

Integrating Leprosy Services into the General Health Care System

**Studies from Chhattisgarh, Madhya Pradesh
and Orissa, India**

DANLEP

2003





Contents

Preface

List of abbreviations

Part I:	Consensus-Building and Integration of NLEP with the Primary Health Care System: A study in Digapahandi and Mohana Blocks of Orissa	1
Part II:	Voluntary Reporting versus Active Search Approach for Leprosy Detection: A comparative study in Madhya Pradesh and Chhattisgarh	69



Preface

Leprosy continues to be a serious problem in eight endemic states of India, including Madhya Pradesh and Orissa. While the prevalence of leprosy has been dramatically reduced over the past 15 years, continued efforts are necessary to sustain this positive development.

The Danish International Development Assistance (Danida) has been supporting the National Leprosy Eradication Programme (NLEP) since 1986 in the states of Orissa, Madhya Pradesh (now bifurcated into Madhya Pradesh and Chhattisgarh) and Tamil Nadu. Particularly in the later years, health systems research (HSR) has been a significant component of this support. Many studies have been conducted which have provided useful feedback to the ongoing project and positively influenced policy decisions. During Phase III of the Danish Assistance to the National Leprosy Eradication Programme (DANLEP), integration of leprosy services into the general health care system has been one of its prime objectives and a number of studies have been conducted to support this effort.

This book contains the key findings from two studies conducted in Orissa, Madhya Pradesh and Chhattisgarh on different aspects of the process of integration.

The first study is an intervention study with a focus on the effects of consensus-building among health care staff concerning the process of integration. The study documents that establishing a shared platform among the different categories of health staff working under an integrated concept improves the quality of services provided to the leprosy patients. These findings will be useful for replication in other states where integration is ongoing or is under way.

The second study compares two methods of case-detection, namely, the Active Search Approach (ASA), which has characterized the former vertical NLEP structure, and the passive case-detection through voluntary reporting centres (VRCs). While ASA has been studied in Chhattisgarh, the VRC approach has been studied in Madhya Pradesh. The study concludes that IEC needs to be strengthened under the VRC approach, and that there may still be a need to apply ASA in certain high-prevalence areas.

It is hoped that the sharing of experiences with regard to various aspects of leprosy elimination in relation to the integration of leprosy services into the general health system, which is the purpose of this book, will be useful even beyond the three states directly involved in these studies.

It has been a pleasure working with the teams involved in these two studies, and my acknowledgments and thanks go to the respective governments, the research teams, facilitators, district health system personnel, patients and others associated with these two studies, as well as the DANLEP staff in Chhattisgarh, Madhya Pradesh and Orissa.



Jens Seeberg
Health Systems Research Adviser
DANLEP
New Delhi, July 2003



List of abbreviations

ANM	Auxilliary Nurse Midwife
ASA	Active Search Approach
AWW	<i>Anganwadi</i> worker
BEE	Block Extension Educator
BMO	Block Medical Officer
CCC	Care and Concern camp
CHC	Community Health Centre
Danida	Danish International Development Assistance
DANLEP	Danish Assistance to the National Leprosy Eradication Programme
DDC	Drug Distribution Centre
DDP	Drug Distribution Point
DLES	District Leprosy Elimination Society
DLO	District Leprosy Officer
FGD	Focus group discussion
GHS	General health system
GOI	Government of India
GOMP	Government of Madhya Pradesh
GOO	Government of Orissa
HS	Health Supervisor
HSR	Health Systems Research
HW	Health Worker
ICDS	Integrated Child Development Scheme

IEC	Information, education and communication
KAP	Knowledge, attitudes and practices
LEC	Leprosy Elimination Campaign
LEU	Leprosy Elimination Unit
LHV	Lady Health Visitor
MB	Multibacillary
MDT	Multi-drug therapy
MLEC	Modified Leprosy Elimination Campaign
MO	Medical Officer
MPHS	Multi-purpose Health Supervisor
MPR	Monthly progress report
MPW	Multi-purpose Worker
NCC	National Cadet Corps
NGO	Nongovernmental organisation
NLEP	National Leprosy Eradication Programme
NMA	Non-Medical Assistant
NMS	Non-Medical Supervisor
NYK	Nehru Yuva Kendra
OPD	Outpatient department
PB	Paucibacillary
PHC	Primary Health Centre
PMW	Paramedical Worker
PR	Prevalence rate
RFT	Released from treatment
SC	Scheduled Caste
SC	Sub-centre
SECL	South Eastern Coalfields Limited
SSL	Single skin lesion
ST	Scheduled Tribe
TBA	Traditional Birth Attendant (trained)
VRC	Voluntary Reporting Centre



Glossary

<i>Bada roga</i>	A 'big' (fatal) disease
<i>Chhau</i>	Patch
<i>Dhabala chhau</i>	White patch
<i>Durga Puja pandal</i>	Platform for celebration of <i>Durga Puja</i>
<i>Haat</i>	Temporary market
<i>Jadu</i>	Itchy patch
<i>Kala jatha</i>	Street performers in government service
<i>Karela</i>	Bitter gourd
<i>Kustha</i>	Leprosy
<i>Mahila Samiti</i>	Women's group
<i>Meena bazaar</i>	Fair-cum-market
<i>Pancha Byadhis</i>	Five priority diseases of public health importance, namely, leprosy, malaria, acute respiratory infection, diarrhoea and scabies
<i>Rath yathra</i>	Chariot procession
<i>Rath</i>	Chariot
<i>Sada</i>	Urban notified area
<i>Shiksha karmi</i>	Primary school teacher (temporary)
<i>Tonga</i>	Two-wheeled cart usually driven by a horse

