

# Multi-Sectoral Interventions

for Tuberculosis Elimination  
in Uttar Pradesh





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# **Multi-Sectoral Interventions**

for Tuberculosis Elimination in  
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# LIST OF ABBREVIATIONS

BEL	Bharat Electronics Limited
BHEL	Bharat Heavy Electricals Limited
CHO	Community Health Officers
CII	Confederation of Indian Industry
CSR	Corporate Social Responsibility
CTD	Central Tuberculosis Division
ECHS	Ex-Servicemen Contributory Health Scheme
ICDS	Integrated Child Development Services
IEC	Information, Education, and Communication
IHAT	India Health Action Trust
IOCL	Indian Oil Corporation Limited
ISR	Individual Social Responsibility
ITC	Indian Tobacco Company
MMV	Mobile Medical Van
MoU	Memorandum of Understanding
MSME	Micro, Small and Medium Enterprises
NAAT	Nucleic Acid Amplification Test
NABH	National Accreditation Board for Hospitals & Healthcare Providers
NHAI	National Highways Authority of India
NHM	National Health Mission
NGO	Non-Governmental Organisation
NTEP	National Tuberculosis Elimination Programme
PMTBMBA	Pradhan Mantri TB Mukta Bharat Abhiyaan
PRI	Panchayati Raj Institution
PSU	Public Sector Unit
SBI	State Bank of India
SHG	Self-Help Group
SRLM	State Rural Livelihood Mission
STC	State TB Cell
STDC	State TB Demonstration and Training Centre
STO	State Tuberculosis Officer
TB	Tuberculosis
TB-STSU	TB State Technical Support Unit
ToT	Training of Trainers
UP	Uttar Pradesh
UPSRTC	Uttar Pradesh State Road Transport Corporation
WHO	World Health Organization
XVFC	Fifteenth Finance Commission



# INTRODUCTION

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India accounts for 26% of the global Tuberculosis (TB) burden with over 2.5 million TB cases<sup>1</sup>,

and Uttar Pradesh (UP), home to 16% of India's population, reported over

**0.62 million**

TB cases in 2023<sup>2</sup>.



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<sup>1</sup> Global TB Report 2024

<sup>2</sup> India TB Report 2024 , Central TB Division , Government Of India



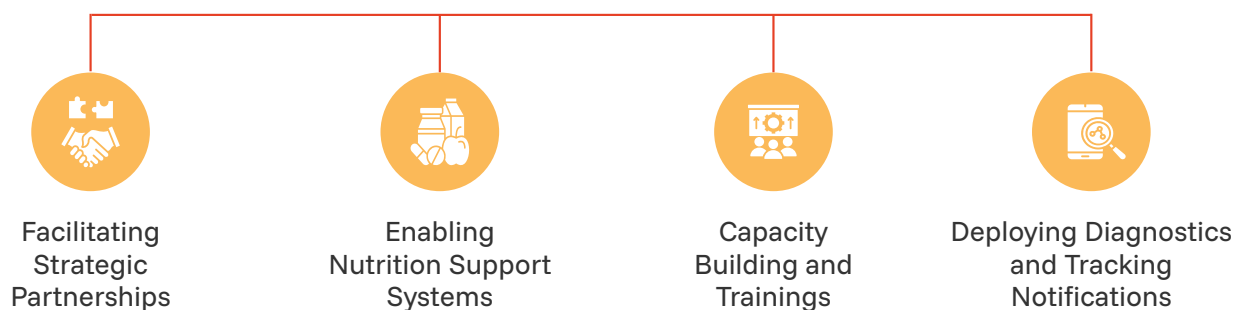
Health outcomes are influenced not only by biological factors or access to healthcare but also by the broader social and economic conditions in which individuals live.<sup>3</sup> Poverty, overcrowded housing, malnutrition, and social exclusion are key social determinants of health that perpetuate TB transmission.<sup>4</sup> To address TB, medical interventions alone are not sufficient, especially when the disease is deeply rooted in socioeconomic vulnerabilities. A comprehensive response requires multi-stakeholder and multi-sectoral collaboration that targets its social and economic determinants.<sup>5</sup> Each government, non-government, private, and community-based stakeholder (including community-based organisations) plays a vital role in disrupting transmission chains and providing essential support to individuals with TB.

To address TB holistically, the Government of India launched the Pradhan Mantri TB Mukh Bharat Abhiyaan (PMTBMBA) in 2022, with the Ni-kshay Mitra initiative to encourage individuals, corporates, and institutions to further the vision of TB-free India.

