

Case Study: Improving malaria policy in Cross River State, Nigeria

'Killer' fact

Timely audit of health care practice followed by evidence-based interventions driven by an appropriate communication strategy will improve quality of health practice and overall outcome of care.

Summary

Using a cohesive, evidence-based policy and communication strategy, working with the Ministry of Health at Federal and State level, the Effective Health Care Research Consortium Partner, the Nigeria Effective Health Care Alliance has effectively contributed to the roll out of the use of artemisinin-based combination treatments (ACTs) for malaria in Cross River State, Nigeria and monitored the effectiveness of the roll out.

The aim was to bring together international research with local audits with an effective strategy in communication and influence to bring about change. The Alliance, as part of the global Roll Back Malaria initiative, had been working on a national ACT strategy following the publication of the World Health Organization (WHO) Guidelines in 2006. As part of the Research Consortium, an audit was carried out in the State and showed that less than 10% of doctors prescribed ACTs.

The Alliance then worked with the State Roll Back Malaria Department to develop, implement and evaluate a communication strategy that targeted policy makers, health practitioners and the general public with clear messages on the efficacy, safety and cost-effectiveness of ACTs. A variety of behaviour change communication methods were used including seminars, workshops, radio/TV talk shows, briefing sessions for policy makers, village square meetings with demonstrations, folksongs etc.

Later surveys conducted by the State Roll Back Malaria Department partners and the State (November 2008, May 2009) showed that 25–28 % of under-five children with malaria were treated promptly with an ACT. This figure falls far short of the national coverage target of 80% but is better than the national coverage rate of 15.5% reported for the recent Nigeria Demographic and Health Survey (2008).

In response to the technical advice of the Alliance, based on research evidence synthesized in Cochrane Reviews, the State Roll Back Malaria Department has increased budgetary provision to scale up home management of malaria as a strategy to ensure that at least 80% of under-five children with malaria receive appropriate treatment within 24 hours. This is a key indicator in achieving the malaria treatment coverage target.

Impact

Survey results shows that more under-five children are receiving prompt treatment for malaria with ACTs. The audit showed poor practice and led to a communication intervention to improve quality of practice and uptake of this evidence-based intervention.

The investment in procurement of ACTs (by the Global Fund and State Government) is now better utilized by increasing the knowledge base of health professionals, policy makers and community members.

The medium term impact of the research is the fact that the State Roll Back Malaria Department has developed the tendency to find and apply reliable evidence for policy and planning. The long-term impact is to reduce the number of children dying from inappropriately treated malaria.

Researchers

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