

Mothers with their young children wait outside a health centre © Akintunde Akinleye/Malaria Consortium

PROJECT BRIEF

ICCM guidelines and implementation framework

The aim of this project is to support the development of a decision tree for use by the Nigerian government and implementation partners in the roll-out of integrated community case management for major childhood illnesses

Project outline

Nigeria's integrated community case management (ICCM) strategy for pneumonia, diarrhoea and malaria is consistent with and supported by the World Health Organization. However, there are geographic disparities regarding lack of available healthcare access. ICCM is intended to help fill the "gaps" in healthcare access with trained community care givers who can treat common ailments, serve as an access point into the existing healthcare system, and provide continuity of care to these underserved areas. It is essential that existing healthcare systems are strengthened and referral systems implemented if integrated case management at a community level is to be both complementary and sustainable within the Nigerian context.

Malaria Consortium's ICCM project encompasses a broad range of implementation activities, including system strengthening through personnel identification and training, commodity procurement and distribution and establishment of referral pathways, among others. The project, funded by the Department for International Development/UKaid Programme Partnership Arrangement, is intended to support the development of a decision tree that will be used within the broad ICCM framework to help identify where ICCM activities will be complementary, appropriate and effective.

Country

Nigeria

Donor

UK Government (UKaid)

Length of project

March 2013 – February 2014

Partners

Federal Ministry of Health

UNICEF

World Health Organization



A child sleeps under a mosquito net © Akintunde Akinleye/Malaria Consortium

The target population is children under five years old in underserved geographic areas. However, it is anticipated that the establishment of effective ICCM practices will be broadly applicable across the population and will therefore benefit all populations.

The project comprises the following activities:

- » compile and review existing background material on considerations informing the roll-out of ICCM in other settings
- » identify practical considerations that inform the roll-out of ICCM which are important to include in a decision tree
- » gain consensus among key stakeholders of the identified considerations that will inform the roll-out of ICCM and field test the completed decision tree

The project is targeting the healthcare systems supporting an estimated 1.6 million children under the age of five. However, the project will also target other vulnerable and minority groups, including women, the elderly and people with disabilities, who often have little access to existing health systems. ICCM is being implemented to bring access to basic healthcare, including referral to comprehensive health centres as appropriate.

Project objectives

An ICCM stakeholders' meeting was held in Abuja in September 2013 and agreement was reached to move

forward with implementation activities. These activities include development of training manuals or job aids for ICCM supervisors, ICCM care givers, referral providers, state and federal trainers. Locations for initial roll-out or field testing have been proposed to be Zamfara and Ebonyi states due to the existing support systems in place through the USAID funded Malaria Action Plan for States programme.

The development of the decision tree will be done in parallel with these implementation activities and prior to the field test. Field testing will take place before the end of 2013 to inform the final guidelines, training materials and decision tree. A consultant has already started working on the development of these documents to support the field test.

This project supports efforts to deliver:

- ✓ Control of childhood illnesses
- ✓ Health systems strengthening
- ✓ Capacity building / human resource development
- ✓ Operational research
- ✓ Policy change / advocacy
- ✓ Support for at-risk populations

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