The TB State Technical Support Unit (TB-STSU), India Health Action Trust (IHAT), provided technical support to the State TB Cell, Uttar Pradesh (UP), from March 2022 to March 2025. The IHAT team continues to support the state in multi-sectoral engagement, mainly in the areas of programme design, partner coordination, diagnostics deployment, and community-based innovations.

This document outlines the TB-STSU's contributions to UP's multi-sectoral TB response, demonstrating how cross-sector partnerships among Government Institutions, Corporate Social Responsibility (CSR) engagement, and community participation are transforming TB care.

#### TB-STSU supported the state across the following areas:



<sup>3</sup> World Health Organization (WHO). Closing the Gap in a Generation: Health Equity Through Action on the Social Determinants of Health. Final Report of the Commission on Social Determinants of Health. 2008. Available online: <https://nhsrindia.org/sites/default/files/2021-04/WHO%20Commission%20on%20Social%20Determinants%20of%20Health%20-%20Final%20Report.pdf>

<sup>4</sup> Hargreaves, J.R. et al. The Social Determinants of Tuberculosis: From Evidence to Action. American Journal of Public Health. 2011. Available online: <https://doi.org/10.2105/AJPH.2010.199505>

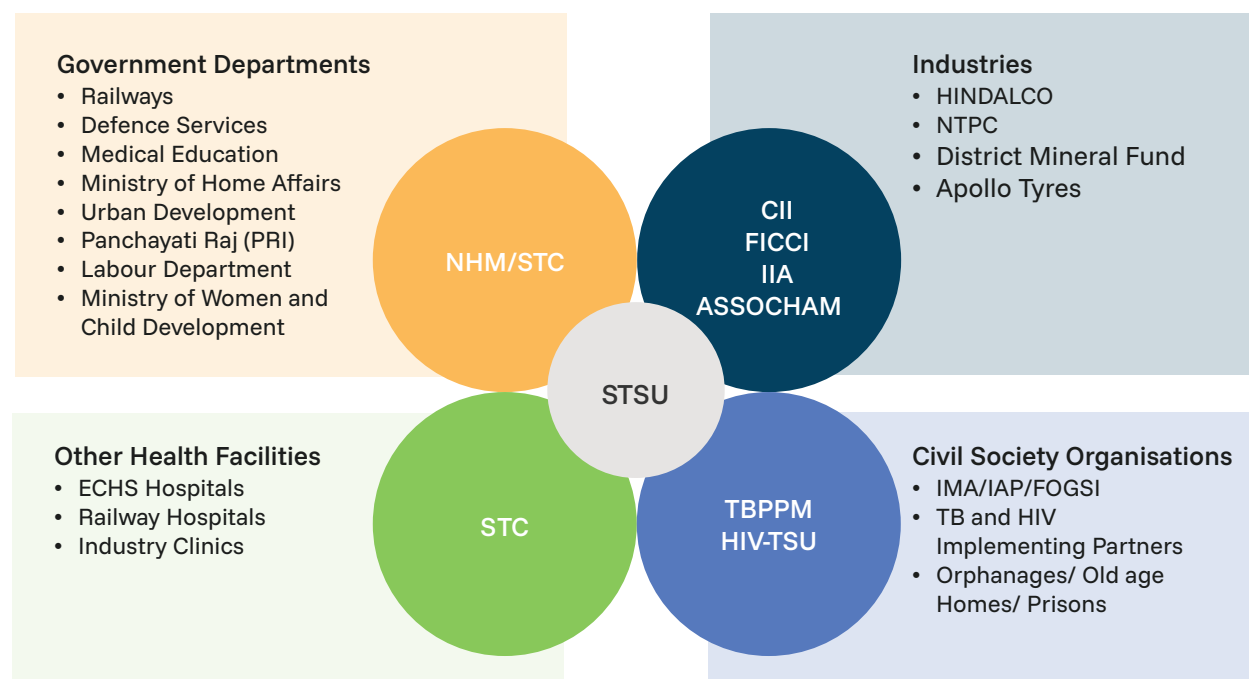
<sup>5</sup> National Multisectoral Action Framework for TB Free India. Available online: [57479351National-Multisectoral-Action-Framework-for-TB-Free-India\\_30-8-19.pdf](https://nhsrindia.org/sites/default/files/2021-04/National-Multisectoral-Action-Framework-for-TB-Free-India_30-8-19.pdf)

