



IAPPD Newsletter

A Quarterly Newsletter of Indian Association of Parliamentarians on Population and Development



Hon'ble President congratulated IAPPD for its project on 'Content Analysis of Parliament Questions on Population and Health'

Hon'ble President of India Shri Pranab Mukherjee, congratulated the Indian Association of Parliamentarians on Population and Development for bringing out the project report entitled 'Content Analysis of Parliament Questions on Population and Health, with special emphasis on Reproductive and Child Health (RCH) and Sexual and Reproductive Health and Rights (SRHR)-2016'. The report was presented to the Hon'ble President by Prof. P.J. Kurien, Deputy Chairman, Upper House of Parliament and Chairman, IAPPD on September 26, 2016. Smt. Viplove Thakur, MP and Shri Avinash Rai Khanna, former MP, also graced the occasion.

Members of the Technical Advisory Committee of IAPPD including Prof. P.P. Talwar, Dr. J.P. Narain, Dr. (Smt.) Sudesh Nangia, Dr. Dinesh Agarwal, Dr. J.S. Yadav, Smt. Suneeta Mukherjee, Shri R.N. Singh and Dr. Abhay Kumar along with Shri Manmohan Sharma,

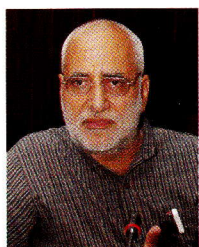
Executive Secretary, IAPPD were also present on this occasion.

The report is based on the questions raised in both the houses of Parliament during the Question Hour. The objective of the study was to understand the level of awareness among the Parliamentarians on national and international demographic and health agenda. The findings of the report will certainly help IAPPD to tailor advocacy programmes for Elected Representatives. The results of the Content Analysis were presented under four categories of population and health questions i.e. population growth and stabilization, reproductive and child healthcare and SRHR, HIV/AIDS and gender ratio, sex determination and female foeticide.

The project was conducted by IAPPD with the support by Asian Forum of Parliamentarians on Population and Development (AFPPD), Thailand.



Prof. P.J. Kurien submitting the report to Hon'ble President. Also seen in the picture Mrs. Viplove Thakur, MP; and Mr. Avinash Rai Khanna, ex-MP; along with Mr. Manmohan Sharma and Members of TAC, IAPPD.



India has a long and distinguished tradition of research in TB. Studies from the Tuberculosis Research Centre in Chennai and the National Tuberculosis Institute in Bangalore provided key knowledge to improve treatment of TB patients all around the world. Modern anti-TB treatment can cure virtually all patients. It is, however, very important that treatment be taken for the prescribed duration, which in every case is a minimum of 6 months. Because treatment is of such a long duration and patients feel better after just 1-2 months, and because of many other problems that TB patients face such as poverty and unemployment, treatment is often interrupted.

In India, the "Revised National TB Control Programme" is being implemented by the Central TB Division (CTD), Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India. With the advent of the Sustainable Development Goals (SDGs), the third goal of which is aimed at the end of the tuberculosis epidemic by 2030, and the expiration of the Stop TB Strategy, a new era in control efforts is set to begin. WHO's End TB Strategy envisages a world of "zero deaths, disease, and suffering due to tuberculosis". The 2035 target is a 95% reduction in deaths and a 90% reduction in incidence relative to 2015 levels. India's Revised National Tuberculosis Control Programme has entered 12th Five Year Plan (2012-17) with a budget of Rs. 4500 crore, with the theme of Universal Access for quality diagnosis and treatment for all TB patients in the community and a target of "reaching the unreached". Our Vision 2020 is to significantly reduce TB burden in India by ensuring universal access to quality and assured TB care as per Standards for TB Care in India (STCI).

IAPPD along with The International Union Against TB and Lung Disease (the Union) has had several sessions in the past to discuss the issue of TB with Members of Parliament and advocate for increased attention to TB care and prevention. In the series, IAPPD in collaboration with The Union and the Central TB Division (CTD), Ministry of Health & Family Welfare (MoHFW), reached out to Members of Parliament

and Civil Society Organizations to discuss the urgent need for united action on TB. "India TB Caucus: Parliamentarians Meet Towards a TB-Free India" was organized on August 8, 2016 in New Delhi. This meeting was a follow up session to the deliberations held last year, which recognized the need to build a sustained political response to eradicate TB in India. This year, the focus was to sensitize parliamentarians on the situation of TB in India, and to seek their commitment to the formation of an India TB Caucus, which would catalyze a truly robust and sustainable political response to this global disease.

