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TB Elimination — Making It a People's Movement, Not Just a Government Target

INDIAN EXPRESS

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INTERVIEW ANGLE



"India missed the 2025 TB elimination target and now aims for 2030. What systemic failures explain the gap between policy ambition and ground-level outcomes in TB control?"

WHY IN NEWS

The Union Health Minister launched the 100-day “TB Mukht Bharat Abhiyaan” campaign on World TB Day (March 24, 2026), deploying AI-based screening, nutrition support, and community-driven approaches after India missed the 2025 TB elimination target set by the National Strategic Plan.

The Editorial Argument

The Indian Express editorial argues that India’s TB programme has historically been top-down and facility-centric. While AI-based screening and Nikshay Poshan Yojana are welcome, elimination requires transforming TB control into a people’s movement — engaging communities, addressing stigma, ensuring nutrition, and decentralising treatment to the ASHA-ANM level.

India's TB Burden

METRIC	DATA
India's TB incidence (2024)	~27 lakh new cases/year
Global share	~27% (India has the highest burden globally)
TB deaths (India, 2024)	~3.2 lakh/year
MDR-TB cases	~1.3 lakh/year (multidrug-resistant)
Original elimination target	2025 (5 years ahead of SDG 3.3 target of 2030)
Revised target	2030 (aligned with SDG)
Treatment success rate	~85% for drug-sensitive TB; ~55% for MDR-TB

National TB Elimination Programme (NTEP)

Formerly the Revised National Tuberculosis Control Programme (RNTCP), renamed NTEP in 2020:

FEATURE	DETAIL
Umbrella body	Central TB Division, Ministry of Health and Family Welfare
Strategy	National Strategic Plan for TB Elimination 2017-2025 (now extended to 2030)
Key initiative	Nikshay Poshan Yojana: Rs 500/month nutritional support to every TB patient
Notification	Mandatory notification of all TB cases (public and private) since 2012
Diagnostics	CBNAAT/TrueNAT molecular testing; AI-based chest X-ray screening
Treatment	DOTS (Directly Observed Treatment, Short course); bedaquiline for MDR-TB
Digital platform	Nikshay portal — real-time tracking of all diagnosed TB patients

AI in TB Screening

The 100-day campaign introduces AI-powered portable chest X-ray units:

- AI algorithms can detect TB from X-rays with ~95% sensitivity
- Portable units deployed in high-burden districts, tribal areas, and urban slums
- Reduces dependence on radiologists (India has ~1 radiologist per 100,000 population)
- Integrated with Nikshay portal for immediate case notification and treatment initiation

Why India Missed the 2025 Target

- 1 **Underdiagnosis:** Estimated 5-6 lakh “missing” TB cases annually — patients who are never diagnosed or treated
- 2 **Private sector gap:** ~50% of TB patients first seek care from private practitioners, many of whom do not follow standard protocols or notify cases
- 3 **Nutrition crisis:** TB and malnutrition form a deadly cycle — India has 33% stunting (NFHS-5) and TB patients need 2,500-3,000 calories/day
- 4 **MDR-TB:** Growing drug resistance; MDR-TB treatment takes 9-18 months (vs 6 months for drug-sensitive) with severe side effects
- 5 **Stigma:** TB carries social stigma, delaying diagnosis and causing treatment dropout
- 6 **COVID-19 disruption:** 2020-2021 lockdowns diverted resources, closed DOTS centres, and caused massive underreporting

The Community Model — What Works

The editorial advocates for the **community-based approach** that worked in Korba district, Chhattisgarh and Mehsana, Gujarat:

- ASHAs trained as TB treatment supporters (not just referral agents)
- Community sputum collection points (reducing travel to PHCs)
- Peer support groups for MDR-TB patients (addressing stigma and treatment adherence)
- Nutritional support through ICDS and midday meal convergence

UPSC RELEVANCE

TB incidence in India, NTEP, Nikshay portal, Nikshay Poshan Yojana, DOTS, CBNAAT, SDG 3.3, World TB Day (March 24)

Health policy — TB elimination strategy, public-private convergence, community health worker role

Science & Technology — AI in public health screening, molecular diagnostics

★ FACTS CORNER — KNOWLEDGE PEDIA

TB IN INDIA:

Incidence: ~27 lakh new cases/year (~27% of global burden)

Deaths: ~3.2 lakh/year; MDR-TB: ~1.3 lakh cases/year

“Missing” cases: ~5-6 lakh/year (undiagnosed/unreported)

Treatment success: ~85% (drug-sensitive); ~55% (MDR-TB)

Elimination target: 2025 (missed) → revised to 2030 (SDG 3.3)

NATIONAL TB ELIMINATION PROGRAMME (NTEP):

Formerly: RNTCP; renamed NTEP in 2020

Nikshay Poshan Yojana: Rs 500/month nutrition support per patient

Nikshay portal: Digital tracking of all diagnosed TB patients

DOTS: Directly Observed Treatment, Short course

Diagnostics: CBNAAT, TrueNAT, AI-based chest X-ray

KEY DRUGS AND DIAGNOSTICS:

First-line: Isoniazid, Rifampicin, Pyrazinamide, Ethambutol (6-month regimen)

MDR-TB: Bedaquiline, Delamanid, Linezolid (9-18 months)

CBNAAT: Cartridge-Based Nucleic Acid Amplification Test (GeneXpert)

TrueNAT: Made-in-India molecular test (Molbio Diagnostics, Goa)

OTHER RELEVANT FACTS:

World TB Day: March 24 (Robert Koch discovered TB bacterium, 1882)

TB bacterium: Mycobacterium tuberculosis

BCG vaccine: Given at birth; prevents severe childhood TB but limited adult efficacy

SDG 3.3: End TB, malaria, NTDs by 2030

Global Fund: Major donor for India's TB programme (~\$500 million over 3 years)

Sources: [Indian Express](#), [MoHFW](#), [WHO Global TB Report](#)



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