

MALAWI RACE PROJECT ENDLINE SURVEY RESULTS

TRANSCORP HILTON HOTEL, ABUJA, NIGERIA
24-27 OCT. 2017

SURVEY OBJECTIVES

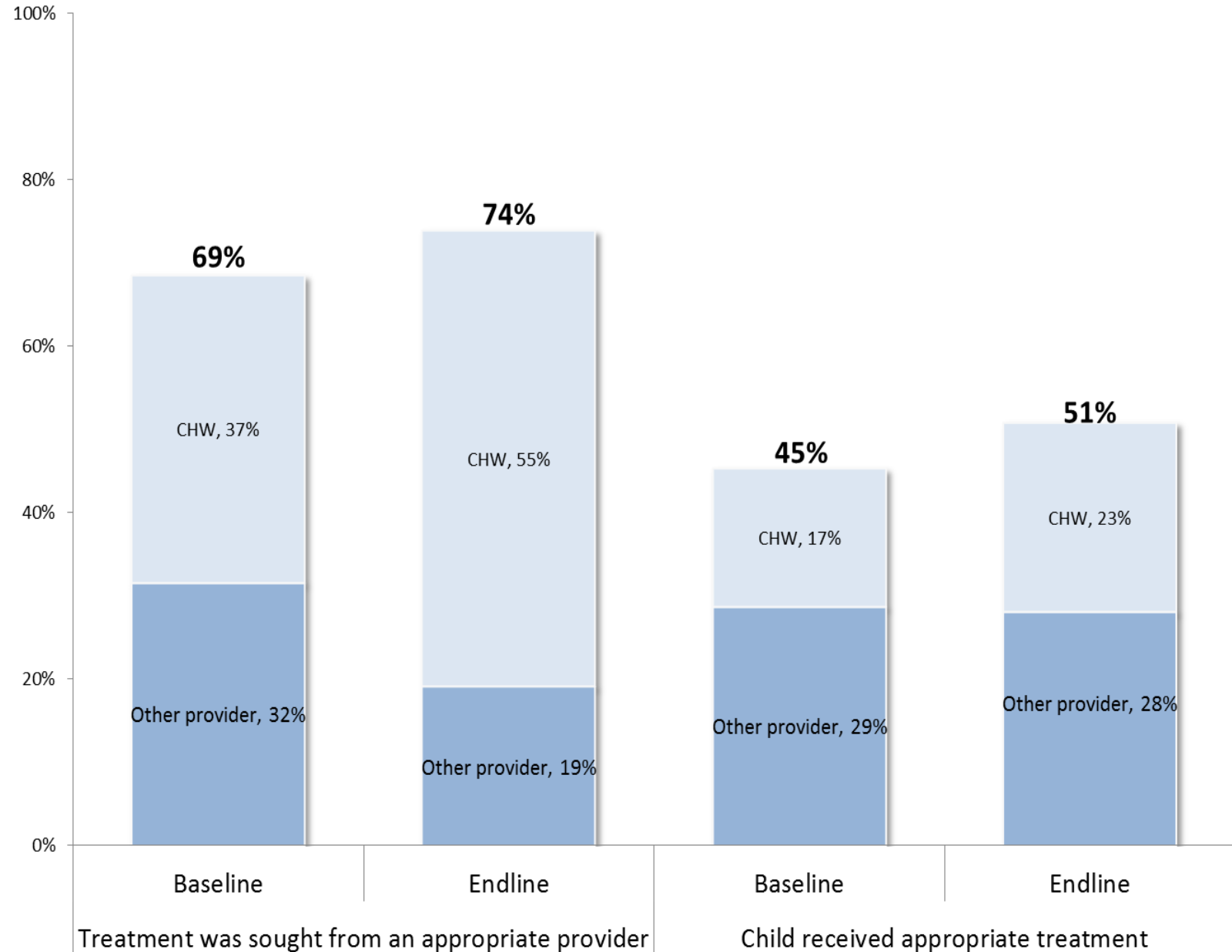
- ▶ **The objective of the RAcE endline household survey was to assess care-seeking behavior for sick children, iCCM coverage, and caregiver knowledge, attitudes, and practices related to malaria, diarrhea, and pneumonia in RAcE Malawi project areas.**
- ▶ **Malawi's National Statistics Office and Save the Children Malawi conducted the RAcE endline survey in August 2016 with technical assistance from ICF.**
- ▶ **The survey protocol received ethical approval from ICF's Institutional Review Board and from the National Health Sciences Research Committee in Malawi**

