

Preliminary findings from baseline studies in CRS Cameroon's Malaria-HIV-Education multi-sectoral Project



A mother and son participating in the KIDSS project in the Littoral region. Photo-credit: Jen Lazuta, CRS.





Accelerating the end of Malaria across sectors

Presentation Outline

Background/Overview
Objectives
Methodology
Results
Conclusion/Next steps



Background/overview of the project

- Malaria and HIV infections are two leading causes of morbidity and mortality in Cameroon.
- Malaria and HIV co-morbidity is associated with poor outcomes for both diseases.
- Malaria contributes to 5-8% of all causes of non-attendance among school children in Africa, which is equivalent to 50% of all preventable absenteeism.
- A pilot intervention to reduce the effects of Malaria on HIV and schooling outcomes among OVC and their families in a PEPFAR funded project being implemented by CRS using a multisectoral case-management.

Objectives

Specific objectives of the pilot baseline study were;

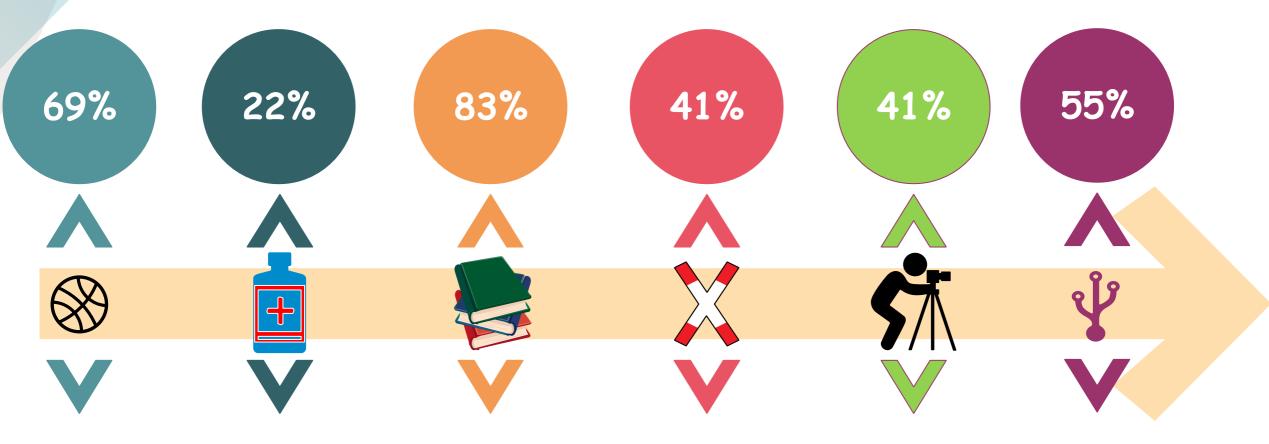
- To examine knowledge level on the effects of malaria on HIV among teachers, caregivers, and local health care providers.
- To assess knowledge level on the effect of malaria on education outcomes among teachers, caregivers, and local health care providers.
- To determine the prevalence of school absence as a result of suspected malaria incidence among school going OVC.

Methodology

- Baseline assessment used cross-sectional design. Mixed method approach was applied to collect quantitative and qualitative data through both secondary sources and primary sources
- Study scope was limited to respondents who are already enrolled in KIDSS within selected health districts of the Littoral and Southwest regions. Schools and health facilities were also limited within the same health districts.
- Stratified random sampling technique was adopted to inform selection of project participants.
- Project database was used to determine target population sampling frame
- Purposive sampling was used to identify key informants within same health districts
- Questionnaires and KII guides were used to collect data upon pre-testing and training of independent enumerators
- Descriptive analysis was used to analyze quantitative data while qualitative information was used to complement findings

Baseline Results

• Key preliminary findings from the baseline data demonstrate that;



Caregivers reported Malaria-HIV coinfection worsens illness

Reported Malaria affects HIV drug adherence School-teachers have witnessed cases of suspected Malaria amongst pupils

Absenteeism in school is due to suspected Malaria symptoms

Cases affected on performance

School absenteeism lasts for 3-5 days



Conclusion/Next steps

- The prevalence of malaria in the last three months prior to data collection was considerably high among respondents and correlates with the relatively low proportion of respondents who sleep under an insecticide-treated net (ITN) throughout the year.
- Incidents of Malaria is associated to absenteeism and low performance among school going children
- Schools do very little to support prevention and treatment of malaria

CRS will use study findings to implement effective strategies and establish multisectoral collaborations to mitigate the effects of malaria on education among vulnerable populations.

Questions

Thank You

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