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MEDICAL CARE DEVELOPMENT INTERNATIONAL

## Accelerating the Reduction of Malaria Morbidity and Mortality (ARM3) | BENIN

### Case management: bringing malaria education, prevention, and treatment to the people



#### ARM3 AT A GLANCE

**DONOR:** USAID/PMI

**PERIOD:** 2011–2018

**PRIMARY OBJECTIVE:** To assist the Government of Benin (GOB) to rapidly and significantly reduce both the number of malaria cases and malaria-related mortality, as part of its efforts to bring malaria deaths to zero and eliminate malaria as a public health threat by 2030.

**MAIN APPROACH:** ARM3 technical experts worked closely with Benin's National Malaria Control Program (NMCP) to intensify malaria interventions and surveillance at all levels, with continuous capacity building including training, coaching and mentoring of NMCP and health-facility staff.

**SUSTAINABILITY:** The ARM3 methodology was designed for sustainability. In 2014, ARM3 transitioned from an implementing role to an advisory role. The NMCP is now fully in charge of malaria interventions.

**NATIONAL IMPLEMENTERS:** National Malaria Control Program (NMCP) of Benin with technical assistance from Medical Care Development International and other partners.

**POPULATION REACHED:** Over 11 million—the entire population of Benin—in all 34 health zones.



#### CHALLENGE

For the Republic of Benin to reach its goal of nearly eliminating malaria by 2030, Beninese families need malaria education, prevention tools like long-lasting insecticidal nets (LLINs), access to preventive treatment for pregnant women, rapid diagnosis and prompt treatment in their own villages and neighborhoods.

#### RESPONSE

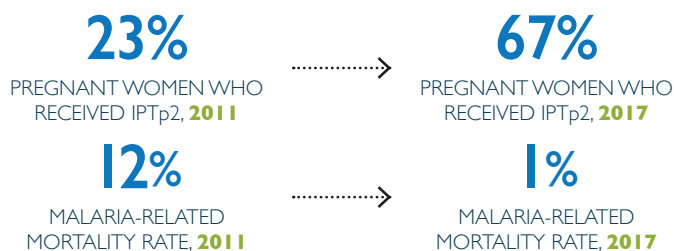
**ARM3 has worked closely with the Ministry of Health of Benin to revise policies, guidelines, and tools for integrated community case management (iCCM).**

The project also strengthened the capacity of local NGOs and supported several health zones to recruit, train, equip, and supervise a large cadre of voluntary community health workers (CHW) for integrated community case management. Residents in these areas can get rapid diagnostic testing and treatment in their own villages or neighborhoods.

In addition, ARM3 assisted the NMCP in introducing injectable and rectal artesunate in hospitals for more effective treatment of severe malaria.

#### OVERALL PROJECT RESULTS

The community-based case management system contributed significantly to overall results of ARM3:



#### A GRATEFUL VILLAGE

Fresh from a five-day training in case management, a CHW examined a small village boy with convulsions and other symptoms of severe malaria. While his parents were reluctant to make the 10 km trip to a health facility, the CHW knew he had to insist. He arranged transport and even accompanied the family by motorcycle. Unlike others who had not made the trip, the child survived.

Later, the public-health doctor who had trained the CHW came to check on the child's progress. Rather than the suspicion with which villagers often greet officials, he received a warm welcome. Recognizing the value of his training, villagers gifted him with a sheep.

# ARM3: Integrated Community Case Management



## CONTEXT

**Malaria is endemic throughout Benin.**

**Among pregnant women and children under five, it is the leading cause of illness and death.**

**The disease also stunts the economy. The World Bank estimates that Beninese households spend 25 percent of their income on preventing and treating malaria.**

**An estimated 90 percent of the population lives more than 10 km from a health center, making it vital to offer basic malaria services at the community level.**

[www.mcdinternational.org](http://www.mcdinternational.org)



### For more information:

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## APPROACH AND METHODS

**Policies and protocols:** ARM3 provided technical assistance to the NMCP to:

- Develop standard operating procedures (SOP), manuals, and curricula to align with the World Health Organization's malaria protocol, in a way that is tailored to the Beninese environment;
- Produce standard tools for community-level data quality assessments

**Training:** ARM3 supported the NMCP in training

**1456** community health workers in case management, including rapid diagnostic testing and when to refer patients to a facility; plus

**178** members of NGOs and district health departments.

**mHealth:** From 2011-15, ARM3 assisted the Benin Ministry of Health to introduce an mHealth program. The program equipped 136 community health workers in two health zones with android phones and solar chargers for collecting community-level health data and receiving health care support via the mobile-health platform CommCare. ARM3 also provided technical assistance on CommCare to related programs in Benin: Advancing Newborn, Child, and Reproductive Health (ANCRE) and Advancing Partners and Communities (APC).



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