Acknowledgements

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Credits

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Dear Colleagues,

The purpose of this report is to share the results of your hard work in organizing advocacy and education campaigns for World TB Day 2002 – mobilizing people and resources, building partnerships and, in many cases, maintaining year-long advocacy efforts. Whether you are a health professional, a community care worker, a donor, a politician, a communications officer, a volunteer, an academic or a staff member of an organization working to stop TB, you should read these highlights from around the world and feel proud. And read them to get new ideas for 2003!

The theme for 2002 was “Stop TB, fight poverty”, drawing attention to the terrible link between TB – and other infectious diseases, such as HIV/AIDS – and poverty. To stop TB is to promote economic development, and to fight poverty is to reduce the factors that contribute to the spread of TB and the heavy burden of disease in developing countries.

Around the world in 2002, partners in the fight against TB organized screening and consultation clinics, painted murals, wrote letters and newspaper articles, spoke on the radio, appeared on television, coordinated training sessions for health care workers, designed posters and brochures, produced plays, published reports, attended conferences, led parades, played football, opened new TB clinics, talked to schoolchildren, signed agreements – and the list goes on – all in the name of educating people about TB and mobilizing the general public, the medical community, politicians and the media to work together to stop TB.

The theme for World TB Day 2003 is “People with TB”, and the slogan is “DOTS cured me – it will cure you too”. The 2003 theme, chosen from suggestions sent from around the world, emphasizes TB patients and the importance of including them as advocates and participants in global TB control while working to banish the stigma attached to TB. The theme also supports case detection and DOTS expansion, which is crucial in the countdown to 2005 as we strive to reach the global goals of 70% detection of infectious TB cases and an 85% cure rate.

I hope that reading about some of the events that took place around the world in 2002 will inspire you in your planning for World TB Day 2003 and year-round advocacy. We need political support, public awareness, and the energy of health and community care workers to beat this disease.

Yours sincerely,

Jacob Kumaresan,
Stop TB Executive Secretary
The theme for World TB Day 2002 stressed the link between ill-health and poverty, one of the biggest challenges to health care providers everywhere. In a vicious cycle, TB not only causes poverty by preventing those infected from working, looking after their families or pursuing an education, but also is often caused by poverty. Some of the basic requirements for good health – sanitary living and working conditions, nutritious food, clean water, education and access to medical care – are denied many of the world’s poor, and as a result, the largest burden of the world’s communicable diseases is carried by the poorest nations. In turn, strained health care services and a sick labour force hamper economic development and growth in all countries. TB occurs most often in those between the ages of 15 and 49, the most economically productive segment of society and often the sole income-earners for entire households. As a result, TB takes the devastating equivalent of approximately US$ 12 billion every year from the pockets of poor communities alone.

The Commission on Macroeconomics and Health has reported that by 2010, approximately eight million lives per year could be saved – mostly in low-income countries – with interventions against infectious diseases, the worst of which are TB, malaria and HIV/AIDS. In 2002, those working to stop TB were encouraged to expand their advocacy and awareness campaigns to include year-round activities in addition to planning events connected to World TB Day.

The aim of the 2002 theme, “Stop TB, fight poverty”, was to raise awareness among political leaders, policy-makers, opinion leaders and the general public about the spread of TB and the resulting impact on community health and the economy, and to let them know that there is a cost-effective cure readily available for TB. Another goal was to emphasize DOTS expansion, which is critical for reaching global TB targets by 2005 and for fighting disease-related poverty. Finally, it was also hoped to mobilize TB patients themselves to draw attention to the disease and demand greater access to treatment for TB patients everywhere.
The mission of the African Development Bank is to promote the economic development and social progress of member nations. It recognizes TB as a cause of impoverishment in African nations and that poverty in turn increases the spread of disease. The Bank Group put out a press release to mark World TB Day 2002, noting the global TB targets for 2005 and providing information on its efforts to improve health infrastructure and promote sustainable agriculture. The Bank Group pledged its support in fighting TB and other communicable diseases in Africa by providing resources for public information campaigns on disease prevention and control and increased access to health care.

CÔTE D’IVOIRE

Health officials in the Côte d’Ivoire recognize the links between poverty and disease and in 1996 made fighting poverty officially part of their public health programmes. Political will to eradicate TB is growing, and recently the government created the position of Executive Director for the National TB Programme in order to accelerate the country’s progress with TB control. The country marked World TB Day 2002 and chose the city of Yopougon to be the official centre for events. Students led a parade through the streets, joined by the Minister of Health, WHO representatives, health personnel and local politicians. The theme of the parade was “Stop TB, fight poverty”, and after the parade some of the country’s top comedians entertained the crowd and talked about TB prevention and treatment.

NIGERIA

One of Nigeria’s TB partners is the Youth World Health Organization (YWWHO), which planned specific advocacy and outreach activities in rural areas with high poverty levels during 2002. Using the theme “Stop TB, fight poverty", they looked for opportunities to promote agriculture, food production, employment and healthy lifestyles. YWHO’s activities included talks on the radio, small theatre productions and discussions with rural villagers. They also met with community leaders, school principals and government agricultural officers to talk about combating TB by promoting food production and employment. While many of the activities occurred on or around World TB Day 2002, YWHO has plans to spread information throughout Nigeria during the rest of the year.