LIMITATIONS

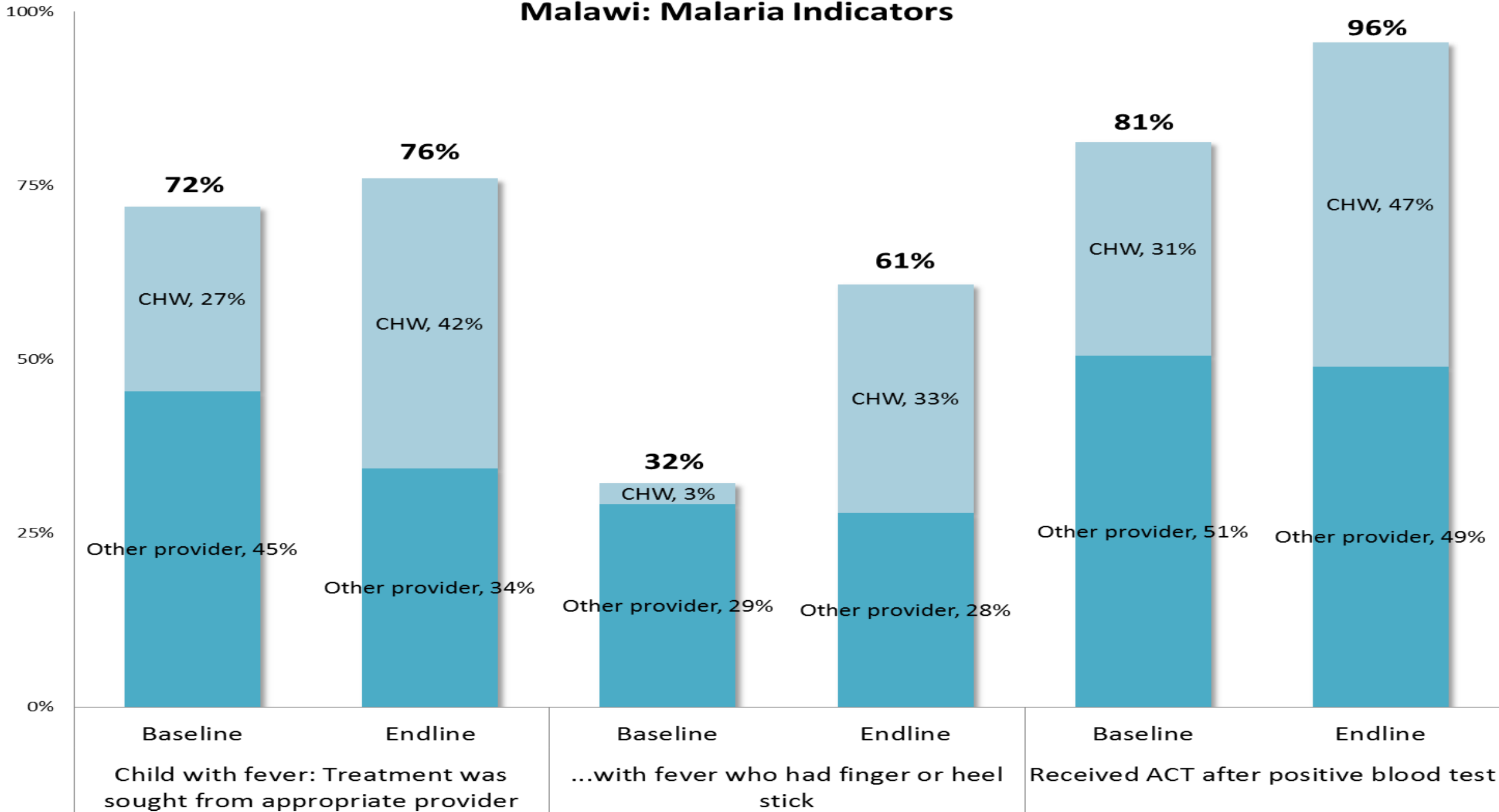
- ▶ Findings are representative only of the 4 original project districts as a whole
 - ▶ Not able to report on coverage differences among project districts
 - ▶ Does not include the 4 project expansion districts.
- ▶ Known potential biases are associated with indicators that rely on caregiver recall of malaria diagnostic testing and treatment for fever and cough with difficult or fast breathing
- ▶ The end-line survey included clusters that did not have HSAs actively implementing iCCM
- ▶ The sampling frame was based on census EAs, which do not align perfectly with iCCM-eligible areas; some EAs included in the sampling frame may have included areas not eligible for iCCM

