Tamil Nadu State AIDS Control Society
Tamil Nadu AIDS Initiative

Experience and Learning

Process Document of the Transition
of TAI TIs to TANSACS

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TAMILNADU STATE AIDS CONTROL SOCIETY

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Greetings from Tamilnadu State AIDS Control Society.

Tamilnadu is a forerunner in the implementation of various HIV programs, by holistically integrating the Prevention and Care components and thereby combating the AIDS epidemic. This has started yielding results by reducing the HIV prevalence, from 1.13 % in 2002 to 0.25 % in 2011.

The Targeted Intervention programs were initially funded by various funding organizations and some of them were supported by TANSACS. In the year 2009, the first phase of transition to TANSACS was initiated from the Bill and Melinda Gates Foundation supported Tamilnadu AIDS Initiative supported TIs from the district of Madurai. From thereon, three phases of transition had occurred over a span of three years. Currently TANSACS handles all the Targeted Intervention programs in the State and now supports 93 TI projects.

Bill and Melinda Gates Foundation had been instrumental in preparing a document "Experience and Learning" which gives a clear insight into the transition process. The transition process has been an experience and opportunity for great learning between the TANSACS and TAI to effectively manage the transitioned TIs.

I hope that this document would help the other funding agencies to understand the transition process and will be a guide for smooth transition.

Best wishes

KUMAR JAYANT
Project Director

CHENNAI-600 008
28th March 2013

Foreword

Foreword

Tamil Nadu AIDS Initiative (TAI), a project of Voluntary Health Services (VHS), with the financial support of Bill & Melinda Gates Foundation (BMGF)successfully implemented Targeted Interventions (TIs) in Tamil Nadu since April 2004. As per the agreement between National AIDS Control Organisation (NACO) and BMGF the TIs were transitioned to Government in every state where BMGF projects were operational; and in line with this, in Tamil Nadu the TIs of TAI were transitioned to Tamil Nadu State AIDS Control Society (TANSACS). The process of transition took place in phases between July 2009 and June 2012.

It was agreed between TAI and TANSACS, as part of the Post-Transition Support, that the process of transition would be documented in order to help understand the learning that such process could extend to different players in HIV prevention program. A joint process was initiated and a Consultant was engaged to travel to different parts of Tamil Nadu, meeting various sections of the TI and document the 'Process of Transition'.
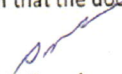
The document deals more about the process of transition and the experience gained during the course of handing over TIs to Government. It discusses the different dimensions of transition and gives a detail on how meticulously it was executed by TAI and TANSACS. The Pre-Process initiatives portray the preparations and the cordial coordination between the State and the SLP. The community preparedness towards transition is very impressive.

The document highlights the initial concerns and reservations of the community members and staff team regarding transition and how proficiently TAI and TANSACS addressed them.

I would like to acknowledge the support and cooperation extended by the Project Director, TANSACS for the transition and towards the preparation of 'Transition Process Document'. I would also like to appreciate TI department of TANSACS and TSU for their cooperation.

I would like to extend my appreciation to Mr. Simpson Cornelius, Manager, Government Liaison & Communication and TAI team for bringing out this document.

I wish that the document helps stakeholders learn through our experience.

