

## Linking TB and HIV in Asia

**Background:** TB is likely to be foremost cause of death for HIV infected. National HIV/AIDS programmes, are relatively weak in spectrum of prevention, care, support and treatment. Although there have been attempts to link TB and HIV services, these have generally not been successful. Often policy for TB-HIV linkages exists, but policy is rather theoretical there is generally little or no guidance on how to put policy into practice.

**Objective:** To develop a working model of TB-HIV collaboration and national guideline for developing TB HIV collaboration in Nepal.

**Methods:** The study was completed in three phases; Guideline and material development phase (a national level working group was formed and training, educational materials and implementation guideline for TB HIV collaboration were developed and disseminated), piloting and scale up phase (the developed material were piloted in Kathmandu and Kaski districts) and assessment phase (finalization of guideline based on issues raised in pilot districts).

**Findings:** Various TBHIV training materials and a TB HIV implementation guideline was produced. In line with guideline two Voluntary Counseling and Testing (VCT) centers were established in DOTS center. To make TB HIV co infected people lives more productive, income generating training was provided to four TB HIV co-infected people, educational support was also provided to 2 children of TB HIV co infected in Kaski district. For handling cases of both diseases more effectively by TB HIV co infection management training was provided to 22 health workers working in TB and/ or HIV/ AIDS and 20 FCHVs.

**Conclusion:** Development of implementation guidelines and working models for TB/HIV collaboration demonstrated to be very crucial for effective collaboration of TB HIV. The guideline is useful for programme implementers, health professionals and stakeholders at central and district level.

