PALU - ALAFIA
Objective

To provide a description of the project implementation strategies and project results
Background Information

- Population: 8,224,644 million
- Illiteracy rate: 59.5%
  - Men: 46.9%
  - Women: 72.1%
- Primary cause of morbidity and mortality for children under 5 is Malaria
Health Service Delivery - Access to Medical Care

40% of the population use formal medical services for multiple reasons:

- Doctor/patient ratio = 1/11,294
- Nurse/patient ratio = 1/2,418
- Disruptions in the provision of medical services
- Lack of medication
- Limited outreach capacity
Community Health Services

- National policy exists but:
  - Limited implementation framework exists, including supervision
  - No policy exists that regulates how non-medically trained people should dispense medication
  - No supply chain management system was established for community distribution of medication
Community Health Services-continued

- No system exists for the collection of funds that are generated from the sale of medication
- No data collection tools exist
- No mechanism exists to integrate community generated data into the national health data collection system
- No evacuation plan
Palu-Alafia Malaria Program

Designed to operationalize the community mobilization component of the national health strategy by:

- Creating a mechanism for the treatment of malaria at the community level
- Addressing systemic issues related to the provision of community based health services
- Increasing national capacity in disease management
Palu-Alafia Malaria Program (continued)

- **Goal** - To reduce morbidity and mortality among children 0 - 5 years
- **Project period** - 2008 to 2013
- **Five year budget** - $22,000,000
- **1862 communities targeted**
- **Total population in the target zone** - 4,483,722
- **Total number of children under 5** - 837,387
Critical Assumptions

- Similar working environment throughout the country
- Standard peak seasons, nationally
- Similar levels of infrastructure and material support required
- Resistance among health authorities and medically trained staff
- Community acceptance of the program
Program Design Strategies

- Create a supply chain management system
- Design a community based treatment protocol
- Establish an education and prevention campaign
- Strengthen the national health system
- Integrate community generated data into the national health data collection system
Create a supply chain management system

- Identify a mechanism in which to integrate community distribution of medication into the national health system
- Establish a delivery service point in communities
- Develop a mechanism for medical stock replenishment at the national, district and community level
- Establish a system for revenue collection
- Establish a data collection system to ensure proper stock management
Program Design Strategy One (continued)

- Each partner is responsible for one district
- Trained community based organizations on how to distribute medication and on funds collection, stock management and record keeping
- Each community based organization has a set of data collection tools
- Monthly meetings are held to reconcile stock and finances, as well as confirm the data collected
Program Design Strategy Two

Community Mobilization

- Held official project launchings in all 40 sub-districts
- Recruited field agents to work with communities
- In collaboration with representatives of the national malaria program, met with sub-district level medical authorities and community leaders
- Implemented a selection process to choose community based organizations
- Provided logistical and financial support to targeted communities
Program Design Strategy Three

Design a community based treatment protocol

- Train community based organizations (CBO) on the signs of simple malaria, treatment protocols
- Developed strategies to evacuate severe malaria cases and 0-6 months
- Support home visits
- Design data collection tools
Program Design Strategy Four

Establish an education and prevention campaign

- Community members = community educators
- Held education session
- Used radio to pass information
- Provided basis information at the point of service provision
Program Design Strategy Five

Strengthen the national health system

- Rehabilitated or constructed 14 medical storehouses
- Trained 80 nurses community management of malaria cases and secondary effects and 56 on Malaria from a medical perspective
- Provided boats, motorcycles, computers and generator to ensure project monitoring
- Project monitoring conducted jointly with the National Program for the Fight Against Malaria
Program Design Strategy Six

Integrate community generated data into the national health data collection system

- Established a collaboration with the National Information System and Health Management (SNIGS)
- Determined what data could be immediately integrated into the national system
- Data is sent to regional data collection points so that it is integrated into the statistical data
- Financed a study on the feasibility of integrating community data into the SNIGS
Program Successes

Qualitative

- Caregivers saying:
  "the witchcraft that was killing our children is no longer in our village"

- Clinic staff saying:
  "our workload has been greatly reduced because of this program"
Program Successes - continued

Qualitative - National policy perspective

- Acceptance of the community’s ability to ensure basic health services
- Recognition, acceptance and integration of community generated data into national health data
- Request from the WHO that all community level data collected be sent to them for inclusion in their disease tracking reports
- Confirmation that the education materials and data collection tools are now the national tools
Program Successes - continued

Quantitative

- Over 650,000 children have been treated for malaria
- Over 2 million caregivers have been sensitized
- Children 0-6 month are now evacuated
- Over $265,000 has been collected from the sale of ACTs
- 14 warehouses were rehabilitated or built
- Caregivers recognizing the signs of malaria
- Reduction in the number of severe malaria cases
The Palu-Alafia Program

THANK YOU