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STAC Newsletter is a regular publication of SAARC TB and HIV/AIDS Centre, it includes reports on activities, decisions of important meetings of the Centre, news of important activities of National TB and HIV/AIDS Control Programmes of SAARC Member States and recent information on TB, HIV/AIDS and their control.

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Editorial

HIV/AIDS Scaling-up efforts in SAARC Region

Gender mainstreaming does not necessarily addresses only financial resources but it requires an increased advocacy, awareness at each level of creating gender sensitive HIV prevention, care and surveillance.

Gender inequality, is one of the factors of the HIV epidemic within South Asia. Majority of HIV infected women are at prime reproductive age with many around 18 years of age, and the key route of transmission is predominantly through unprotected and unsafe sex. Women's biological vulnerability is 2 to 4 times greater than that of men and gender disparities add additional complexities to the issues.

Moreover, the woman is under "dual attack" by HIV/AIDS as she herself may be affected by the disease and bears the burden of caring when a member of her family is infected. This growing prevalence will invariably affect the families and children, creating orphans and widows and fragmented families. As South Asian women contribute to over 50% of the agriculture sector, the rising prevalence of HIV/AIDS among women impedes the food production at the household level and at national levels. Despite the fact that males dominate the South Asian societies, the degradation of women's health will impose a grave intimidation on the household as well as the society at large.

Countries in the SAARC region, such as Bangladesh, Nepal, Pakistan, and Sri Lanka, HIV prevalence is low among the general population but significantly higher among key populations, such as injecting drug users, male and female sex workers and their clients, and men who have sex with men. These concentrated epidemics are extensive and affect a large proportion of vulnerable populations at high risk. As a result, HIV is spreading rapidly in some parts of the region. Significant structural and socio-economic factors across the region put many women at risk of HIV infection.

Globally, an estimated more than 1.2 million women and girls newly acquire HIV infection. Out of them women represent 49% of all adults living with HIV. Young women have a much higher risk of acquiring HIV than young men. HIV strategies therefore need to account for the specific needs of women and girls. In low- and middle-income countries, an estimated more than 1.5 million women living with HIV were pregnant. Reaching the target of halving the number of mothers dying among these women requires that all the pregnant women living with HIV who are eligible for treatment to be made accessed.

The South Asia region, a high population region has many cultural and religious diversities with pronounced inequalities practiced towards women. Their increased vulnerability to HIV/AIDS is primarily due to the lack of autonomy and control over the sexual activities commanded by a multitude of socio-cultural and economic factors such as poverty, migration, abuse and trafficking. Economic adversity is the major force that drives women and girls to commercial and casual sex work.

Still there is an opportunity for prompt interventions in order to prevent the major catastrophe in the region. HIV/AIDS in women must be recognized as the tremendous and dangerous threat confronting the region and efforts must be accelerated toward poverty reduction; increasing educational access; harm reduction & violence unwanted sex. Increasing awareness and advocacy campaign on HIV/AIDS risk and prevention strategies to general population and higher risk groups-importantly focusing on women, young girls and the youth of South Asia will scale-up the efforts.
World TB Day 2013 marks the second year of a two-year campaign initiated in 2012 with the theme "STOP TB IN MY LIFETIME". This year's theme "stop TB in my lifetime" calls for greater action to stop the spread of TB including TB in children. More number of children are becoming ill and dying of childhood tuberculosis.

1. Commemoration of World TB Day/SAARC TB Day 2013

SAARC TB and HIV/AIDS Centre (STAC) commemorated World TB Day as well as SAARC TB Day by organizing different activities such as partnership programme with Nursing Colleges, disseminated the World TB Day/SAARC TB Day message of H. E., publication of book-let and participated in the Joint Function organized by NTP Nepal.

1.1. Partnership Programme with Nursing Colleges

On the occasion of the Day, STAC organized one day programme on “Advocacy and Awareness on Tuberculosis with Nursing Colleges” on 22nd March 2013 at STAC building, Thimi, Bhaktapur, Nepal. The objective of the programme was to make school students aware about situation of TB & HIV/AIDS, its spread and social & economic impact on individual, family and community along with the responsibility of students for the prevention of tuberculosis.