MONGOLIA

With 74 per cent of Mongolian TB patients coming from the lowest socioeconomic brackets of society and 54 per cent of TB patients unemployed, TB partners in Mongolia are very clear on the two-way links between TB and poverty. One of the crisis points for TB in Mongolia is in the capital city of Ulaanbaatar where the number of homeless people on its streets has been increasing steadily since 1990. According to Dr D. Ogtontsetseg from the TB Department of the National Centre for Communicable Diseases, one of the goals of their World TB Day 2002 advocacy campaign was to mobilize political and social commitment to stop TB by fighting poverty, which is such a serious factor in the country’s rising TB rates.

To raise public awareness, TB partners coordinated public lectures, street theatre, educational programming for national television, rallies and a parade through the streets of Ulaanbaatar. The Mongolian Anti-TB Association produced 10 000 leaflets for distribution by dispensaries in all provinces. As well, a number of case-finding missions went through the streets of Ulaanbaatar, and volunteers were trained to oversee patients who take their drugs at home.

In the provinces, where activities were organized by provincial and district health centres, dispensaries and community health clinics, there were public lectures on TB and a number of TB poster competitions for school children. One province worked with World Vision to hold a drive for food and clothing for TB patients. The province of Darkhan-Uul opened a new treatment centre for TB patients that will provide not only drugs but also nutritious food to low-income patients.

In the coming months, TB partners plan to increase health education to the rural and urban poor, to provide TB education to governors in rural areas and to hold a press conference with senators, the Minister of Social Welfare and the Minister of Finance to emphasize the role poverty plays in the spread of TB and the devastating economic impact to families, communities and the country. There are also plans to open new treatment centres to provide drugs and food to TB patients in Ulaanbaatar.

SLOVAKIA

In Slovakia, TB rates have been consistently higher in regions with high unemployment and lower incomes. Regional TB coordinators, TB specialists and WHO staff collaborated to mark World TB Day 2002 in Slovakia by using mass media, particularly television and newspapers, and distributing leaflets to inform higher risk groups about TB and the availability of treatment. In addition to raising the awareness of the general public, the National Institute of TB and Respiratory Diseases in Bratislava gave presentations to physicians on TB epidemiology and the global goals for TB control. In the coming year, there are plans for TB prevention programmes specifically aimed at the homeless in Slovakia.
Around the world, the countries with strong and visible political commitment to TB control are the countries with well-managed National TB Programmes (NTPs), resources for treatment and preventive education, and frequent inter-agency cooperation. On the other hand, TB partners repeatedly list the lack of political will at the national, regional and community levels as one of the biggest obstacles to mobilizing community involvement, private sector support, and the cooperation of mass media.

When a nation’s leader speaks on television about TB control, this sends a message to the public that eradicating TB is a national priority. When representatives from the Ministry of Health attend TB conferences, this tells health care professionals, NGOs and other TB partners that the government is committed. When government ministries in charge of employment, social welfare, prisons, immigration and education work together as part of the NTP, this is a sure sign that a country is working strategically to reach high-risk communities and to educate the population to stop TB. Peru’s success in being removed from the list of the world’s high TB-burden countries after only eight years was largely due to strong government commitment to tackle their TB crisis.

World TB Day 2002 was marked in some countries with strong government support and in others with activities designed to spark increased political action. In Somalia, high-ranking government officials were invited to participate in World TB Day activities in order to secure their support. In Malawi, a football match was held between the Ministry of Health and Population – captained by the Minister of Health, the Honourable Yusuf Mwawa – and youth from the Kaliyeka Primary School in one of the poorest areas of Lilongwe City. In Cambodia, a meeting between the NTP and the Ministry of Health on World TB Day ended with the release of Stop TB balloons to welcome a procession of students promoting poverty eradication and DOTS.
EGYPT

The primary focus of Egypt’s month-long campaign around World TB Day 2002 was to increase the awareness of the general public on TB and to mobilize the government and private sector to be actively involved. Staff from the NTP met with key representatives of the Health Education Department and the Department of Social Work within the Ministry of Health, the Department of Environment and Population within the Ministry of Education, and the Health Insurance Organization. Meetings were also held with prison authorities from the Ministry of the Interior. The NTP then organized educational teleconferences with representatives from these ministries to raise their awareness of TB, DOTS strategy, the role of the NTP and the need for cross-sectoral collaboration in combating TB in Egypt. By working with the Ministry of Health and the Health Insurance Organization, the NTP was able to hold meetings and educational seminars for the public in schools, youth clubs, hospitals, health care centres, mosques, churches and prisons. The NTP also worked with pharmaceutical companies to provide educational material to the public on TB and DOTS treatment.

HUNGARY

In Hungary, a successful TB control programme has resulted in annual reductions in TB cases to 14 per 100,000 people in 2001. However, the Koranyi National Institute of Tuberculosis has noted that approximately 50% of TB patients in the country are homeless or otherwise living in poverty. Annual meetings of the country’s TB partners focused on the particular contexts of TB in Hungarian communities, resulting in plans to lobby the government for increased support for TB programmes for the homeless and to look for new partners in non-governmental organizations.

MAURITANIA

In order to mobilize the support of other government ministries in the fight against TB, World TB Day 2002 advocacy planners from the Ministry of Health in Mauritania held an official ceremony to mark the day and invited government ministers and high-level political decision-makers to attend. The ceremony provided an opportunity to educate government members from other ministries and enlist their support.

