

ABSTRACT

Background: Lymphatic filariasis is one of the neglected tropical diseases prevalent in 72 countries worldwide. Lymphatic Filariasis is endemic in 63 out of 77 districts of Nepal with the average prevalence of 13%. Mass drug administration, MDA is ongoing in 13 districts of Nepal. This study explored the fidelity of MDA programme implementation from service providers and community perspective in Lamjung district of Nepal.

Methodology: This was cross-sectional descriptive study using mixed method study. This study was conducted in Lamjung district of Nepal, which failed pre-Transmission Assessment Survey and re-pre TAS districts of Nepal and already completed 11th round of medication with albendazole and Diethylcarbamazine Citrate, DEC. Quantitative information was collected from 170 community people. Self-reported checklist was filled by health workers of Rainas Municipality. Qualitative information was collected from 36 respondents, 18 service providers and 18 community people

Result: The compliance to MDA was 71.2% in the district. Although high implementation fidelity was reported by health workers, when compared to community people's responses the fidelity was considered low. There was issue of keeping proper record in LF register in the district, addressing the missed people to take medicine. Health workers were not found strictly adhered to the directly observed treatment strategy for making people ingest the medicine, no proper follow up for missed people were done in the district along with people having concerns of adverse events. There is need to address people's concern, especially of adverse events although people not only ingested medicine but involved for counseling other people for medication and social mobilization during MDA. There was no any contextual factor working as the barrier for taking medicine, instead sociopolitical support was one of the strengths in increasing compliance in the district.

Conclusion: Health worker did not follow the directly treatment strategy strictly, issues of proper record in LF register, people still had the concerns of adverse events and severe adverse events.

Key Words: Lymphatic filariasis, implementation fidelity, implementation research, Nepal, community responsiveness, service provider