## Multi-Sectoral Strategy

The multi-sectoral TB response in Uttar Pradesh was operationalised through a structured, state-led approach anchored within the National Tuberculosis Elimination Programme (NTEP). The TB-STSU functioned as a technical catalyst, supporting the State TB Cell in translating national multi-sectoral frameworks and Memoranda of Understanding (MoUs) into actionable, district-level interventions. Central to this strategy was the mobilisation of Corporate Social Responsibility (CSR) support to address nutritional needs of individuals on TB treatment, alongside systematic convergence of other government departments to strengthen TB detection, treatment, and prevention. In Uttar Pradesh, partnerships with departments such as Integrated Child Development Services - Uttar Pradesh (ICDS-UP), State Rural Livelihoods Mission (SRLM), and the National Highways Authority of India (NHAI), as well as non-governmental organisations (NGOs) and corporate stakeholders, were leveraged to extend TB services to vulnerable and high-risk populations.

Supported by the TB-STSU, the State TB Cell conducted stakeholder mapping, serving as a key baseline input to strengthen planning and implementation of multi-sectoral interventions (Figure 1).

**Figure 1: Stateholder Mapping for Multi-Sectoral TB Engagement**



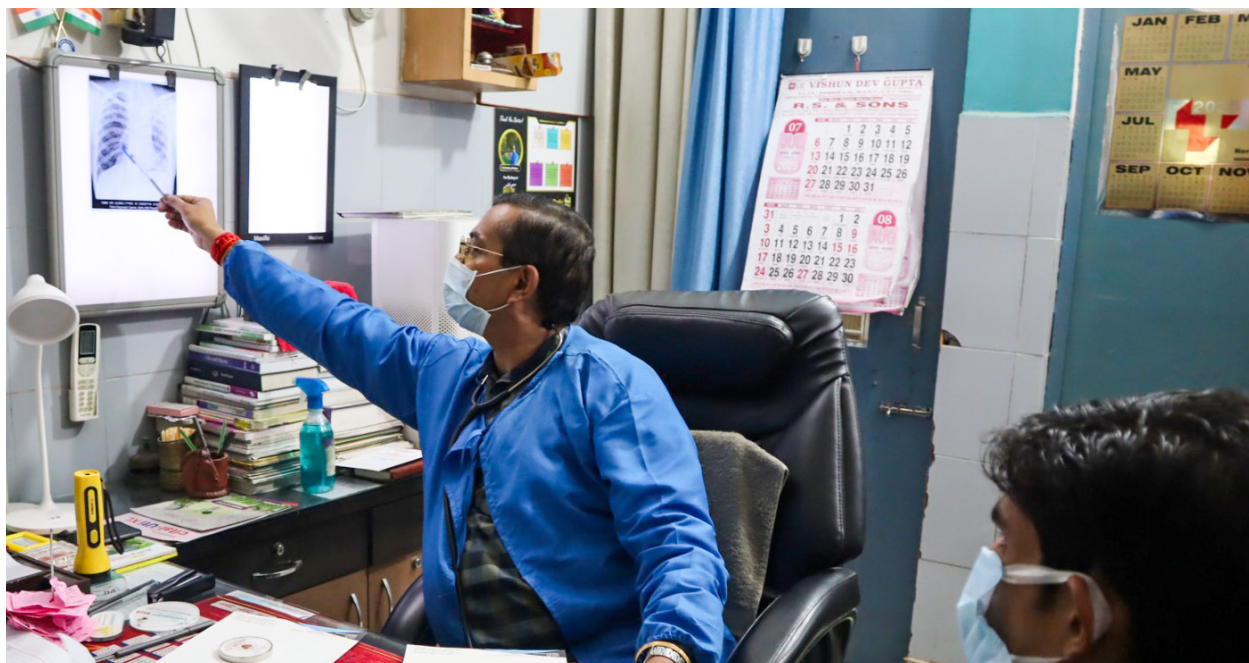
\* **STC**– State TB Cell, **ASSOCHAM**– Associated Chambers Of Commerce and Industry Of India, **CII**– Confederation Of Indian Industry, **ECHS**– Ex-Servicemen Contributory Health Scheme, **FICCI**– Federation Of Indian Chambers Of Commerce & Industry, **FOGSI**– Federation of Obstetric and Gynaecological Societies of India, **IAP**– Indian Academy Of Paediatrics, **IIA**– Indian Industries Association, **IMA**– Indian Medical Association, **NHM**– National Health Mission, **NTPC**– National Thermal Power Corporation, **TB PPM**– Tuberculosis Public-Private Mix



The multi-sectoral strategy adopted by the State was built on four broad strategic pillars as shown in the Figure 2.