Also, 'Himachal Legislators Meet Towards a TB-Free India' was organized in Shimla, Himachal Pradesh on August 26, 2016 to discuss the problem of TB in Himachal Pradesh and emphasize the need for collective action at all levels.

Manmohan Sharma
Executive Secretary, IAPPD

Quick facts about TB

- *Tuberculosis is one of the major public health problems being faced in India.*
- *Every 5 minutes 2 people die because of TB in India.*
- *1 in every 4 TB patients in the world is from India.*
- *Every year about 2.2 million people develop TB in India.*



To sensitize Members of Parliament on family planning and reproductive health and showcasing innovative model of family planning service delivery benefiting the marginalized populations, an Exposure Visit for Parliamentarians was organized by IAPPD in collaboration with Population Foundation of India (PFI) and ARTH (Action Research and Training for Health), Udaipur, Rajasthan during July 14-15, 2016.

The idea of the visit was to generate debate and influence policy makers so as to address the growing need for

family planning services by showcasing innovative models of family planning service delivery benefiting the marginalized populations. Seven Members of Parliament including Mr. Kantilal Bhuria, MP & former Union Minister; Mrs. Viplove Thakur, MP; Mr. Laxmi Narain Yadav, MP; Mr. Narayan Lal Panchariya, MP; Mr. Jugal Kishore Sharma, MP; Mr. Arjun Lal Meena, MP (Local Host) and Mr. Manmohan Sharma, Executive Secretary, IAPPD, joined the visit.



The field programme featured provision of reproductive and child health services through a clinic; periodic outreach services in all villages; community based education and distribution of health products through volunteers; health education of women, men and adolescents; mobilization of panchayati raj self-government institutions on health issues; and surveillance of a few service coverage indicators.



The group members enhanced their knowledge and information of the innovative models of the family planning services being used in the area. At the end of two-day visit, the MPs were motivated to take up these issues with the health departments in their respective state for such services at the village/grass root level.

Seen above in the pictures: Members of Parliament during the Exposure Visit.



Project on Engagement of Parliamentarians: Realizing Commitments to Family Planning in India

New Delhi, July 28, 2016

Given the democratic and parliamentary setup of India, the role of the parliamentarians is of utmost importance. They are the representatives of the people and have been levied with the task of addressing issues of national and international importance - social, economic and political. They are a bridge between the government and the people. The demands raised by the people are addressed by these representatives in the parliament. Besides, they also act as guards for the executive through various parliamentary proceedings. They express their views for or against any of the government policies and programmes. Debate and discussion on policies, programmes and decisions of the government is an important element of deliberative democracy and the parliamentarians have played a proactive role in enhancing and consolidating these core values in Indian democracy. As such, it is important for the representatives to be aware, educated and proactive on the various issues of national and international importance.



With the objective to discuss issues related to family planning and maternal health in India, a one-to-one meeting with

the Members of Parliament was organized by IAPPD in collaboration with Population Foundation of India in New Delhi on July

28, 2016. The meeting was attended by Mrs. Viplove Thakur, MP, Ms. Kahkashan Perween, MP, Ms. Vandana Chavan, MP; Mr. Shadi Lal Batra, MP; Prof. A.A. Sitaram Nair, MP and Mr. Arjun Lal Meena, MP; and senior officials from TRIFED (The Tribal Cooperative Marketing Development Federation of India Limited), PFI and IAPPD.



Issues related to unmet needs of family planning, safe abortion, women health and family planning were discussed at length during the meeting. At the end of the meeting the parliamentarians were of the view that these issues should be close to the heart and mind of parliamentarians. Also, parliamentarians need to be advocated and motivated on such issues in asking and probing what government is doing to ensure that it meets the global ICPD, ICPD+20, MDGs and SDGs agenda of population and health.

Seen above in the pictures: Members of Parliament during the One-to-One Meeting.

Neonatal deaths double in

Advances in medical technology and health infrastructure in the city seem to have done little to save children from dying. The latest birth and death registration data shows that the number of neonatal deaths — children dying within 29 days — has nearly doubled in the last 10 years from 3,183 in 2005 to 5,908 in 2015.

The number of infant deaths (children who die before turning a year old) in the capital has also gone up from 4,182 to 8,695 over the last decade. This data was released in the annual report prepared by the Directorate of Economics and Statistics of Delhi Government on registration of births and deaths in 2015.

