

**NO.F.13 (3-62)-DFWPM/PHS/DEWORM/2016**  
**GOVERNMENT OF TRIPURA**

Dated, Agartala, the ----- June, 2017

**MEMO**

Soil Transmitted Helminths (STH), also called parasitic worms is a significant public health concern for India. Around 68% children of 1-14 years of age (22 crore) are estimated to be at risk of parasitic intestinal worm infestation. Evidence shows detrimental impact of STH infestation on physical growth, anemia, under nutrition and cognitive development as well as poor attendance at school.

To combat this issue, in 2015 the Government of India launched the National Deworming Day to deworm all children aged 1-19 years. It aims to improve the health and well-being of pre-school age and school age children by reducing STH infection through mass deworming. The National Deworming Day is conducted in all States/UTs on February 10 every year, with a mop-up day on February 15. States/UTs based on prevalence conduct a bi-annual round on 10 August. During NDD February 2017 round, Tripura State reported it dewormed 1048719 children, which includes 64948 children in private schools.

Tripura, with 60% STH prevalence has to conduct biannual round of deworming as per the Government of India's notification and WHO recommended treatment strategy. The next round of National Deworming Day will be observed in the State on forthcoming 10 August, 2017 followed by mop-up round on 17<sup>th</sup> August, 2017.

State Govt. of Tripura will carry forward its convergence strategy for forthcoming August round of NDD as implied during Feb round of NDD.

We seek your support for the effective implementation of the incoming NDD round through active participation in all steps of programme planning, implementation and monitoring with combined efforts taken by Health, School Education and SW-SE Departments. Concerted efforts between stakeholder departments are required at State, District and Block level to ensure successful implementation and enhanced coverage of NDD.

The following steps are required to be undertaken in order to strengthen the coordination amongst the three stakeholder Departments for achieving high quality and high coverage programme.

- 1 All the key stakeholder Departments should coordinate with the Department of Health for the effective implementation of school and anganwadi based NDD scheduled on 10 August and mop-up day on 17 August, 2017.
- 2 School Education & Social Welfare and Social Education Departments to provide the Department of Health with the desired numbers of target population under their respective age groups so that adequate supplies of Albendazole tablet is made available for all children 1-19 years age group including those in private schools, for conducting NDD.
- 3 State and District level Coordination Committees (SCC/DCC) to be chaired by the Principal Secretary, Health and District Magistrate & Collectors respectively to ensure all programme components are planned and implemented as per NDD guidelines

- 4 From monitoring visits, it was found that only 47% of anganwadis had the list of unregistered and out-of-school children. Only 69% out-of-school children and 63% unregistered children were dewormed in the NDD, February 2017 round. To ensure that no child is left out from receiving the benefits of deworming, it is essential that ASHAs prepare a list of unregistered children (1- 5 years) and out of school children (6- 19 years) of the community and share with anganwadi workers prior to NDD. Department of Health should sensitization ASHAs on their specific roles in community mobilization utilizing existing platforms like VHND, VHNSC and ASHA Bharosa divas. State and District ASHA cell should actively monitor ASHAs engagement in community mobilization for improving awareness about the programme in the community. Letter to District's ASHA cell should be sent detailing the expected roles of ASHA during NDD implementation. Additionally, updated contact database of ASHAs should be used so that training reinforcement messages are being successfully delivered to them.
- 5 State commitment towards improving hygienic practices with more extensive campaign should be continued in collaboration with Swachh Bharat Abhiyan to bring a sustainable impact in schools and community.
- 6 Department of School Education in consultation with Health Department should take lead role for greater involvement of private schools in the upcoming NDD round. NDD February 2017 monitoring findings shows that only 76% of private schools had attended training and received posters, banners, handouts and reporting formats etc. Remaining 24% of private schools did not received IEC & training materials due to absence in the training whereas 100% private schools had received sufficient quantity of Albendazole tablets. **Further, only 47% of private school followed recording protocol and only 27% of private schools received NDD related SMS.** To enhance private school engagement from planning to implementation, the Department has to facilitate for issuance of private school engagement letter signed by the District Magistrate & Collector and also provide update contact details of private schools to Evidence Action, the Technical Assistance Partner of Govt. of Tripura for NDD.
- 7 All the Departments will include NDD as one of the agenda items in their periodic meetings from June to August 2017 to reinforce key messages for the NDD programme, to ensure effective planning, conduct review and filling up gaps if any, to facilitate high coverage
- 8 Training of functionaries from School Education and Social Welfare & Social Education Departments to be supported by Health Department at State and District level, while Block level training of teachers and anganwadi workers to be led by respective Departments. District and Block level officials of stakeholder Department should plan training following guideline and timeline and the same has to be shared with Health Department for necessary coordination. **To prevent inconvenience all the stakeholder Departments are requested to timely notify changes in training schedule.**
- 9 All stakeholder Departments to disseminate information about safety of Albendazole tablet which can be administered on empty stomach also, Adverse Event Management Protocol and the IEC material provided by the Department of Health to the schools, anganwadis and community as appropriate for increasing programme awareness and facilitate greater coverage. **All Districts should ensure District level launch on August 9, 2017 for increasing acceptability of the programme among community members. All medical facilities and helpline numbers has to be alerted on NDD and mop-up day so that Adverse Events are managed as per NDD operational guideline.**

