

Community Health Workers provide excellent local community-based services

“We could see for ourselves the excellent services that community health workers (CHW) are delivering in remote fokontany, and we now realize how large the needs are.” This was the account by Dr. Michelle Chang, CDC/Atlanta (Centers for Disease Control and Prevention) Monitoring and Evaluation Advisor following a site visit to fokontany (villages) in the southwestern district of Tolagnaro, Madagascar, from April 13 to 18, 2010. She was part of a three-person team from the President’s Malaria Initiative (PMI) that included Dr. George Greer, Senior Advisor in Child Survival and Infectious Diseases from USAID/Washington, and Mr. Donald Dickerson, PMI Advisor at USAID/Madagascar.

The purpose of the visit was to observe the implementation of the Integrated Management of Child Illnesses at community level (IMCIc), which includes prevention and management of malaria, pneumonia, and diarrhea. IMCIc is one of the health services delivered to communities based on the USAID/SanteNet2 project’s Kaominina Mendrika Salama approach (KMsalama).



Team members en route to Androangambe where they will meet with a community health worker.

The team visited five fokontany, including Ezama, Masiakena, Esalo, Besava, and Androangambe, which are at least a one-hour walk from the nearest health center. Children in these communities often suffer from fever or cough. Because of the distance, most mothers resort to either self-medication or traditional medicine.

The Kaominina Mendrika salama approach promotes the community’s commitment to improving its health care. This approach promotes the timely treatment of sick children by community health workers in 800 rural communes.

The team discussed with actors engaged in social development work in their communities, as well as with community health workers. The latter deliver IMCIc services that for the first time include the use of Rapid Diagnostic Tests (RDTs) to confirm malaria cases. These CHWs work in fokontany located more than five kilometers away from primary health care clinics.

The team noted that the local population in villages visited suffers from a high prevalence of malaria among fever cases. For example, 50 to 70 percent of RDTs conducted are positive. In less than one



The Esalo community health worker administers a RDT to a young patient. The test was positive and the girl was treated for malaria.

month's activity, three of the five CHWs visited have run out of their initial stocks of ACTs (artemisinin-based treatment) and RDTs.

While impressed by the performance of the CHWs, the team identified several challenges. *"Scaling up of this model that involves trained community health workers is one of the project's biggest challenges,"* Dr. Greer said. Dr. Chang added, *"The real challenge now is to see that the supply system works to ensure continued community-based service delivery for the benefit of the communities that rely largely on the services of the community health workers."* In spite of these challenges, Mr. Dickerson was happy with the visit. *"We were able to visit hard-to-reach fokontany where dedicated, hard-working CHWs were providing services; that really impressed me,"* he said.

USAID/SanteNet2 is currently supporting over 1,089 community health agents working in as many fokontany who provide treatment for fevers, coughs, and diarrhea for 225,000 children under five years of age. By late 2010, USAID/SanteNet2 will have put in

place 4,000 CHWs to manage these illnesses. More than one million children under five in 4,000 remote fokontany will thus benefit from community-based health services.

The five-year, \$32 million SanteNet2 project is a basic component of the United States Government's assistance to the Malagasy people in the health sector. The President's Malaria Initiative (PMI) aims to reduce malaria-related mortality by more than 50% in 15 African countries, including Madagascar. This initiative, managed by USAID in collaboration with CDC, supports the use of effective prevention and treatment tools such as long-lasting insecticide treated nets, indoor spraying of insecticides, preventive treatment of pregnant women, and treatment of malaria with ACTs. PMI activities in Madagascar fall within the scope of the national malaria control strategic plan. The Initiative has had a total budget of more than \$65 million since its launch in Madagascar in 2007.