Over 150 students and teachers from the following nursing colleges participated in the programme:

1. ANPC College of Health Sciences, Kausaltar, Bhaktapur
2. Iwamura College of Health Sciences, Sallaghari, Bhaktapur
3. Chakrabarti Habib Nursing College, Thimi, Bhaktapur

The programme was organized under the chairmanship of Dr. Gunaraj Lohani, Deputy Director General, Department of Health Services, Government of Nepal.

Dr. Kashi Kant Jha, Director, STAC welcomed the dignitaries and participants by delivering welcome address. Dr. Jha highlighted objective of commemoration of World TB Day/SAARC TB Day and read-out the message of His Excellency Mr. Ahmed Saleem, Secretary General, SAARC issued on the occasion of World TB Day/SAARC TB Day 2013.

Dr. Praveen Mishra, Secretary, Ministry of Health and Population, Government of Nepal graced the occasion as Chief Guest. Dr. Mishra in his speech, highlighted the achievements and efforts made by the Government of Nepal for the
MESSAGE

As we all know, progress towards attaining global targets for reduction in TB cases and deaths in recent years has been impressive. TB mortality has fallen over 40% worldwide since 1990, and the incidence is further declining. In spite of this success scenario, it is estimated that one-third of the world’s population is still infected with TB.

Against this backdrop, World TB Day, which is also observed as the SAARC TB Day, is an opportunity to raise awareness about the burden of tuberculosis (TB) and to assess the status of its prevention and control efforts. It is also an opportunity to mobilize political and social commitment to make further progress in curtailting TB cases. This is the second year of a two-year campaign with the slogan “Stop TB in My Lifetime” calling for a world free of TB.

Tuberculosis is a contagious and airborne disease that disproportionately affects young adults in their most productive years. According to the global report, one-third of the world’s population is thought to be infected with the microbe that causes TB. Worldwide, TB is not only the primary cause of death among people living with HIV/AIDS, but also leads to infertility and poor reproductive health outcomes. It is so despite the fact that TB prevention, treatment and control are among the most cost-effective public health interventions available.

The SAARC region, with an estimated annual incidence of 2.87 million TB cases, carries 33% of the global burden of TB. Four of the eight Member States in the region are among the 22 high burden countries with the highest burden of TB with countries as Afghanistan, Bangladesh, India and Pakistan, which represents 97.6% of total new smear positive cases notified in the region. And out of the sputum smear-positive pulmonary TB patients in the SAARC Region in 2010, 89% were successfully treated. Additionally, all the SAARC Member States had achieved either close to 70% or above of case detection rate of new smear positive cases.

Established in 1992 in Kathmandu, SAARC TB & HIV/AIDS Centre (STAC) aims to support the efforts of National TB and HIV/AIDS Control Programmes through evidence-based policy guidance, coordination and technical support with an end to minimize the mortality and morbidity due to TB and HIV/AIDS in the region. With the support of STAC, the good news is that all the SAARC Member States have developed their strategic plans for expansion of TB/HIV collaborative activities. In addition, Member States have also initiated management of MDR-TB under the National TB Control Programmes.

As we commemorate this day, I would like to call upon national authorities and development partners to strengthen TB prevention and control initiatives in the region in order to stem the tide of this epidemic in our lifetime.

(Ahmed Saleem)
Secretary-General

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control of Tuberculosis. He also explained the ways how to reach to un-reach and marginalized population. He also added in his speech that the social determinants for effectiveness of TB control should also be addressed. At the end of his speech, he appealed to participants for conveying TB control awareness messages to their communities as a part of their responsibility as Nursing students. Dr. Mishra also appreciated the efforts made by SAARC TB and HIV/AIDS Centre for controlling TB in the SAARC Region.

Dr. Ghanshyam Bhatta, Research Officer, STAC presented the Introduction of STAC, regional burden of TB and role of nursing students in National TB control programme. Dr. Giam Paolo Mezzabotta, WHO/NTP, Nepal presented a paper on Global Scenario of TB, the burden, achievements and efforts for stopping tuberculosis.