**Figure 2: Key Pillars of State Led Multi-Sectoral Strategy**

 <b>Sensitise Partners &amp; Corporates For Multi-Sectoral Collaboration</b>	 <b>Streamline CSR support with NTEP</b>	 <b>Strengthen Diagnostics for TB</b>	 <b>Support Patients</b>
<ul style="list-style-type: none"> <li>• General/Human Resources Managers</li> <li>• Employees</li> <li>• District NTEP team</li> <li>• Private Sector</li> </ul>	<ul style="list-style-type: none"> <li>• Tracking notified TB patients from various sectors i.e, Defence, labour, railways</li> <li>• Access to TB tests</li> <li>• Treatment support and public health actions</li> <li>• TB Free Workplace Policy</li> <li>• TB Mukht Gram Panchayat</li> </ul>	<ul style="list-style-type: none"> <li>• Supporting Active Case Finding for TB in vulnerable population by providing NAAT machines, MMV with Xray Facility and laboratory testing facilities</li> <li>• Partnership with private X Ray Diagnostic Centres for free X-Ray services to screen population</li> </ul>	<ul style="list-style-type: none"> <li>• Ni-kshay Poshan Yojna - cash transfer scheme</li> <li>• Ni-kshay Mitra Initiative - providing nutritional and vocational support to TB patients</li> <li>• Health Camps</li> </ul>



Various activities under multi-sectoral interventions: Diagnostics support, TB Screening, TB Mukt Panchayat Initiative.



# State Framework for Implementation of Multi-Sectoral Strategy

## **1. Stakeholder Mapping and Line Listing**

Institutional partnerships were initiated in line with existing MoUs between CTD and relevant ministries and sectors. At the district level, comprehensive line listing of government departments, corporate entities, and industries was undertaken to identify potential partners and prioritise high-engagement districts.

## **2. Capacity Building and Technical Assistance**

The state organised structured stakeholder engagement initiatives, including sensitisation, advocacy meetings, and joint trainings. These efforts focused on building a shared understanding of TB elimination goals, roles, and sector-specific contributions.

## **3. Supportive Supervision and Coordination**

The TB-STSU provided ongoing technical support through regular review meetings and supportive supervision with District Nodal Officers. This ensured timely implementation, problem-solving, and alignment with NTEP guidelines.

## **4. Partnership Development and Recognition**

Formal communication channels were established with government and private sector authorities to translate intent into action. The TB-STSU facilitated the issuance of directives and Government Orders (GOs) from the TB department and converging departments, and supported systematic follow-up to ensure implementation and recognition of partner contributions.



*The TB-STSU played a catalytic role in establishing key partnerships to advance the State's TB response.*

# FACILITATING STRATEGIC PARTNERSHIPS

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Creating a robust, collaborative network of public and private partners has been central to UP's strategy to amplify its TB elimination efforts. The TB-STSU played a catalytic role in establishing key partnerships to advance the State's TB response. By linking stakeholders, providing technical guidance, and building operational frameworks, TB-STSU has enabled the state to translate Memoranda of Understanding (MoUs) (signed by the Central TB Division with ministries, government bodies, industries, corporates, and private agencies) into tangible action.



TB-STSU supported the State TB cell in building a multi-sectoral ecosystem by identifying partners across the government, public sector units (PSUs), and private industries. Further, the TB-STSU provided support in drafting, negotiating, and finalising MoUs aligned with national TB goals. Similarly, for the private sector partnerships, TB-STSU also developed CSR concept notes and aligned proposals with NTEP priorities.

## Key Partnerships

### 1. Indian Oil Corporation Limited (IOCL)

IOCL has strengthened TB services in eight aspirational districts of Uttar Pradesh by supplying 61 TrueNat Quattro-4 modules to public health facilities.

Beyond diagnostics, IOCL has deepened its commitment to TB care through its Individual Social Responsibility (ISR) initiative. On 2 August 2024, a sensitisation meeting was held at IOCL's Lucknow State Office to brief employees on the Pradhan Mantri TB Mukh Bharat Abhiyaan and guide them through the process of registering as Ni-kshay Mitras. As a direct outcome of this engagement, 62 IOCL employees registered as Ni-kshay Mitras and adopted 72 Individuals with TB from Ram Manohar Lohia Hospital in the first month. Beginning in September 2024, through the partnership with Plan India, IOCL has delivered six months of uninterrupted nutritional support to 56 individuals with TB.



District TB Program Unit (Lucknow), STSU-UP and IOCL jointly conducted an ISR meeting in August 2024 to sensitize IOCL employees on supporting nutrition for people undergoing TB treatment.