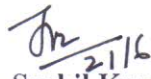
- 10 All the Departments at District are required to include NDD campaign along with reinforcement messages on IFA supplementation program and promotion of hygienic practices as an agenda in regular monthly meetings in July 2017 including private school participation as one of the agenda in their periodic meetings to reinforce key messages.
- 11 Ensure integrated distribution of NDD kits during Block level orientation training.
- 12 All anganwadi workers should administer Albendazole to the children aged 1-5 years covering both anganwadi registered/unregistered Children (1-5 years) and out-of-school children (6-19 years) and ensure hand washing & nail trimming if required before administration of Albendazole tablet.
- 13 All school teachers should administer Albendazole tablet to the children aged 6- 19 years enrolled in State Government schools, Central Government schools, local body run schools, Private schools, Aided schools, Madrasas, etc. and ensure hand washing and nail trimming, if required before administration of Albendazole tablet.
- 14 Officials of all the stakeholder Departments are mandated to undertake field monitoring visits for supportive supervision on NDD and Mop up Day. On National De-Worming day and mop-up day, school principals, teachers and anganwadi workers should be vigilant for any Adverse Events (AE), if any in their respective sites by ensuring that the Adverse Event Management Protocol (AEMP) and Emergency numbers are readily available and must alleviate any reported cases based on the AEMP.
- 15 Reporting has to be done as per reporting cascade and the specified timelines share by the State.

Roles and responsibilities of stakeholder departments are elaborated and enclosed in **Annexure**.

We are confident that with your support for the NDD campaign, we will collectively be able to reach out to all the children in the age group 1-19 years and help improve their quality of life with improved health and educational outcomes.



(Dr. Rakesh Sarwal)  
Principal Secretary  
Dept. of Health & FW



(Mr. Sushil Kumar)  
Principal Secretary  
Dept. of School Education



(Mr. Chaitanya Murty)  
Special Secretary  
Dept. of Edn. (SW & SE)

To

The Pr. Secretary, Tribal Welfare/Pr. Secretary, DWS/Pr. Secretary, Panchayat Raj/All DM & Collectors (North, Unakoti, Dhalai, Khowai, West, Sepahijala, Gomati, South)/CEO, TTAADC/All Headmasters (Govt. & Pvt. Schools)/All Anganwadi Supervisors