Dr. Balkrishna Subedi, Director, National Centre for AIDS and STD Control, Government of Nepal presented the paper on importance of collaborative approach of TB and HIV/AIDS to address the TB/HIV co-infection. A paper on general information on TB and its control strategy in Nepal was presented by Mr. Sujit Kumar Shah, TB/HIV Co-ordinator, NTP, Nepal.

1.2. Releasing of book


1.3. Dissemination of Message

H. E. Mr. Ahmed Saleem, Secretary General, SAARC released a message on the occasion of World TB Day/SAARC TB Day 2013. This message was disseminated to the NTPs of SAARC Member State for publication in Newspapers on the occasion of World TB Day/SAARC TB Day 2013.

1.4. Printing of Special Publication

STAC prepared a special publication “STOPPING TUBERCULOSIS” on the occasion of World TB Day/SAARC TB Day 2013. The book contained messages released by Ministers of Health of SAARC Member States, H. E. Secretary General of SAARC, Health Secretaries, Director Generals, Directors and National Managers of TB and HIV/AIDS control programmes. The book also contained the general information on TB along with the status of TB control in the SAARC Member States.

1.5. Participation in Joint Programme

STAC participated in a joint programme organized by NTP, Nepal in association with NGOS and INGOs, held at city hall, Kathmandu on 24th March 2013. The programme was organized under the chairmanship of Dr. Praveen Mishra, Secretary,
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1.6. Display of Banner
STAC displayed different type of banners/flex of awareness messages in the premises of the venue where the joint programme was organized.

1.7. Exhibition
A stall was arranged for exhibition by STAC in the city hall. Hon’ble Minister, Secretary and all National and International dignitaries observed the exhibition. The observers were explained by the STAC officials about, Current Status of TB and HIV/AIDS in the SAARC Member States, Awareness Materials/publications etc.

1.8. Distribution of STAC Publications
STAC publication related to awareness on TB and HIV/AIDS and epidemiological information on status of TB and HIV/AIDS in the SAARC Member States were distributed to the visitors of joint function.

1.9. Commemoration of World TB Day 2013 in SAARC Member States

Afghanistan
Kabul, 24 March 2013: World TB Day was commemorated across Afghanistan on 24 March 2013. Afghanistan is among 22 TB high burden countries of the world. In 2012 alone, there were 29,400 cases detected and 13,000 lost lives due to TB.

Dr. Ahmad Jan Naeem, Deputy Minister of Public Health on Policy and Planning said that drug resistant form of TB might become a major challenge; treatment of such cases would be expensive. He stressed on the importance of vaccination among children and developing a comprehensive package of services for women affected by TB based on a nationwide research.
Dr. Ahmed F. Shadoul, WHO Representative said, “we know that with the right interventions, we can make a major difference. We know how to end all forms of TB, including multi-drug resistant TB – an emerging issue also in Afghanistan – before it leads to severe manifestations that are costly to treat and can cause additional suffering.

Ms. Marghalary Khara on behalf Stop TB Partnership in Afghanistan stressed on the need to address the link between TB and poverty and its consequences. She said that we all knew TB is curable but still TB is one of the top 3 major causes of death among women ages 15 – 44 worldwide.

Source: http://www.stopitbafghanistan.org

Pakistan

National TB Control Program organized an “Awareness Seminar” followed by an “Awareness Walk” in the vicinity of Rural Health Centre Bara Kaho, Islamabad on March 28, 2013 under the chairmanship of Honourable Secretary Ministry of Inter-Provincial Coordination (IPC).

TB patients, their families, health care/service providers, school children, volunteers from Pakistan Girls Guide Association & Pakistan Boy Scouts, local community elders/members, representatives of donor agencies, INGOs, NGOs and officials from vertical programs participated in this walk and seminar.

Source: www.ntp.gov.pk
2. SAARC Regional Training for Microbiologist on Culture and Drug Susceptibility Test, Bangalore, India

SAARC TB and HIV/AIDS Centre (STAC), Kathmandu organized a seven-day training programme on “SAARC Regional Training of Microbiologists for Sputum Culture and Drug Susceptibility Test” in National TB Institute (NTI), Bangalore, India. The programme was held in joint collaboration of RNTCP, Government of India from 23rd – 29th April 2013.

