

HIV & TB INTERVENTIONS



MESSAGE FROM THE CEO

-PRASANTA KUMAR

Dear Colleagues and Partners,

It is with great pride that I present the second edition of our newsletter highlighting the HIV and TB initiatives of LEpra. This milestone reflects our strengthened commitment to equitable, inclusive, and person-centred healthcare for vulnerable communities. Across Andhra Pradesh, Telangana, and Madhya Pradesh, we are implementing focused HIV interventions through upgraded Care and Support Centres (CSC 2.0) and programmes in Prison and Other Closed Settings, integrating counselling, treatment adherence support, digital monitoring, and community engagement to ensure continuity of care with dignity while addressing stigma.

During this month, several key activities were implemented, including the Mission AIDS Suraksha (MAS) Training, State Oversight Committee meeting, Support Group Meetings for PLHIV, and LFU Track Back initiatives to strengthen ART adherence and improve viral load suppression. In prison settings, the Handheld X-Ray TB Screening Campaign in Madhya Pradesh, Telangana and Andhra Pradesh supported early TB detection, while pediatric TB sensitization activities in Chhattisgarh strengthened coordination with health facilities. In Telangana, support group meetings continued to promote ART adherence, nutrition awareness, and stigma reduction. I take this opportunity to sincerely thank our supporting partners SAATHII, Alliance India, IADHO and government authorities for their continued collaboration and trust. This newsletter symbolizes not only progress but also our renewed commitment to collaboration, innovation, and sustainable impact. I sincerely appreciate our teams and partners whose dedication makes this mission possible as we move closer to a future where no one is left behind.

SUCCESS STORY:

Re-engagement of LFU Client into ART Care through Counselling Support

A 38-year-old man from a rural village was working in a rice mill and living with his wife and daughter. In 2017, he developed severe skin allergy and recurrent fever and was diagnosed as HIV positive. As his CD4 count was stable, he was kept under Pre-ART care and was not started on ART immediately.

Pre-Intervention Situation:

Due to fear that people in the village might learn about his HIV status, he avoided visiting the hospital and became a Pre-ART Lost to Follow-Up (LFU) case. The stigma and concern about his daughter's future created emotional stress and reduced his motivation for medical follow-up.

Intervention:

After his name appeared in the LFU list, the CSC team conducted a home visit and provided counselling to restart treatment. Although he resumed ART initially, the family later moved to Chennai due to stigma. Through continuous follow-up and phone counselling, the CSC team motivated them to return and continue treatment.

Post-Intervention Impact:

With counselling and support, the family returned to their village and he restarted ART. His wife was tested for HIV and found negative. With regular treatment and follow-up, his Viral Load is now TND (Target Not Detected).

Conclusion:

The family is now living confidently and he continues to take medicines regularly. This case highlights how counselling and continuous follow-up can help re-engage LFU clients and improve health outcomes.

ANDHRA PRADESH KEY ACTIVITIES & ACHIEVEMENTS

- **Mission AIDS Suraksha (MAS) Training:**

The ASDG, NACO introduced the Mission AIDS Suraksha (MAS) program. Under this initiative, SAHAYOGIs (District Associates) and State SANJYOGIs were oriented and trained. A total of 24 members (23 + 1) from Andhra Pradesh attended the MAS Training held at Yashobhoomi, New Delhi, on 10th and 11th February 2026.

- **National Coordination Committee Meeting:**

The Andhra Pradesh CSC 2.0 State Project Manager attended the National Coordination Committee (NCC) Meeting at the NACO Office, New Delhi, on 18th February 2026, to review national progress and strategic directions for CSC strengthening.

- **State Oversight Committee (SOC) Meeting:**

The Andhra Pradesh CSC 2.0 team conducted the State Oversight Committee (SOC) Meeting with the support of Andhra Pradesh State AIDS Control Society (APSACS), Tadepally, on 24th February 2026, focusing on program performance, coordination, and action planning.

- **Support Group Meetings:**

Under the Andhra Pradesh CSC 2.0 program, 150 Support Group Meetings were conducted, reaching approximately 1,500–2,000 participants. The meetings focused on awareness and counseling on ART adherence, viral load testing, EVTH, TB-HIV coordination, stigma reduction, psychosocial support, nutrition, and social entitlements.

- **LFU Assessment Survey:**

The CSC 2.0 program initiated an LFU (Lost to Follow-Up) Assessment Survey from 26th February to 13th March 2026 to understand the challenges faced by LFU clients and identify the root causes contributing to treatment interruption.

- **Bi-Annual LFU Track Back Drive:**

The Bi-Annual LFU Track Back Activity was launched across Andhra Pradesh to improve the 3rd 95 indicator (viral load suppression) under Mission AIDS Suraksha.

- **Weekly Review Meetings:**

Regular weekly review meetings were conducted by CSC teams during February 2026 to monitor progress, review performance indicators, and ensure timely follow-up of priority clients.