The data shows infant deaths were caused by hypoxia, birth asphyxia and other respiratory conditions (20.34%) followed by septicaemia (11.36%). Slow fetal growth, fetal malnutrition and immaturity was the third-most common cause of infant deaths (7.26%).

“Infant deaths are 6.98% of the total registered deaths in Delhi, which is slightly higher than 6.67% recorded during the preceding year. Of these infant deaths, 8,612 were institutional and 83 non-institutional. The infant mortality rate per thousand live births in 2015 is 23.25%, which are higher in comparison to preceding year,” said officials.

Public health officials are shocked at the neonatal and

Enhancing the Role of Parliamentarians in the inter-linkage between Population Issues and the 2030 Agenda for Sustainable Development – Part-II

Addis Ababa (Ethiopia), August 10-12, 2016

APDA in cooperation with Ethiopian Parliament and with support from UNFPA and Japan Trust Fund organized a meeting on Enhancing the Role of Parliamentarians in the inter-linkage between Population Issues and the 2030 Agenda for Sustainable Development – Part-II in Addis Ababa during August 10-12, 2016.

This conference was a part of the APDA conducted project initiated last year(2015) in Nairobi, Kenya. The present project targets to further elaborate on the topics previously discussed and introduced. The main theme of the programme was to identify and examine the role of parliamentarians towards achieving the 2030 agenda for sustainable development goals and their contribution to Sixth Tokyo International Conference on African Development with focus on population and sustainable development.

In his keynote address, Hon. Hiroyuki Nagahama, Vice-Chair of Japan parliamentarians Federation for Population, said that we need to build “societies where the dignity of the human person can be ensured”.

Mr. Ananda Bhaskar Rapolu, MP; Shri Arjunlal Meena, MP; and Mr.

Manmohan Sharma, Executive Secretary, IAPPD, attended this meeting.

During the session on Investment for Sustainability – Food Security and Women’s Empowerment, Mr. Ananda Bhaskar Rapolu, MP, India, made a presentation on ‘Food Security is Future Security’. He said that vulnerability of family and community is great challenge in food security. Government intervention and self-sustained housing will reduce the vulnerability. For empowering community, primarily we have to emancipate women. Indian experiment of self-help groups is revolutionizing the strength of community and women earning capacity is directly resulting into empowerment of family.



Indian delegation members (from left) Mr. Manmohan Sharma, Mr. Ananda Bhaskar Rapolu, MP; and Shri Arjunlal Meena, MP; with other participants during the meeting.

a decade, infants also at risk

infant mortality rate. “The government is celebrating the increase in institutional births, but there is no focus on improving infrastructure and managing shortage of staff in hospitals. Often, patients are referred to bigger hospitals at the last minute due to lack of equipment or expertise at the smaller centres,” said a doctor.

Maternity centres and some government-run health institutions, experts said, lack facilities for caesarean-section delivery. “There are cases of women delivering in ambulances every day. This is because there is no trust in local maternity centres and patients travel long distance at the last minute for delivery,” said a public health expert. He also blamed poor nutrition of mothers for the high infant mortality rate.

Doctors said that public sector hospitals are overburdened and the private sector is unaffordable for most people. “The cost of ICU care for a newborn in most big hospitals is Rs.10,000-30,000. The government should add newborn care facilities in peripheral hospitals,” a senior doctor said.

Social activists working for the rights of women and the girl child point towards the need for focussed measures to build awareness against sex determination tests and crackdown on ultrasound clinics offering such facilities illegally.

Source: Archana Khare Ghose, Sadhguru Jaggi Vasudev & Saumya Pant, Times News Network, August 4, 2016.



Prof. P.J. Kurien, Deputy Chairman, Rajya Sabha, Chairman, IAPPD (Centre), Mrs. Viplove Thakur, MP, Mr. C.K. Mishra, Secretary Health, MoHFW, Dr. Sunil Khaparde, DDG TB, MoHFW and Mr. Manmohan Sharma, IAPPD during the Inaugural Session.

"India TB Caucus: Parliamentarians Meet Towards a TB-Free India" was organized on August 8, 2016 at Le Meridian, New Delhi by the IAPPD in collaboration with The International Union against TB and Lung Disease. This meeting was a follow up session to the deliberations held last year on December 21, 2015, which recognized the need to build a sustained political response to eradicate TB in India. This year, the focus was to sensitize parliamentarians on the situation of TB in India, and to seek their commitment to the formation of an India TB Caucus, which would catalyze a truly robust and sustainable political response to this global disease.