Prof. S. Suresh
Honorary Secretary

AIDS	:	Acquired Immuno Deficiency Syndrome
ART	:	Anti-Retroviral Therapy
BMGF	:	Bill and Melinda Gates Foundation
CBO	:	Community Based Organisation
CMIS	:	Computerized Management Information System
DAPCU	:	District AIDS Prevention and Control Unit
DIC	:	Drop-in-Centre
DPM	:	District Program Manager
DS	:	District Supervisor
EQAS	:	External Quality Assurance System
FHI	:	Family Health International
FSW	:	Female Sex Worker
HIV	:	Human Immuno Deficiency Virus
ICTC	:	Integrated Counselling and Testing Centre
IPC	:	Inter Personal Communication
KP	:	Key Population
MARP	:	Most-At-Risk Population
MHC	:	Master Health Check-up
MSM	:	Men Having Sex with Men
MSW	:	Male Sex Worker
NACO	:	National AIDS Control Organisation
NACP	:	National AIDS Control Programme
NGO	:	Non-Governmental Organisation
ORW	:	Outreach Worker
PE	:	Peer Educator
PLHA	:	People Living with HIV/AIDS
PPP	:	Public Private Partnership
RMC	:	Regular Medical Check-up
STI	:	Sexually Transmitted Infection
TAI	:	Tamil Nadu AIDS Initiative
TANSACS	:	Tamil Nadu State AIDS Control Society
TI	:	Targeted Intervention
TSU	:	Technical Support Unit
VHS	:	Voluntary Health Services
WHO	:	World Health Organisation
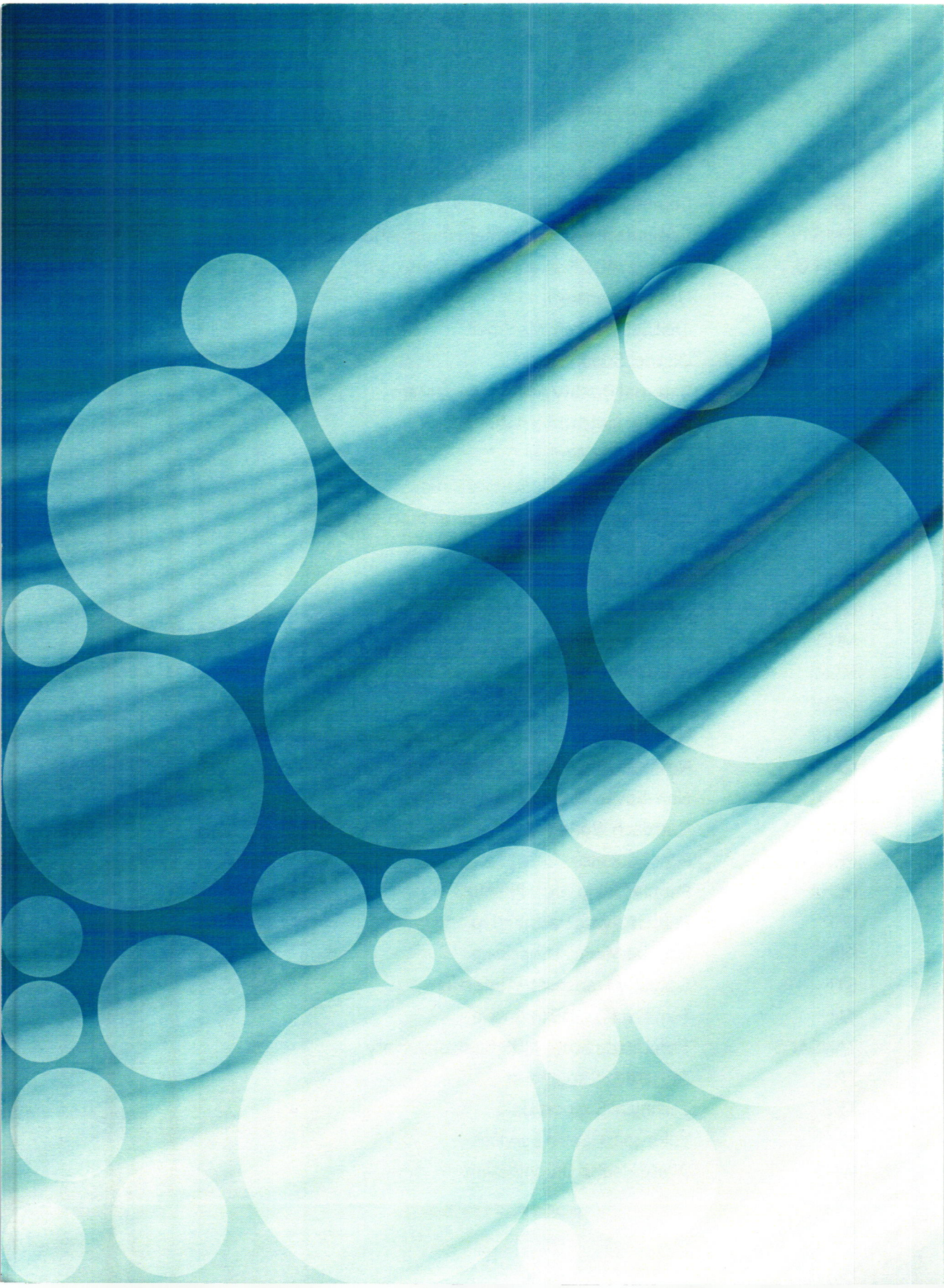
Background

Transition Dimensions

Pre-Process Initiatives

Transition Planning

Background

India is estimated to have 2.3 million people living with HIV, of which an estimated 39% are women and 3.5% children. HIV/AIDS continues to be a high priority development challenge in the country for last couple of decades. Government of India has established National AIDS Control Organisation (NACO) to coordinate HIV/AIDS prevention and control activities. State AIDS Control Societies (SACS) are operational at state level. Innovative strategies have been implemented under National AIDS Control Program (NACP) IV. HIV infection in India was first detected in Tamil Nadu in 1986 and since then, the state, in collaboration with NGOs continues to play a significant role in bringing the infection under control. According to 2007 surveillance data, the HIV prevalence among ANC attendees was 0.25%, IDUs - 16.8%, MSM -6.6% and FSWs 4.68% in the state of Tamil Nadu.

The Tamil Nadu AIDS Initiative (TAI), launched in 2004, is implemented by Voluntary Health Services (VHS) with financial support from "Avahan", a project of Bill and Melinda Gates Foundation. The objectives of TAI were scaling up and increasing coverage of HIV/AIDS prevention among the 'Most at Risk Populations (MARPs)'in Tamil Nadu. TAI implemented community driven STD/HIV/AIDS prevention and control program, among 50,000 Female and Male Sex Workers in 13 districts: Thiruvallur, Vellore, Dharmapuri, Krishnagiri, Salem, Namakkal, Erode, Tiruppur, Coimbatore, Theni, Madurai, Dindigul ® Thanjavur of Tamil Nadu. The focus community included Kothis, Transgender and Double-deckers.

The community mobilization efforts of TAI were based on social protection and welfare of the community. Health care, nutritional supplementation, emotional ® psycho-social support for needy community members were additional factors motivating community mobilization and collectivization. Respect for community and building self-esteem of Community members were the key to success of TAI during the last 9 years; community members were involved in planning and implementation of the program activities. The initiatives of TAI were supplemented by 'effective and community friendly' Interpersonal communication (IPC) materials developed in consultation with the community. In STI program TAI took the expertise of the Senior Government STI Specialists during the inception and later from FHI and WHO.

As per the program plan and arrangement between NACO and BMGF, the TIs of TAI were transitioned to Tamil Nadu State AIDS Control Society (TANSACS) in four phases. The process of transition was initiated in 2009 and it was expected to be completed by April 2012. This enabled TAI and TANSACS to provide required post transition support to the transitioned projects.

