



SUCCESS STORY Uganda | May 2017

Malaria attains a spot on district agenda

USAID's Malaria Action Program for Districts supported the Ministry of Health to organize a Grand Round meeting to sensitize district leaders on malaria control and highlight the need to allocate resources for malaria control in the Rwenzori region.



Health workers at the Ground Round meeting in Fort Portal Regional Hospital

BACKGROUND

District meetings serve as an important opportunity to discuss potential policy resolutions for malaria control. However, malaria is often given low priority in the district meetings in Rwenzori region, where HIV and maternal and child health programs have seen more presence in the region.

In order to bring malaria control higher up on the agenda, USAID's Malaria Action Program for Districts supported the Ministry of Health in organizing a Grand Round session, in which technical staff from the project sensitized district leaders on malaria control and highlighted the need to prioritize the issue.

The Grand Round in Rwenzori region is the first in a series of planned meetings to raise malaria issues in district meetings across Uganda to increase the opportunity for greater allocation of resources for malaria-related activities.

GRAND ROUND

The Grand Round is a formal meeting at which the district health workforce discusses and proposes solutions to priority health issues. The meetings are a core component of medical education today and serve as a place to present clinical problems and discuss current cases.

The Grand Round meeting held in Fort Portal Buhinga Regional Referral Hospital, was attended by medical doctors, clinical officers, senior nursing officers from the regional referral hospital, private not-for-profit facilities, private for-profit facilities and public facilities that manage malaria.

At the meeting, a variety of presentations focused on the latest developments in malaria prevention and control, the status of malaria in different regions in Uganda and the challenges that hospitals currently face. The challenges highlighted were inadequate healthcare resources, a weak health system and a lack of understanding of malaria epidemiology.

The National Malaria Control Program led discussions on the malaria situation across Uganda and the current plans in place to prevent, control and treat malaria, such as the National Malaria Reduction Strategic Plan 2014-2020. Case studies of countries that reached elimination status were highlighted to emphasize the need for implementation and scaling-up of effective interventions for Uganda to reach elimination status

"In other countries, they do mass drug administration, mass screening and treatment, and active case-finding, but we have not yet reached that level. We are working on the following strategies: net use, indoor residual spraying, case management, malaria in pregnancy, and behavioural change management. One challenge we face is that malaria does not rank high on the agenda of most foras, including health organisations and departments, and not even during continuous medical education sessions"

- Dr Opigo, NMCP Program Manager

Participants at the meeting discussed the impact of malaria control interventions and ways forward to tackle malaria in Uganda – such as the promotion of correct and consistent use of long lasting insecticidal nets (LLINs). For example, current efforts of the National Malaria Control Programme's (NMCP) include a campaign to distribute over 24 million nets by September 2017 with support from the President's Malaria Initiative and the Global Fund. Through this campaign, the NMCP aims to maintain the rate of households with at least two people sleeping under a net at 85 percent. USAID's Malaria Action Program for Districts also plans to help deliver LLINs to mothers in antenatal and immunization clinics and children in primary schools so as to create a culture of net use.

Other malaria prevention efforts by the Ministry of Health were highlighted at the meeting. These include effective diagnosis and treatment through testing and treatment campaigns, and coordination of malaria communication activities, in particular social and behavioural change communication and social marketing.

At the end of the meeting, participants formally agreed to adopt and promote malaria control behaviours such as the use of LLINS and testing before treating, as well as increase budget and time allocations for malaria-related activities. Participants also agreed that effective malaria

interventions should be prioritized in forthcoming regional, district and health facility meetings and in health facility work plans.

"This [Grand] Round was very educational. It exposed me to the current malaria situation and the new interventions to control it, and it offered me a more thorough education than any continuous medical education meeting."

 Dr Musinguzi, Surgeon at Kabarole Hospital. Grand Round meeting participant

NEXT STEPS

The Grand Round meeting in Rwenzori region demonstrated that increasing the healthcare workforce's knowledge and understanding of the current malaria situation and the efforts in place for malaria control, can help them to prioritise malaria and mobilize decision making at the regional and district level.

To sustain the success of the Ground Round in Rwenzori region, the program will work with the NMCP to organize Grand Round meetings in each region in Uganda in order to increase the district health workforce's focus on malaria in their region and districts.

This success story is published as part of a series from the USAID's Malaria Action Program for Districts project. For more information, see www.malariaconsortium.org/resources/publications/977/ or contact: Dr Sam Gudoi, s.gudoi@malariaconsortium.org

USAID's Malaria Action Program for Districts aims to improve the health status of the Ugandan population by reducing childhood and maternal morbidity and mortality due to malaria. The project will support the Government of Uganda for a period of five years, focusing in particular on children under five years of age and pregnant women.

This project, made possible by the generous support from the American and British people, is implemented by Malaria Consortium in partnership with Jhpiego, Banyan Global, and Communication for Development Foundation Uganda (CDFU), Deloitte Uganda and Infectious Diseases Institute (IDI).

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