## 2. Confederation of Indian Industry (CII)

CII partnered with the Central Tuberculosis Division (CTD), Ministry of Health and Family Welfare, for TB elimination. The MoU was signed in February 2020 to drive activities to promote TB-free workplace policies

**Under the MoU, CII has undertaken the following initiatives:**



**Industry mobilisation:** CII issued two circulars urging around 100 companies to raise awareness, conduct onsite screening, adopt TB-free workplace policies, and provide nutritional support.



**Virtual coordination:** Regular online meetings connected industries with district NTEP teams to plan and track TB-elimination activities.



**Health Summit:** IHAT presented “Elimination Drive Against TB” at the CII UP Health Summit on 26 August 2022, spotlighting the role of industrial partners.

### Outcomes:

Nearly 100 industries engaged in Uttar Pradesh for nutritional support (as per Ni-kshay)  
Stronger industry commitment toward early TB detection, treatment support, and healthier work environments.

## 3. Alignment of CSR Initiatives under the State’s Multi-Sectoral Approach

**Medanta Foundation:** Facilitated by the TB-STSU, on 6th October 2023, Medanta Foundation signed an MoU with NTEP-UP to launch a mobile medical van equipped with TrueNat and portable X-ray machines for active TB screening, in Lucknow, Uttar Pradesh. Between January and November 2024, the van screened 3,572 individuals in urban slums, diagnosed 50 new TB cases, and linked them to treatment. (Source: Ni-kshay (October 2023 – December 2024))

**SBI Foundation:** TB-STSU drafted and submitted a CSR proposal for the State TB Cell (STC) to secure advanced NAAT platforms from SBI Foundation, aiming to bolster molecular testing capacity in outreach areas.

**Bharat Electronics Ltd (BEL):** TB-STSU prepared and submitted a CSR request to Bharat Electronics Ltd for five NAAT machines to enhance early TB detection, and these were procured in the month of August 2025.

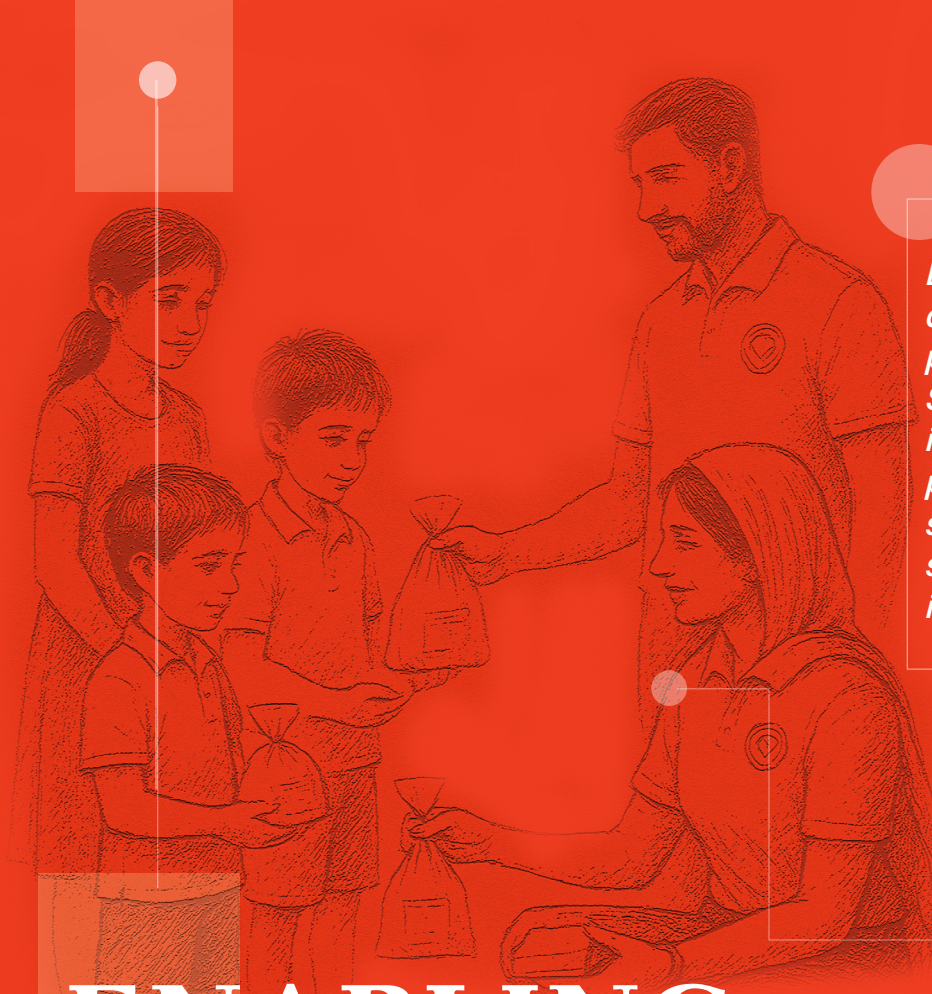
**ONGC-** The State TB Cell, with technical support from TB-STSU, developed a comprehensive proposal for ONGC, aimed at deploying handheld and chest X-ray devices integrated with AI-based diagnostic software and TrueNat machines.