SYRIAN ARAB REPUBLIC

The Syrian government showed its strong commitment to TB control through the numerous ministries that participated in publicizing World TB Day. The Ministry of Communications created a postal stamp commemorating World TB Day and had TB-related information on its telephone system throughout the month of March. The Ministry of Tourism produced a specially printed tissue box for hotels to provide to guests. The Ministry of Information provided public service announcements about TB on public radio and devoted two television programmes to the subject of TB, interviewing three of Syria’s top TB specialists.

USA

The National Coalition for the Elimination of Tuberculosis (NCET), a coalition of public health, medical professional, health care and service organizations, hosted a news conference and released a white paper on World TB Day 2002 on the growing federal funding gap for TB eradication in the USA and called for an increase in funding in order to maintain effective TB control programmes. Speakers included Dr. J.W. Lee, Director of Stop TB at WHO, Dr. Lee Reichman, co-chair of NCET, and Dr. Philip Hopewell, Professor of Medicine at the University of California in San Francisco. They talked about the importance of high-level government support for successful TB control and the direct link between funding and the number of TB cases in the USA. As part of NCET, the American Lung Association prepared informational mail-outs for all members of the US Congress and invited a congressional representative active in TB programme support and the former US surgeon-general to speak at World TB Day events.
THE IMPORTANCE OF PARTNERSHIPS

The Stop TB Partnership was created to provide a globally coordinated response to TB involving all the key players, from governments and the health care sector to NGOs and donors. This has resulted in aggressive targets for TB detection and cure rates by 2005 and the worldwide implementation of an internationally approved treatment strategy – DOTS. As a result of the Stop TB Partnership, funding, equipment and other resources are also being more efficiently directed to countries whose NTPs require support.

Partnerships bring results by mobilizing people under a common goal and combining resources, expertise, planning and, most importantly, access to people. Bringing preventive education, diagnosis and DOTS treatment to every community in the world, particularly those with high TB burdens, requires further layers of partnership-building at the national, regional and local levels.

In order to reach high-risk groups – often the most marginalized members of society due to poverty, homelessness, disease or imprisonment – and to reach all sectors of society, from school-children to rural villagers, it is necessary for all agencies and organizations that work with people to work together.

Groups that may never have imagined working together are now gathering to strategize and share their knowledge, networks and resources. Eradicating TB is no longer the sole responsibility of those traditionally involved in health care, and with new partners in fighting the disease come new and often imaginative ideas for reaching the public.

The most successful advocacy campaigns in 2002 were those whose planners included representatives from community organizations, private sector businesses, schools and universities, government ministries outside of health, public transit, sports clubs or other non-traditional partners. As well, TB partners who built relationships with media organizations and health-specialist reporters and journalists provided the media with a reliable source of information on TB and saw better coverage in return.

In the end everyone has a stake in community health and economic growth.
MEXICO

World TB Day events were organized throughout Mexico in 2002 by government agencies, NGOs and other TB partners, including the National Centre for Epidemiology, the Ministry of Health, the National Institute for Lung Disease, the National TB Committee and the International Union Against TB and Lung Disease. Private businesses sponsored posters, brochures, and paint for murals on public walls. The post office produced a special stamp for World TB Day and now plans to do this annually. The collaborative campaign, which lasted for two weeks, focused on raising public awareness of Mexico’s NTP and mobilizing greater support from NGOs and regional governments.

SOUTH AFRICA

The National TB Task Force in South Africa formed the planning committee for World TB Day 2002 with provincial TB/HIV coordinators, staff from the TB/HIV national team, and stakeholders from the mining industry, correctional services and various non-governmental organizations working on TB and HIV/AIDS control. Their goal was to improve public awareness and increase social mobilization by holding educational campaigns in a different province in each quarter of 2002.

Phumlanzi Ximiya, an advocacy officer with the National TB Control Programme, emphasized that because TB and HIV/AIDS often occur together, staff involved in TB and HIV/AIDS control programmes must increasingly collaborate in their advocacy efforts. As a result, the committee planned both World TB Day and World AIDS Day together and is cooperating to promote greater partnerships with government departments and other stakeholders who can provide resources and a broader reach to diverse communities.

SYRIAN ARAB REPUBLIC

In Syrian Arab Republic, civil society organizations, government ministries, schools and the private sector were all actively involved in raising public awareness on TB. Events took place throughout the month of March.

The Syndicate of Physicians, the General Union of Women and the General Union of Youth each produced bulletins for their members, and the General Sport Union organized a series of chess matches on World TB Day. The Organization of Pioneers produced a play for children about TB and organized talks for young students. They also sponsored exhibitions of children’s drawings on the subject of TB in the cultural centres of three Syrian cities. The Union of Students and numerous companies in the private sector printed desk and wall calendars with facts about TB on each page.

Several pharmaceutical companies printed special World TB Day posters, brochures, t-shirts and pocket calendars, and an advertising company sponsored roadside ads about TB. Regional health departments throughout Syria published articles in local papers, printed bulletins, distributed brochures, gave away specially made World TB Day t-shirts, key-rings and pens, and held talks in schools and health clinics, often in cooperation with local educators, physicians and community organizations.

