# Situational analysis of TB/HIV collaboration at Kaski district, Nepal

## Background

Currently, TB/HIV co-infection has become a major public health issue in many developing regions especially in African and South East Asian countries including Nepal. Collaboration between TB and HIV/AIDS programmes is essential in order to tackle the dual burden of the disease. Despite the formulation of policies and strategies of TB/HIV collaboration in Nepal, there's a lack of strong evidence to illustrate the exact situation of the collaborative activities at implementation level. Thus, a detailed situation analysis of TB/HIV collaboration was carried out in Kaski district as a key step to make sure the developed policies and strategies are actually bought into real practice.

#### Objective

The major objective of this study was to assess the existing situation and recommend possible interventions for implementing TB/HIV collaborative activities in the district of Kaski in Nepal.

#### Methodology

This was a descriptive cross-sectional study conducted in Kaski in Nepal by carrying out both qualitative and quantitative research. Semi-structured interviews were conducted in 14 DOTS centers and 6 VCT/ART centers, which were selected using stratified random sampling. Similarly, for qualitative information, 6 indepth interviews were performed with TB and HIV/AIDS focal persons and stakeholders of the area. Two focus group discussions (FGD) were also carried out with TB patients and PLHIVs (People living with HIV AIDS). Quantitative data were first entered and analyzed through SPSS version 13.0 using descriptive statistics. Whereas for the qualitative part, the data was first transcribed and analyzed using thematic analysis approach. In this study, the qualitative findings were used to support the quantitative findings.

### Conclusion

TB HIV coordinating authorities with clearly defined terms need to be established at all levels of the district to achieve effective collaboration between existing HIV AIDS and TB programmes. As the findings illustrate, none of DOTS centers conducted intensified TB case finding, therefore policy level discussion seems essential to address this issue. Similarly activities of capacity development such as trainings and sufficient human resource in the institution should also be addressed at district level to ensure successful implementation of the programme.