CARE SEEKING AND TREATMENT

RACe Endline Survey Results: Malawi*

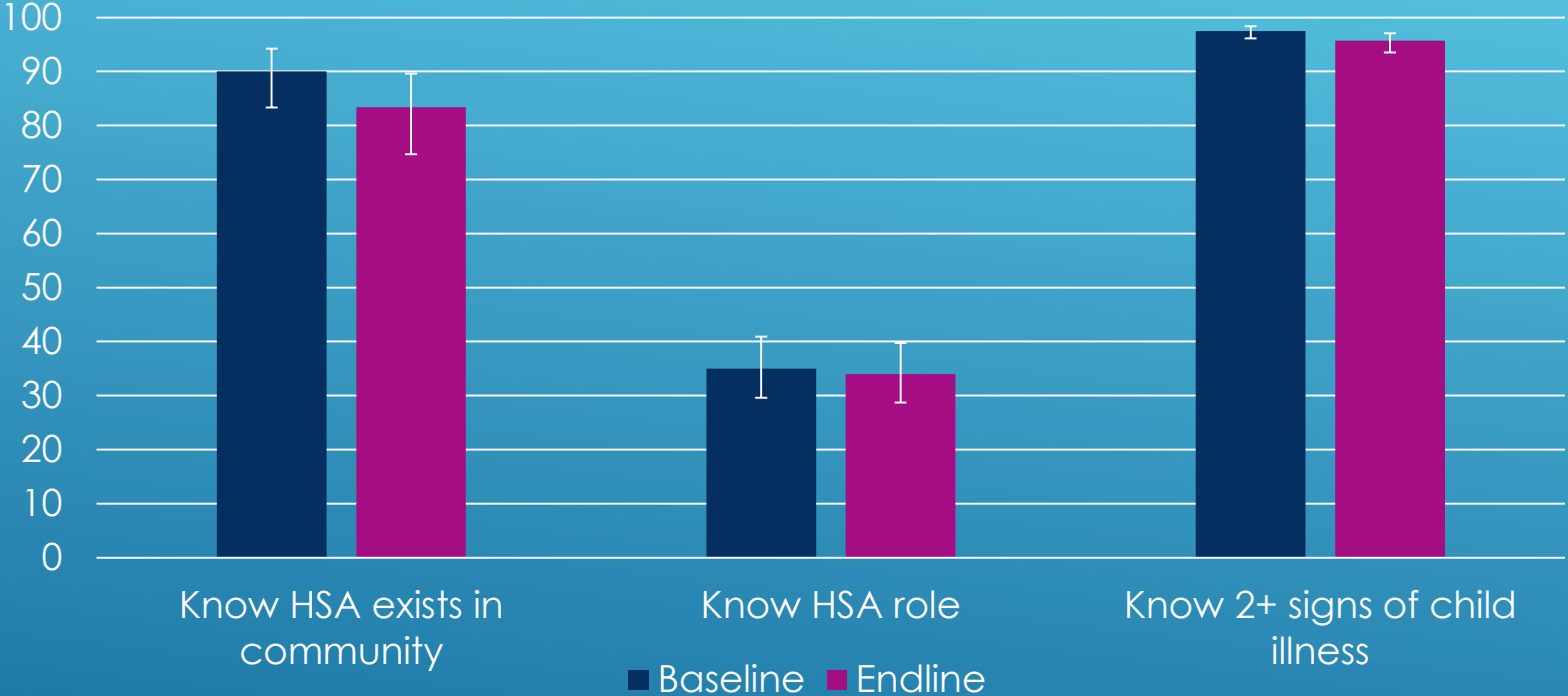


Malawi: Malaria Indicators



CARE GIVER'S KNOWLEDGE

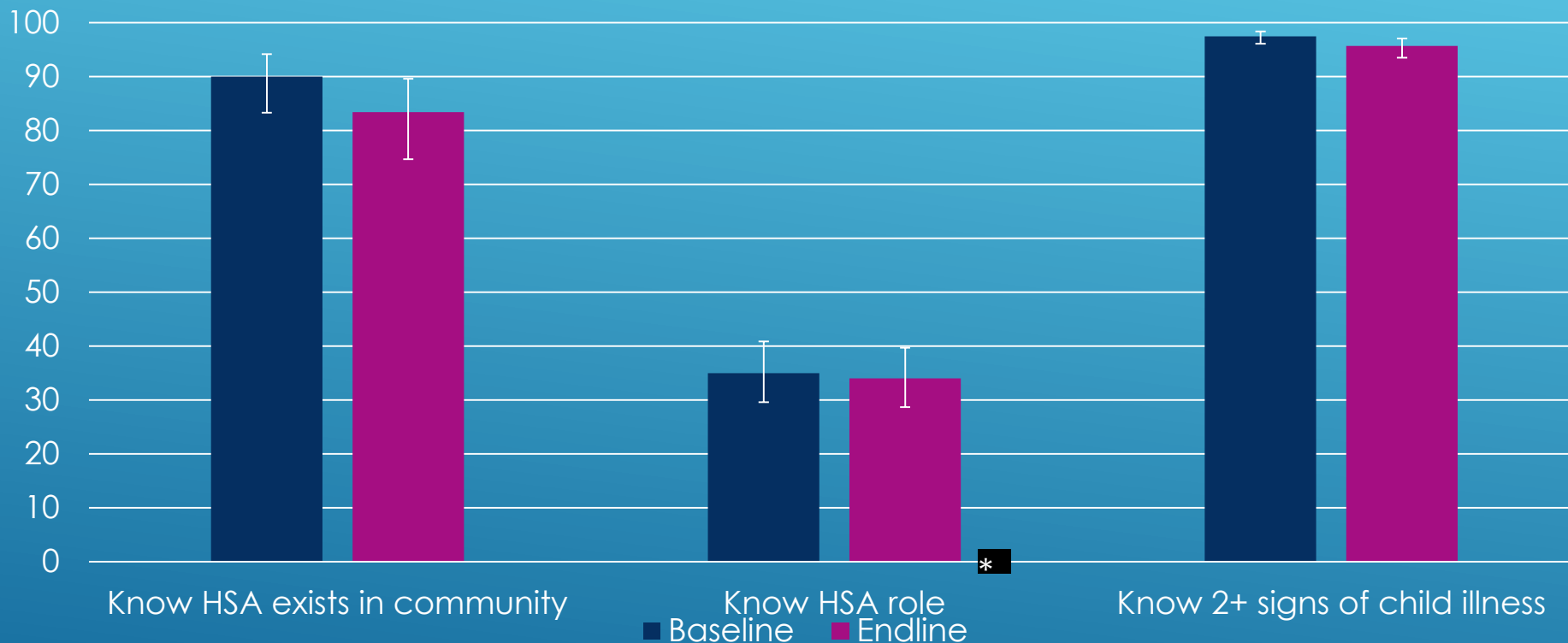
Percentage of caregivers of children aged 2-59 months who have been sick in the two weeks preceding the survey who are aware of the presence of the iCCM-trained HSA in their community, know their role, and know at least two signs of child illness



- * Only asked of caregivers who stated that there was a CCM-trained HSA in their community
