



सत्यमेव जयते

MEMORANDUM OF UNDERSTANDING

This Memorandum of Understanding (MOU) signed on 27th
day of December, 2022

Between

Department of Youth Affairs
Ministry of Youth Affairs and Sports

And

Central TB Division
Ministry of Health and Family Welfare
Government of India

INTRODUCTION

India has the world's highest Tuberculosis (TB) burden with an estimated 26 lakh people contracting the disease and 4.2 lakh people dying from the disease every year. Moreover, there are almost a million missing patients every year in India which are unregistered or undetected, and who need to be brought under the public health system for ensuring quality diagnosis and treatment. As India has world's highest TB burden, significant interventions and integration of programmes and converging efforts from different ministries/departments are required to achieve the goal of Eliminating TB by 2025.

India is rich in elusive demographic dividend; government recognizes youth as the most critical and most valuable human resource of the population for tapping their potential to bring socio-economic development and growth of the country. To strengthen the system of TB management and service delivery, engagement of wider population and the spirit of 'Jan Andolan' should be ensured by engaging youth as a catalyst for Awareness Generation, Encouragement of health care seeking behaviour within the communities.

Most importantly, De-stigmatization of TB is required especially at village level. Misinformation and Stigma against any disease further aggravates the problem. The issue of stigmatization stems from fear, prejudice, and lack of correct information. Lessons can be drawn from COVID pandemic management, where India's young people lead action against COVID as a warrior and helped take the country out of its ongoing health and humanitarian crisis by addressing misinformation, discrimination and stigma related to the crisis. They are act at the forefront of risk communication initiatives by disseminating information on TB related services using various platforms such as social media and local languages. Youth Volunteers can also contribute to data-collection and monitoring of people infected with TB and

act as a link between infected person and administration and health care departments by coordinating with ASHA workers.

TB is not only a medical disease but a social problem. Even though anyone can be affected by TB, the worse hit are the marginalized population who battle poverty, malnutrition, poor hygiene, stigma, loss of wages, poor housing and working conditions etc. Such multi-faceted issues are beyond the efforts of health sector alone and call for comprehensive solutions by meaningful involvement of non-health sectors. Convergent actions by various Government Ministries are therefore imperative for realization of country's goal of Ending TB by 2025.

Central TB Division (CTD), Ministry of Health and Family Welfare and Department of Youth Affairs, Ministry of Youth Affairs and Sports are hereinafter referred to together as "the parties".

Article 1

1. CENTRAL TB DIVISION (CTD)

- 1.1 Central TB Division (CTD) under The Ministry of Health & Family Welfare (MoHFW) is the nodal agency for coordinating response with respect to tuberculosis in India. It implements National Tuberculosis Elimination Programme (NTEP) across the country.
- 1.2 The Ministry of Health & Family Welfare has developed a National Strategic Plan (2017-25) for elimination of TB in the Country by 2025.
- 1.3 Through Inter-ministerial Coordination, MoHFW aims to reach key populations served by various ministries such as workers, miners, migrants, tribal population, women, youth and children etc.

Article 2

2. DEPARTMENT OF YOUTH AFFAIRS

- 2.1 The Government recognizes youth as the single most important segment of the population in the context of future socio-economic development and growth. Several important schemes and programmes have been launched for the benefit of youth in the country during last five years. The Youth, i.e. those falling within the age group of 15-29 years constitutes nearly 40% of the total population of India. This group which is the most vibrant and dynamic segment of the country's population constitutes potentially its most valuable human resource. The Department of Youth Affairs pursues the twin objectives of personality building and nation building, i.e. developing the personality of youth and involving them in various nation-building activities. The Department works through large network of National Service Scheme (NSS) and Rashtriya Yuva Sashaktikaran Karyakram (RYSK)
- 2.2 National Service Scheme (NSS): NSS has more than 3.8 million student youth enrolled in 41,442 NSS units spread over through 432 Universities/+2 Senior Secondary Councils, 16,331 Colleges/Technical institutions and 28,621 Senior Secondary Schools across the country with primary focus on the development of personality of students through community service. The activities of NSS are wide ranging covering National Integration Camp, Blood Donation, Plantation, Immunization Shramdaan, Disaster Management & Adventure Programmes.



2.3 Rashtriya Yuva Sashaktikaran Karyakram (RYSK): The Umbrella Scheme merges 8 ongoing schemes with an aims to develop the personality and leadership qualities of the youth and to engage them in nation building activities. The Objective was that the merger of the schemes under an umbrella scheme would effectively leverage the administrative structure of the scheme for effective implementation of the programmes. The seven sub-schemes under scheme RYSK are:

1. Nehru Yuva Kendra Sangathan.
2. National Youth Corps.
3. National Programme for Youth and Adolescent Development.
4. International Cooperation.
5. Youth Hostels.
6. Assistance to Scouting and Guiding Organisations.
7. National Young Leaders Programme.

Article 3

3. OBJECTIVE

3.1 To forge convergence at policy, programme and implementation levels across the ministries of the Government of India for a multi-sectoral and accelerated response towards TB-Free India.

Article 4

4. SCOPE OF COLLABORATION

- 4.1** The thematic areas for collaboration are listed below –
- a) Awareness generation to boost TB-Free India campaign.
 - b) Integrating adequate focus on TB in priority areas of National Policy for Youth.