The meeting was chaired by Prof. P.J. Kurien, Deputy Chairman, Rajya Sabha (Vice-Chairman, AFPPD, Bangkok & Chairman, IAPPD) and attended by the Members of Parliament (both Rajya Sabha and Lok Sabha) from the states including Bihar, Chhattisgarh, Gujarat, Himachal Pradesh, Jharkhand, Karnataka, Kerala, Maharashtra, Punjab, Rajasthan, Telangana, Uttarakhand and West Bengal. From The government Mr. C.K. Mishra, Secretary

Health, MoHFW and Dr. Sunil Khaparde, DDG TB, Central TB Division, MoHFW appraised the Members of Parliament (MPs) on the TB situation in India and the efforts being made by the government. Mr. Reuben Swamickan, Senior Advisor, Tuberculosis and Infectious Diseases, USAID India, Shri Manmohan Sharma, Executive Secretary, IAPPD, senior representatives from civil society partners, and Ms. Kavita Ayyagari, Project Director, Challenge TB were also present.

Mr. Manmohan Sharma, Executive Secretary, IAPPD shared a note on the need to discuss on TB and thank everyone present in the gathering.

Smt. Viplove Thakur (MP, Rajya Sabha), welcomed all the participants and said, "Given the high burden of TB in the country, the role of parliamentarians becomes particularly important. We, as policy makers, have engaged with health issues in the past and are willing to engage on the issue of TB and to push for effective policy and programme decisions." She emphasized on the importance of interventions to prevent further transmission of TB.

Addressing the parliamentarians, Prof. P.J. Kurien, Deputy Chairman, Rajya Sabha noted, "Many people who have TB do not know that they are suffering from this disease. The Parliamentarians have a major role to play in the fight against TB, as they can reach out to people in their constituencies. United efforts in HIV prevention have reduced the incidences and similar action is needed to win the battle against this age-old disease with greater



speed.” It’s a great privilege to be part of this programme where we discuss the role of Parliamentarians in addressing the problem of TB. I believe we all have a role to play to make India TB Free, not just Amitabh Bachchan. I would say that Members of Parliament have a major role to play because there are lots of misunderstanding about TB in the community. Lack of knowledge in the community about TB, is a major problem as I understand.

He further said that India has seen the success of HIV, where there was a big political will and every stakeholder came together. We must learn from it. I am happy to know that India has achieved the millennium development goals of halving the TB incidence. But we have a bigger goal of ending TB and Parliamentarians have a major role. I also request Parliamentarians to take this as a mission like HIV and population-development and support TB Free India. I request all MPs to participate and support, and also talk about TB with your fellow MPs.

Shri C K Mishra, Secretary Health, MoHFW, Gol, reiterated government’s commitment to end TB in India and said, “RNTCP has been successful in bringing down the deaths due to TB in India but much more needs to be done. Access to quality treatment, reducing the incidence of TB (especially MDR-TB), and ensuring standards for TB care to patients treated in private sector, reaching the unreached are areas that need to be addressed urgently.” Shri Mishra requested Parliamentarians support in the fight against TB.

Dr. Sunil Khaparde, DDG TB, Central TB Division, MoHFW presented the situation of TB in the country and the efforts made by the Revised National Tuberculosis Control Programme (RNTCP) in addressing the problem. He highlighted the commitment from the programme to meet the END TB strategy.

Ms. Kavita Ayyagari from The Union presented about the Call to Action for a TB-Free India Project and commented, “TB is the leading killer among infectious diseases in India. There is an urgent need for increased awareness and resources for TB in India. Call to Action is an effort to sensitize a wide range of stakeholders and raise domestic resources. We would like all Parliamentarians to join us and make India TB Free.” Parliamentarians were also requested to endorse the Barcelona Declaration on TB - an ambitious call to action - committing to political leadership against TB in their own countries and globally.

Open Discussion Session

The honourable MPs discussed ways to drive political, administrative, and technical solutions to address specific barriers affecting TB prevention and care in India. They vowed, “Let us not remain silent spectators to the loss of human life. We should come together and do all that is possible to make India TB-Free.”

Shri. R. Ramakrishna (MP, Rajya Sabha) suggested, “While the national TB programme is devising strategies for treatment of TB, it is equally important to devise preventive measures.” He also shared his experience of being part of the BCG campaign.