UNITED NATIONS RELIEF & WORKS AGENCY FOR PALESTINE REFUGEES IN THE NEAR EAST

The UN Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) was established in 1950 to provide emergency assistance to Palestinians displaced by the 1948 Arab–Israeli conflict. Today, UNRWA provides education, health, relief and social services to approximately 4 million Palestinian refugees living in Jordan, Lebanon, Syrian Arab Rep., Gaza Strip and the West Bank. UNRWA adopted DOTS strategy in all regions in early 1999 and observes World TB Day every year with an advocacy campaign.

The UNRWA objectives for World TB Day 2002 were to mobilize staff and refugee communities in support of DOTS and the importance of early detection and treatment, and to raise awareness of the relationship between poverty and TB – particularly the links between poor nutrition, overcrowding, inadequately ventilated homes and the development of TB. Planning committees with representation from health, education, relief and social services, NGOs and the wider community met to coordinate the preparation and wide distribution of TB information, particularly targeting schools, vocational centres, women’s programme centres, health care workers and NGO staff.

Activities were carried out in coordination with NTP managers of host countries using UNRWA staff, with NTP staff looking after media coverage. UNRWA estimates that it reached approximately 50 per cent of targeted adult refugees, crediting the collaborative efforts of multisectoral planning committees for World TB Day 2002 successes and citing the conditions in the West Bank and Gaza Strip as the primary obstacles to a community-wide campaign. For the remainder of the year, UNRWA plans to continue meetings of the coordinating committees, further education for health services staff and work with NTP managers and NGOs to follow up on education provided to refugee communities earlier in the year.
Social mobilization was really the ultimate goal for all World TB Day 2002 campaigns – to inform the public, enlist the mass media to disseminate information, garner government support, educate and energize the health care community, foster the contribution of the private sector and motivate everyone to contribute to the health of their communities through their knowledge, expertise, resources or participation. Social mobilization means getting all sectors of society involved in TB control.

Raising public awareness of TB and the negative impact it has on families, communities and the economy is the key to increasing detection rates and ensuring that TB patients complete their full treatment. In India, Nepal and South Africa, former TB patients participated in World TB Day events in order to share their experiences and dispel harmful myths about the disease.

Awareness-raising activities ranged from events on World TB Day to year-long campaigns. In Turkey, the first week of January was named “TB Training and Campaign Week” with talks for students, a documentary on national television, and special TB posters, brochures, educational videos and theatre produced for the general public.

Schools in countries from Gabon to the Cook Islands coordinated special educational events for students on World TB Day. Pakistan put a strong focus on TB education in schools by distributing information sheets to students, providing related content on school radio programmes and in school newspapers, and conducting TB seminars. Pakistani preparatory schools gave students a quiz on TB and offered prizes to those with the best scores.

A Youth Against TB campaign in Kyrgyzstan included a TB poster contest and a play, and the Red Crescent Society produced brochures on TB which were distributed with particular attention to servicemen and those working in prisons. In Somalia, organizers held multiple events, including poetry contests and football matches, and spread awareness through songs and plays.

Eye-catching products with TB messages are always popular. In Nicaragua, NTP staff sent information packages with Stop TB posters and pens to all health units in the country. In Russia, the Ministry of Health and NGOs produced World TB Day caps, t-shirts, notebooks, pens and pocket calendars.
AZERBAIJAN

Last year, the Ministry of Health in Azerbaijan officially adopted the DOTS treatment strategy in their NTP. The country plans to reduce TB rates by 10 per cent by 2003 and saw World TB Day 2002 as an opportunity to concentrate efforts on educating the public. Eight TB specialists from the regions and district TB coordinators worked together with funding from the Ministry of Health, UNICEF and WHO to hold public health talks, produce brochures and talk to radio and television reporters who specialize in public health. They produced educational video footage for television and arranged for TB specialists to be interviewed on national television during the week. Organizers estimate that they reached a third of the country’s population with their 2002 campaign.

CAMEROON

A year-long advocacy campaign was planned for 2002 in Cameroon, starting in March with World TB Day. The country’s traditional leaders – chiefs, emirs and kings – supported the campaign and were involved in various events to raise the awareness of communities throughout the country. Secondary schools, polytechnics and universities provided special lectures on TB and leprosy to students. Towns and villages staged puppet shows, special theatre productions and musical programmes by traditional Cameroonian singers to provide TB education through entertainment. Events were publicized using posters, and further information on TB was provided through the distribution of pamphlets and wall calendars.

CHINA

In China, with its high burden of TB, raising public awareness of the disease is critical. World TB Day was marked throughout the country in 2002 with a wide variety of activities and publicity coordinated by the Ministry of Health (MOH). Booklets, posters, badges and flyers were distributed to the general public, with particular efforts made to reach the rural poor, family members of those infected with TB, people with HIV/AIDS, and people in prisons. The MOH worked with TB institutions and associations, general hospitals and other members of the health care sector to provide lectures, demonstrations and other events in the streets to attract as many people as possible. The government estimates that it reached approximately 500 million people with some form of TB education.