Truenat (Duo) diagnostic machine and a Hand Held X-ray unit installed in the Mission TB-Free van for a screening camp in Barabanki district by the Medanta Foundation





*By working across departments and with private stakeholders, TB-STSU supported the state in building pathways and partnerships to make sure that nutrition is systematically integrated into patient care.*

# ENABLING NUTRITION SUPPORT SYSTEMS

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Malnutrition remains one of the key vulnerabilities that worsen TB outcomes. Recognising this, UP's multi-sectoral strategy included a strong focus on nutrition for the elimination of TB. By working across departments and with private stakeholders, TB-STSU supported the state in building pathways and partnerships to make sure that nutrition is systematically integrated into patient care. Some of the remarkable partnerships in UP to provide nutritional support have been the following:

## 1. Integrated Child Development Services (ICDS)

In 2023, the ICDS department in Uttar Pradesh issued a directive for all districts to support NTEP by doubling the regular take-home rations for every child under six diagnosed with TB. This was designed to strengthen the recovery and overall treatment success of children with TB. District NTEP teams, mobilised by the TB-STSU, worked with ICDS officers to identify and register children with TB. In total, 5,050 children under six living with TB were documented and enrolled for the enhanced ration scheme. (Source: Ni-kshay (2023 –2024))

## 2. Uttar Pradesh State Rural Livelihood Mission (UPSRLM)

To ease the procurement process for nutrition baskets, the district officials were directed to engage Self-Help Groups (SHGs) to source ingredients and assemble kits. Under this framework, Ni-kshay Mitras transfer funds digitally to SHGs, which then prepare and deliver the nutrition baskets to the respective TB Units. Since July 2023, in Varanasi, Mirzapur, Etawah, Rampur, and Ghaziabad, SHGs have crafted and delivered 3,070 of the 29,060 planned nutrition baskets. TB-STSU team coordinated with SRLM State team and advocated for directives from SRLM to their district teams for making nutrition kits. Further, the team coordinated with the district team NTEP to enhance the uptake of these baskets for individuals on TB treatment.

**Ni-kshay Mitras:** In all, 1,14,386 Ni-kshay Mitras have contributed to providing 13,49,423 nutrition kits to individuals with TB across Uttar Pradesh (November 2022 to July 2025; source: Ni-kshay). The TB-STSU team supports the State TB Cell by analysing data from Ni-kshay and sharing weekly reports with districts under the Ni-kshay Mitra initiative. During field visits, the team engages with various industries, CSRs, Gram Pradhans, and other prominent stakeholders across the state to mobilise support for adopting individuals undergoing TB treatment and providing them with nutritional assistance.


# 1,14,386

Ni-kshay Mitras have contributed to providing 13,49,423 nutrition kits to individuals with TB across Uttar Pradesh



Nutrition baskets or Poshan potlis for TB patients on treatment





*Timely and accurate TB  
diagnosis is central to achieving  
TB elimination*

# DEPLOYING DIAGNOSTICS & TRACKING NOTIFICATIONS

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The ability to detect TB rapidly and reliably is the backbone of any elimination strategy. TB-STSU efforts have been to strengthen the UP's diagnostic system by aligning CSR opportunities with infrastructure gaps, securing essential equipment, and developing systems to track their utilisation.



# Diagnostics Machines Deployed Through Partnerships

Sixty-one TrueNat Quattro machines provided by IOCL across TB Units.

Three TrueNat Duo machines installed in Barabanki through Reliance Foundation.

Handheld X-ray unit supplied by Adani Foundation.

Fully-equipped mobile diagnostic van launched with Medanta Foundation.

Five Truenat Duo machines in Chandauli District were provided BEL.

