

All households in the target areas have received long-lasting insecticidal nets. Photo: Comic Relief/Vicky Dawe

PROJECT BRIEF

Pioneer

The purpose of the Pioneer project is to reduce malaria related morbidity and mortality in the target areas and to gain a deeper understanding of the most effective approaches in achieving this objective

Project Outline

The project aims to reduce malaria mortality and morbidity through support to a range of activities in five districts in Mid-Western Uganda. Hoima, Kibaale, Buliisa, Kiboga and Kyankwanzi districts were selected with the Ministry of Health and cover an estimated population of over 1.1 million. Prior to the project's inception, this region had a very high rate of malaria, which was linked to the intrinsically high to moderate transmission health system challenges and lack of resource investment. Access to healthcare and coverage of prevention measures remained low, with less than 35 percent of households living within 10km of a health facility and only 10 percent of households owning a long lasting insecticide treated net (LLIN) prior to intervention.

The project focuses on supporting systemic change by increasing both supply and demand for malaria control tools. By simultaneously ensuring the best tools are available to the people who need them the most and increasing their understanding of the importance and effectiveness of

these tools, families are empowered to take positive action for the health of their own households and malaria related morbidity will be dramatically reduced within this region.

Other areas of work within the project to support its goal are: health system strengthening, monitoring and evaluation of the activities to promote learning and measure success and impact, and advocacy work at the local, national and international levels.

Project aims & achievements

Aims:

- » To increase the number of households using LLINs every day and reduce mosquito density and the entomological inoculation rate through universal coverage of LLINs
- » To increase the number of patients accessing appropriate malaria treatment based on correct diagnosis

Country/Countries

Uganda

Donor/Donors

Comic Relief

Length of project and Start/end dates

Five years, May 2009 - April 2014

Partners

National Malaria Control Programme,

Uganda Ministry of Health

District Health Teams of Buliisa,

Kiboga,

Kibaale,

Kyankwanzi and Hoima

Malaria and Childhood Illnesses NGO

Secretary (MACIS)

within 48 hours of onset of fever and the number of severely ill children referred to health facilities

- » Inclusion of key malaria control activities in the districts' annual workplan
- » Documentation and dissemination of lessons learnt about best approaches for achieving systemic change in malaria control.

Achievements:

- » Over 600,000 LLINs were distributed to 234,591 households covering over one million people to achieve universal coverage in four districts. Behaviour change communication (BCC) activities have been carried out to increase families' knowledge. After two years, 64 percent of the households are using the nets regularly
- » Rapid diagnostic tests (RDTs) were rolled out in 88 health facilities across the Pioneer supported districts, covering all health centre levels II and III lacking microscopy. In collaboration with the National Malaria Control Programme (NMCP) and district health offices, the project has trained over 1,000 health workers, 56 district trainers, and 170 political leaders on the use and management of RDTs. This has improved the rational use of anti-malarial drugs and reduced the stock out of these expensive drugs to zero in health facilities
- » In-charges and health workers were also trained in supply chain management, focusing on RDTs and antimalarial drugs. Additionally, the project collaborated with NMCP to introduce an external quality assurance system (EQA) at field level to assess the accuracy of RDTs. The project also took a leading role in revising the national RDTs user's manual
- » Lessons learnt from this intervention have been shared with partners involved in the roll out of RDTs country-wide
- » The project, in collaboration with a Malaria Consortium integrated community case management project, has trained 2,108 VHTs in three districts of Hoima, Kiboga and Kyankwanzi on pre-referral treatment

at community level using rectal artesunate. Over 70,000 capsules of rectal artesunate have been distributed to these VHTs to treat children under five suffering from severe malaria, giving 342,052 children in three districts access to the treatment at community level

- » Entomological surveillance is conducted every quarter to assess the changes in malaria transmission across the project implementation area.

Further areas of focus:

- » Provision of RDTs to the supported health facilities and regular support supervision visits to health workers across the five districts
- » Operational research to determine the factors driving behaviour change as well as the uptake of prevention (LLINs) and diagnostic (RDTs) tools, and pre-referral treatment (rectal artesunate) by both health workers and beneficiaries.
- » Entomological surveillance activities to monitor the impact of LLINs on the mosquito population, the infectivity rate, and the behaviour of mosquitoes
- » Continuous BCC activities, including radio shows and community dialogues to ensure increased use

of LLINs, improved health seeking behaviour and better management of cases. These activities are organised in cooperation with other malaria control projects in the area

- » Advocacy activities to disseminate the lessons learnt and ensure sustainability of the project's intervention.

This project has a direct impact upon efforts to:

- ✓ *Malaria control*
- ✓ *Control of childhood illnesses*
- ✓ *Health systems strengthening*
- ✓ *Capacity building/human resource development*
- ✓ *Behaviour change communication*
- ✓ *Operational research*
- ✓ *Monitoring and evaluation*
- ✓ *Policy change/advocacy*
- ✓ *Support for at-risk populations*



Health facility workers receive training in the use of rapid diagnostic tests in Bullisa, Uganda

Malaria Consortium

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