- * Only asked of caregivers who stated that there was a CCM-trained HSA in their community
- * Only asked of caregivers who stated that there was a CCM-trained HSA in their community

RESULTS – CAREGIVER KNOWLEDGE

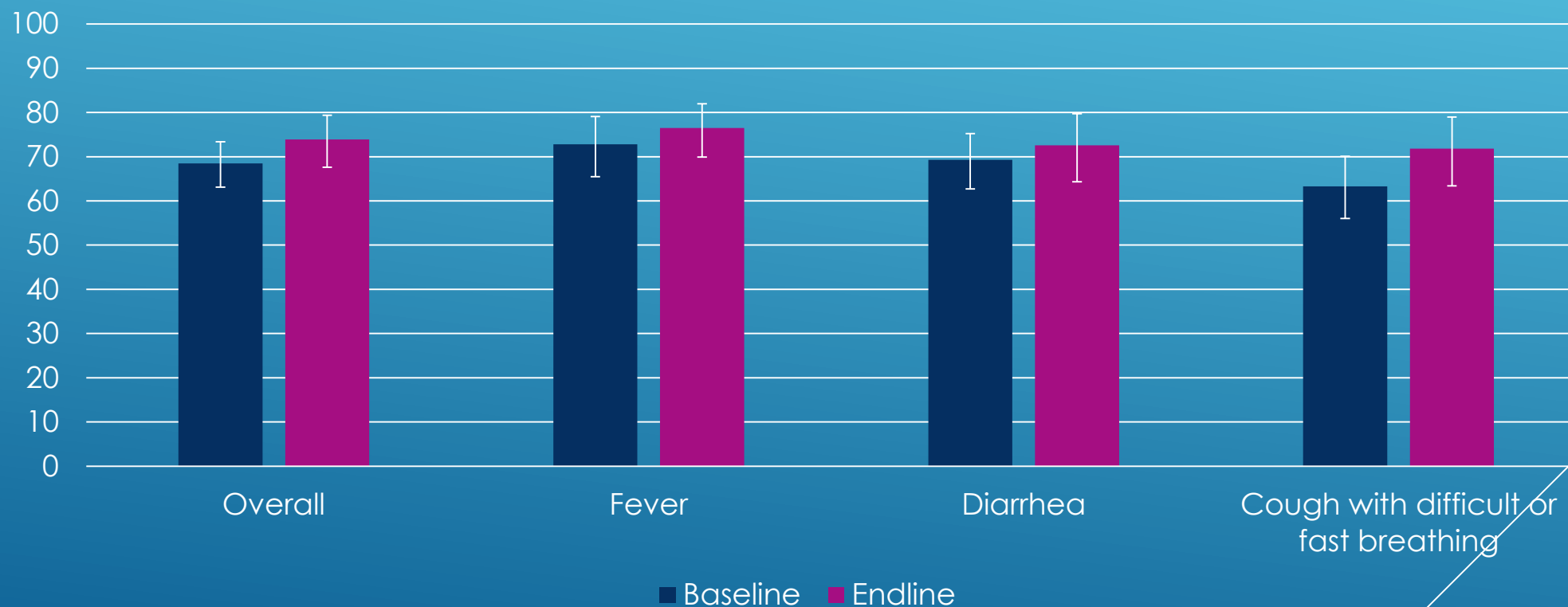
Percentage of caregivers of children aged 2-59 months who have been sick in the two weeks preceding the survey who are aware of the presence of the iCCM-trained HSA in their community, know their role, and know at least two signs of child illness