COOK ISLANDS

The National TB Committee in the Cook Islands worked with the media, public health staff, school principals, child welfare workers and NGOs to plan and implement a full week of awareness-building around World TB Day 2002, with particular efforts made to reach outer island communities. Tactics for reaching people included TV and radio announcements, advertisements in newspapers, and talks with community groups and students. They also distributed flyers on TB to households. Challenges to the campaign included having limited resources for transport to reach some of the outer islands. As well, planners noted that in poorer communities with pockets of overcrowding, people are sensitive to the use of the word “poverty”. For this reason, their theme was simply “Stop TB”. The Ministry of Health estimates that the campaign reached 9 500 people, or 59 per cent of the population.
EL SALVADOR

In communities throughout El Salvador, local representatives, municipal leaders, volunteers and health personnel worked together to plan Fight TB Week. The objectives were to raise public awareness of TB symptoms, diagnosis and treatment, and to encourage the participation of as many different social groups as possible in the fight against TB. Planners maintained a community focus with their campaigns to more effectively mobilize groups at the local level. Tactics included media interviews, newspaper articles, educational events and DOTS training for health professionals.

HONG KONG, SAR

Planning for World TB Day 2002 in Hong Kong SAR was a collaborative effort between the Department of Health, the Hong Kong TB, Chest and Heart Diseases Association, and the Hospital Authority. Their goals were to mobilize the general public to participate in TB control and to promote healthy living. As TB partners in Hong Kong SAR conduct awareness-raising activities all year through health talks to community groups, advertising in the mass media and information on their TB website, they viewed World TB Day as the culmination of their year-round efforts.

The government officially marked World TB Day 2002 with a ceremony attended by high-ranking officials from the Department of Health, but the biggest public event was the two-day Anti-TB Health Exhibition, which attracted 1500 people with its theme “Let us join hands and participate in TB control activities”. The exhibition provided visitors with song and dance, a free diagnostic clinic and consultation with medical staff, educational displays, TB computer games for children and lots of free take-aways, including CD-ROMs, stickers and brochures illustrated with cartoon characters. During the week, English and Chinese radio stations conducted interviews with TB specialists, and newspapers in both languages reported on the exhibition and on TB in general.

INDIA

Each state in India organized its own World TB Day events, which ranged from street theatre and folk plays to public lectures and slogan-writing contests. Throughout the country, cinema was popular as a medium for reaching the general public. At many public educational events, local politicians talked about TB control, and former TB patients spoke about the importance of completing treatment. TB partners in the state of Tamil Nadu held a drive for DOTS volunteers, and in one spectacularly successful district, 40 retired school teachers signed up to be DOTS providers.

ISRAEL

World TB Day 2002 was marked in Israel with awareness-building for the general public, and educational and networking opportunities for health professionals and social workers, all on the theme of “TB and Community”. NTP goals were posted on the Ministry of Health website and received hundreds of visits within a few days of being launched. Media coverage was a challenge, as Dr Daniel Chemtob from the Ministry of Health observed, because political events captured so much media attention that it was difficult to compete.
MALAYSIA

Each state in Malaysia has its own TB advocacy planning committee consisting of the state health director, the TB control team and local physicians. In 2002, these teams worked with NGOs to plan region-specific forums, exhibitions, meetings and other activities in which the public could participate to learn more about TB. They produced pamphlets and posters for distribution throughout the year, sent out press releases to the media and wrote articles for publication in local newspapers. At the national level, World TB Day was marked by the Minister of Health who gave a speech, held a press conference and opened a new TB clinic.

MALDIVES

Organizers from the Department of Health in the Maldives believe they reached most of the population with their outreach efforts for World TB Day. Stop TB posters and banners were put up throughout the island, and leaflets were distributed widely. Specialists gave talks on TB in schools, and all hospitals conducted awareness-building activities in their communities. Other events included a parade and the screening of a documentary film on TB.

MYANMAR

The focus for World TB Day 2002 in Myanmar was on reaching the general public with information on TB and the DOTS treatment strategy. In cooperation with the Ministry of Education, an essay competition was held for high school students, a painting competition for middle school students and a cartoon competition for primary school students, all based on the World TB Day 2002 slogan, “Stop TB, fight poverty”. Educational talks were given in communities with DOTS clinics, and the Department of Health produced a video, pamphlets, billboard ads, key chains, t-shirts and stickers for distribution throughout the country.

NEPAL

World TB Day 2002 events in Nepal went on for six days using the theme “Stop TB, Fight Poverty” to promote DOTS and to highlight the commitment of the NTP to bringing DOTS clinics to everyone in need of TB treatment, including the rural poor and prisoners. Currently, 69 per cent of TB patients in Nepal have access to DOTS, and the government has pledged to see that number reach 100 per cent.

Advocacy efforts to mobilize volunteers, schools, artists and sports organizations included special activities in schools for children, rallies, speeches and theatre in the streets, banner displays in villages, health education programmes, quiz contests with prizes,
The focus of the NTP in Paraguay is DOTS expansion, with an aggressive plan to expand from 10 per cent coverage in 2002 to 100 per cent in 2005. World TB Day 2002 provided an opportunity to kick off a year of outreach to the general public on TB and DOTS treatment. With the participation of public and private institutions, the Ministry of Health and NGOs to mobilize the general population, NTP staff plan to pay particular attention to high-risk groups, such as indigenous peoples and prisoners.

NIGERIA
The TEEPAC organization leads the fight against TB in Nigeria, collaborating with the private sector, NGOs and other partners to raise community awareness of TB and the DOTS treatment strategy. As well as distributing stickers and posting World TB Day posters in streets, petrol stations, parks, hospitals, schools and other public places throughout Nigeria, TEEPAC coordinated educational events in several hospitals. At the El-Shaddai Hospital and Maternity in Awada, health care workers sang to guests after keynote speeches by TB specialists. At Jeremi Hospital in Ihiala, workers presented a short play to demonstrate TB transmission and treatment. Speakers at both events talked about TB infection among HIV/AIDS patients and emphasized DOTS.

