



## Progress in Reducing Malaria in Kenyan Children

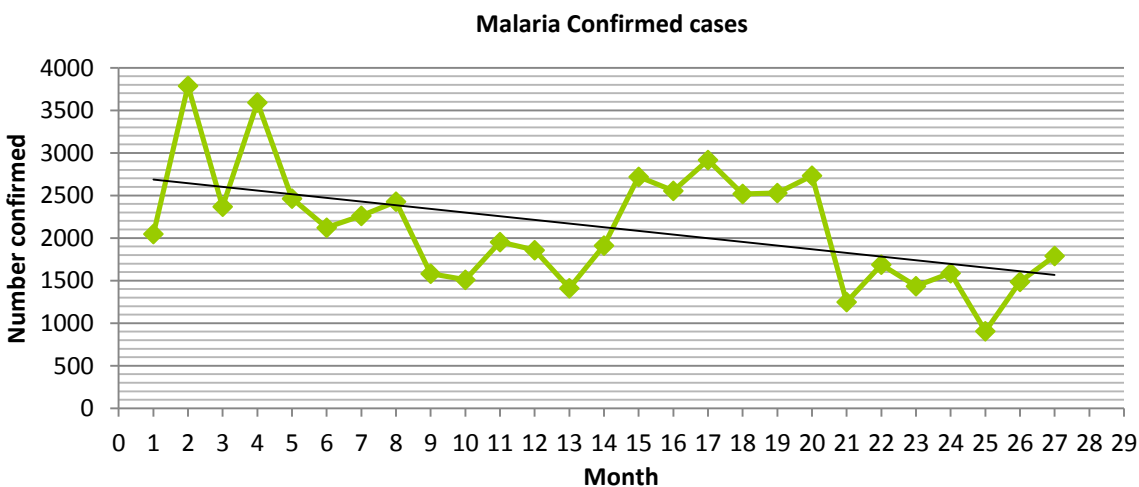
Report for August 2012

Malaria is the number one cause of illness in children in Kenya. In the fight against malaria in rural Kenya, the needs are great but the solutions are simple. With inexpensive resources such as test kits, microscopes, and mosquito nets, HealthRight's project saves hundreds of children's lives every year.

For the past three years, HealthRight has been working to reduce the impact of malaria in 21 communities in the rural areas of the North Rift Valley of Kenya. In total, the project serves over 750,000 people who suffer frequently from the devastating effects of malaria – including death. And, the project data show that the efforts are having a positive impact. In the past two years, malaria rates have been cut by almost 50%! The table below presents data collected from the health facilities during the months of high malaria transmission.

	April – June 2010	April – June 2012	Impact
<b>Number of malaria tests performed</b>	17,827	18,033	<b>1.2% Increase</b>
<b>Number of positive test results</b>	8,204	4,182	<b>49.0% Decrease</b>

In addition, the graph below shows a clear decline in the number of malaria cases over the past 27 months in the project areas.



HealthRight's project has contributed to these impressive results by working to raise awareness among families and communities about the risks and prevention of malaria and by working with health facilities

to provide testing, treatment, and mosquito nets to those most at risk. The details of our activities over the past three months are described below.

### 1. Strengthening Communities and Families:

HealthRight's project takes a two-pronged approach to strengthening communities and families. The project partners with ten local community-based organizations who serve to raise awareness in their communities about malaria. And the project supports community health workers (CHWs) who each serve 20 households in their community. In total, this project supports 1,050 CHWs who reach 21,000 families.

The project continues to disseminate malaria messages at community meetings, churches and during market days. In addition, the project has been delivering malaria messages very successfully through school visits. In the past three months, visits to schools have accounted for the delivery of malaria messages to **14,045** school children who can carry those messages home with them. In total, the project reached **29,659** community members in the past three months.

The Community Health Workers who are trained and supported by the project visit families once every three months to offer health information and to make referrals to the health facilities. Over three months, **17,015** home visits have been conducted and over **10,850** people have been referred for malaria services at one of the facilities.

### 2. Strengthening Health Facilities and Clinics:

In the past three months, HealthRight has focused on improving the diagnosis of malaria in the 21 health facilities. The gold standard for malaria diagnosis is through use of a microscope to view patient blood samples. In June, HealthRight donated six microscopes to facilities that needed them. This donation is in addition to the five microscopes donated last year. Furthermore, the project team has been performing quality checking of malaria lab diagnoses to guarantee accuracy of the results. Some of the project data showed that the accuracy of lab diagnosis varied between 50 – 100% with an average score of 72.5%. In most sites, the ability of lab technicians to make an accurate malaria diagnosis was poor. In response to this need, HealthRight organized training for 40 lab technicians throughout the project districts. The week-long training was organized to improve the quality of malaria diagnosis by using microscopes as well as the Rapid Diagnostic Tests, which provide a malaria diagnosis from a single drop of blood on a test strip.

Each month, HealthRight provides vehicles and refreshments for facility clinical staff to conduct ten rural outreach clinics. The clinics are used to reach particularly remote villages for which access to health services is very challenging. This quarter, these clinics reached a total of **2,238** people with ANC services, HIV testing, immunizations, acute care services and health education.

### 3. Increasing the Use of Mosquito Nets

Use of mosquito nets has proven to reduce malaria and is a strong contributor to the project's success. In previous years, health facilities in the North Rift Valley would struggle to maintain stocks of mosquito nets for distribution to pregnant women and children. Since the start of this project, the HealthRight team has been working with our partner – Population Services International – to distribute nets to all of the facilities. Reducing stock outs means that more families receive the nets when they need them most.

In addition, the trained CHWs work with families during their home visits to verify that nets are available and that they are being used. The CHW assists in hanging the net when needed and explains that pregnant women and children are the most at risk of death from malaria and should use the nets every night.

#### 4. Future Directions:

In the coming months, HealthRight will focus on improving the skills of health staff in the project areas at treating severe malaria cases – those most likely to cause death. In addition, HealthRight will distribute nearly 5,000 rapid diagnostic tests in July to partner facilities with high rates of malaria to increase their testing rates.

And in August, partner community organizations will receive training on the basics of organizational management including developing strategic plans and being effective supervisors. This training will ensure that these partners can continue their good work in the communities even after the end of HealthRight's involvement.

#### 5. Donor Appreciation!

HealthRight would like to thank everyone that has contributed to this project so far. The work that you are supporting is having an impact. It is making a difference to children living in these rural communities and saving their lives. We appreciate your generosity!



*Community Health Workers in Konyao, North Pokot*