Shri. Majeed Memon (MP, Rajya Sabha), congratulated and thanked everyone for finding time to discuss on this noble cause. He said since the last meeting of Parliamentarians on December 21, 2015, he has made efforts to know more about TB in his own constituency. He shared his experience about his visit to the slum areas of Mumbai and highlighted that, “The burden of MDR-TB is a cause of concern. There is a clear need for improved and increased TB treatment services across India.”

Dr. Prabhakar Kore (MP, Rajya Sabha), Karnataka expressed concern on the increasing cases of Paediatric TB and emphasized on the need to devise dedicated strategies to handle stigma and discrimination associated with the disease.



Members of Parliament and other participants sharing their view point during the Open Discussion Session.

Shri. K.C. Ramamurthy (MP, Rajya Sabha, Karnataka) said, "Our role as an MP is critical in policy formation. We should act as independent reviewer of government efforts in the area of health and fully engage in the campaign towards making India TB-Free." He shared that "Large number of people close to my family have suffered from TB and died. As a member of the parliament, I believe that it's our duty to work on this cause". Shri Narayan Lal Panchariya (MP, Rajya Sabha, Rajasthan) suggested that update should be provided on action points after such meetings. He also stressed that there should be an engagement plan with MPs. He requested the Secretary Health, Shri C. K. Mishra to look at the issue in Rajasthan where there are many TB cases due to industries.

Smt. Kahkashan Perween (MP, Rajya Sabha, Bihar) highlighted the fact that the socio-economic impact of TB is much bigger than the clinical impact of the disease. The need to provide nutritional and other support to the TB patient and family is equally important.

Shri Md. Nadimul Haque (MP, Rajya Sabha, West Bengal) thanked the organizers for the orientation and asked "Is it possible to develop a vaccine for TB? If yes, can you tell us the research work on this? Spitting is a common issue in India, how spitting is responsible for the spread of TB in India?"

Smt. Chhaya Verma (MP, Rajya Sabha, Chhattisgarh), praised MPs for taking interest in this issue. She highlighted the high number of cases in the poor, vulnerable areas in the tribal and difficult areas. She observed that there is a lack of awareness and lack of basic services in these areas and hence we need to create awareness among them.

Shri Pradeep Tamta (MP, Rajya Sabha, Uttarakhand) said "India has progressed so much but is so behind in fighting TB. The government needs to create mass level awareness.



Shri Shamsheer Singh Dullo (MP, Rajya Sabha, Punjab) said, "Government should prioritize action in a mission mode to make India TB-Free."

Shri Jugal Kishore Sharma (MP, Lok Sabha) said, "Extensive media campaigns (on the lines of Polio eradication campaign) to increase awareness regarding TB symptoms, diagnosis, and treatment facilities are the need of the hour." Dr. B.N. Goud (MP, Lok Sabha) emphasized on the importance of funding/encouraging research for preventive vaccination (against TB), shorter treatment regimens and more effective drugs with less severe side effects. Dr. Kirit Premjibhai Solanki (MP, Lok Sabha, Ahmedabad, Gujarat) highlighted the need for legislations to ensure universal access to TB treatment and care services for patients and their families. He complimented the government of India for their work so far to control TB, but suggested that government need to aggressively work on this.

Shri Arjunlal Meena (MP, Lok Sabha) added, "The rigor of treatment adherence (as in the public sector) should be made an integral element of treatment in the private sector."

In her Vote of Thanks, Smt. Viplove Thakur (MP, Rajya Sabha) requested DDG TB, to share responses to the queries raised by Parliamentarians and also prepare a plan to engage MPs in the fight against TB.



Group photo of the participants.

HelpAge Asia Pacific Regional Conference on "The Economic Implications of Ageing"

Hanoi (Vietnam), September 6-8, 2016

Every two years, the HelpAge Network hosts an Asia-Pacific regional conference on ageing with a view of developing consensus and promoting collaboration on key themes of importance to improving the wellbeing of older people. The purpose of these conferences has been to increase understanding, share experience and build common approaches to one of the most important trends of our time, demographic transition in the region. The theme of this year's conference was 'The Economic Implications of Ageing'.

In collaboration with the Ministry of Labour, Invalids and Social Affairs (MOLISA) of Vietnam and United Nations Population Fund (UNFPA), the HelpAge Asia-Pacific Regional Conference 2016 was held in Hanoi, Vietnam during September 6-8, 2016.