Time Frame of Transition:

Phase	Name of the TI		Managed by	District
Phase I **July 2009**	Madurai Women TAI Vizhudugal Trust	[MWTVT]	CBO	Madurai
	Madurai Aravanigal TAI Vizhudugal Trust	[MATVT]	CBO	
	Pache Trust	[PACHE]	NGO	
	Service Organisation for Utilization of Resources Care and Education Trust	[SOURCE]	NGO	
	Russ Foundation	[RUSS]	NGO	
Phase II **April 2011**	Dharmapuri Women TAI Vizhudugal Trust	[DHWTVT]	CBO	Dharmapuri
	Rural Integrated Development Organisation	[RIDO]	NGO	
	Vellore Women TAI Vizhudugal Trust	[VWTVT]	CBO	Vellore
	Madras Social Development Society	[MSDS]	NGO	
Phase III **April 2012**	Association For Rural Community of Development	[ARCOD]	NGO	Krishnagir
	Krishnagiri Women TAI Vizhudugal Trust	[KWTVT]	CBO	
	Arogya Agam	[AROGYAAGAM]	NGO	Theni
	Dindigul Women TAI Vizhudugal Trust	[DWTVT]	CBO	Dindigul
	Coimbatore Women TAI Vizhudugal Trust	[CWTVT]	CBO	Coimbatore
	Coimbatore Aravanigal TAI Vizhudugal Trust	[CATVT]	CBO	Tiruppur
	Erode Women TAI Vizhudugal Trust	[EWTVT]	CBO	Erode
	Thanjavur Women TAI Vizhudugal Trust	[THWTVT]	CBO	Tanjore
	People Development Initiative	[PDI TJ]	NGO	
	Namakkal Women TAI Vizhudugal Trust	[NWTVT]	CBO	Namakkal
	Chennai Aravanigal TAI Vizhudugal Trust	[CHATVT]	CBO	Thiruvallur
Phase IV **July 2012**	Chennai Women TAI Vizhudugal Trust	[CHWTVT]	CBO	Thiruvallur
	Deepam Educational Society For Health	[DESH]	NGO	
	Indian Community Welfare Organisation	[ICWO]	NGO	
	Salem Aravanigal TAI Vizhudugal Trust	[SATVT]	CBO	Salem
	Salem Women TAI Vizhudugal Trust	[SWTVT]	CBO	
	People Development Initiative	[PDI]	NGO	

TAI and TANSACS decided to review the process of transition from the point of view of key population and implementing NGOs / CBOs perspective to consolidate the learning. It was proposed that the documentation would include collecting and consolidating the experiences and learning of the transition process. Documentation of the transition process was planned with an objective of disseminating the rich experience and good practice to the stakeholders. TANSACS and TAI have engaged a consultant to document the process of transition.

Transition Dimensions

TAI is focused to ensure high level of community participation and ownership. The community perspective and preference have been integrated in the program. Innovative activities like community contribution of rice for the distribution among the needy (Akshayapathram) and cloth distribution (Vastradhanam) were included in the program. The Drop-in-Centers (DIC) addressed the emotional needs of the community by introducing 'Sharing time (Sevisaikkumneram)'and Prayer Time (Irai Arul Neram). In this context it could be seen that Transition of TAI project to TANSACS had cognitive, management and strategic dimensions.

Cognitive Dimension

Thinking of KPs gradually and consistently changed from recipient perspective to implementer and owner perspective

Transition Dimensions

Strategic Dimension

Community centered social protection / welfare strategy to reach prevention and safety was transitioned to prevention and service delivery to reach social development

Management Dimension

TAI projects got transitioned and merged with TANSACS as per the NACO guidelines.

1. **Cognitive Dimension of Transition:** Over the period, TAI empowered community members to develop a perspective of ownership of the program rather than being beneficiaries. The shift in the perspective made it easy for the formation of CBOs, who later became implementers with support from TAI. This change in the perspective helped during the process of transition.

2. **Management Dimension of Transition:** In TAI TIs the pattern of fund flow, technical support, capacity building, reporting and review methods were based on Avahan guidelines; but TANSACS followed NACO guidelines. There were differences in periodicity with which grants are released from TANSACS, reporting systems, reporting formats etc. However, during transition, the combined effort of TAI and TANSACS helped TIs in getting trained and aligned with NACO guidelines of program implementation and reporting formats. Concerns regarding such differences were lesser with TIs transitioned during the last phase compared to the ones transitioned in the first phase.

3. **Strategic dimension of Transition:** While implementing TIs, TAI followed a strategy of 'mobilize and empower' FSWs, MSWs and TGs through addressing their social and welfare needs. The alignment with new system was made easy as the approach in TANSACS is not very different from the one in TAI.

These three dimensions of transition have complemented each other to support and strengthen the transition process.

Pre-Process Initiatives

The professionally structured pre requisite helped the transition process. As per the understanding between NACO and Avahan, it was made clear to TIs of TAI, that after a period of time they will be transitioned to TANSACS. However, details regarding the appropriate time and the process to be followed in transition were decided among the stakeholders. The following were major pre-transition initiatives taken by TAI in consultation with TANSACS.

1. **Partner consultations:** Consultations were held by a joint team of TAI and TANSACS to give clarity to the implementing partners on the process of transition and post-transition activities. This helped identify areas of major concern among the stakeholders and make necessary administrative decisions to rectify them at the appropriate time.

2. **Strategizing alignment:** Minor differences in the operational aspects of implementing TIs were identified and discussed. This helped TANSACS in addressing them.

3. **Administrative protocols:** A protocol on transition process related to administrative and financial systems was developed. This was to address major areas like difference in the salary structure and resources available for community support initiatives.

4. **Community preparation by TAI team:** Preparing the community for a smooth transition process was planned and undertaken by TAI team, who held community meetings in this regard. In the early stage of pre-transition when key population and TI staff members were concerned about transition, TAI team convinced them about the benefits of transition through a series of interactive sessions.

Pre-project initiatives helped the planners, implementers and beneficiaries of the project to get prepared for transition.

Transition Planning

The transition process was planned internally by TAI and TANSACS who considered the technical, administrative and financial implications of the transition process and addressed them without any major disturbances. Accordingly, the following support was provided to the partners prior to the process of transition

1. **Data validation and performance appraisal of projects:** Consultants were engaged by TAI to objectively assess the project technically. The documents and data maintained by the projects were verified for reliability and accuracy and the performance was appraised against set objectives.

2. **Technical assistance for alignment with TI projects of TANSACS:** Consultants provided mentoring support to the TAI TIs to help them align with TANSACS TIs. TI staff played a major role in sustaining the TI performance during transition period.

