Building Capacity and Competence within Integrated Programmes

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Topics

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Introduction

• Leprosy control can only be sustained in integrated programmes.
• Long-term success in leprosy control can only be achieved by reliable partnerships of all relevant stakeholders.
• Integration of leprosy control must fit the national and sub-national health situation.
• Leprosy control needs comprehensive leprosy services.
Objectives of Integrated Leprosy Programmes

- To ensure long-term sustainability of leprosy control
- To optimize the impact in terms of case-finding, treatment outcome and disease control
- To optimize human resource development and allocation
Possible Partners in Integrated Programmes

• The Federal and Provincial Ministries of Health
• The health care providers (Government, NGOs and private)
• The international donors, namely the World Health Organization and INGOs
• Other National NGOs as supporting partners
• 5. Often forgotten: The patient and his/her community
Note:

All partners may be in need for building capacity and competence
Required Functions for Integrated Leprosy Control

• Primary Level: “Suspect leprosy”, deliver MDT
• Secondary Level: Routine Diagnosis and Management of Leprosy Cases
• Tertiary Level: Referral hospitals for comprehensive leprosy services, human resource development, technical expertise and management of complications.
Suggested Structure for Leprosy Control

Tertiary Level:
Leprosy Referral Centres

Secondary Level:
Designated leprosy workers, Dermatologists

Primary Level:
e.g. General Health Services, Dermatologists
Strategies in Capacity Building

• Community Outreach Programmes in Hyper-endemic Areas
• Awareness programmes for primary health care staff, particularly doctors
• Integration of leprosy into a concept of basic dermatology
• Training of designated leprosy workers
• Maintain expertise at national referral centres
• Lobbying for continued political commitment
Steps in Capacity Building

- Situation Analysis
- Service Structure
- Job Descriptions
- Training Needs Assessment
- Training Capacities and Materials
- Adequate IEC Measures and Materials
Need of National Guidelines

• Case-finding by sustaining adequate knowledge in all health cadres
• Proper case-management and continuous monitoring of treatment outcome
• Comprehensive services for prevention and treatment of impairments and deformities
• Comprehensive services for social needs assessment and rehabilitation including networking
• Efficient referral system, including national resource centres
Link Leprosy with Basic Dermatology

- Leprosy primarily is a skin disease
- 15 – 20% of primary health care patients have skin problems
- Concept of “SUSPECT LEPROSY” at primary health care level
- Training in “seeing, learning, comparing, recognizing, treating/referring”
IEC Programmes

• Training in basic dermatology for primary health care workers
• Medical Officers’ Orientation Courses on leprosy
• Leprosy to be included in all curricula of medical training courses
• Research/assessment of impact of different health awareness interventions
• “Best Practice Models”
Community Outreach Programmes in Hyper-endemic Areas

• Awareness and participation of local authorities in “Skin Camps”
• Training and participation of local primary health care staff in “Skin Camps”
• Public awareness campaigns in preparation for Skin Camps
• Participation of healed patients and their families
Competence through Partnership

• National, Provincial and District Boards
• Net-working with relevant non-health Government departments (Zakat, Social Welfare department)
• Net-working with relevant NGOs and other stakeholders
• Net-working with patients, their families and communities, e.g. DPOs
Challenges

• To maintain knowledge and experience in leprosy management under very low prevalence conditions
• To establish sufficient and relevant dermatological services
• The appropriate coverage of female population
• Lack of General Health Awareness
Recommendations

- National Guidelines for Leprosy Control
- Training Needs Assessment
- Capacity Building in Basic Dermatology – Linkage with Leprosy Control
- Maintain National Resource Centres for Leprosy
Thank you very much