* Only asked of caregivers who stated that there was a CCM-trained HSA in their community

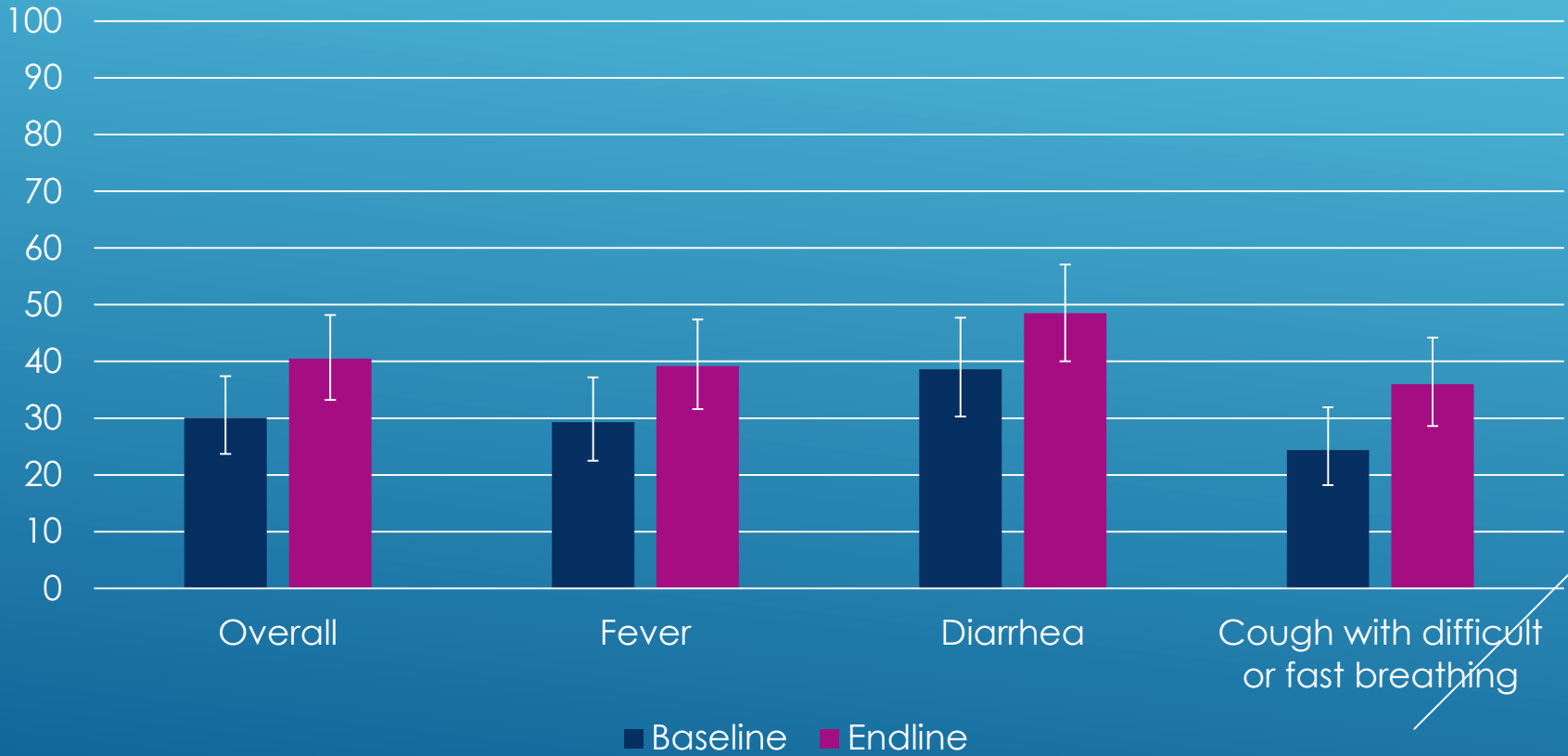
RESULTS – CARE-SEEKING FROM APPROPRIATE PROVIDER

Percentage of children aged 2-59 months who have been sick in the two weeks preceding the survey for whom advice or treatment was sought from an appropriate provider