3. **Facilitation in contracting process with TANSACS:** The 'terms of contract' in TAI were different from the contracting norms of TANSACS. The implementing NGOs and CBOs were oriented about the contracting protocol of TANSACS before finalizing the contracts.

4. **Post-Transition support by TAI:** It was mutually agreed between TANSACS and TAI that in the immediate post transition period, the transitioned TIs will be provided support from TAI in the following major activities:

   - Providing training for staff of TIs in the areas mutually decided by TAI and TANSACS
   - IPC materials - need assessment and identification of effective community preferred materials
   - Joint periodic reviews by TAI and TANSACS
   - Supplying condom outlet boxes to all TIs in the state
   - Documenting 'Transition Process'
   - Operational research in Salem and Namakkal districts

A MoU for post-transition support was prepared after deliberations and consensus between TAI and TANSACS.

Joint periodic reviews helped to identify the program gaps and address them. During these reviews, technical assistance was provided in key focus areas like service uptake, ICTC, RMC, ART registration and follow-up.
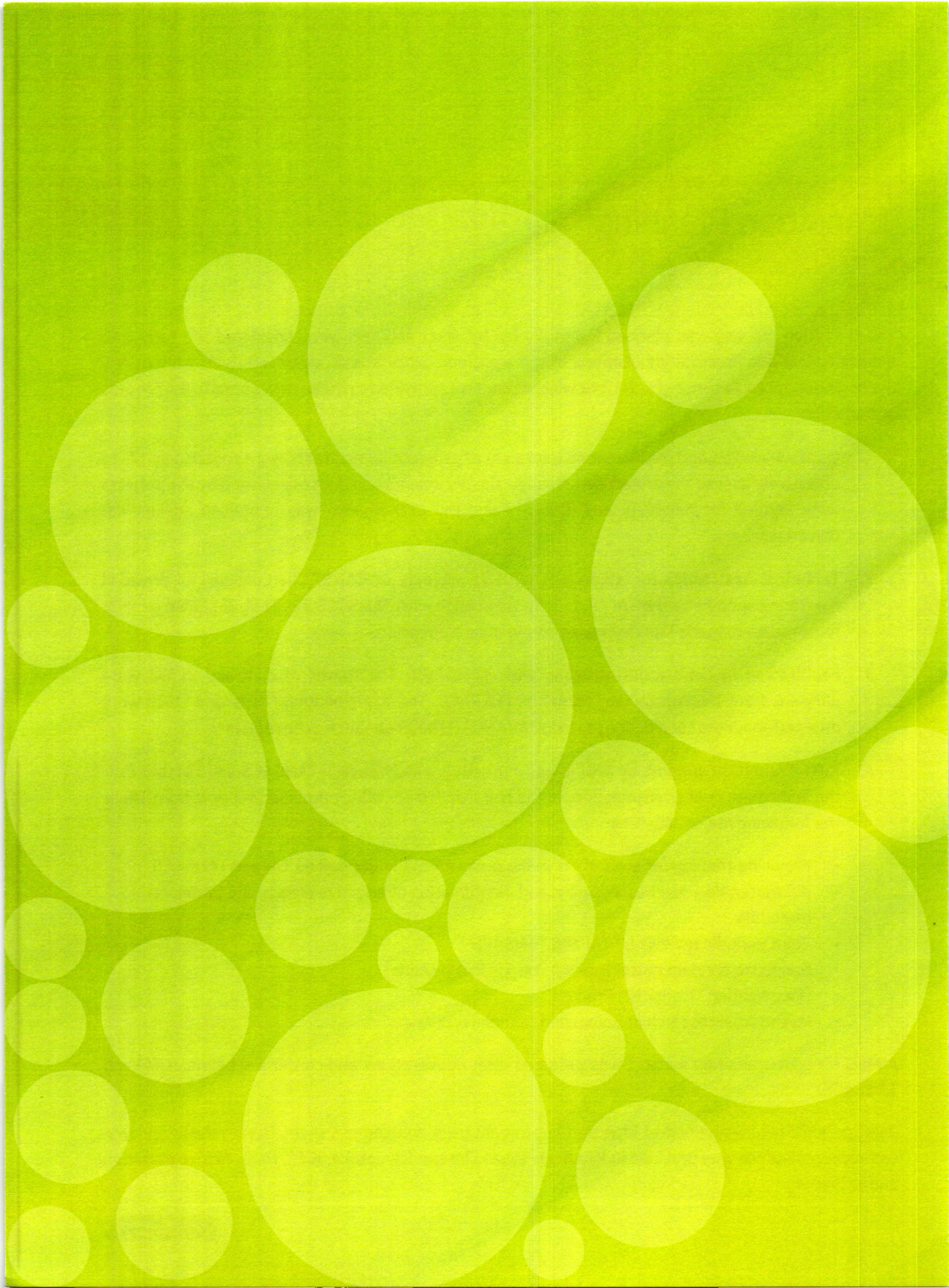
Transition Process

Systems for Supportive Management and Monitoring

Community Participation & Preparedness

Transition Process

Transition process is comprised of different components in administrative and operational areas and following were the major steps in transition process.

Assigning nodal official by TANSACS: One technical officer was assigned by TANSACS to help in categorizing, organising and updating various documents in TIs.

Capacity building to project team: The project team members were given training to help understand operational aspects. The following trainings were provided to the different categories of project staff:

Category of Staff	Training given
Project Managers	Program Management and CMIS
Counselors	Counseling & STI Management
M&E Officers	Format & Reporting Systems and CMIS
ORWs	Induction Training, STI Management, Communication skills and Refresher training

Transition orientation program: The trainings given were complemented by a 1 day introduction program on systems and services in different departments of SACS. This helped NGOs/CBOs get clarity on whom to contact in TANSACS for sorting out emerging issues in program implementation.

