## Performance of community health workers in treating children with pneumonia, diarrhea, and malaria - a cross-sectional study in Uganda

1. What were the findings/results in 3-5 bullets

- Stratified random sampling was used to select 80 CHWs from 13 sub-counties in 5 districts in Midwest Ugand. 15,468 patient records from 2012 were collected and entered into EpiData and analyzed using SPSS.
- $43 \%$ of cases seen received a single diagnosis (malaria, pneumonia or diarrhoa) whereas $2 \%$ received a triple diagnosis.
- $81.5 \%$ of all patients with malaria received appropriate doses of antimalarials. When comparing single (malaria alone) versus triple illness case management (malaria in combination with pneumonia and diarrhea) $84.1 \%$ and $70.1 \%$ received a correct dose of antimalarials, respectively. This represents a decline of $14 \%$ ( $95 \%$ CI 8.7-19.4, $\mathrm{p}=0.000$ ).
- Of the pneumonia patients, $89.2 \%$ received an appropriate dose of antibiotics. Of those with pneumonia as a single illness, $83.9 \%$ received an appropriate dose of antibiotics, compared to $77.9 \%$ of those getting triple illness case management (pneumonia in combination with malaria and diarrhea). The decline was $4.2 \%$ ( $95 \%$ CI-1.0 to $9.4, \mathrm{p}=0.100$ ).
- Of the diarrhea patients, $2.3 \%$ received an appropriate dose of zinc and ORS. Of those with diarrhea as a single illness, $2.3 \%$ received an appropriate dose of zinc and ORS compared to $5.4 \%$ receiving triple illness case management (diarrhea in combination with malaria and pneumonia

2. How the findings have influenced implementation in your country of study and any lessons learned

- The use of zinc for diarrhoea has been re-emphasised in supervision and refresher trainings.

3. How the findings can be applied to other countries/settings

- More complex treatment guidelines may lead to inappropriate treatment

4. Is there additional evidence or implementation knowledge gaps that have become evident from this research?
