

FINAL EVALUATION

MOTHERS, CHILDREN AND ADOLESCENTS: DEVELOPING MEASURES TO IMPROVE THE INTEGRATION OF HIV, TB AND MALARIA PREVENTION, SCREENING AND MANAGEMENT INTO HEALTH SYSTEMS

EVALUATORS: ISABELLE CAZOTTES AND RAÏSSA KOUROUMA - HMST
EVALUATION DATES: SEPTEMBER 2024 - JANUARY 2025



COUNTRY:
CÔTE D'IVOIRE



BUDGET:
€602,556



LEAD ORGANIZATION:
PACCI

PARTNERS:
ESPOIR POUR
LES ENFANTS



START DATE:
07/01/2021

END DATE:
30/06/2024

THE PROJECT

Background

The three major infectious diseases, HIV/AIDS, tuberculosis (TB) and malaria, represent a major public health challenge in Côte d'Ivoire, and require tailored control and prevention measures. The Côte d'Ivoire National Strategic Plan for Community Health 2022-2025 (known as PSNSC-CI) clearly outlines the role of community health workers (CHWs) and in particular the integration of all tasks they undertake in different areas of health, including the three diseases. The PSNSC-CI also aims to strengthen the system for data collection, monitoring and evaluation of community health interventions through a gradual digitization process of tablets being provided to CHWs.

Project operating model

The hypothesis behind the Proxisanté operational research project is that CHW interventions improve the health of relevant populations (pregnant women, infants, children, adolescents and young people), both in terms of malaria, tuberculosis and HIV and around maternal and child health. The introduction of new communication technologies, such as tablets connected to a server, also aims to improve patient referrals and information transfer to the relevant health facilities and to the departmental directorate of community health.

OBJECTIVES

Overall objective

Improving the integration of HIV, malaria and TB prevention and management into the health system at community level through community health workers.

Specific objectives

- ▶ Identifying and treating, among target populations, cases of simple malaria and referring cases of non-malarial fever or severe malaria to the health center to access care.
- ▶ Identifying suspected cases of tuberculosis, conducting screening of close contacts and carrying out community-based DOTS to break the chain of TB transmission.
- ▶ Identifying people infected with HIV, integrating them into care and strengthening adherence to treatment.
- ▶ Contributing to reducing maternal and child mortality in the project area.
- ▶ Developing and implementing an electronic health data collection technique to improve the health information system.

EVALUATION RESULTS

Relevance

The Toumodi district is considered at-risk for malaria, due to very high endemicity and a higher TB case reporting rate than the regional rate. The sub-prefectures of Djekanou, Kokoumbo and Kpouebo were selected as they had the largest cohorts of people living with HIV and the tuberculosis- and HIV-related risks were higher, especially in Kokoumbo, which is a gold mining area. The project objectives align with the needs initially identified at sub-prefecture level, however no cases of tuberculosis and very few cases of HIV have been identified during the project.

Effectiveness

The 24 CHWs under the project supported 50 households each through home visits and group talks, mainly with women but also with men and adolescents towards the end of the project. CHWs identified a large number of fever cases, mostly in children under five, who were tested and treated for malaria. Only a limited number of pregnant women were referred to the health center. A total of six people were referred for TB screening, none of whom were diagnosed positive. More than 2,500 HIV tests were carried out, of which three were positive and were referred for ARV treatment. CHWs recorded each household's health data on tablets to be integrated into monthly dashboards.

Efficiency

Project implementation was delayed due to the NGO, Alliance Côte d'Ivoire, who were identified as an initial partner, withdrawing. However, the NGO, EPE, was quickly selected as a replacement. Some activities were delayed due to the late supply of HIV testing supplies and anti-malaria treatment. The relevant programs supported the health district's supply demand in order to speed up the delivery.

Impact

The project demonstrated sustained involvement of CHWs in household monitoring around the integration of the three diseases. Management of simple malaria and prevention measures for children under five was an important outcome of the project, which has contributed to a decrease in severe cases. Detection of TB and HIV cases was extremely limited and CHWs were not in a position to follow up on treatments as originally planned. Maternal health outcomes remained modest, despite awareness sessions and targeting of pregnant women. Digital collection of health data by CHWs has contributed to an initiative by various actors, which is coordinated by the DSCPS (Directorate of Community Health and Health Promotion).

Sustainability

By the end of the project, CHWs were only involved occasionally for certain campaigns. Mechanisms put in place, such as CHW incentives, intensive household monitoring and intensive coaching, are difficult to replicate without additional funding. Ongoing efforts to analyze the data collected will support advocacy based on project results with stakeholders, such as CHW involvement in HIV testing.



Conclusions and recommendations

The Proximité project has demonstrated that CHWs can play a regular role in various thematic areas of health. They have acquired skills in communications and planning group talks, as well as collecting electronic data through sustained, ongoing support. Although this data can provide valuable information once analyzed, the integration of data into the DHIS 2 health information system needs to be followed up.

Proximité allowed for home-based care provision of child malaria cases and referral of severe cases, while also strengthening prevention measures. However, TB and HIV testing outcomes have been limited, with the exception of improvements in knowledge levels about these diseases.

Women expressed an increased sense of support, especially in terms of the health of their children. The opportunity to access health care at the community level was widely appreciated.

However, maternal health outcomes remained modest, despite awareness sessions and targeting of pregnant women.

The mechanisms put in place to fund and provide support to CHWs are difficult to replicate. Sustainability of interventions is a major challenge, particularly in terms of CHW remuneration.

Recommendations to the lead implementer and implementing actors:

- ▶ It is crucial to involve the Directorate of Health Information, Evaluation and Research to ensure integration of the data collected into DHIS 2.
- ▶ Enable digitization at all levels of the reporting chain to ensure direct data integration.
- ▶ Operational research protocols should be based on a logical framework and include an analysis plan that describes how data will be used and collected to ensure better project monitoring.
- ▶ In order to measure changes in behavior through awareness-raising interventions, it is necessary to implement mechanisms to assess the effectiveness of these interventions.
- ▶ Develop measures to ensure the sustainability of interventions and carry out research to identify alternative funding involving local authorities and communities for long-term support of CHWs.
- ▶ Documentation of project results would support and influence the implementation of national approaches and potentially scale-up.

Recommendations to institutional partners:

- ▶ Use the operational research results to advocate for the implementation of an integrated CHW package
- ▶ Continue to advocate for community health financing, including a CHW support system for an integrated approach and sufficient incentives, through exploring sustainable financing mechanisms.
- ▶ Facilitate the integration of community health data into DHIS 2 by scaling up digitization and by including it in the PSNSC-CI budget and in funding opportunities.

Recommendations for L'Initiative:

- ▶ Guidance is needed for operational research projects to develop logical frameworks that align with their hypotheses to guide the analysis of the large cohorts of data collected.

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