Technical assistance: During the initial period of Transition, TIs were provided ongoing technical assistance and mentoring by both TAI and TANSACS to ensure smooth transition process and adequate performance. The following support was provided in this regard:

- Joint supportive monitoring & mentoring visits by TAI and TANSACS to the transitioned TIs

- Consultants were engaged to make an assessment of the transition preparedness including the documentation

- In the 1st phase of transition, it was decided to continue the technical assistance from TAI for few months to ensure continuity and sustain the performance.

Advantage of phased transition: In the first phase of transition there was a delay of three months. However this learning and the subsequent preparatory process resulted in ensuring that the second phase of transition process could be completed as planned on 1st April 2011.

It has been observed that during the process of transition, there were clear differences in the first and second phase of transition as illustrated.

PHASE 1 TRANSITION
- Delay of 3 months
- Concern among KPs / staff about admin & personnel issues following transition
- Post-transition hand holding support from TAI (1 year)

PHASE 2 TRANSITION
- Transition completed as per schedule
- Less concern among KPs / staff about admin & personnel issues following transition
- Post-transition support from TAI was for a period of one year

PHASE 3 & 4 TRANSITION
- Transition completed as per schedule
- No concern among KPs / staff about admin & personnel issues following transition
- Complete alignment of TIs as per NACO guidelines
- Post-transition support from TAI was for a period of one year

It was noticed that each of the subsequent phases have been performing better compared to the previous one. This was evident while documenting the process of transition experience in Salem, Theni and Thanjavur districts, which were among those transitioned in the final phase.

Systems for Supportive Management and Monitoring

Supportive management and monitoring systems are essential to ensure effective change in management. TAI designed and implemented supportive management and monitoring systems considering the unique situational relevance and related challenges. Different aspects of 'Supportive management and monitoring' were incorporated in transition designing:
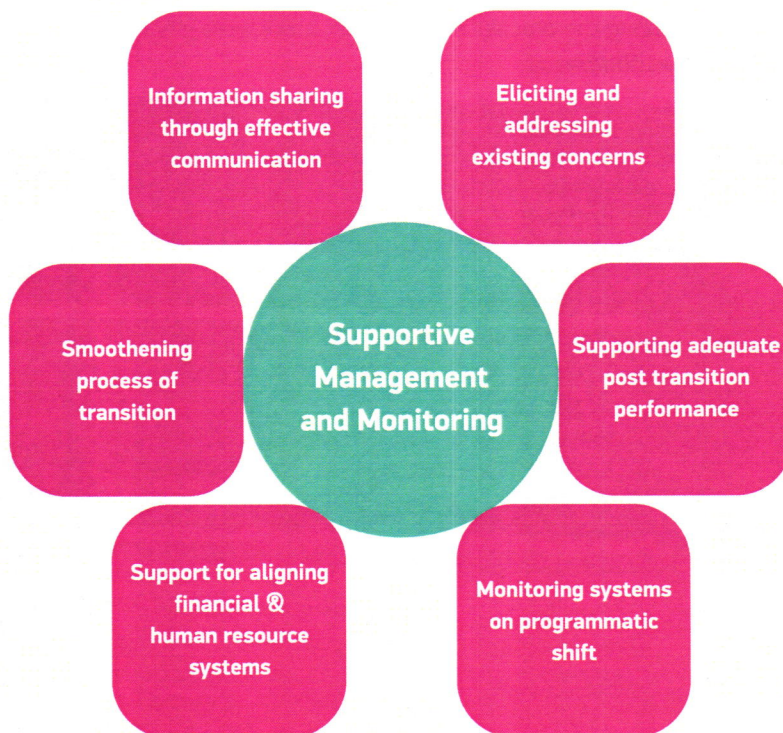
Sharing of information about transition to the staff and the community members helped perceive transition as an important step in project implementation and about the critical role each of them has to play in the process of transition. The importance of being part of a larger national program and how that will contribute towards sustainability were also discussed.

Community Participation and Preparedness

The following evidences indicate that there has been adequate community preparedness for transition:

1. CBO emergence process was progressing in some projects whereas in some it had reached a mature stage. This indicates that key population perceived this as an opportunity to build fellowship among their peers and partnerships with other civil organizations.

2. Community members are successful in responding to crisis at their level and hence confident of sustaining such initiatives. This has long term implications where in community is empowered to address issues of rights violations and vulnerability.

3. Community members who started accessing the project for social benefits have later become active in the TI as peer educators, outreach workers and community animators. This indicates that community members have understood the opportunities in a community centered program and opted to become the owners of the TI rather than being beneficiaries.

4. The community members, who at the time of transition have been CBO office bearers, have taken the responsibility of implementing the project through their own organizational structure. This indicates that the community is prepared for their responsibility in the context of transitioning of project and willing to take up responsibility of implementing the project.

