SUBJECT: JOINT DIRECTIVES - NATIONAL DEWORMING DAY, FEBRUARY 2019

1. 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, undernutrition and cognitive development as well as poor attendance at school.

2. 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 Soil Transmitted Helminths infection through mass deworming.

3. Tripura, with more than 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 in the State will be observed on February 8, 2019 followed by mop-up round on February 14, 2019.

4. During NDD August 2018 round (held on August 10, 2018), 10, 59,433 children were dewormed in Tripura, which includes 1, 09,226 children in private schools. State Government of Tripura will carry forward its convergence strategy for forthcoming February round of NDD as implied during August 2018 round of NDD.

5. Since, the reduction in worm prevalence depends on high coverage amongst all children of 1-19 years of age, reiterating to the earlier commitment, Health & Family Welfare Department, Government of Tripura has decided to include children up to 19 years of age enrolled in other categories of educational institutions like Industrial Training Institutes (ITI), Polytechnic Institutes, Vocational/Degree Colleges, Medical, Paramedical and other institutes as well for getting deworming benefits.

6. Only your amiable support can help in effective implementation of the NDD round through active participation in all steps of program planning, implementation and monitoring with joint efforts taken by Health and Family Welfare, Education, Social Welfare and Social Education, Industries and Commerce Departments and other stakeholder department.

7. The following steps are required to be undertaken in order to strengthen the coordination amongst Stakeholder Departments at State, District and Block level for achieving high quality and high coverage program:

I. All the key Stakeholder Departments must coordinate with the Department of Health for the effective implementation of School and Anganwadi based NDD scheduled on February 8 followed by mop up day on February 14, 2019.

II. Department of Health will make available adequate supply of Albendazole to School Education, Higher Education, Social Welfare and Social Education and Industries and Commerce departments for all children 1-19 years age group including those in private schools, migrants brick kilns workers and slum dwellers for conducting NDD.

III. District Level Coordination Committees (DCCM) to be chaired by District Magistrate & Collectors to ensure all program components are planned and implemented as per NDD guidelines. This has to be completed between on or before December 20, 2018

IV. 17% and 47% of anganwadi workers had list of unregistered preschool-age children and out-of-school children respectively during NDD August 2018 round while the availability of list was 22% for unregistered preschool-age children and 43% for out-of-school children during NDD January 2018 round. It shows a scope of improvement in involvement of ASHA as per the NDD guidelines and a possible reason for this could be gap in orientation of ASHA on their expected role in NDD during block-training. To extend deworming benefits to unregistered preschool-age children and out of school children (6-19 years) of community, regular orientation of ASHAs on their specific role in community
mobilization through existing platforms like Village Health, Sanitation and Nutrition Committee, ASHA Varosa Divas and their monthly meetings at Cluster and Blocks should be capitalized. A letter to District ASHA cells should be sent detailing the expected role of ASHAs during NDD implementation. Additionally, Districts need to update contact database of ASHAs so that training reinforcement SMS are successfully delivered to them. Further, ASHA cell representative should attend training and coordination committee meetings at Districts and closely monitor ASHA’s community mobilization efforts.

V. Reinforce private school engagement through conducting exclusive private school meetings at district-levels and strengthening the participation of private school representative/s at the District-level Coordination Committee Meetings. Related communication from the State to all District Magistrates must be facilitated at least two months prior, notifying them about importance of engaging private schools in the NDD program including issuing directives for increased participation of private schools at block/below block-level trainings. These engagement efforts have shown good results in their overall participation for the program and should be continued in future NDD rounds as well.

VI. State commitment towards improving hygiene and sanitation practices with more extensive campaign should be continued in collaboration with Swachh Bharat Abhiyan to bring a sustainable impact in schools and community.

VII. Efforts should be made by department of Health & Family Welfare for engagement of Panchayati Raj Institutions, Nehru Yuva Kendra Sangathan, National cadet Corps, Bharat Scouts and Guide in the community mobilization efforts in the upcoming NDD.

VIII. All stakeholder departments will include NDD as one of the agenda items in their periodic meetings from December 2018 to February 2019 to reinforce key messages for the NDD program, to ensure effective planning, conduct review and fill gaps if any to facilitate high coverage.

IX. Reorientation 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 orientation of teachers and anganwadi workers to be led by respective departments. District and Block level officials of Stakeholder departments should plan reorientation workshop as per timelines scheduled on January 1st week, 2019 (District level training) and January 1st to 4th week, 2019 (Block/sectoral level training). Further District officials of three stakeholder Department to share training scheduled with State Nodal Officer, NDD, Health & Family Welfare Department for necessary coordination.

X. All Stakeholder Departments to disseminate information about safety of Albendazole which can be administered in empty stomach (WHO Guideline) also. Adverse event management protocol and the IEC material provided by the Department of Health to the schools, anganwadis and community should be used appropriately for increasing program awareness and facilitate greater coverage.

XI. Ensure integrated distribution of NDD kits during block/sectoral level orientation workshop to be held from January 2nd week to 4th week, 2019.