NAGAON
The biggest event was the annual World TB Day rally and stadium celebration in the capital, attracting thousands of participants, including schoolchildren, college students, police, teachers, health workers, youth groups, women’s organizations, the military and physicians. The Minister of Health, Mr. Sarat Singh Bhandari, opened the rally with the release of balloons and doves, and the procession of flag-waving participants led by an elephant walked through the streets of Kathmandu joined by carnival bands and groups in traditional dress. At the stadium, an afternoon of education and entertainment followed: speeches by high-profile guests, TB songs by some of Nepal’s top performers, testimonials by former TB patients and awards for organizations and individuals in recognition of outstanding contributions in TB control. The event closed with dance performances and sports displays.

The Minister of Health launched a new NTP website www.ntp.mos.com.np and opened a Tuberculosis Museum charting the history of TB in Nepal. A Ministry of Health delegation and the United Kingdom’s Department for International Development visited Kathmandu Jail to open the country’s second DOTS clinic within a prison setting and to speak with prisoners about TB and DOTS. The NTP plans to open more DOTS clinics in Nepal’s prisons in the next year.

NTP advocacy planners and their partners viewed the campaign as the beginning of a year of using the slogan “Stop TB, fight poverty” to further raise public awareness and to expand DOTS to locations such as factories, slums, remote rural areas and prisons. They also noted that maintaining a high profile for TB control serves to reinforce political commitment and the momentum of health care workers involved in the day-to-day work of diagnosis and treatment.
PHILIPPINES

Every August is marked as Lung Month in the Philippines in honour of former-president Manuel L. Quezon who died of TB. This month provides an important addition to World TB Day for intensive educational outreach to communities and to health professionals, though advocacy efforts occur year-round. With funding from the government, Medicos del Mundo and the World Vision Foundation, NTP and Ministry of Health planners produced posters on DOTS, flyers with basic facts on TB and advertising for public transit vehicles. They also held public lectures and obtained guest spots on radio and television to talk about TB. A health caravan travelled through four provinces providing information and showing a film on TB to the communities it visited. For health workers, the committee organized training sessions on DOTS. TB diagnosis, sputum microscopy and the goals of the NTP.

REPUBLIC OF KOREA

In Seoul, after a special commemorative ceremony for World TB Day, all participants rallied in the streets for a massive demonstration of their combined support and to distribute leaflets. One of the city’s subway stations exhibited large painted panels on the theme of “Stop TB”, and the Korean National TB Association (KNTA) distributed 300,000 copies of their magazine, as well as posters and leaflets with statistical data on TB in the country. TB partners there have planned a year-long TV, radio and newspaper advertising campaign for the clinical services of the KNTA and their 21 mobile diagnostic units, focusing on the message “TB hasn’t left us yet”.

SUDAN

Sudan marks World TB Day every year and in 2002 planned a week-long campaign to mobilize all sectors of the community to recognize their responsibility to help fight TB. Planners targeted the general public, government, the private sector, NGOs and institutions. Awareness-raising activities took place in schools, universities, markets and prisons, with several parades held for students, and educational exhibitions and plays on DOTS held for the general public. TB specialists spoke on the radio and television, and the Khartoum state government, including the Minister of Health and the Governor, spoke at numerous events and went to health clinics and hospitals to administer TB drugs.

VENEZUELA

In Venezuela, NTP staff worked with churches, local government, health inspectors, musical groups, former TB patients and volunteer educators to plan activities around World TB Day 2002 to raise the awareness of communities on TB and the importance of public participation in TB control. Planners captured their main messages in short slogans that were used in posters, brochures, leaflets for university students and specially printed book covers.
Planning TB education for the medical community often forms an important part of country and regional education and awareness campaigns around World TB Day. Many countries are in the process of DOTS implementation or expansion and must provide training to physicians, nurses, laboratory staff, pharmacists, medical students and other health care workers. Numerous states in India held courses for medical officers on TB diagnosis and DOTS treatment. In Singapore, GlaxoSmithKline funded an educational conference specifically aimed at DOTS personnel, Singapore TB Elimination Programme staff, and nurses from health clinics and prisons.

Another way to reach the medical community is through its journals. Articles were published in two medical journals in Azerbaijan, and a special editorial on TB and three articles were published in the primary Israeli medical journal, which is distributed free of charge to all physicians in the country. Indonesia’s Mycobacterial Laboratory of Persahabatan Hospital published new editions of TB reference texts in the Indonesian language and produced a bibliography of all TB literature published since 1990.

Medical associations and NGOs frequently hold TB conferences and meetings to coincide with World TB Day in order to focus attention on the disease. The International Union Against TB and Lung Disease held a conference entitled TB and Lung Health Care in Africa during the month of March. Conferences were also held in Azerbaijan, Cambodia, Egypt, Hong Kong SAR, Indonesia, Malaysia, Pakistan, the Philippines, Republic of Korea, Sudan and Thailand.