It is found that community preparedness and empowerment of FSW and MSM community have helped in their active participation in ensuring the smooth process of transition. Having community groups with a greater sense of responsibility and risk perception was one of the major factors that helped in making the transition process possible.
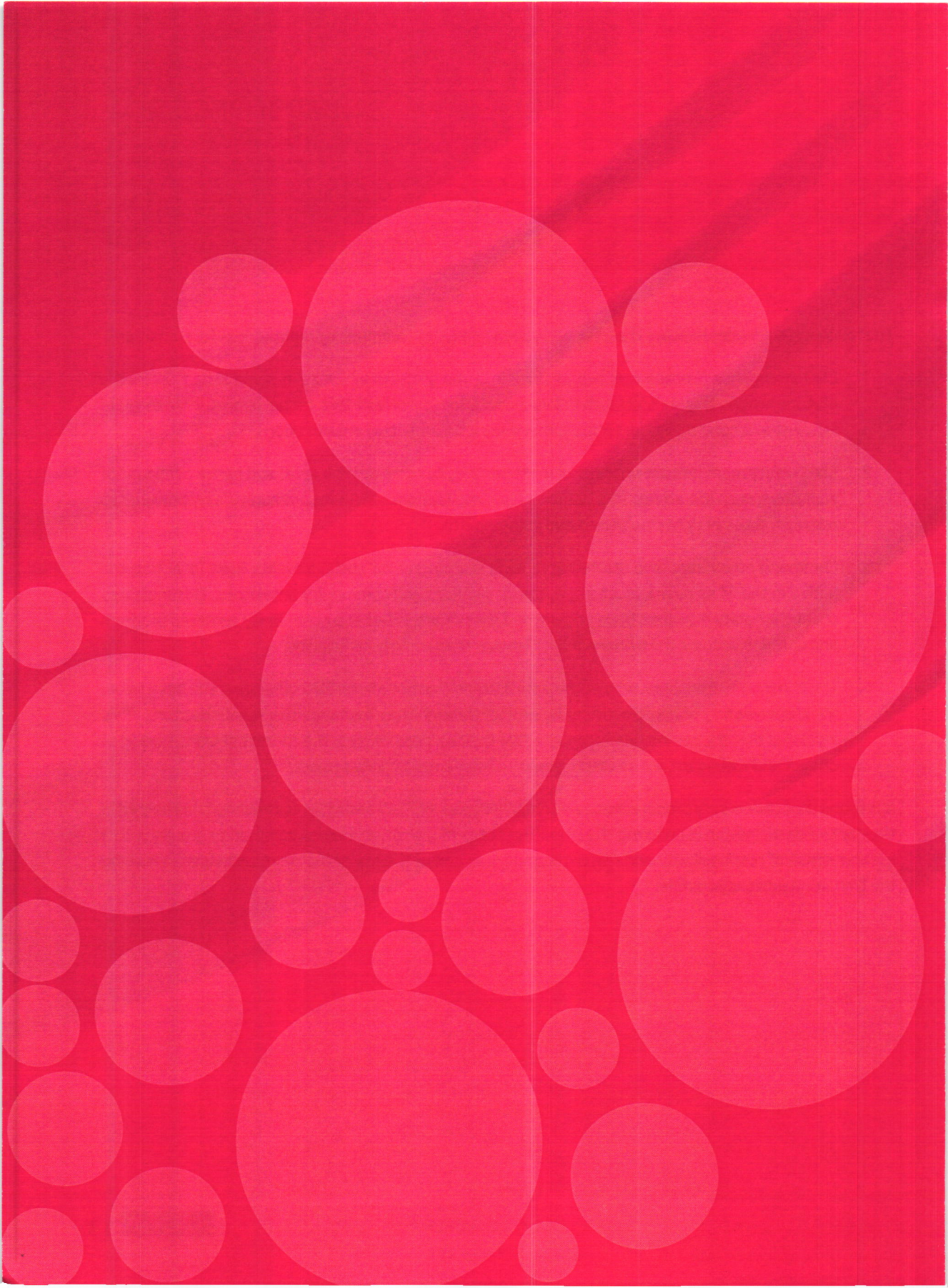
Transition Experience

Transition experience was an opportunity for learning at various levels; and following are the highlights:

1. The transition experience could be structured as a model and used as a technical reference while transitions are planned by different State AIDS Control Societies (SACS) in the country in future.

2. The pre-transition planning initiative by TAI in the second phase of transition is an ideal reference for any transition process took place in SACS.

3. TAI TIs have been running program owned clinics providing treatment for general ailments as well.

4. Treatments for STIs without internal examinations have been in practice in most settings. Doctors of TAI and SESA clinics, Government doctors and some private practitioners helped in changing this trend and provided STI care as per NACP protocol. Master health check-up implemented by TANSACS in collaboration with the Government of Tamil Nadu has significantly contributed in this regard.

5. STI committees were of immense help in making the community accept speculum and proctoscopic examination as part of routine STI care. Care should be taken to ensure speculum and proctoscopic examinations continue beyond transition.

6. Referring KPs to identified Private Health Care Providers who are community friendly has been a model in TAI STI care. Considering sustainability of the program, establishing PPP models would be a need in future in identified locations, where STI care facilities are not available.

7. TAI could facilitate referral hubs in Government district hospitals. This innovative model creates a space for the community and services are provided in a stigma free and community friendly environment.

8. Side Labs of TAI – a model for important STI investigations done at one point of contact. Nurses performing laboratory investigations and the results being vetted by External Quality Assurance System (EQAS).

Various aspects in this transition process throw light on areas of program management among marginalized and vulnerable population. The fact that at the time when any project is conceptualized its exit and convergence to the existing government mechanisms to be planned is a most important development indicator. So also ensuring that the exit cum convergence process happens as it is envisaged within the agreed timelines. In this context the TAI transition process remains a significant milestone in the context of development initiatives in India

Benefits of Transition

The community members and TI staff identified a number of benefits of transition when transition process was complete. This was in contrast to the concern and fear expressed by them during the initial phase of transition. Following are major benefits as perceived by different segments:

1. **Being part of larger system:** Members of community groups and project staff opinioned alike that, during post-transition phase they find themselves part of larger national system in HIV/AIDS prevention and care. Staff team hopes to get better growth prospects as NACP is getting strengthened.

2. **Opportunity for accessing Government schemes:** Community members gained confidence in accessing benefits from Government service and welfare outlets at district and local self - government level.

3. **Support from the larger System:** Key population is practicing impressive health seeking behavior in STI care that has emerged by increasing the referrals to government STI facilities following MHC. This could be a model for sustainability. The DPM/ DS of DAPCU and TANSACS officials are supportive to the process of linkages to the existing system.

4. **Technical clarity on thematic areas:** ORWs and PEs opinioned that trainings and mentoring support provided by TANSACS helped them in getting clarity on technical dimensions of TIs. Identification of new MARPs, site validation, validating line list, risk assessment and outreach planning were examples quoted.