Bringing together around 300 representatives from 30 countries including government agencies, UN agencies and development banks, members of civil society and the private sector, this year's conference aimed to raise awareness of the economic adaptations needed to respond to rapid population ageing in low and middle income countries of Asia-Pacific.

Addressing the opening ceremony, Deputy Prime Minister Vu Duc Dam, who is the President of the National Committee for Vietnamese Elderly People said "Vietnam was at the pinnacle of a golden population and moving towards the threshold of becoming a country with an elderly population. It is estimated that the number of young and old people will be the same in 20 years. We understand that although it is not a new matter, it poses numerous challenges to Vietnam. Vietnam needs not only to overcome these challenges, but turn them into opportunities for development. We need to promote the role of the elderly,".



Shri Laxmi Narayan Yadav, MP, (left) sharing his view point during the Conference.

Shri Laxmi Narayan Yadav, MP and Mr. Manmohan Sharma, Executive Secretary, represented IAPPD in this Conference.

With collaboration from all sectors represented at the conference, participants discovered and expanded upon what needs to be done to realize fair and equitable societies for all ages, including older people across Asia and the Pacific.

The Conference recommendations include: (i) shared understanding of the challenges and opportunities for economic growth, equity and fiscal sustainability arising from the demographic transition in Asia-Pacific; (ii) greater appreciation by governments of the critical adaptations needed in public policies, structures and services to respond to population ageing; (iii) fresh perspectives within civil society and international actors on how to shape policy advocacy and programmes to support societal adaptation; and (iv) wider and deeper networking among a range of organizations interested in ageing in the Asia-Pacific region. The delegates had an opportunity to visit the actual operational model of the Inter-generational Self-Help Club (ISHC) in the two provinces of Hai Duong and Thanh Hoa.



Group photo of the participants.

Himachal Leg Towards a T

Shimla, Himachal Pra



Honourable Chief Minister, Himachal Pradesh, Shri Virbhadra Singh (centre) inaugurating the Legislators Meet.

Indian Association of Parliamentarians on Population and Development (IAPPD) in collaboration with The International Union Against TB and Lung Disease (The Union) and Central TB Division (CTD), Ministry of Health & Family Welfare (MoHFW) organized the 'Himachal Legislators Meet Towards a TB-Free India' in Shimla to discuss the problem of TB in Himachal Pradesh and emphasize the need for collective action at all levels. The Legislators meeting was an initiative of Smt. Viplove Thakur (MP- Rajya Sabha & Vice-Chairperson, IAPPD). It was also a follow up to the national level meeting organized on 8 September, 2016 by IAPPD and The Union. The meet was inaugurated by Shri Virbhadra Singh, Honourable Chief Minister, Himachal Pradesh and attended by a large number of MLAs and other state officials.

In his introductory remarks, Mr. Manmohan Sharma, Executive Secretary, IAPPD, praised the government of Himachal Pradesh for improvement in the health and development indicators.

In her welcome address, Mrs. Viplove Thakur, MP (Vice-Chairperson, IAPPD) commented, "TB is still affecting the lives of a large number of people in Himachal Pradesh. IAPPD along with The Union has had several sessions in the past to discuss the issue of TB with Members of Parliament and advocate for increased attention to TB care and prevention. Himachal Pradesh is the first state in India where we are holding this session for the members of the legislative assembly (MLAs) to take action for the eradication of this disease."

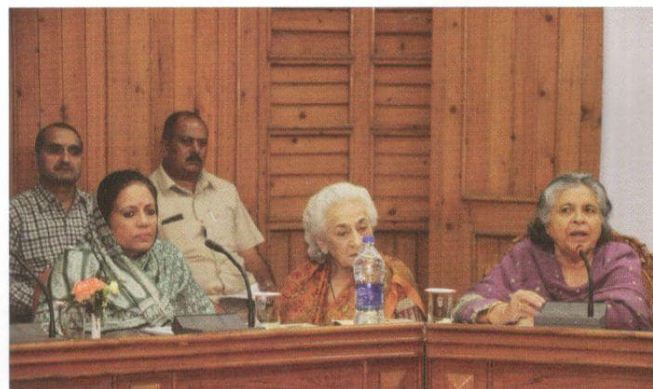
Ms. Kavita Ayyagari, Project Director Challenge TB, presented the situation of TB in India and also some figures pertaining to problem of TB in Himachal Pradesh. She said, "The Union is a scientific and research organization working towards

finding healthy solutions, particularly to address TB, for almost 100 years. Every fourth case of TB in the world lives in India and there is an urgent need for increased awareness, action and resource allocation for TB in India. Call to Action is an effort for collective action. We would like all the MLAs to join us and make India TB Free.