**Copy to:-**

1. The District Magistrate & Collector Dhalai/Gomati/Khowai/North/Sepahijala/South/Unakoti & West District for information and necessary action.
2. The Director of Family Welfare & PM for information and necessary action.
3. The Mission Director, NHM, Tripura for information and necessary action.
4. The Director of Secondary Education for information and necessary action.
5. The Director of Elementary Education for information and necessary action.
6. The Director of Social Welfare & Social Education for information and necessary action.
7. The CEO, TTAADC for information and necessary action.
8. The Chief Medical Officers North/Unakoti/Dhalai/Khowai/West/Sepahijala/Gomati/ & South District for information and necessary action.
9. The Principal Officer, Education, TTAADC for information and necessary action.
10. The Principal Officer, Social Welfare & Social Education, TTAADC for information and necessary action.
11. The Principal Officer, Health, TTAADC for information and necessary action.
12. The State Nodal Officer (Deworming Intervention) for information and necessary action.
13. The PRO, Directorate of FW & PM for information & necessary action.
14. The District Education Officer (DEO) cum DNO - North/Unakoti/Dhalai/Khowai/ West/Sepahijala/Gomati & South District for information and necessary action.
15. The District Inspector of Social Education (DISE) cum DNO - North/Unakoti/Dhalai/ Khowai/West/Sepahijala/Gomati & South District for information and necessary action.
16. The District Nodal Officer (Deworming Intervention) - North/Unakoti/Dhalai/ Khowai/West/Sepahijala/Gomati & South District for information and maintain necessary coordination with other stakeholder Departments.
17. Head Masters/Principals of all State Govt/Govt aided/ Central & Private schools Madrasa/ Madrasa SPQM/ across the state for information and necessary action.
18. Anganwadi Supervisors of all AWCs across the State for information and necessary action.
19. State Program Coordinator, Evidence Action, the Technical Assistance Partner of Govt. of Tripura for NDD for information

**Copy also forwarded for information to:-**

1. PS to the Chief Secretary, Govt. of Tripura for kind information to the Chief Secretary
2. Ms. Vandana Gurnani, Jt. Secretary, RMNCH+A, MoHFW, GoI, New Delhi for information.
3. Mr. Ajay Khera, DC-I/C, Child Health, Ministry of Health & Family Welfare, GoI, New Delhi for information.
4. Ms. Sila Deb, DC-CH, Ministry of Health & Family Welfare, GoI, New Delhi for information.
5. Ms. Priya Jha, Country Director, Evidence Action, the Technical Assistance Partner of Govt. of India, New Delhi for information.

**NATIONAL DEWORMING DAY - AUGUST 2017 ROUND****A. Health Department**

- Procure Albendazole tablets as per guideline.
- Customization and printing of IEC, reporting format and training materials as approved by GoI.
- Motivate ASHAs for better engagement in community mobilization for unregistered and out of school children to extend deworming benefits.
- Ensure integrated distribution of NDD kits during Block level orientation training.
- Conduct NDD Coordination Committee at various levels.
- Disseminate Adverse Event Management Protocol and guidelines at all levels starting from State, District, Block to schools and anganwadis.
- Provide NDD financial guidelines and budget at different levels of stakeholder Department.
- Develop IEC strategies to generate awareness amongst community.
- Ensure presence of ASHAs at anganwadis on Deworming Day and mop-up day to support deworming unregistered and out of school children.
- Monitor program progress in the field and ensure timely reporting of coverage data.
- IFA tablets/syrups to be distributed among stakeholder Department categorically to reinforce the ongoing WIFS/NIFI programme to combat anaemia which is 48.3% as per NHFS IV.
- Coordinate stakeholder department to ensure promotion of sanitation & hygiene as a part of behaviour change communication through hand washing practice and nail trimming.
- Ensure inclusion of deworming benefits to brick kilns/tea gardener migrant population (1-19 yrs) by engaging ANMs/MPWs.

**B. School Education Department**

- Coordinate with Department of Health and Family Welfare for effective roll-out of National Deworming Day.
- School Education to provide the Department of Health with the desired numbers of target age group to cover all children 6-19 years' age group including private schools, so as to ensure adequate procurement and supply of Albendazole tablets are made for conducting NDD
- Participate training organize by Health Department.
- Orient headmasters/principals/ teacher in-charges by organizing Block level orientation training in coordination with Department of Health. In turn headmaster/principal or teacher in-charge will be trained teachers at school on Albendazole administration and also brief them on possible Adverse Events and their management.
- Should take lead role for greater involvement of private schools in NDD program implementation. The department has to facilitate for issuance of private school engagement letter signed by DM & Collector.
- Disseminate IEC materials to all schools received from Health Department. and ensure visibility for the same.

