

Situational analysis

Public Private Mix (PPM) for TB control: case of Palpa district, Nepal

Background: Private pharmacies and private clinics are initial point of consultation for most TB patients both in terms of financing and service provision. It is estimated that half of the people seek care from private sector in Nepal. Thus, Public Private Mix (PPM) is the best approach of engaging all health care providers in TB control. A model of PPM was proved to be effective in increasing case detection and treatment outcome.

Objective: To explore current situation of district capacity and approaches to implement Public Private Mix approach in Tuberculosis and to recommend possible intervention for implementing PPM in Palpa district, Nepal

Methods: This was a descriptive cross sectional study. Qualitative and quantitative data were collected by Semi-structured questionnaire implemented among public and private service providers, TB patients, focal persons and private pharmacies.

Findings: The total population of Palpa is 268558. Trend of case detection is declining from 63% to 51% since 2004/05 till 2008/09. Treatment success rate of new smear positive cases has been slightly decreased to 93% in 2008/09 from 94% in 2007/08. Altogether, there are 13 DOTS, 6 diagnostic and 55 sub centers in public and private sector working under NTP guideline. One third of non NTP service providers were providing TB related services. Private sectors are looking forward to be involved in various areas of TB control; Suspect identification, TB diagnosis, Provide DOTS services, referral, and Health education.

Conclusion: Despite the fact that PPM can strengthen NTP to deliver more service oriented TB care, various challenges exist in its implementation. Hence, DPHO should take initiation and lead in the programme implementation by defining roles and responsibilities of concerned authorities and stakeholder.