Advocated with the State TB Cell, Uttar Pradesh, for the procurement of 422 Truenat Duo machines through the National Health Mission (NHM) under the Fifteenth Finance Commission (XVFC).



Truenat (Uno) Molecular Diagnostic Machine for the Detection of TB and Rifampicin Resistance

## Impact

- **IOCL Support:** 1,32,564 TB tests conducted through TrueNat machines (Supported through IOCL) from February 2024 to June 2025. 28,639 confirmed TB cases. (Source: Monthly Lab Report)
- **Reliance Foundation Support:** Total number of tests performed- 4063 (15 Feb 2025-31 July 2025, Source: Monthly Lab reports), 205 TB positive cases detected in the same period.
- Expanded diagnostic access in high-burden, underserved districts.

## Active Case Finding and Workplace Screening

To drive early detection beyond the facilities, TB-STSU supported in large-scale screening during the 100 Days Intensified TB Campaign (from 7 December 2024 to 24 March 2025):

### 1. Uttar Pradesh State Road Transport Corporation (UPSRTC) Bus Drivers Screening:

The TB-STSU team supported State TB Cell officials to initiate screening of vulnerable populations in coordination with UPSRTC during the 100 Days Intensified TB Campaign.



They also assisted in monitoring these activities through regular data analysis from Ni-kshay. Till January 2025, 1,620 drivers from Amethi, Jhansi, Agra, Ayodhya, Varanasi, Prayagraj, Mainpuri, Deoria, Lalitpur, Jalaun, Hathras, Hardoi, and Hapur were enrolled for TB screening (Source: State TB Cell). Further, the team also ensured availability and prominent display of IEC materials highlighting TB symptoms, vulnerable populations, TB preventive treatment and differentiated TB care.

### 2. National Highways Authority of India (NHAI) Toll Plaza and Construction Site Screening

TB-STSU met with NHAI regional officers and supported the State TB Cell to build TB screening points and display IEC materials at toll plazas. Concurrently, active case finding at construction sites in the same 13 districts led to 1,112 worker enrolments from December 2024 to February 2025. (Source: Ni-kshay)



### 3. Bharat Heavy Electrical Limited (BHEL)

BHEL operates active construction sites in Jagdishpur, Varanasi, and Jhansi, Uttar Pradesh. As part of the 100 Days Intensified TB Campaign, the TB-STSU team partnered with BHEL to deliver on-site TB screening and “TB-free workplace” training at these sites

## Notification Tracking across Sectors

By coupling advanced diagnostics with proactive screening and rigorous notification tracking, TB-STSU supports the state in closing the gaps in the care cascade. Regular monitoring of TB notifications from the following enables real-time surveillance and targeted follow-up for public health actions:

- Railways, cantonment hospitals, district jails, Ex-Servicemen Contributory Health Scheme (ECHS) polyclinics, Apollo Tyres, and Hindalco sites collectively notified 3,185 (December 2022- July 2025) (Source: Ni-kshay).
- Seventy-two NABH-accredited hospitals enrolled on the Ni-kshay portal, almost doubled their annual notifications from 2,700 in 2022 to 5,088 in 2024. (Source: Ni-kshay)



CBNAAT machine provided by Bharat Electronic Limited (BEL) in District Chandauli

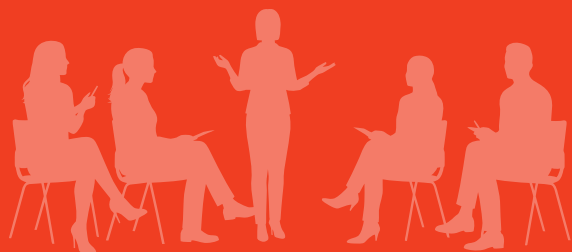


An illustration of a woman with glasses and a scarf, pointing at a whiteboard. In front of her, the backs of several people's heads are visible, suggesting a classroom or training session. The entire image has a red overlay with white geometric lines and dots.

# CAPACITY BUILDING AND TRAININGS

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Scaling up TB interventions requires more than equipment and policy—it demands trained personnel who understand the disease and how to address it in context.



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TB-STSU provided targeted capacity-building support to healthcare workers, industry stakeholders, and community champions.



## Training Initiatives Rolled Out

To drive early detection beyond the facilities, TB -STSU supported in training of Community Health Officers (CHOs) supported by State TB Cell, UP and review of all 75 districts during the 100 Days Intensified TB Campaign (from 7 December 2024 to 24 March 2025).


