MOBILIZATION OF COMMUNITY HEALTH WORKERS FOR EARLY DIAGNOSIS AND TREATMENT OF LEISMANIASIS IN NEPAL.



## วิทยาลัยวิทยาศาสตร์สาธารณสุข จุฬาลงกรณ์มหาวิทยาลัย COLLEGE OF PUBLIC HEALTH SCIENCES

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## **ABSTRACT**

The magnitude of high incidence, prevalence of Visceral leismaniasis along with its high mortality affecting particularly the young age group in Nepal and its disparity from the developed world and from developing countries has been an issue for policy makers and health service program officials. Since, control of Leismaniasis and mortality from V.L. is a serious problem of Public Health concern in Nepal, it is intended to find out the critical factors related to this issue.

This thesis comprises of mainly 3 parts: the essay, the proposal and the data exercise. In this essay, I have identified the problems related to health of risk group people from Leismaniasis in Nepal and found that mortality and morbidity are very high in comparision to other developing and developed countries as well. In Nepal, mortality and morbidity from Leismaniasis continue to be high because case detection and prompt treatment of V.L., especially in rural areas (being rural focus of disease) are often deficient and inappropriate to peoples situation. Situation analysis and data collection on the functioning and the use of facilities and on other aspects of V.L. was conducted in Sunsari District of Nepal. Research methods include identification of case, patients flow studies, laboratory set-up for diagnosis of case, reagents, drug supplies for treatment and review of hospital records. The situation analysis was helpful for assassins health system factors contributing to death from Leismaniasis.

While there are many factors that contribute to mortality from Leismaniasis, I have focussed those that affects the interval between the onset of complications from disease and its outcome. If early diagnosis and treatment is provided in time, the

outcome will be usually satisfactory, and hence, outcome is affected by late case detection and delayed diagnosis and inappropriate and late treatment.

In Nepal, leismaniasis could be controlled in the frame-work of primary health care program. At the local level communities should be involved in planning and decision making. With some motivation communities can be easily mobilized to implement their planned activities. The CHWS play a vital role in this and by providing regular and adequate training to CHWS with regular supervision, monitoring and evaluation of their activities, will help promote early and increased case detection, their referral in time to district hospital for diagnosis and treatment therby help reduce mortality and morbidity from the disease.

Communities should be provided with health education program for creating awareness for control of Sand Fly through residual insecticidal spraying and improved environmental sanitation. People should be discouraged for traditional practices of sleeping on the floor outside houses, keeping cattlesheds close to their houses etc., which results in transmission of disease. At the same time, people should be encouraged to adopt protective measures like use of mosquito bed-nets, repellants etc. for reducing Sand fly bite, thus minimizing transmission of disease.

A reliable and effective referral process should be developed for suspected cases of Leismaniasis for helping people at risk to reach in time when needed to appropriate health facilities for diagnosis and treatment. Role of inter-sectoral collaborations, involvement of pollitical leaders, school teachers, local NGOS, and clubs play an important role in the control of Leismaniasis if motivated properly.

I have discussed about lack of information on disease and an ineffective disease surveillance system which needs to be developed to detect the burden of disease in the communities, so that a timely and appropriate control measures could be identified.

I have also discussed about the problem of implementation of program and found that implementation of service for early diagnosis and treatment at PHC level is the appropriate solution to the problem. The proposal is focussed on the implementation of Early diagnosis and prompt treatment service with evaluation of the program in Sunsari District.

The study strengthens the capacity of Ministry of health in Nepal to design, implement EDPT service with prompt treatment in PHC and to evaluate the program, informs the decision makers about the importance of Leismaniasis control and mortality from V.L. thereby sharing information on the most effective strategies to reduce it.

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