In his inaugural address Hon'ble Chief Minister said, "TB has emerged as one of the biggest challenges to the public health system in India.

This disease is a major barrier for the development of any country. 90% of TB cases can be cured if proper diagnosis happens and correct treatment is available right from the beginning. When a TB patient starts taking treatment, he/she soon starts showing the signs of improvement and tends to discontinue the treatment. MDR TB may develop if the treatment is left halfway." He said that the State Government is taking proactive steps to set a new benchmark in the development and health indicators. He further said, "Tuberculosis is a big problem and we have a great responsibility for ensuring TB control in the state. People still have lots of misconceptions about TB, which is resulting in poor intake of diagnostic services, improper treatment, and lack of adherence to treatment which is making the problem even bigger. Legislators can play an important role for TB control by generating awareness, strengthening infrastructure or community engagement."

Shri Kaul Singh Thakur, Hon'ble Health & Family Welfare Minister, Himachal Pradesh said, "Non-completion of TB treatment leads to a more complicated form of TB, Multi Drug Resistant (MDR). MDR-TB in recent times poses a



Mrs. Viplove Thakur, MP (extreme right) and Mrs. Pratibha Singh, MP, (extreme left) during the Meet.

Legislators Meet TB-Free India

Shimla, August 26, 2016

great challenge. Kangra, Mandi and Shimla districts have the largest number of TB cases in Himachal Pradesh, and Kangra and Mandi also have the highest number of MDR TB cases. To diagnose MDR-TB, 8 CBNAAT machines (new diagnostic method for MDR – TB) have been installed and 3 more will soon be installed in the remaining 3 districts. Himachal Pradesh is also one of the five states in India, where the daily regimen of DOTS is going to be introduced". Shri Thakur reiterated, "My ministry is committed to making access to TB diagnostics and treatment available for all."

Shri Prem Kumar Dhumal, Leader of Opposition said that elected representatives are heard and understood well by the community, so their direct engagement is now required to discuss the status of disease control efforts. He also stressed on a decentralized approach to take TB messages to the grass roots.

During the Open Discussion Session, Smt. Sarveen Chaudhary, MLA from Shapur, mentioned that one needs to know about the symptoms of TB. She also said that TB drugs are believed to be very strong and toxic. She asked if the government has any programme of including nutrition to such TB patients? Shri Suresh Bhardwaj, Ex-MLA, Shimla, expressing his views said that "we were under the impression that TB is no longer a problem". Col. Indu Singh Thakur, MLA emphasized the need to create awareness. He said that the concerned doctors in the district should inform us about different aspects of disease so that we can talk about these issues in the community. Shri Maheshwar Singh, MLA, Kullu, thanked Mrs. Viplove Thakur and organizers for bringing everyone together for this cause. He emphasized on the fact that we should focus on TB stigma, and create awareness about the TB problem without creating panic and fear among the people. Dr. Jai Ram, MLA, Seraj highlighted that the need of creating awareness should not be limited to TB patients but also to their families. He shared his experience of Bali area in his constituency.

Shri Rakesh Kalia, MLA, Gagret, asked a question that where does the TB bacteria come from? He suggested that children should also be sensitized on the issue of TB as they can become a very good medium to spread information about the disease to their families. Shri Ravi Thakur, MLA, Lahual Spiti, echoed that accessibility to difficult areas for diagnosis is a must. Hard to reach areas should be highlighted and focused in the programme. Shri Karan Singh, Cabinet Minister, HP, expressed his gratitude for organizing the Meet. He said that since he is close to Ayurveda, he believe that we should work together to fight TB and he will be happy to offer all support required to fight this disease. Shri Kishan Lal, MLA, Nalagarh talked about the diseases that were related to hygiene in the past, many such problems have its root in the hygiene of the community. I will certainly disseminate the message of TB. Shri Sohan Lal Thakur, MLA, Sundernagar asked if there are any vaccines to prevent TB? Mr. Baria, State TB Office, clarified that BCG vaccine only prevent TB meningitis in children and does not prevent adults from getting TB. Hence, there are no vaccines currently available for TB. Shri Rajesh Dharmani, MLA, Ghumarwin expressed his commitment to make Himachal a TB –Free State. He expressed his concern about TB being airborne infection and wanted to know about the mode of prevention of people from getting infected. Shri Jagiwan Paul, MLA, Sullah said that TB patients hide their status from others and the stigma about this disease is still exists. Also, people hesitate to carry dead bodies of persons who die from TB. We have ASHAs who work in the community to provide health services. I have observed that people who smoke and consume alcohol a lot are more prone to TB infection. He also suggested that we must develop a vaccine for TB.

