

Integrated community case management in Kebbi and Niger states

The integrated community case management project aims to provide malaria, diarrhoea and pneumonia curative services for children under five by community health volunteers in the most marginalised and hard-to-reach communities.

Project outline

In Nigeria, a review of studies on child mortality showed that sick children under five years are most often presented late for treatment. As a result, they often die within 24 hours of admission. To address this problem, the integrated community case management (iCCM) project, supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria under the New Funding Model, will seek to bridge the gap in access to life-saving commodities in marginalised and hard-to-reach communities in Kebbi and Niger states – thereby contributing to the reduction in malaria, pneumonia and diarrhoearelated mortality among children between 2-59 months.

The iCCM policy developed by the Federal Ministry of Health and partners and approved by the Honourable Minister of Health in April 2013 in an effort to address the large gap in healthcare coverage with appropriate cost-effective curative interventions for common childhood illnesses. The policy recognised that facility-based services alone are not sufficient given the challenges of access to services. The iCCM policy mandates state-led implementation of iCCM, with defined guidelines and activities for state ministries of health, local primary healthcare teams, community members and implementing partners.

Country

Nigeria

Donor

Global Fund to Fight AIDS, Tuberculosis and Malaria

Length of project

June 2015 to December 2016

Partners

Federal Ministry of Health, National Primary Health Care Development Agency, National Malaria Elimination Programme (NMEP), State Ministry of Health (SMoH), State Primary Health Care Agency (SPHCDA) and other relevant non-governmental organisations and community based organisations



Malaria Consortium will be working with two state ministries of health, and the state primary healthcare development agencies as well as the Federal Ministry of Health and a range of other partners (communities, governments and non-government organisations). The project will build on past successes in implementing iCCM, especially the Malaria Consortium's Rapid Access Expansion project being implemented in Niger state.

Malaria Consortium will work to ensure that delivery of effective services is guided by evidence-based information and will also provide technical support for monitoring and evaluation of programmes carrying out activities to support evidence-based decision-making and strategic planning.

Villages and functional health centres in each of the two states will be identified and mapped. iCCM services will be established in areas outside of a five kilometre radius from these health centres in order to guarantee access to remote communities. Service delivery at community level will complement rather than duplicate services at facility level as part of an effort to form a continuum of care.

A key feature will be the selection of suitable community members to be trained and designated as community oriented resource persons (CORPs)/community health workers (CHWs). Efforts would be made to ensure strong linkages between the health centres and CORPs/CHWs, which is essential in maintaining the supply chain, referrals and supervision at community levels.

The project will:

» Support the capacity of CORPs and their supervisors to provide quality service delivery and provision of behaviour change communication messages and information

- » Ensure availability of medicines and other supplies to CORPs
- » Enhance the existing commodity logistics management systems
- » Strengthen and enhance existing iCCM supportive supervision
- » Strengthen platforms for information sharing and mentoring of CORPs
- » Support demand creation for CORPs services
- » Support improved systems and capacities of states for sustainability of programmes

Project objectives

The objectives of the project are to:

- » Scale up access to iCCM services and commodities for malaria, diarrhoea and pneumonia
- » Ensure high quality iCCM service delivery
- » Increase acceptance and informed demand for iCCM services at the community level
- » Strengthen existing structures to facilitate ownership and sustainability of iCCM

This project supports efforts to deliver:

- ✓ Prevention
- ✓ Case management
- ✓ Health systems and service delivery
- ✓ Public health communications
- ✓ Monitoring and evaluation