

REPUBLIQUE DEMOCRATIQUE DU CONGO Ministère de la Santé Publique <u>Division Provinciale de la Santé Tanganyika</u>

Endline survey results



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Survey objectives

Assess

- care-seeking behavior for sick children,
- iCCM coverage,
- and caregiver knowledge, attitudes, and practices related to malaria, diarrhea, and pneumonia in RACE DRC project areas.
- perceptions of CHW services in the RAcE intervention areas



Methodology

- Cross-sectional cluster survey:
 - 30 x 30 multi-stage cluster sampling methodology.
 - 300 interviews per each illness across the project area.
- Respondents:
 - primary caregivers of children aged 2–59 months who had been sick in the past two weeks with diarrhea, fever, or cough/difficult breathing.



• Standardized sampling and tools for all sites designed by ICF.

Methodology (2)

- IRC recruited and trained 12 interviewers and 6 supervisors.
 Supervisors were existing IRC RACE staffs,
- ICF analyzed the survey data using Stata v14 and Microsoft Excel
- The survey collected 21 key indicators.



Pascaline, a volunteer relais communautaire, gently pricks Elessa's finger to draw blood for the rapid diagnostic test that will determine whether Elessa has malaria. WHO/G. Tapper

Endline Survey results



Rebecca Kalenga (left), an International Rescue Committee doctor, visits Pascaline and the other "relais communautaires" regularly, to mentor and monitor performance.

Sought care from appropriate provider



	Sought care fro prov			
Illness	Baseline	Endline	p-value	
	% (CI %)	% (Cl %)		
Overall	53.3	81.1	0.0001	
	(44.0 - 62.4)	(75.2 - 85.9)	0.0001	
Fever	55.2	83.5		
	(45.5 - 64.5)	(78.0 - 87.8)	0.0000	
Diarrhea	51.8	79.4	0.0006	
	(41.9 - 61.5)	(71.0 - 85.8)		
Cough with difficult	52.9	79.9	0.0002	
or fast breathing	(42.8 - 62.7)	(72.3 - 85.8)	0.0002	

Child received appropriate treatment

		Baseline	Endline	p-value	
	Illness (treatment)	Daseime			
		% (Cl %)	% (CI %)		
	Received appropriate				
57%	treatment				
		10.1	57.1		
	Overall	(7.6 - 13.2)	(49.2 - 64.7)	0.0000	
	Confirmed malaria (ACT	16.7	67.5		
CHW, 55%	within 24 hours)*	(7.7 - 32.4)	(58.0 - 75.7)	0.0000	
		1.6	52.9	0.0000	
	Diarrhea (ORS and zinc)	(0.6 - 4.4)	(42.7 - 62.9)	0.0000	
Other provider, 2%	Cough with difficult or	17.9	53.0		
Endline	fast breathing			0.0000	
	(amoxicillin)	(13.1 - 23.8)	(42.8 - 63.0)		
e treatment					



Care-seeking from ReCo

Illness –	ReCo was first source of care among those who sought any care		p-	Baseline N	Endline N
	Baseline % (Cl %)	Endline % (Cl %)	value	Buseline N	
Overall	0.7 (0.2 – 2.8)	73.7 (67.2 - 79.3)	0.0000	761	939
Fever	0.0	75.2 (67.9 - 81.3)	0.0114	271	363
Diarrhea	0.8 (0.2 - 3.3)	71.4 (61.5 - 79.6)	0.0000	250	290
Cough with difficult or fast breathing	1.3 (0.3 - 5.6)	74.1 (68.3 - 79.2)	0.0002	240	286



Rapid breathing assessment

Rapid breathing assessment	Baseline % (Cl %)	Endline % (Cl %)	p-value	Baseline N	Endline N		
All cough with difficult or fast breat	All cough with difficult or fast breathing cases						
Respiratory rate assessed by any provider	28.3 (21.3 - 36.4)	59.1 (48.2 - 69.2)	0.0003	297	313		
Cough with difficult or fast breathing	g cases in which	n care was sough	t from a Re	eCo			
Respiratory rate assessed by ReCo	N/A	78.3 (67.4 - 86.3)	N/A	3	235		
using timer or watch	N/A	72.8 (61.8 - 81.6)	N/A	3	235		
using counting beads	N/A	66.0 (54.5 - 75.8)	N/A	3	235		
Cough with difficult or fast breathing cases in which care was sought from a provider other than aReCo							
Respiratory rate assessed by provider other than ReCo	33.6 (25.1 - 43.3)	10.7 (5.3 - 20.5)	0.0013	235	103		

N/A = not applicable

Caregiver perception of ReCo

Caregiver perception of ReCo	Baseline % (Cl %)	Endline % (Cl %)	p-value	Baseline N	Endline N
View CCM-trained ReCos as trusted health care providers	11.3 (5.2 - 22.8)	97.7 (94.5 - 99.0)	0.0000	55	555
Believe CCM-trained ReCos provide quality services	9.4 (4.5 - 18.1)	96.0 (92.1 - 98.1)	0.0000	55	555
Cite the CCM-trained ReCo as a convenient source of treatment	13.2 (6.1 - 26.3)	99.6 (98.5 - 99.9)	0.0000	55	555
Found the CCM-trained ReCo at first visit (for all instances of care-seeking included in survey) **	N/A*	95.9 (93.1 - 97.6)	N/A	5	464

N/A = not applicable

* Percentage not available because denominator was too small for calculation

** Includes only caregivers who sought care from an ReCo for at least one sick child

Survey Limits

• 30 endline survey clusters included only 9 of the baseline clusters

21 of the endline survey clusters were selected through a variety of replacement methods prior to and during survey fieldwork by ICF and IRC.

- Security concerns throughout project implementation
- Therefore, the endline survey sample and results are not representative of the full RAcE project area
- There are known potential recall biases

Conclusion

- The presence of ReCos in communities has increased, as has overall careseeking and treatment for children aged 2–59 months.
- The necessary exclusion of many project areas from the endline sample, and non-random selection of some replacement clusters, renders the endline survey sample unrepresentative of the full RACE DRC project area.
- Of those caregivers surveyed, knowledge of the presence of ReCos in their communities was close to universal at 95 percent.

Merci