Presentation Title: Tanzania MiP updates
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COUNTRY OVERVIEW

Estimated population = 54,285,757

Expected # of pregnant women = 13,339,074

Live births = 1,730,613

Number of malaria cases = 6,123,133

MMR = 556/100,000
NMR = 25/1,000
U5MR = 67/1,000
IMR = 43/1,000
PROGRESS ON KEY MIP INDICATORS

2015-16 TDHS-MIS  2017 TMIS

% coverage

IPTp1  69%  83%
IPTp2  35%  56%
IPTp3  8%  26%

% of preg women using an ITN the night before the survey

% of the population that slept under an ITN the night before the survey

MIP indicators
PROGRESS ON ANTENATAL CARE INDICATORS

Source DHIS2 - Tanzania
CADRES SUPPORTING COMMUNITY EFFORTS TO ADDRESS MIP

• Health Care Providers in health facilities creates facility and community linkage

• Community Health Workers at community level through Household visits and health education talks at community level e.g use of:
  • Long-lasting Insecticide-treated Nets (LLINs)
  • Intermittent Preventive Treatment (IPTp)
  • Prompt diagnosis and effective treatment

• Civil Society Organizations (CSOs)
  • Implements SBCC activities eg Cinema shows, Gulio la Afya, Radio talks & technical support during monthly meetings
TRAINING AND SUPERVISION OF CHW

• Those trained for three weeks using RM2NCAH Training Package
• Other currently new CHW are trained for 1 year
  • The cadre has been formalized and standards are set by NACTE syllabus
• The CHWs are supervised on monthly basis by the health facility supervisors.
Community MiP information/data is collected through:
- Client register which captures client information and services provided by CHWs
- Health facility Information/data is collected through:
  - Client Card RCH 4, Register Number 6, and Daily Tally Sheets Number 6.
  - Information on commodity stock levels is collected daily using ledger book number 4.
POLICY ISSUES RELATED TO CHWS

CHALLENGES

• Shortage of SP in health facilities
• Policy for CHWs distributing SP during home visits

LESSONS LEARNED

• Education at the community about importance of SP and use of ITN in the prevention of malaria in the general populations and vulnerable population such as pregnant women and under-five is important
**IMPLEMENTATION ISSUES RELATED TO CHWS**

**CHALLENGES**
- CHW’s trained are from few wards
- Partially trained CHWs are not conversant in malaria services
- Social norms related to use of ITN in the households

**LESSONS LEARNED**
- Those few trained CHWs were able to make a follow up of pregnant mothers and their children in malaria prevention such as use SP, LLINS, and early fever detection
KEY TAKEAWAYS

• Mapping of CHWs and give them orientation for community package interventions
• Currently priority of community malaria interventions in Tanzania is only SBCC) eg Cinema shows, Gulio la Afya, Radio talks, provides IEC materials
NEXT STEPS/SUPPORT NEEDED TO MOVE FORWARD

• Adopt the best practices from other countries like Rwanda so that the lesson learnt will help us to implement integrated Community Case Management (iCCM) in our country

• Develop guidelines and training materials for implementation of iCCM
Mothers and Babies accessing community Malaria counselling and testing during inauguration of World Malaria Day (WMD) in Kasulu, Western Tanzania

THANK YOU!