Another aspect of maintaining the ability and willingness of those in the medical community to provide quality care is simply recognizing their efforts. Taking steps to sustain the necessary motivation for front-line health and community care workers is as important as mobilizing the public, yet it is often neglected.
CHINA

In China, the Ministry of Health provided training courses for health care workers, lectures on TB for medical students and a national meeting on the new TB Control Programme for government staff, directors of TB institutions and physicians from around the country. The Ministry also distributed the WHO Western Pacific Region 2002 Report on TB Control to institutions, clinics and offices in all provinces.

GERMANY

With a new Communicable Diseases Reform Act in Germany, World TB Day 2002 was an ideal time to strengthen training and resources available to medical professionals and other health care staff. The Centre for Infectious Disease Epidemiology, the Robert Koch Institute and the German Central Committee against Tuberculosis formed a committee to publish a TB manual for physicians and health care workers and to organize lectures on TB treatment, prevention, surveillance, epidemiology and multidrug resistance. TB was also the leading theme in the country's Epidemiological Bulletin during the week.

ISRAEL

On and around World TB Day in Israel, several regional meetings were held specifically for medical and social professionals working at the community level to encourage dialogue on their experiences looking after TB patients and their families, and to develop further strategies for the care of TB patients.

TURKEY

As DOTS was being newly implemented in Turkey in 2002, the Ministry of Health and the Turkish Anti-TB Association (TATBA) wanted to share the goals of the NTP and the importance of DOTS strategy with health professionals. The annual meeting of the TB Control Department and TATBA was held during the week of World TB Day 2002 and attended by provincial health directors, chest disease specialists from the universities and health professionals from around the country. One-day DOTS training sessions were offered to chest physicians in Ankara by the International Union Against TB and Lung Disease, and two-day training was given to the staff of regional dispensaries as part of the pilot phase of DOTS implementation in Turkey.

RECOGNITION

An important part of World TB Day events in Cameroon was the giving of gifts to health care staff who work with TB and leprosy patients. TB partners in Cameroon believe it is important to reward the efforts of staff and maintain their energy in the fight against TB by recognizing their year-round dedication.

Mongolia’s National Centre for Communicable Diseases, the Mongolian Anti-TB Association, and the Ministry of Health held a commemorative ceremony on World TB Day 2002 at which they presented awards to organizations and individuals in recognition of their outstanding contributions to TB control in Mongolia over the previous year.

In the World TB Day 2002 ceremony in Seoul, Republic of Korea, attended by the Minister of Health and Welfare, representatives from the National Institute of Health and the entire staff of the Korean National TB Association (KNTA), awards were given to organizations and individuals working to stop TB, followed by the performance of a specially commissioned song.

The keynote speech at Cambodia’s National TB Conference focused on DOTS and the “Power of Health Workers”. In India, DOTS personnel were given certificates and tokens of appreciation.

The Metropolitan Chicago TB Coalition (MCTBC) in the USA sponsored a lunch with a lecture on children and TB, and regional programme reports. Afterwards, staff members from Chicago-area agencies presented awards and a skit to their co-workers. Every year, MCTBC recognizes the efforts of individual employees whose work is critical to the elimination of TB in their own jurisdictions.
USING THE MEDIA

The mass media have immense power to reach large numbers of people and to bring TB education right into the homes, cars and businesses of people around the world through newspapers, television, radio and, increasingly, the Internet. In Mexico, organizers estimate that 16,070 TB messages were transmitted to the public through mass media. Many campaign planners sent out briefing packages, press releases and event invitations to encourage the media to provide good coverage of TB issues and special events.

In Mongolia, organizers used mass media as a means of reaching people throughout the country, holding a press conference to generate coverage in papers and on radio and television news. They also held radio and television phone-in sessions where specialists from the Ministry of Health and the National Centre for Communicable Diseases were available to answer questions. These had large response rates, with questions phoned in from every region of the country.

TB education in Singapore was disseminated largely through articles in national newspapers in 2002. In Belgium, where the number of TB cases has increased over the last two years, the Belgian Lung and Tuberculosis Association marked World TB Day 2002 by putting out a press release on the link between TB and poverty and an educational advertisement in a national newspaper. Daily papers in the Maldives carried a special TB supplement on World TB Day. In Germany, almost all newspapers and some magazines printed articles on TB, and numerous television and radio programmes reported on World TB Day.

Editorial media coverage can exert an influence on policy-makers and opinion leaders. In Pakistan, three national newspapers covered the serious impact of TB on public health, child survival, economic productivity and family welfare, and called for the rapid expansion of DOTS throughout the country.

Often, the press can be enticed to report on an issue by a well-attended public event, and these were plentiful on World TB Day 2002 across the globe. In Saudi Arabia, the Health Education Division of the Security Forces Hospital organized a parade, and the King Faisal Specialist Hospital and Research Centre organized a sports competition, both of which were covered by the newspapers. An event at the national level which attracted media coverage inside and outside the People’s Republic of China was the signing ceremony for the new China TB Control Project, which is being funded by the Government of China, the World Bank and the Department for International Development in the United Kingdom.
CZECH REPUBLIC

The Vice-Minister of Health, the Deputy Chief Medical Officer, the Dean of the Faculty of Medicine at Charles University and the Chair of the Medical Association attended a special press conference where the Chief of National TB Surveillance and the NTP manager gave presentations. The conference was attended by approximately 30 journalists and resulted in significant coverage on television and radio and in national newspapers. The World TB Day 2002 theme, “Stop TB, fight poverty”, was particularly appropriate for the Czech advocacy campaign, which focused on high-risk groups such as the homeless, refugees and drug addicts. Plans for the remainder of the year include launching an NGO-sponsored incentive programme for homeless TB patients to complete their treatment regimens.

