TB Control Programme
Focused on Older Persons of 60+

LEAVE NO ELDERLY BEHIND

UNITE TO END TB

Government of Nepal
Ministry of Health
Department of Health Services
National Tuberculosis Center
Acknowledgement

Ageing Nepal campaign team would like to express our sincere gratitude to Mr. Bikash Lamichhane, Director of National Tuberculosis Center for making us a partner for the observance of World Health Day, 24th March 2016. Similarly, we are grateful to Mr. Anil Thapa, Section Chief of the Planning, Monitoring Evaluation Unit at National Tuberculosis Center about elderly and TB for his valuable guidance throughout the campaign. Also, we are thankful to all members of National Tuberculosis Center for their support and encouragement to conduct elderly focused TB campaign for the first time in Nepal with the main theme of “Leave No Older Person Behind with TB”.
Facts on Tuberculosis and Older Persons

- Older people (60+) are more vulnerable to Tuberculosis than people of any other age group. And yet most of the developing countries, including Nepal, do not have policies and programmes to fight TB that are focused on ageing population.
- A majority of tuberculosis-related deaths occur among people older than 60 years of age.
- More than 50% of Tuberculosis caused Disability-Adjusted Life Years (DALYs) occur among people of 60+ age.
- Older adults are more likely to develop extra-pulmonary and atypical forms of TB.
- TB among older persons is harder to diagnose than conventional sputum smear-positive pulmonary tuberculosis.
- Care of elderly TB patient is complicated by more frequent drug-related adverse events.
- Increased co-morbidity of older TB patient proves difficult to manage.
- Nepal does not have any TB control programme specific to ageing population.
- With unprecedented increase in number of ageing population across the globe, Tuberculosis among older adults will pose major challenges both at national and global level in the future.
- Tuberculosis treatment outcomes in older adults are often poorer due to delayed diagnosis abject poverty and poor access to health services.

Need for Advocacy

- Recognition of above facts is the first step towards making a TB Free family, community, nation and the world.
- National tuberculosis programs should consider active case finding among older people and their inclusion in prevention strategies.
- There should be increased emphasis to include older people in the assessment of new tuberculosis drugs.
- Older people should be included as a key population in tuberculosis prevention, active case finding and treatment interventions.

Campaign Objectives

- To inform mass on importance of addressing the issues of TB among older persons.
- To demand policies and programmes to fight against TB in old age.
- To mobilise people and resources to address issues of TB among ageing population.

Campaign Theme

- “Leave No Elderly Behind with Tuberculosis” was the main slogan of the campaign.
SUMMARY OF ACTIVITIES COMPLETED

1. Formation of Core Team for Planning and Supervision of the campaign

Ageing Nepal team in partnership with National Tuberculosis Center (NTC) carried out various campaign activities to mark the World Tuberculosis Day, 24th March, 2016. The campaign activities were completed under the planning and supervision team of campaigners that included the following.

Mr. Anil Thapa, Advisor
Mr. Krishna M. Gautam, Team Leader
Mr. Bhumidatta Poudel, Member
Mr. Prakash Gautam, Member
Mr. Ajay Gurung, Member
Ms. Sanju T. Magar, Member
Ms. Rewa Dahal, Member
Ms. Manisha Shakya, Member

Each team member was assigned individual responsibilities to carry out the following activities as proposed earlier.

2. Radio Talk Show

Ageing Nepal arranged a half hour radio talk show on sagarmatha fm radio 102.4 MHz about elderly and TB. Dr. Manoj Prasai, Senior Chest and TB Specialist highlighted the need of elderly specific programmes and policies on TB. It is estimated that about 2 million people reached the message through this radio programme.

3. TV Talk Show

An hour long TV talk show with Dr. Sharatchandra Verma, Director of SAARC TB & HIV/AIDS Centre, Nepal in National TV Sagarmatha on 22nd March was arranged. Dr. Verma highlighted on TB in elderly & need for advocacy in the programme. It is estimated that the message reached to about 6 million people through this television programme live broadcasted from 8-9am on 22 and replayed twice on the following day. Link of the programme: https://youtu.be/JA91w-Pk10c
4. Published an Article
An article on Senior Citizens and TB by campaign team member of Ageing Nepal, Mr. Ajay Gurung, Research Coordinator at Ageing Nepal, was published in vernacular national Nagarik daily on 24th March. The article highlighted needs of ageing specific TB control programme in Nepal. It is estimated that 50 thousands readers were reached through this article.

5. Invitation Card Prepared andPosted in the Wall of Social Media
The team prepared an invitation card to invite general public in TB special event organized in National TB Center on 24th March. The invitation card was posted in the wall of social media.
6. Distributed Pamphlets

The team produced 1000 copies of pamphlets on TB and elderly in both Nepali and English languages as shown below and distributed in each campaign activity.
7. Distributed Brochure

The team produced 1000 copies of brochure for the campaign. The brochure contained cross cutting issues of elderly and TB in both Nepali and English languages and distributed in all campaign activities.

Brochure distributed to the nursing students
8. Participated on the Event
Ageing Nepal team participated in the event jointly organized by National Tuberculosis Center and SAARC TB & HIV Center on the occasion of World TB Day 24th March 2016. Ageing Nepal team carried out the following activities in the event.

a) Stall Decorated
The team decorated the stall for poster exhibition and IEC materials distribution. Five different types of posters were produced with messages concerning TB and older persons and exhibited on the occasion.

![World TB Day Posters](image-url)
Older people contribute a large proportion of Disability-Adjusted Life Years (DALYs); 51% of tuberculosis DALYs occurred in patients aged 50 years and older in East Asia.
b) The team pinned red arrow: A symbol to unite us against TB to the participants of the event.
c) Briefed to Mr. Shanta Bahadur Shrestha, Secretary to Ministry of Health about Elderly and TB

![Mr. Krishna M. Gautam, Chairperson of Ageing Nepal briefing about Elderly and TB Secretary to Ministry of Health](image)

d) Briefed to Mr. Anil Thapa Section Chief of the Planning, Monitoring Evaluation Unit at the NTC about elderly and TB.

![Ageing Nepal team briefing to Section Chief at the Planning, Monitoring Evaluation Unit at the NTC about elderly and TB.](image)
e) **Released Video**

The team released a video entitled Mr. Tuberculosis about Elderly and TB in the event. Link of the video: [https://youtu.be/M1vDNKhBZAo](https://youtu.be/M1vDNKhBZAo)

d) **Presented Drama**

The team presented drama on Elderly and TB. Link of short clips of the video: [https://www.facebook.com/AgeingNepalProudToBeOld/videos/1100121450009444/](https://www.facebook.com/AgeingNepalProudToBeOld/videos/1100121450009444/)

9. **SOCIAL MEDIA USED**

The campaign team used social media like Facebook, Facebook Page and Twitter to spread the message of the campaign.

No. of postings: 12  
People Reached: 6009

**RECOMMENDATIONS**

(a) The time allocation for the preparation of campaign should be increased to allow campaigners to be more creative and campaign activities could be better planned.

(b) Elderly and TB is a serious concern of public health, particularly in the context of changing population structure of the society. But lack of sufficient budget has remained the major bottleneck for extending the campaign period to repeatedly reach out to larger section of the population with the message “**Leave No Older Person Behind with TB**”.
Organizers

National Tuberculosis Center
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Face book: https://www.facebook.com/AgeingNepalProudToBeOld
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Care of elderly TB patient is complicated by more frequent drug-related adverse events.