- Ensure involvement of school management committees for community mobilization activities.
- Generate awareness amongst students during prayer & circulate key message on importance of deworming tablet administration amongst parents during teachers-parents meeting.
- Disseminate the message on importance of NDD, IFA supplementation programme including sanitation and hygiene practices through hand washing and regular nail trimming amongst students & teachers. The same has to be demonstrated during Block level training.
- Ensure deworming of enrolled children aged 6-19 yrs under direct supervision.
- Undertake field visits for monitoring and supportive supervision.
- Submission of coverage data as per standardized formats and State reporting cascade within specified timelines.

#### **C. Social Welfare & Social Education Department**

- Coordinate with Department of Health and Family Welfare in effective roll-out of National Deworming Day.
- Provide desired numbers of target age group so as to ensure adequate procurement and supply of Albendazole tablets are made for conducting NDD by Department of Health based on the target of registered and unregistered children of pre-school age and out of school children.
- Orient anganwadi workers (AWWs) on Albendazole administration at anganwadi centres and also brief them on possible Adverse Event and their management in coordination with Department of Health.
- Participate training organize by Health Department.
- Orient anganwadi workers and ICDS supervisors by organizing Block level orientation training in coordination with Department of Health.
- Disseminate IEC materials to all anganwadi centres received from Health Dept and ensure visibility for the same. Motivate anganwadi workers to take active initiation for mobilizing community by organizing meeting and home visits.
- Ensure deworming of children aged 1-5 years (both registered and unregistered) and out of school children aged 6-19 yrs under direct supervision.
- Departmental officials should undertake field visits for monitoring and supportive supervision.
- Will submit report coverage data to the Department of Health in standardized formats within specified timelines.
- Disseminate the message on importance of NDD, IFA supplementation programme including sanitation and hygiene practices through hand washing and regular nail trimming amongst children and anganwadi workers.
- Submission of coverage data as per standardized formats and State reporting cascade within specified timelines.

#### **D. Tribal Welfare Department**

- Effort should be made by the Department for maximum coverage among tribal children those enrolled in schools & enrolled/unregistered/out of school children at anganwadi centres under TTAADC.

- Provide necessary directives to TTAADC administration for maximum involvement of private schools situated under TTAADC area.
  - Ensure active participation through community mobilization activities by utilizing existing machineries.
  - Disseminate message on importance of NDD, IFA supplementation programme including sanitation and hygiene practices through hand washing and regular nail trimming.
- E. Drinking Water and Sanitation Department**
- Ensure provision of potable drinking water.
  - Take up IEC activities on sanitation in convergence with NDD.
- F. Information and Cultural Affairs Department**
- Ensure dissemination of key messages on NDD through various media.
- G. Department of Panchayat Raj**
- Ensure participation of PRI bodies at Districts & Blocks level NDD coordination committee meetings, workshops and community mobilization activities.
- H. Role of DM & Collector**
- Issue letter to private school authorities to participate at Block level orientation training & also to conduct NDD programme in their respective schools.
  - Facilitate inter Departmental harmonization through organizing NDD District level coordination meeting.
  - Supervise quality implementation of orientation training at District level
  - Encourage authority of private schools to participate in the NDD implementation.
  - Oversee implementation and monitor the progress of NDD.
  - Resolve programmatic issues at District level and beyond.
- I. SDM & BDO**
- Assist inter Departmental synchronization through conducting Block level coordination meeting.
  - Supervise quality execution of proposed orientation training at Block levels.
  - Encourage use of common community based platforms like VHNDs and VHSNC meetings, Gram Panchayats for community mobilization and mass awareness.
  - Supervise effective implementation of NDD program at Block level.
  - Active involvement in monitoring of intervention during the NDD implementation.
  - Manage programmatic issues at Block level and beyond.
- J. Evidence Action, the Technical Assistance Partner of Govt of Tripura for NDD**
- Facilitate State in micro level planning of NDD implementation.
  - Develop State operational plan for NDD August 2017 in consultation with State Govt.
  - Facilitate State in preparing NDD PIP
  - Assist in developing community mobilization strategies for increasing awareness and coverage of target beneficiaries.
  - Sending bulk SMS at different level functionaries on key activities.
  - Arrange Tele caller to track NDD program preparedness at various level and share the same with Govt. on regular basis.
  - Engage Independent Monitoring to supervise training & program implementation.
  - Assist State in analysis of program monitoring and coverage data.
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