

# Report on Intensified Case detection at Upper River valley in Dolakha and Sindhuli



Project Period: 15th Jul 2020- 15th Jan 2021

TRISHULI PLUS COMMUNITY ACTION GROUP
KATHMANDU

### **Background of the Organization**

Trishuli Plus, a community action group established in 2006, is a community-based non-profit, politically non-aligned, non-governmental organization (NGO) led and run by and for people living with HIV (PLHIV) and affected by TB to provide HIV and TB prevention, care, support, and treatment services. Trishuli Plus fosters meaningful involvement of communities in health policy development in Nepal through their participation as executive board and general members of key country decision-making platforms and in health promotion and prevention activities through mobilization of PLHIV and TB affected communities as outreach staff and peer speakers. In the course of implementing its positive prevention programs, community care centres, prevention program among migrants and their spouses, TB community mobilization and awareness raising activities, Trishuli Plus emerged as one of the leading agencies for HIVrelated activities in Nuwakot and Rasuwa districts and has been able to serve more than 200 PLHIV - all of whom are from migrant community - for improving health and well-being as well as reducing HIV related stigma and discrimination (S&D). Since 2020, Trishuli plus field office has been established in Kathmandu for the HIV prevention programme among migrant and spouse in Kathmandu valley. Trishuli Plus also has very strong and functional relationship with the District Health Office (DHO), District coordination Committee (DCC), District AIDS Coordination Committee (DACC) and other district level and local level government authorities and non-governmental stakeholders.

## **Program Description**

Malaria is one of the public health problems in Nepal. Nepal has adopted a long-term malaria elimination strategy with a ambitious vision of malaria free Nepal by 2025 with the aim of elimination phase is to interrupt local transmission in order to ensure zero indigenous cases of malaria by regular Active Case Detection in the community in all the risk areas of Dolakha (Tamakoshi rural municipality) and Sindhuli (Kamalamai rural municipality). Malaria project in Dolakha and Sindhuli, which was supposed to run from March-September (2020) was halted due to the COVID-19 was funded by Global fund in partnership with Save the children and was implemented by Trishuli Plus. Thus, to catch up with the program targets and goal, the program started from July 15 and was extended till Jan 15 0f 2021. Within the program, Trishuli Plus worked in Tamakoshi Rural Municipality of Dolakha and Kamalamai Municipality of Sindhuli and staff performed their work under health coordinator of respective Municipalities. Trishuli Plus mainly worked to raise awareness of malaria along with its RDT.

# **Objective**

- Regular Active Case Detection in risk communities.
- Conduction of health awareness and promotional activities
- Early case detection and enrollment in the health facilities for treatment

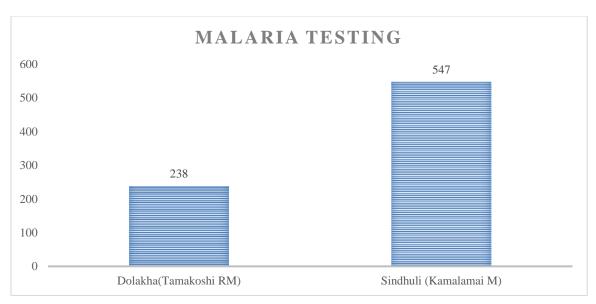
## **Major activities**

#### 1. Orientation

A virtual orientation was given to the outreach worker of Tamakoshi and Kamalamai rural municipality of Dolakha and Sindhuli respectively. The main objective of the orientation was to orient the outreach workers about the program and its objective and clarification on their role and responsibilities were also provided. Coordination was done respective palika and Health coordinators of the health department of the municipality were the focal person. The outreach workers had to work under the health coordinator and report hem on daily basis.

#### 2. Screening and Testing

Screening and testing of malaria was done by the outreach worker in Tamakoshi and kamalamai rural municipality. Total of 775 testing was done during the project period. Outreach worker conducted outreach activities by visiting household of each ward of the municipality and similarly testing was done to those clients who has visited the health post have symptoms of fever and had sign and symptoms of malaria.



#### 3. Health Awareness and Promotion

The outreach workers of both the district had conducted various health awareness and promotion and were conducted in coordination with the health posts and FCHVs of different wards. Health education was also provided to the visitors who visited the health post. Similarly, outreach had participated in the mother's group and gave awareness on malaria.

#### 4. Monitoring and evaluation

Monitoring and supervision were done in regularly by health coordinator of the palika and in charge, focal person from the health facilities for the guidance, support, and observation of the day-to-day field activities.

# **Conclusion**

As the program was halted due to pandemic caused by COVID-19, but the program started from mid of July 2020 and ended on 1st Jan 2021. There were some challenges while implementing the program. Total of 775 clients were tested during the project period and awareness and promotion of malaria was provided.