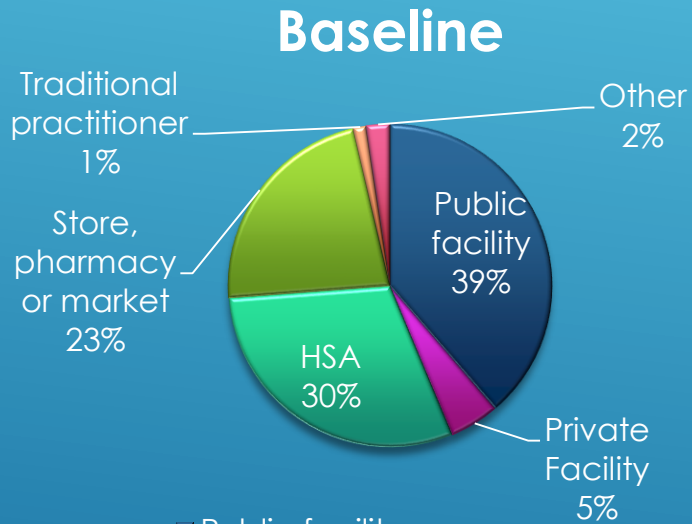
RESULTS – HSA AS FIRST SOURCE OF CARE

Percentage of children aged 2-59 months who were sick in two weeks preceding the survey who were taken to an HSA as the first source of care, among children for whom any care was sought

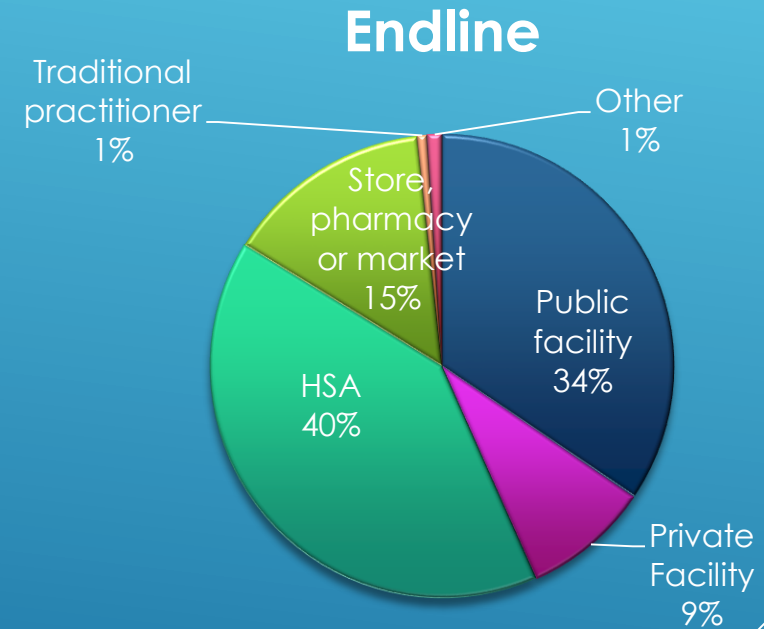


RESULTS – FIRST SOURCE OF CARE

Percentage of children aged 2-59 months who were sick in two weeks preceding the survey who were taken to a given location as the first source of care, among children for whom any care was sought