At the end of the meet, the legislators pledged not to remain silent spectators to the loss of human life. They should come together to make India TB-free. They also committed to work towards ensuring TB detection, treatment, patient care and support in their respective constituencies.



Group photo of the participants.

Make men the focus of Family Planning: An integrated approach with behaviour change communication and awareness about misconceptions is required

Viplove Thakur, MP



Mrs. Viplove Thakur, MP

The progress in the increasing use of contraceptives has been gender biased by marginalizing male engagement. Focus on women for family planning and contraceptive utilisation is heavily skewed because more methods are available for women, and also owing to multiple barriers in access to specific methods of contraception that affects use. These include availability, awareness, myths and misconception.

Among the male methods of contraception available, CPR (contraception prevalence rate) for condoms is 12.6% and less than 1.5% for male sterilization. The acceptance of male methods of contraception is marred by a number of myths and misconceptions such as loss of virility, libido, etc. This implies that improving accessibility and availability, and engaging men as partners to support family planning, may be a key to turning the tide.

In many parts of South Asia men do not participate in discussions and informed decision making about family planning and the onus is on women to use contraceptives. In fact, NFHS III data reveals that 22% men feel that contraception is women's business. Studies reveal that men often control contraception decision-making and male reproductive control of female partners can impede contraceptive use and increase risk of contraceptive failure. Data from multiple Indian states (NFHS IV) reveal no improvement in contraceptive uptake across the past decade, with some states registering a decline in modern contraceptive use. The data also shows that health worker outreach to women for family planning promotion has improved in many states, with no corresponding improvements in contraceptive uptake. This implies that factors such as male influence or engagement are either acting as barriers or contributing to maintaining a status quo.

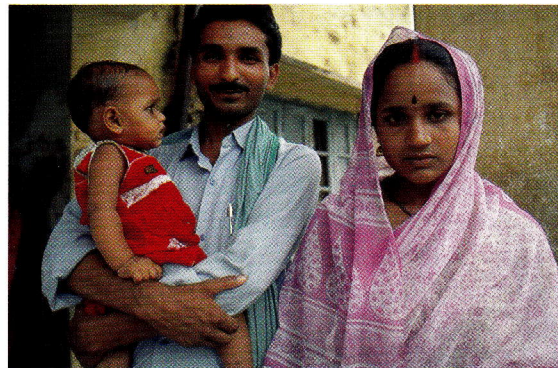
Male engagement could act as a catalyst in improving contraceptive uptake in already aware and willing population.

Efforts to improve and sustain male engagement in India are riddled with social barriers and challenges. So a systematic integrated approach with behaviour change communication for men, and awareness about myths and misconceptions, could result in a better uptake of contraceptives and shared responsibility by men in family planning. Sustained behaviour

change communication and on-ground work to engage men, while still promoting women's rights and decision making could go a long way in effecting a positive change.

The emphasis needs to be on beginning this involvement at an early age, through discussions with adolescents on sexual and reproductive health and rights and integrating various schemes in health, education and vocational training. The government's effort to engage male peer educators as part of the Rashtriya Kishor Swasthya Karyakram Programme is a move in the right direction.

There is a need to involve male frontline health workers and doctors in the programme, where family planning counselling is largely done by female workers



Given the government's emphasis on strengthening counselling at hospitals, an increased focus on couples counselling and follow-ups is likely to bear fruit. A study for Maharashtra under the CHARM project (Counselling Husbands to Achieve Reproductive health and Marital equity) revealed that counselling sessions delivered by male healthcare providers to married men, alone and with their wives, over three months, appears to be an effective approach to engage men in family planning and improve marital

contraceptive communication.

Lastly, the involvement of other stakeholders, including civil society organizations and private practitioners, to draw men into this process needs to be underlined. Innovative ways to ensure this under existing PPP and social franchising models will positively impact health and family planning at the community level. It's important to realize that family planning and related maternal and child health goals cannot be achieved without male engagement.

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