XII. All Anganwadi workers must administer Albendazole to the children aged 1-5 years covering both registered/unregistered Children (1-5 years) and out-of-school children (6-19 years) under their supervision and ensure hand washing and nail trimming (as per requirement) before administration of Albendazole tablet.

XIII. All school teachers must administer Albendazole 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. under direct supervision and ensure hand washing and nail trimming if required before administration of Albendazole tablet.

XIV. Multi-purpose workers (MPWs) will administer Albendazole tablet under their direct supervision to out of school children up to 19 years of age, enrolled in other educational institutes (ITI, Polytechnics, Vocational, Medical, Para-medical, degree colleges, IICAI, NIT, Animal husbandry, Agriculture, Fishery etc) on NDD and mop-up day. Coverage reports of these institutions will also be collected by MPWs.

XV. Department of Health and Family Welfare to promote awareness of program will organise launch events at State and Districts on February 7, 2019.

XVI. Officials of all the Stakeholder Departments are mandated to undertake field monitoring visits for supportive supervision on NDD and mop-up day and submit the duly filled monitoring form to nddtripura@gmail.com within 5 days from the date of completion of visits.
VII. Adverse Event Management team has to be formed at State, District and Block level on National Deworming day and Mop Up Day. School Principals/Headmasters/Teachers and Anganwadi Workers must be vigilant for any Adverse Events (AE), if any in their respective sites by ensuring that the Adverse Event Protocol and Emergency Numbers are readily available and must alleviate any reported cases based on the Adverse Event Management Protocol (AEMP). Further, ensure the involvement of Block level mobile teams of RBSK with proper orientation to manage such adverse events if occur any during implementation of NDD (February 8, 2019) and mop-up day (February 14, 2019). In addition, RBSK teams will also create awareness on National Deworming Day during their regular visits by sharing the benefits of deworming, promotion of hygiene and sanitation practices and information on implementation day to ensure high attendance of children in schools and anganwadi centres.

XVIII. Reporting has to be done as per reporting cascade and the specified timelines shared by the State and all Block officials should refer block wise targets while reporting.

XIX. All the left over Albendazole after mop-up day should be submitted along with reporting forms as per the State’s reporting cascade and timelines.

XX. With a view to improve physical fitness as well as academic performance, Government of India has introduced National Physical Fitness Program among school children in the age group of 10-18 years. Under this program, physical fitness level of children is measured in terms of endurance, speed, strength, flexibility and body mass index (BMI). Implementation of National Deworming Day (NDD) and National Physical Fitness Program (NPFP) - Fit India are supplementary to each other in addressing sustainable impact on physical and mental growth of children.

We are confident that with your commitment 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.

(S shri Samajit Dhowmik)
Secretary
Dept. of Health & FW

(Shri Sushil Kumar)
Additional Chief Secretary
Dept. of School Education

(Shri Chaitanya Murty)
Special Secretary
Dept. of Edu. (SW & SE)

To
All DMs, CMOs, DEOs, DISE, PO- Education, SW&SE, Health, TTAADC, DNOs, BNO, CDPOs, Inspector of School, All Director, ITI, Polytechnics, Vocational, Medical, Para-medical, degree colleges, ICFAI, NIT, Animal husbandry, Agriculture, Fishery institute, All Headmasters/principal(Govt. & Pvt. Schools)/All Anganwadi workers, Supervisors/ASHAs and concerned officials.

Copy to:
1. PS to the Pr. Secretary, Tribal Welfare for kind information to the Pr. Secretary
2. PS to the Pr. Secretary, DWS for kind information to the Pr. Secretary
3. PS to the Pr. Secretary, Panchayat Raj for kind information to the Pr. Secretary
4. PS to the Pr. Secretary, Industries & Commerce for kind information to the Pr. Secretary
5. The Mission Director, NHM for information and necessary action.
6. The CEO, TTAADC, for information and necessary action.
7. The Director, Family Welfare and Preventive Medicine for information and necessary action.
8. The Director of Secondary Education for information and necessary action.
9. The Director of Elementary Education for information and necessary action.
10. The Director of Higher Education for information and necessary action.
1. The Director of Social Welfare & Social Education for information and necessary action.
2. The Director of Industries & Commerce for information and necessary action.
3. The Director of Panchayats for information and necessary action.
4. The Director of Tribal Welfare for information and necessary action.
5. The Director of ICA for information and necessary action.
6. The Director of Drinking Water & Sanitation for information and necessary action.
7. The Chief Engineer of Swachh Bharat Abhiyan for information and necessary action.
8. The Director, CBSE, Regional Office for information and necessary action.
10. State Director, NYKS.
11. The Director, Drinking Water & Sanitation for information and necessary action.
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17. The State Program Officer, CBSE, Regional Office for information and necessary action.
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31. The State Program Officer, CBSE, Regional Office for information and necessary action.

Copy also forwarded for information to:

1. PS to the Chief Secretary, Govt. Of Tripura for kind information to the Chief Secretary.

(Signature)
Shri. Samajit Bhattacharya
Secretary
Dept. of Health & FW

(Signature)
Shri. Sushil Kumar
Additional Chief Secretary
Dept. of School Education

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