The objective of the programme were to enhance the knowledge & skills of the Microbiologist in diagnosing & monitoring of the treatment efficacies of TB/MDR-TB and imparting training to health care providers and to improve the status of the NRLs to provide TB culture and DST services and participate in DRS activities.

The participants from Afghanistan, Bangladesh, Bhutan, India and Sri Lanka participated in the training.

Dr. P. Kumar, Director, National TB Institute, Bangalore, India and Dr. Kashi Kant Jha, Director, SAARC TB and HIV/AIDS Centre, Kathmandu, Nepal jointly opened the training programme by lighting the traditional lamp. Dignitaries and experts also took part in lighting the lamp.

The Director, NTI delivered the opening speech and welcomed the participants, resource persons and officials in the programme. In his speech he informed that there are more than 36 accredited TB laboratories functioning in India. He thanked STAC for supporting SAARC Member Countries in development of skilled manpower for TB labs which is really a commendable job.

The Director, STAC delivered his opening speech and he mentioned that STAC is in the process of strengthening the TB labs in the region by organizing regular training activities. He thanked Government of Indian for continuous support in this regard. The Director informed the participants that Health Ministerial level commitment for strengthening STAC Laboratory as SAARC Supra-regional Laboratory for TB and HIV/AIDS.

Dr. Ranjani Ramachanran, WHO Lab Focal Point, India and Dr. Preetish S. Vaidyanathan, NTI, Bangalore also spoke in the opening session.

Dr. Ghanshyam Kumar Bhatta, Research Officer, STAC delivered vote of thanks.

Technical programme started with the different presentations related to TB laboratory. In the programme, Dr. Rahul Narang, Microbiologist, International Centre for Excellence in Laboratory Training (ICELT) and Consultant Microbiologists of NTI Mr. S. Anand, Mrs. Hema Sundaram, Ms. Reena K. presented different aspects of the TB lab activities. Participants observed the different activities of NTI. Participants were also provided resource materials such as different type of training manuals/modules etc.

Outcomes

i. The participants learned minimum laboratory standards required for TB culture and DST for 1st and 2nd line drugs using solid (LJ) and liquid culture systems (MGIT 960).

ii. The participants knowledge on WHO policy and guidelines on TB diagnosis (conventional to state of art technology; Line probe Assay, Capilia TB and Xpert MTB/RIF) was enhanced.

iii. The participants learned infection control and prevention standards and practices on MTB infection prevention and control in TB laboratory.
iv. The participants learned sterilization and disinfection techniques applicable for TB laboratory.

v. Participants were able to identify the problems in culture and DST and solve the problems.

vi. The participants learned the FM microscopy technique (reagent preparation, staining and observation) and External Quality Assurance System.

vii. The participants were able to assess the performance of their TB laboratory.

Closing

The Director STAC and Director NTI awarded the certificates to the participants, resource persons and facilitators in the closing session of the programme. On behalf of the participants Mr. Mohammad Idrees Karimi from Afghanistan, Dr. Fahmida Khanam from Bangladesh, Mr. Tshewang Dorji from Bhutan, Dr. Jagar Pradhan from India and Dr. Samanmalee P. Gunasekara from Sri Lanka gave their remarks. They expressed their satisfaction and thanked STAC and NTI for the excellent management of the training.

3. Expert Group Meeting to finalize the SAARC Regional Strategy on HIV/AIDS (2013-17)

Expert Group Meeting to finalize the SAARC Regional Strategy on HIV/AIDS 2013-2017 was held in Thimphu, Bhutan from 5th – 6th March 2013 in collaboration of UNAIDS. This was the follow-up meeting of the SAARC Consultative Meeting of Programme Managers of HIV/AIDS to revise SAARC Regional Strategy in HIV/AIDS (2012-2016) held in Islamabad, Pakistan on 15th – 17th June 2012.