- c) Integrating TB prevention and information on TB related services in the training manuals and modules of RYSK and their sub schemes.
- d) Adoption of TB workplace policy and workplace intervention (TB Free Workplace) in institutes.
- e) Ensuring training of all the functionaries of NSS and RYSK on TB prevention to reach out to youth across the country and enhance their access to counselling and testing services.
- f) Facilitate accessibility of youth to TB related services provided under National Tuberculosis Elimination Programme (NTEP)
- g) Airborne infection control in workplace including social distancing, masks, sanitization etc.

4.2 The discretion lies with the Nodal Officers from the parties in terms of amendment to or expansion of the scope of collaboration.

Article 5

5. ROLE OF CENTRAL TB DIVISION

- 5.1 Provide technical assistance to Department of Youth affairs for development of an annual work plan for TB related activities.
- 5.2 Provide support for implementation of activities under the scope of collaboration.
- 5.3 Provide technical support for capacity building of nodal officer/ concerned officials/ representatives of Dept. of Youth affairs, NSS, RYSK, autonomous institutions etc.

- 5.4 Share relevant IEC material /training modules with Department of Youth affairs.
- 5.5 All services and incentives as per NTEP and guidelines are applicable when service are availed by any patient who are engaged by Department, RYSK, NSS and autonomous institutions.
- 5.6 NTEP will provide drugs, diagnosis, patient support and monitoring support to all patients referred by department, RYSK, NSS and autonomous institutions.

Article 6

6. ROLE OF DEPARTMENT OF YOUTH AFFAIRS

6.1 Directives

- Issuance of advisory/ directive to all the units under purview of Department of Youth Affairs, Rashtriya Yuva Sashaktikaran Karyakram, National Service Scheme and autonomous institutions for prioritizing TB awareness, prevention and control activities.

6.2 Information Education and Communication

- Awareness generation among workers engaged in various offices under the purview of M/o Youth Affairs, RYSK, NSS and autonomous institutions.
- Inclusion of information on TB prevention & services in printed materials for dissemination wherever possible.

6.3 Capacity Building

- Capacity building of officials and Youth Volunteers who are identified as Nodal officer, master trainers & peer educators to strengthen activities related to TB awareness, prevention, diagnosis, treatment and treatment adherence. Capacity building on TB workplace intervention.

6.4 Integration of Service

- Promotion of screening & diagnosis of tuberculosis on the regular basis for workers under the purview of Department of Youth Affairs and volunteers of NYKS working under the field offices for TB awareness.

6.5 Sharing of Information

- Sharing the progress on activities carried out with CTD and State TB Cell (STC) in States/UTs.

6.6 Youth Volunteers can also contribute to data-collection and monitoring of people infected with TB and act as a link between infected person and administration and health care departments by coordinating with ASHA workers.

7. EXECUTION OF MEMORANDUM OF UNDERSTANDING

7.1 Both the parties will nominate one Nodal Officer each who will act as a focal point for their respective Ministry. The Nodal Officers will be responsible for –

- a) Finalization of the scope of collaboration between the parties and any subsequent modification to it.
- b) Development of implementation plan / strategies and indicators.
- c) Facilitation for the effective execution of the implementation plan.
- d) Regular monitoring of the indicators and course correction.
- e) Periodic reporting of outputs and outcomes.
- f) Any other relevant activity agreed upon by both the parties

- 7.2 The modalities for operationalization of the MoU would be decided in accordance with the recommendation of the Nodal Officers.
- 7.3 Nodal Officers would meet at least bi-monthly for first three meetings, quarterly for subsequent four meetings and bi-annually thereafter. The parties can prescribe any modification or extension to the said frequency or period.
- 7.4 The MoU would be effective from the date 27th December, 2022 and any modification to the MoU is to be carried out by written agreement of both the parties.

The parties herein have appended their respective signatures on the day and the year stated below

SIGNED FOR AND ON BEHALF OF
CENTRAL TB DIVISION,
MINISTRY OF HEALTH AND FAMILY WELFARE



27/12/2022

DR RAJENDRA P. JOSHI
DEPUTY DIRECTOR GENERAL (TB)
CENTRAL TB DIVISION
MINISTRY OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF INDIA
27TH DECEMBER, 2022

SIGNED FOR AND ON BEHALF OF
DEPARTMENT OF YOUTH AFFAIRS,
MINISTRY OF YOUTH AFFAIRS AND SPORTS



SHRI NITESH KUMAR MISHRA
JOINT SECRETARY
MINISTRY OF YOUTH AFFAIRS AND SPORTS
GOVERNMENT OF INDIA
27TH DECEMBER, 2022

Acronyms

ASHA	Accredited Social Health Activist
CTD	Central Tuberculosis Division
IEC	Information, Education and Communication
DoYA	Department of Youth Affairs
MoU	Memorandum of Understanding
MoH&FW	Ministry of Health & Family Welfare
MoYA&S	Ministry of Youth Affairs and Sports
NTEP	National Tuberculosis Elimination Programme
NSS	National Service Scheme
NYKS	Nehru Yuva Kendra Sangathan
RYSK	Rashtriya Yuva Sashaktikaran Karyakram
STC	State Tuberculosis Cell
TB	Tuberculosis
UT	Union Territories