Concerns and Challenges in Transition
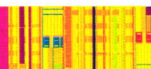
Transition has been a challenging process especially during the first phase. Major challenges that emerged have been addressed jointly by TAI and TANSACS. Following are some of the important concerns expressed and addressed:

- **Losing community focus of the project:** Community members have been experiencing high level of ownership and community centeredness in TAI TIs. At the time of transition the major concern among the community members was that the project will lose its community centeredness and become a target oriented program.

- **Declining enthusiasm in community gathering:** In TAI, community gatherings were considered important by the community members, which helped transmission of messages and inputs to larger audience. The community felt the need for continuing this activity.

- **Utilizing the skills in PEs and MARPs:** TAI TIs focused on skill building of the key population. The Project staff and community members expressed the need to continue utilizing their skills and talents in future.

- **Nutrition support for PLHAs:** Nutritional support for PLHAs from among the MARP groups was another attraction of the TAI project. This program could be continued by linking the PLHAs to avail benefits provided at the district level by Government / Philanthropists and other organizations working for PLHAs.

- **Reduction in number of PEs:** In post transition phase there has been a considerable reduction in the number of peer educators. This has been due to the difference in PE: KP ratio followed in TAI program. While in TAI the ratio was 1:30 in TANSACS it is 1:60. Hence there will be a 50% reduction of PEs.

- **Concerns expressed by the project staff in remuneration related matters:** The TAI project has been functioning since 2004. By 2009 when transition was decided, many of the TI staff members had put in years of service and they have been getting remuneration with annual increments giving weightage for the years of service. This concern was expressed by the senior staff of TIs.
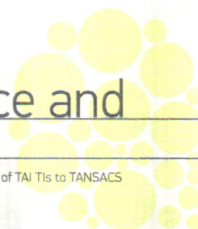
- **Finance and audit systems:** TAI followed quarterly audits along with regular monitoring for adherence with finance systems of the project. This helped different TIs following the set norms in finance management resulting in un-interrupted funds flow. TANSACS is following a half yearly audit and there are issues of delay in fund flow due to technical and administrative reasons. The project staff members are concerned about the delay in funds-flow as it would affect the smooth functioning of TIs in the post-transition phase.

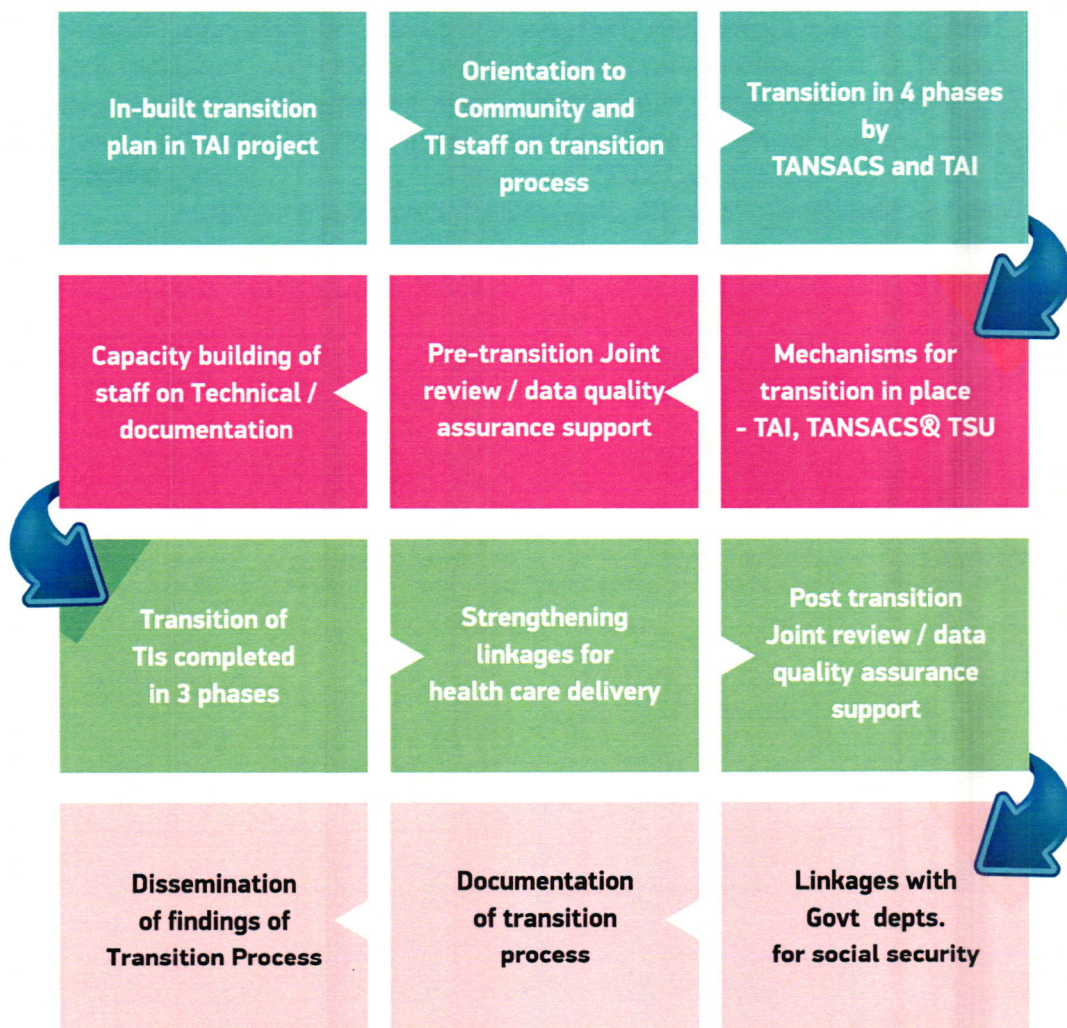As in any change process there were challenges and concerns in the transition process as well. But the officials of TAI and TANSACS have taken appropriate steps to ensure that they were adequately addressed. Project staff and community members expressed that "we knew that there will be a change and hence we could cope with it". The competence and clarity with which TAI and TANSACS handled the issue also helped to overcome challenges.