The objective of the meeting was to finalize the SAARC Regional Strategy on HIV/AIDS – 2013-2017. The meeting was attended by different experts on HIV/AIDS from all SAARC Member States, SAARC Secretariat, SAARC TB and HIV/AIDS Centre (Kathmandu), UNICEF, UNDP, UNAIDS, Consultant, NGOs from Bangladesh, India and Nepal.

(Lyonpo) Zangley Dukpa, Minister of Health, Royal Government of Bhutan graced the opening session of the meeting as Chief Guest. Mr. Ibrahim Zuhuree, Director, SAARC Secretariat and Representative UNAIDS delivered their opening remarks. Hon’ble Health Minister delivered his opening remarks and awarded the SAARC Prize on HIV/AIDS along with certificate to Mr. Tshewang Nidup of Bhutan. Mr. Nidup is reputed as Condom Man in Bhutan. In recognition of his remarkable contribution for creating awareness on HIV/AIDS in Bhutan it was decided by SAARC to provide the Prize.

After selection of the Chairperson, introduction of participants was held, Dr. Shiv Kumar and Dr. Angela Chaudhuri, (Consultants) jointly presented new draft strategy. Discussion on new draft strategy was held whole day. The remaining part of the 1st day was discussed on 2nd before lunch. Finalization of recommendation/suggestions for new strategy was took place in 2nd sitting of the meeting.

Mr. Ibrahim Zuhuree, Director, SAARC Secretariat and representative UNAIDS delivered closing remarks. Vote of thanks was delivered by one of the participant from SAARC Member States.
Brief News

SAARC Prize on HIV/AIDS 2012 handed over

Hon’ble Zangley Dukpa, Minister of Health, Royal Government of Bhutan handed over SAARC Prize on HIV/AIDS 2012 to Mr. Tshewang Nidup of Bhutan. Directors, STAC and SAARC Secretariat were also present on the occasion. The prize was handed over to Mr. Nidup during the special session of expert group meeting to finalize the SAARC Regional Strategy on HIV/AIDS (2012-2016). In the meeting there was separate agenda to award prize and certificate to Condom Man by Hon'ble Chief Guest.

The aim of the prize is to honour citizen/s or organizations of South Asia for their exemplary work towards control and prevention of HIV/AIDS in the SAARC Region with the following objectives:

- to encourage individuals and organizations based in South Asia to undertake programmes and activities complementing and supplementing the efforts on HIV/AIDS Control.
- to honour outstanding contributions and achievements of individuals and organizations of the Region in the fields of HIV/AIDS and
- to recognize any other outstanding achievements, not covered above, of individuals and organizations in the Region whose work or contribution has benefited or inspired the country as well as the Region.

Observation visit of Students from KIST Medical Colleges, Lalitpur, Nepal

4th year M.B., B.S. Students from KIST Medical College, Lalitpur, Nepal visited SAARC TB and HIV/AIDS Centre (STAC) on 15th, 26th April 2012 and next group will visit on 8th May, 2013. As per their 4th year curriculum they have to visit the health institutions of the country as well as the different Regional international organizations working for health services situated in Nepal. The
Farewell to Professionals & GSS

Dr. Naseem Khan Afridi, returned his home country (Pakistan) after partial completion of his tenure as Epidemiologist of SAARC TB and HIV/AIDS Centre on 4th Jan. 2013. He had joined the Centre on 3rd May 2011.

Dr. Badri Thapa returned his home after partial completion of his tenure as Microbiologist of this Centre on 11th Jan. 2013. He had joined the Centre on 8th March 2011.

Mr. Ram Hari Kari who was working in this Centre as a Driver, retired on 18th March 2013.

Separate farewell was organized at STAC to say good-bye to out going staff of the Centre. Director, STAC along with all staff thanked them for their remarkable contribution for the Centre. They were awarded by “Letter of Appreciations” and souvenirs as token of love.

STAC is very much thankful to Dr. Afridi, Dr. Thapa and Mr. Karki for their remarkable contributions to the Centre and wishes them for their great success in coming days.
What do you EXPECT IN YOUR LIFETIME?

Stop TB in my lifetime

What will you DO?

Stop TB in my lifetime

WORLD TB DAY 24 MARCH 2013

If undelivered, please return to:
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