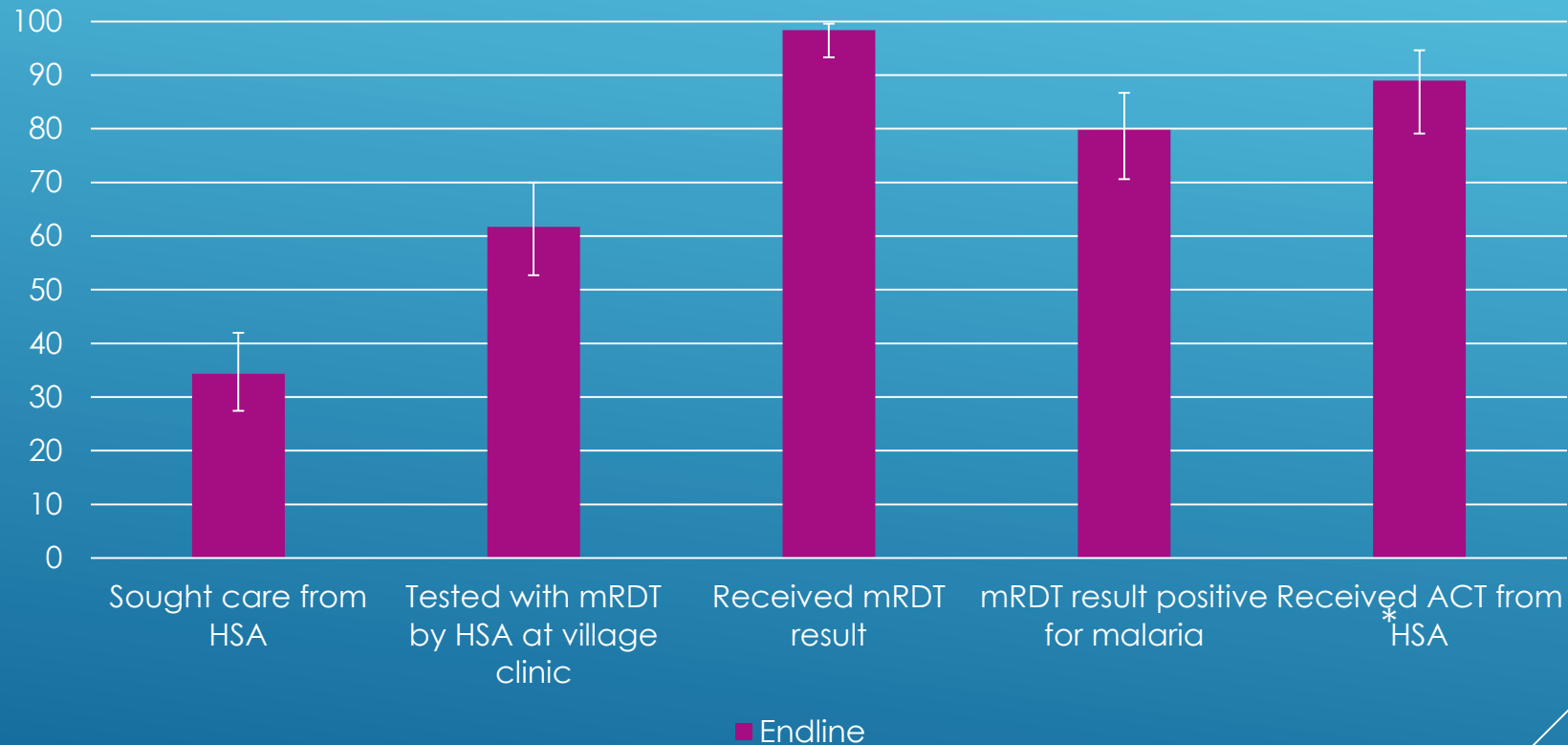
- Public facility
- Private Facility
- HSA
- Store, pharmacy or market
- Traditional practitioner
- Other



- Public facility
- HSA
- Traditional practitioner
- Private Facility
- Store, pharmacy or market
- Other

RESULTS – ASSESSMENT AND TREATMENT OF FEVER BY HSA

Percentage of cases of fever among children aged 2-59 months that sought care from an HSA, received a finger or heel stick (mRDT) from an HSA, received the test result, and, of those with positive tests, received treatment with ACT



*Includes only cases among children 5-59 months.