Support Areas for Transitioned TIs

It is important to ensure that transitioned TIs perform well in post-transition period adding to the state's efforts on prevention. The project staff and community members have clarity on the type of support that would result in better performance in the post transition phase.

1. **Regular staff meetings:** Regular staff meetings to review the program indicators, provide technical assistance and feedback for improvement should happen on a periodic basis.

2. **Crisis Management System and Grievance Redressal:** TAI had a very effective ''Crisis Management System' with community members involvement, TI staff and legal experts. Crisis management mechanism for accessing support from judiciary and police departments to redress grievances of the community has to be considered in the subsequent phase. Community members who are experienced and skilled in crisis management could be made part of a support committee to address the issues of crises as and when they arise.

3. **Confidentiality:** The community had a high level of trust with the TAI program, which ensured that their being in the trade would be kept confidential. It is this faith which made them come forward and actively participate in the program. The community would expect the same level of confidentiality in the post-transition phase.

4. **Drop-in-Centers (DICs):** The Drop-in-Centers in TAI TIs were developed as the most preferred social space for the community members to spend productive time. The activities of the DICs and the sharing that took place in the centers helped in building confidence of the community members and resulted in solidarity.

The Process of Transition at a Glance

In-built transition plan in TAI project	Orientation to Community and TI staff on transition process	Transition in 4 phases by TANSACS and TAI
Capacity building of staff on Technical / documentation	Pre-transition Joint review / data quality assurance support	Mechanisms for transition in place - TAI, TANSACS® TSU
Transition of TIs completed in 3 phases	Strengthening linkages for health care delivery	Post transition Joint review / data quality assurance support
Dissemination of findings of Transition Process	Documentation of transition process	Linkages with Govt depts. for social security

Conclusion

Perception of MARPs on transition has shown changing trends from concern to satisfaction during the process of documentation of the transition. The high level of concern and anxiety being expressed while interacting with TIs that transitioned early were not found in those who have transitioned in the later phases. Clarity and experience gained by TAI, TANSACS / TSU in the early phase have helped in handling issues, which emerged in the second and third phases. The guidance and support provided by the officials at district level was also a key factor in successful transition. The community groups at large have a sense of accomplishment and satisfaction regarding the process of transition.

TAI Intervention Districts (2004-2012)

TAI Intervention Districts
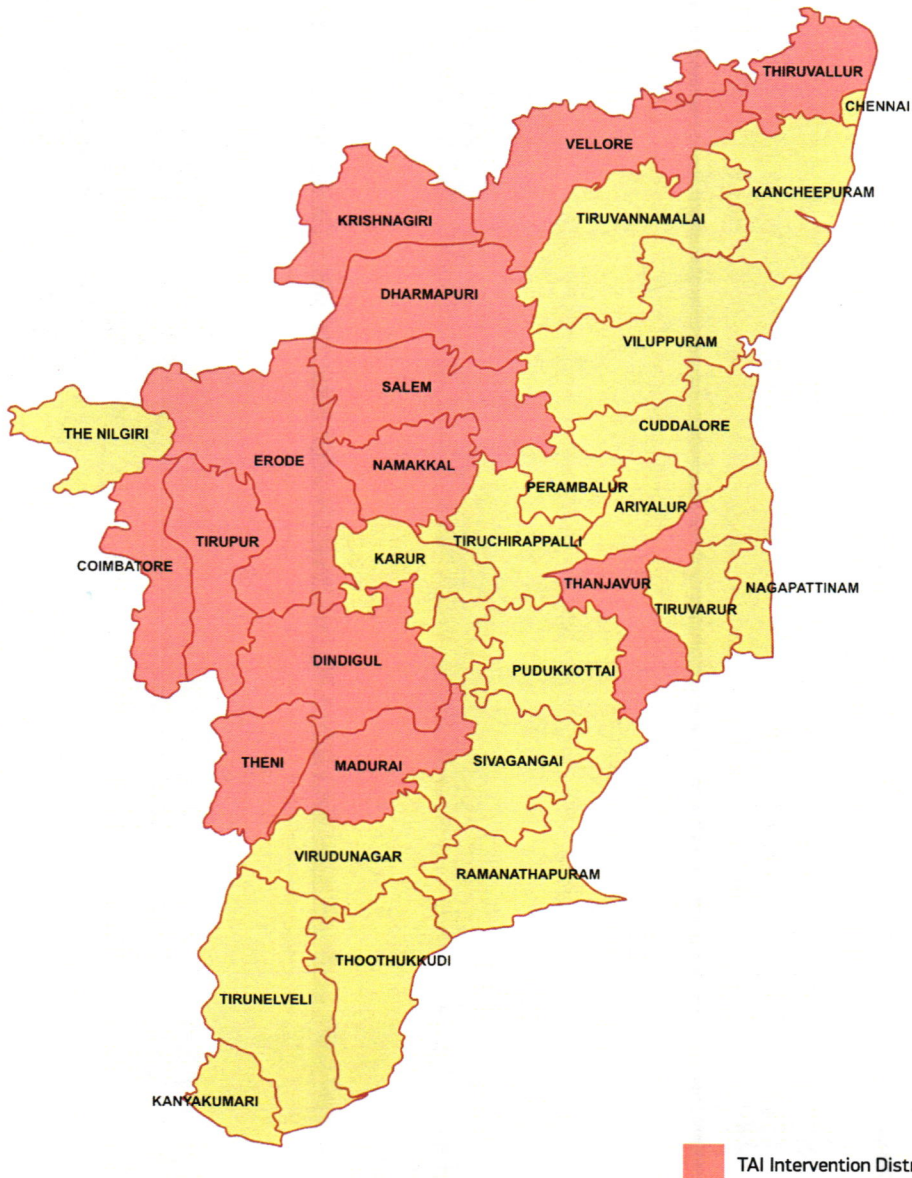
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