CHHATTISGARH KEY ACTIVITIES & ACHIEVEMENTS

District-Level Onsite Sensitization (Mungeli): Pediatric TB



With strong support from the Civil Surgeon, an onsite sensitization (OSS) session was conducted for frontline health workers and facility staff at Mungeli. The session focused on key aspects of childhood TB including identification, diagnosis, notification, and reporting under NTEP. District data highlighting gaps between adult and pediatric TB notifications were presented, prompting the Civil Surgeon to commit to targeted corrective actions. The initiative strengthened coordination between NRCs, pediatricians, and TB program staff. IEC materials were also distributed to enhance awareness and support program implementation.

MADHYA PRADESH KEY ACTIVITIES & ACHIEVMENTS



Handheld X Ray TB Screening Campaign Launched in Prison

On 16th January 2026 as per PR IHAA guidance Madhya Pradesh Prison Intervention Program launched the Handheld X Ray TB Screening Campaign in Central Jail Gwalior. This intervention aims to strengthen active TB case finding in prisons through handheld X-ray screening, supported by Prison Peer Volunteers and Prison Coordinators, particularly addressing the limited mobility of inmates and enabling early detection of TB in closed settings.

TELANGANA KEY ACTIVITIES & ACHIEVMENTS

Support Group Meetings conducted by SSRs in Telangana State

LEPRA SR oriented the SSRs to conduct the Support Group Meetings, based on that SSRs – CSC - APPA+ Khammam, Cheyutha WCBO – Hyderabad, KMP+ Warangal, NTP+1 – Hyderabad & NTP+2 Mahabubnagar CSCs were conducted support Group Meetings. During Support Group Meetings CSC Team highlighted importance of ART Treatment, adherence, nutrition food, consequences of non adherence of ART, Ols, social benefit schemes, labor card registration. Earlier those PLHIVs who are LFUs, their suffering experience, after continuation of ART their quality life has been shared in SGMs, which is highlighted and the new on ART PLHIVs got idea to continue the ART Medicine, so that they can lead quality healthy life. The following SGMs were conducted in the month of February'2026



SEEMANTHAM PROGRAM BY CHEYUTHA WCBO

Seemantham Program organized by CHEYUTHA WCBO – Hyderabad CSC: On 26th February'26 Cheyutha WCBO - Hyderabad organised Srimantham Program at Gandhi Hospital, Hyderabad. Dr. Radhika, SMO, Dr. Prathima, Dr. Nagaraju - ART MO - Kingkoti Hospital, Ms. Tara Devi - President for Lions club, Ms. KL Priya, PM - Cheyutha, Mr. Kameswara Rao, SM, myself, Para Medical Staff and CSC Team - CSCCs, MEFOs & CLHs were participated in the program. Doctors were blessed pregnant women with sindhoor & flowers, the pregnant women & Ms. Lakshmi Priya, PM honoured, with Sarry, fruits and Bangles. By this stigma and discrimination towards PLHIVs were reduced in Government Hospital



MEET OUR STAFF

1. How did you join LEpra and what is your current role?

I joined LEpra with a strong interest in supporting public health programs, especially tuberculosis control initiatives. I was selected as a Handheld CXR Technician to support Active Case Finding activities. Currently, my role involves operating handheld chest X-ray equipment during health camps.

2. What is the most significant challenge you face, and how do you address it?

The most significant challenge is conducting X-ray screenings in remote area, I am trying to understand this X-Ray machine which is new for me. Also, our the TLD badges has not be there as it is in process now

3. What do you enjoy most about your daily work?

I enjoy contributing to health camp in community and screening different people from different areas.

4. What attracted you most to your role?

I was attracted to this role because it combines technical skills with community service. The opportunity to use portable technology to hard-to-reach area.

5. Can you share a memorable experience from your time at LEpra?

A memorable experience from my time at LEpra was participating in a Quarterly Review Meeting (QRM), where I met all state team .I learned about my roles, duties and responsibilities and got a chance to learn a lot from the rest of the team receiving their guidance I also learn program performance, challenges, and field achievements were discussed with district and state teams. During the meeting, I learnt handheld CXR operating, reporting and manage data.

The field experience was very good. It felt great to know people from other communities their languages and their problems. The experience was wonderful and hope everything goes well in the future. Thanks to LEpra Society for giving me the opportunity to go to the people and serve them



Pratibha Dehary,
HH CXR Co-Ordinator,
Chhattisgarh .



Manohar Kulkarni

Communication Executive

P. Sheshadri

Monitoring & Evaluation Officer (MEO)

Arun Kumar Kandukuri

Head - Programmes RM & C

Account Number 0132 0030 06100 **IFSC Code** IBKL0000002 **Account Name** LEpra Society **Type of Account** Savings

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