware of TB disease?	82%	18%
3	Do you have basic information on TB diseases?	62.90%	37.10%
4	Do you have any other disease?	17.60%	82.40%
5	Is any of your family member is suffering from TB?	2%	98%
6	Have you been infected with TB in the past?	0.40%	99.60%
7	Do you have any recent contact with TB patient?	0%	100%

8	Are you aware of PHC nearby you?	95.50%	4.50%
9	Are you referring PHC?	65.30%	34.70%
10	Are you in contact with ASHA-WORKER for any disease?	47.30%	52.70%
11	Are you taking any medicine from PHC?	63.30%	36.70%
12	Are you aware of any scheme related to TB provided by government?	50.20%	49.80%
13	Are you aware of funds provided by government for TB treatment?	43.70%	56.30%
14	Are you aware of TB free INDIA-2025 movement by Government?	9%	91%
15	Is TB communicable disease or not?	68.60%	31.40%
16	Are you taking any medicine for TB disease?		99.60%
17	Do you prefer DOTS therapy?	2%	98%
18	Have you observed any side effects while taking TB medication?	0%	100%
19	Based on your experience would you recommended other patient to take TB therapy?	8.60%	91.40%
20	Does patient face any discrimination from society?	11.80%	88.20%

From question 7 we observed that 5.5% people smoke, 9% of them consumes tobacco and stuff like gutkha, 10.2% of them consumes alcohol, 14.77% people consume beverages and on a positive note 59.6% of them are aware of the dangerous and harmful side effects of consuming these products and therefore they avoid consuming the same.

From question 27 we observed that most of them answered that they do not exercise on daily basis. They

were all aware of the benefits of daily exercise, what did not knew is – how good or exactly what qualifies as exercise. 85.1% people do not exercise on their daily ‘to do’ list. What’s impressive about this survey aside from the sheer volume, is the number of conditions exercise seems to prevent or delay.

From question 31, our next question tested the status of the people related to the disease. TB has been extremely medicalized and the so-called softer areas like counselling, patient care, psychological support are seen not to so medical. So, they have this reflection in our next result which shows 39.2% deeded with Anxiety, 35.5% carelessness, 0.8% with Depression. If we look at the TB response, it’s only got to do with tools. Though they are very important, we shouldn’t forget that all these together contribute to the success against TB.

**CONCLUSION**

From the above report it is concluded that majority of the population are concern of their health, so to maintain good health they are giving their much efforts. The positive result of the survey show that majority of the population are aware regarding TB disease.

We aware them about the TB related things like a symptoms, causative agent, mode of spread were reasonably good, knowledge on availability of DOTS centers, free treatment, curability and TB possibility leading to death is still poor among rural population.

The need for imparting health education and awareness especially in rural communities through health care personal is needed to progress towards TB free India.

Less population are aware about the TB free INDIA 2025 movement, so more Awareness required for those people who don’t know about this movement so we can aware them by telling about the movement. Till there is less percentage of contact with ASHAWORKER for their various kinds of disease, so there is scope of the improvement to rise the contact of ASHAWORKER for the various disease to save the life generate the awareness treatment.

Government of INDIA taking a more step towards the physical health as well as mental health, they leading to yoga exercise also in a various platform, still there is chances of awareness and scope of improvement in exercise as well as contact with Ashaworker and TB free INDIA movement in region of Anklachh PHC.

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