KYRGYZSTAN

The Ministry of Health and the National TB Research Institute planned a one-month campaign around World TB Day 2002 to educate the general public and to get as many TB patients as possible coming to clinics for treatment. Organizers made heavy use of mass media with a series of 18 programmes running on national radio, six programmes produced for national television and four articles printed in the newspaper.

OMAN

World TB Day 2002 was observed throughout the Sultanate of Oman with some very media-friendly events, including a walkathon and a marathon in Muscat, skits, exhibitions and children’s poster competitions. The NTP manager, Dr. Ali Ahmed Ba Omer, gave interviews on radio and television, and coverage of the various World TB Day events appeared in both Arabic and English media.

POLAND

A central press conference held by the National Institute for TB and Lung Disease (NITLD) in Warsaw and the distribution of briefing packages to the media resulted in good coverage in national magazines and newspapers and on television and radio. There were similar press conferences held in the regions for local media. Dr Maria Korzenienska-Kosela of the NITLD noted that the momentum of marking World TB Day in the media and with special events served to inspire health care and social workers in their day-to-day work with TB patients. The Institute plans another media blitz later in the year.

SOUTH AFRICA

World TB Day 2002 campaign planners in South Africa planned to use all available mass media – the Internet, newspapers, radio and television – to reach people with information on TB symptoms, diagnosis and treatment, and to advertise World TB Day events. Due to their efforts, media coverage was good during the campaign, and at least two newspapers grabbed readers’ attention with pictures of well-known South Africans who have had TB, including Archbishop Desmond Tutu and Nelson Mandela. Archbishop Tutu, who had TB when he was a teenager, was designated the public face of the 2002 awareness campaign, and he returned to South Africa from the United States especially for World TB Day in order to visit a clinic in Capetown and talk to volunteers, staff and patients.

THAILAND

The Thai NTP and a planning committee with working groups in twelve regions of the country developed plans for World TB Day and a campaign in August for Thai Anti-TB Week to raise public awareness, promote case detection, encourage DOTS expansion and build partnerships for TB control. Mass media were used extensively to get information out to people, including newspaper articles, radio and television programmes with a focus on TB and its treatment, and short educational radio ads.
TOP TEN IDEAS FROM WORLD TB DAY 2002

Parades or rallies followed by entertainment — These appeal to the general public, attract the media and make it easy to disseminate TB information while entertaining large crowds. The Côte d’Ivoire brought in some of the country’s top comedians, Republic of Korea commissioned a special World TB Day song, and Nepal included athletic displays and dance performances.

TB poster competitions for children — Contests for the best TB poster on the World TB Day theme were popular tools to reach schoolchildren in many countries, including India, Kyrgyzstan, Mongolia, Myanmar and the Syrian Arab Republic.

Education for government officials — These highly influential people can make or break a campaign if they do not understand the importance of fighting TB. Egypt held teleconferences with government ministry representatives to raise their awareness of TB, DOTS and the NTP. Mongolia planned educational sessions for rural governments in regions where TB awareness was low.

Commemorative World TB Day postage stamps — Both Mexico and the Syrian Arab Republic created special postage stamps to mark World TB Day 2002 and plan to do this annually.

Football matches and other sporting events — In Malawi, the Minister of Health captained a ministry football team that played against students from a school in a low-income neighbourhood to raise awareness of TB in the community.

Recognition for TB partners and health workers — Republic of Korea TB partners gave awards to organizations and individuals in recognition of outstanding efforts in TB control — at a ceremony attended by the Minister of Health and the entire staff of the Korean National TB Association! In Cameroon, health workers received gifts to thank them for their dedication to TB patients.

New DOTS clinics — India, Malaysia, Mongolia and Nepal held opening ceremonies for new DOTS clinics and TB care centres on World TB Day, inviting government officials, former TB patients, the media and the general public to attend.

Talking to decision-makers — In Nigeria, the Youth World Health Organization met with community leaders, school principals and government agricultural officers to discuss combating TB by promoting food production and employment.

Lobbying for government funding — The National Coalition for the Elimination of TB in the USA launched a focused campaign for increased government funding for TB control. They held a press conference with a number of high-profile TB specialists, sent out press releases, published a white paper on the funding gap for TB eradication in the USA and sent briefing packages to all members of Congress.

Food and clothing for lower income TB patients — In Mongolia, a food and clothing drive was held for TB patients in need, and one district in Nepal started a new tradition of bringing fruit to TB patients.
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LIST OF ABBREVIATIONS

AIDS — acquired immunodeficiency syndrome

CDC — Centers for Disease Control and Prevention (Atlanta, USA)

DFID — Department for International Development, UK

DOTS — The brand name of the internationally recommended TB control strategy

HIV — human immunodeficiency virus

IUATLD — International Union Against Tuberculosis and Lung Disease

MOH — Ministry of Health

NGO — nongovernmental organization

NTP — National Tuberculosis Programme

Stop TB Partnership — a global network launched in 1998, consisting of more than 200 international agencies, governments, NGOs, donors and scientists who are working together to eradicate TB as a public health problem.

TB — tuberculosis

UNRWA — United Nations Relief and Works Agency for Palestine Refugees in the Near East

WHO — World Health Organization