### Ex-Servicemen Contributory Health Scheme (ECHS)

ECHS runs 44 polyclinics across Uttar Pradesh for screening, notification, and treatment. To strengthen these efforts, the State TB Officer (STO), State TB Cell (GoUP), NTEP, in consultation with WHO and TB-STSU, and with support from the State TB Training and Demonstration Centre (STDC) Agra, delivered on-site training to medical doctors across all three regional centres.

Every ECHS polyclinic is now registered on the Ni-kshay portal, ensuring real-time TB case notification and enrolment of presumptive individuals. As a result of these efforts, the ECHS network enrolled 66 presumptive cases (between December 2022 and December 2024), and 19 cases were notified during this time period. Additionally, since January 2025 and July 2025, 13 TB cases have been notified.



TB STSU team training CHOs, ASHA workers during the 100 Days Intensified TB Campaign in District Barabanki, Uttar Pradesh



*TB STSU enhanced Coordination, Capacity and Monitoring to strengthen multi-sectoral collaboration in order to enhance TB prevention, detection and treatment outcomes.*

# ENHANCING MULTI-SECTORAL RESPONSE

## in TB care through TB-STSU

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To strengthen the multi-sectoral response for TB elimination in Uttar Pradesh, the TB-STSU extended the support to GoUP in strengthening communication and implementation in the following key areas:





**Streamlining Communication:** Strengthened coordination between state, district, and external partners through joint review mechanisms and data dashboards.



**Technical Capacity for CSR Execution:** Many districts lacked the experience to reach out and write proposals to CSR donors. TB-STSU supported district officials in developing proposals, making powerful presentations to leverage resources, and with utilisation of donated equipment or nutrition, ensuring that the purpose of the donation was achieved. It improved donor communication and project execution timelines.



**Tracking and Reporting Systems:** TB-STSU developed robust monitoring formats for diagnostics and nutrition support, embedded with the Ni-kshay portal. This helps in tracking data from different setups and brings it together under one platform. This also helps in identifying the districts that need to be further strengthened.



**Training Uptake:** Established standardised Training of Trainers (ToT) and refresher modules to ensure quality and continuity.

## Key Learnings from State-led Multi-Sectoral Initiatives

The implementation of a multi-sectoral TB response in Uttar Pradesh has generated important learnings that can inform scale-up and replication across geographies:

- Strong stewardship by State TB Cell, backed by Government Orders and directives, was critical in translating national MoUs into district level action.
- Building strong coalition with government departments, private sector, civil-society, community based organisations is central for meaningful engagement and social mobilisation for TB programming.
- The TB STSU, as a technical facilitator under the direction of State TB Cell, UP enabled engagement with several departments, corporates and industries. Continuous sensitisation meetings with CSR partners was instrumental in mobilising support.
- Establishing a central coordination body at state level is essential to streamline communication, define roles, and monitor progress and monitoring of multi-sectoral TB initiatives.
- Leveraging CSR funds for the provision of NAAT machines, mobile diagnostic vans, handheld X-Ray devices during 100 Days Intensified TB Elimination Campaign significantly increased access to early diagnosis, especially in underserved and high-burden districts.
- Widespread awareness campaigns using multiple channels such as social media, local media, community forums, school programmes etc. is essential for engaging different stakeholders to foster multi-sectoral collaboration in tuberculosis response.
- Formal acknowledgement of partner contributions through state platforms and regular feedback loops helped sustain motivation among corporates, PSUs, and community stakeholders, reinforcing TB elimination as a collective commitment.

# CONCLUSION AND WAY FORWARD

Uttar Pradesh has moved beyond traditional TB programmes to a collaborative, systemic, and cross-sectoral initiative. This document represents the coordinated efforts by various government departments, community-based organisations, non-governmental organisations, industries, and corporates across sectors of nutrition, diagnostics, training, and notification tracking. TB-STSU has supported the State TB Cell across key areas—from enhancing case detection and diagnostic access to piloting community-led nutrition models. By strengthening coordination and establishing strategic public-private partnerships, the activities have laid the foundation for a scalable and integrated TB response across the state.

Looking ahead, institutionalising these models through government systems, expanding CSR portfolios, and embedding community leadership will be critical. The TB elimination goal cannot be met in silos—it requires the whole of society's response. By building on these collective efforts, we can accelerate the state's progress towards the elimination of TB.





**Acknowledgement**

We acknowledge the invaluable support and guidance of the Central TB Division, India, and the State TB Cell, Uttar Pradesh, in driving the multi-sectoral interventions. We also extend our gratitude to the CSR agencies, private sector industries and corporations, and civil society organisations for their continued commitment towards the TB elimination goals.

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