

Fourth World Action

small actions, lasting impacts

Dear Prof. Vinita Damodaran and Trust members,

This report is about the project Ekta Niketan for which Fourth World Action are grateful for the generous donation of £3,500 made by your Trust.

You will know that the project Ekta Niketan, a community tuberculosis (TB) programme, aims to control tuberculosis with a holistic approach – biomedical as well as social and societal determinants of the disease. For a disease like tuberculosis, security of food, shelter and social and environmental factors are equally important as the standard anti-tubercular drugs.

In order to reach out the surrounding marginalised communities, Ekta Niketan operates in a remote adivasi (indigenous) village in the state of Jharkhand, India. Unlike other TB centres – governmental and non-governmental, the centre is entirely run by a group of villagers who are much the same as their patients, sharing a common culture, language, education and economic conditions. After years of training, trials and practice, the group of villagers are now well trained to diagnose tuberculosis clinically, examine sputum samples under a microscope and to dispense anti-TB drugs correctly. The TB centre, established three decades ago, is now a well-managed centre for the treatment of tuberculosis that saves lives. The government TB programme at the state and local levels appreciates the work and provides medical supplies free of charge. We are proud what we have achieved with minimum resources.



Social and societal determinants and Ekta Niketan

Despite the achievements mentioned above, Ekta Niketan is far from controlling the spread of tuberculosis effectively. This is because Ekta Niketan is not able to address ‘beyond medicine’ issues as effectively as it has with clinical diagnosis and treatment. Food, nutrition and agriculture; awareness and education; access to essential services, improving the economic conditions and safe environment, and above all, inequalities and discrimination in the society are beyond the scope of a small initiative like Ekta Niketan.

Yet the TB centre makes efforts to meet some of these ‘beyond medicine’ issues. Your support has enabled Ekta Niketan to address some of the social issues in a systematic way. This brief account below describes how we have utilised the funds during 2021-22. It is as such not a full report of the Ekta Niketan TB programme. For such a report, “*Ekta Niketan – unlike other TB Centres*”, please visit <https://ekta-niketan.fourthworldaction.net>.

In addition to standard diagnosis and treatment, Ekta Niketan health workers assess the nutritional status, food security, occupational impacts and the support mechanisms available to each individual affected with tuberculosis. Based on such assessments, Ekta Niketan provides 1) nutritional supplement to selected individuals during the course of his/her treatment; 2) conduct tuberculosis awareness sessions with patients and family members on a regular basis; also, 3) involve authorities

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41 Cowper Road, Cambridge, CB1 3 SL

Tel. +44 (0)1223 214128

Email: manan.ganguli@smallsimple.co.uk

www.fourthworldaction.net

Charity registration no: 1043264

and health professionals in discussions on tuberculosis and marginalisation and impacts on mining and migration; and lastly, 4) promote dignity and cultural identity of the marginalised, adivasi and non-advasi, it works with.

1. **Nutritional supplement to selected TB patients:** TB patients in rural India, particularly areas where we work, are mostly poor and undernourished. It is documented that the average weight of people with TB is 30-35 kg; Ekta Niketan report confirms that. We have allocated a third of the funds made available (approximately £1000) for undernourished patients with significantly low body weight and/or economically heavily burdened families, and provided them with cash to procure nutritional breakfast before taking their daily anti-TB medicines for six months. [see below the details of the utilisation of funds]



2. **Tuberculosis awareness sessions - once a month:** During 2021-22, Ekta Niketan has conducted short sessions with patients and family members when they came to collect their monthly medicine packs on the first Saturday of each month. An information booklet explaining the disease, its spread and prevention measures is provided with those who are able to read.



3. **TB, Women, Migration and Adivasi identity meetings:** During the period, the following meetings with community organisations, village leaders, public health experts and local government representatives were organised to discuss the *Political Economy of TB; TB and Women (7-8 March 2022)*; to observe the Adivasi Divas or the *International Indigenous People's Day (9 August 2022)*



4. **Jharkhandi Giti Riti Centre (Jharkhand's Music Culture Centre):** On 21 June 2022, Ekta Niketan committee opened the 'music-culture centre' in the premises of the TB centre. The music-culture centre though in its preparatory stage has clear activity plans during 2022-23 [for the details, please contact Sunita Murmu at ektaniketan.centre@yahoo.com]. In order to manage the activities, the Ekta Niketan committee has set up a self-help group (SHG), and started raising funds. We have allocated a third of the funds, approximately £1000) to help establish the centre.



A combination of factors, namely the lack of capacity of Fourth World Action to raise funds to meeting additional needs, non-disbursing of funds promised by the government, and the limited capacity of the Ekta Niketan committee in fundraising, have all resulted the project is in a critical financial situation. Nevertheless, Ekta Niketan will continue and hopefully we will get out of the current crisis. In the near future.



Ekta Niketan is a model to learn and practise tuberculosis intervention in innovative ways. As I conclude this report, I would like the Trust to consider releasing the rest of the pledged £10,000.

Utilisation of £3,5000 during 2021-2022:

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| 1. Nutritional support to critically ill patients:
[25% of TB patients of the total 600 patients, 150 individuals, receiving Rs 120/- (£1.3) a month for six months, to help procure nutritional breakfast] | £1,170 |
| 2. Music-culture coordinator (also TB centre coordinator)
[Rs 8000/- (£88) per month for twelve months] | £1,056 |
| 3. Equipment (audio-recording) for the music-culture centre
[Personus audio recorder; Zoom H5 recorder; microphones and cables] | £525 |
| 4. Adivasi culture and TB events/discussions
[TB migrants/economy meeting; Intl. Indigenous Day event; Music-Culture Centre opening] | £650 |
| 5. TB information booklet (in Hindi) to distribute at monthly meetings | £100 |

TOTAL £3,501