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COMMUNITY OR HOME BASE CARE (CHBC) TO PEOPLE WITH HIVS IN NEPAL

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In Kanchanpur district, 4.5 million populations are living and among them 70-80% adult people are migrating to India for labor employment. Among the 70-80% of migrants, 20-25 population is from Dalit Community (Caste Based Discriminated Community). As data showed, in voluntary blood testing center in NNSWA, it is found that mostly migrated population in India has high prevalence of HIV infection. Currently in Kanchanpur, 484 (260 M, 232 F and 1 TG) people are in HIV positive status and 137 were died. These 484 HIV+ people were cared by NNSWA through community/home base care (CHBC) approach by regular health checkup, testing the viral loads to know the status of antibody for starting the ART. CHBC team has been created with basic health training and mobilizing under health technical person along with PLHIVs. The CHBC team will be moving to the PLHIVs home in weekly basis to see the health condition. For ART (Anti Pectoral Viral Therapy) users, the team checked their medicine, storages and time schedule has been followed correctly or not. If the HIV+ person is found with any opportunistic disease or any other nutritional problems or in PMTC (Pregnant Mother to Child) condition, the CHBC team suggested to checkup their condition or they referred to VCT (Voluntarily Counselling and Blood Testing) center or CCC (Community Care Centre) NNSWA health facility for further health examination. A medical doctor will diagnose and prescribes all necessary medicines to the person. Sometimes the doctor will suggest a need for observation for the person on that condition and the person's stay within community care center taking all health services including nourished food as suggested with in the time period by doctor. In community care center, the staff nurses and heath assistants will be taking care. From 2012 to till date we have supported to 350 of PLHIVs.

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