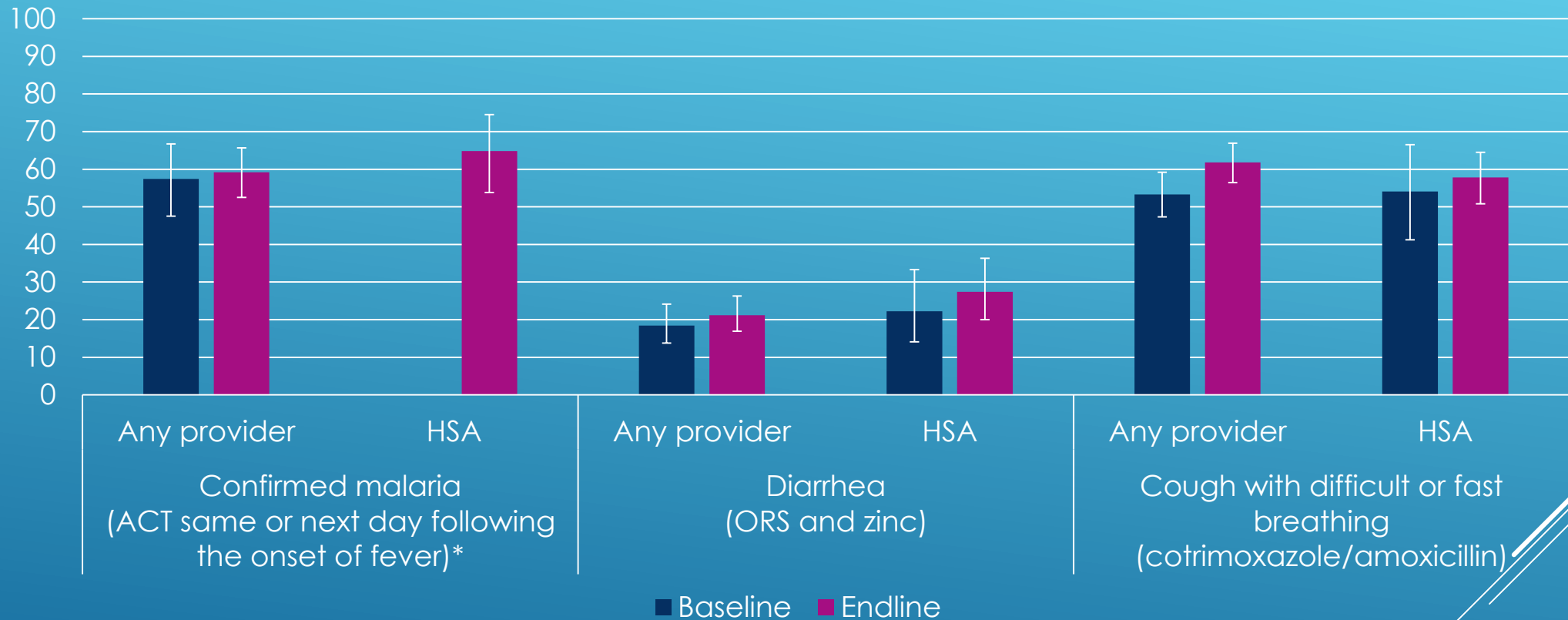
RESULTS – ASSESSMENT OF COUGH WITH DIFFICULT OR FAST BREATHING

Fast breathing assessment	Baseline	Endline	p-value	Baseline N	Endline N
	% (CI %)	% (CI %)			
All cough with difficult or fast breathing cases					
Respiratory rate assessed by any provider	25.6 (20.6 - 31.4)	38.5 (33.5 - 43.7)	0.0007	441	489
Cough with difficult or fast breathing cases in which care was sought from HSA					
Respiratory rate assessed by HSA	29.6 (21.0 - 40.0)	55.8 (46.0 - 65.1)	0.0003	98	147

RESULTS – TREATMENT SUMMARY: DIARRHEA AND COUGH WITH DIFFICULT OR FAST BREATHING

Illness (treatment)	Baseline	Endline	p-value	Baseline N	Endline N
	% (CI %)	% (CI %)			
Received treatment from any provider					
Diarrhea (ORS)	70.1 (64.4 - 75.1)	68.5 (63.2 - 73.3)	0.6644	364	387
Diarrhea (zinc)	21.4 (16.8 - 26.9)	24.0 (19.1 - 29.8)	0.4392	364	387
Diarrhea (ORS and zinc)	18.4 (13.8 - 24.1)	21.2 (16.9 - 26.3)	0.3976	364	387
Cough with difficult or fast breathing (cotrimoxazole/amoxicillin)	53.3 (47.3 - 59.2)	61.8 (56.4 - 66.9)	0.0165	441	489
Received treatment among those who sought care from an HSA					
Diarrhea (ORS)	82.9 (72.8 - 89.8)	76.7 (68.5 - 83.3)	0.3199	117	146
Diarrhea (zinc)	24.8 (16.2 - 36.0)	28.8 (21.3 - 37.6)	0.5250	117	146
Diarrhea (ORS and zinc)	22.2 (14.1 - 33.3)	27.4 (20.0 - 36.3)	0.4207	117	146
Cough with difficult or fast breathing (cotrimoxazole/amoxicillin)	54.1 (41.2 - 66.5)	57.8 (50.8 - 64.5)	0.6284	98	147

RESULTS –TREATMENT OF CONFIRMED MALARIA, DIARRRHEA, COUGH WITH DIFFICULT OR FAST BREATHING



* Denominator for confirmed malaria is restricted to cases of fever among children age 5-59 months with a positive malaria diagnostic test result.

SUMMARY OF KEY FINDINGS

- ▶ Endline survey results show significant increases over the course of the project in indicators measuring:
 - ❑ HSAs as the first source of care among those who sought any care
 - ❑ Malaria diagnostic testing
 - ❑ Respiratory rate assessment
- ▶ Because iCCM services were not available in all 60 clusters surveyed at endline, survey results were likely diluted, particularly relating to:
 - ❑ Knowledge of HSAs
 - ❑ Perceptions of HSAs
 - ❑ Care-seeking

FINDINGS MERITING QUALITATIVE FOLLOW-UP

- ▶ At endline HSAs were most often the first source of care, but a substantial number of caregivers sought care from other sources, even in areas confirmed to have an iCCM-trained HSA.
- ▶ Caregivers who did not seek care from an HSA at endline stated that they did not because they preferred another provider.
- ▶ Survey results revealed a delay in children with confirmed malaria receiving ACT treatment among all providers, including HSAs.
- ▶ Survey results revealed that a much larger percentage of children received ORS than received zinc, both at baseline and endline, among all providers, including HSAs.

THANK YOU

