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

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A Thesis Submitted in Partial Fulfillment of the Requirements
for the Degree of Master of Public Health,
Health System Development Program
College of Public Health
Chulalongkorn University
Academic Year 1997

ISBN 974-637-628-8

Thesis Title	: Mobilization of Community Health Workers for Early diagnosis and Treatment of Leismaniasis in Nepal.
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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.

ACKNOWLEDGEMENTS

I would like to express my sincere gratitude to Prof. Chitr Sithi amorn, Dean, C.P.H., Chulalongkorn for his guidance, kindness and care throughout the study.

I also would like to express my sincere regards to Dr. S.J. Wattana, Assoc. Prof. and Deputy Dean for graciously accepting me to present my thesis.

No words can be express my deep gratitude and sincere appreciation to Dr. stephen King, for his kind guidance, valuable suggestion and for constructive criticism. I will not forget his warm and friendly advice, that served as a source of strength during my period of frustrations and despair.

I express my sincere regards to Dr. Nuntavarn Vichit-Vadakan, who encouraged and helped me all the time for completion of course. As a teacher I found her always guiding her students in the right track. I found her very kind and helpful all the time of my studies.

I am grateful to Dr. Sathirakorn P., for encouraging me every moment of my studies at Chulalongkorn. He is highly appreciated for, he made me understand the basics of Health Economics, which is of much importance for me to work as an administrator in Health services, Nepal.

I owe special thanks to my advisor, Ajarn Wacharin Tanyanont, who guided me to complete my thesis work. I would really appreciate her for making me understand the norms of statistics, which is of much help throughout my career to work in my country. She always helped me whenever I found myself in trouble during the period of my studies. She guided me all the way tocomplete my thesis.

I would like to pay my regards to Dr. Sawakorn R. for providing me a good knowledge in Health planning and policy implementation. I am also grateful to Ajarn Pete, who really helped me to work on computer in a way that I could write this thesis in time. At the same time I am obliged to Ajarn Ratna S. and Ajarn Chanawong B. for providing me all necessary help for my study. My thanks go to Dong thip, a staff of CPH, who helped me all the way making my stay at Chulalongkorn comfortable. I am also grateful to library staff for providing me all necessary support and helped me enormously during my study period.

I would like to thank my wife, who took lot of pain for my comfort during my study period at Chulalongkorn. It was her effort that I could complete my thesis. She always encouraged me and cared me during my stay in Bangkok.

Finally, I humbly acknowledge to my colleagues, who have contributed to my fund of knowledge. My thanks are due to my friends at Chulalongkorn, who made my stay comfortable and memorable.

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