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# IMPROVING CHILD HEALTH IN TANZANIA

## BASICS III

## INTRODUCTION

USAID/BASICS' Tanzania country program featured technical assistance for improved care seeking practices and access to essential drugs for the treatment of childhood illness in the private sector and an assessment and preliminary planning with the Tanzanian government to ensure that children represented at least 20% of those who receive antiretroviral therapy for HIV in the country.

Between 2006 and 2008, USAID/BASICS worked to integrate a child health component into the Ministry of Health and Social Welfare's Accredited Drug Dispensing Outlet (ADDO) national roll-out strategy. The ADDO strategy, more popularly known in Tanzania as *Duka La Dawa Muhimu*, is based on setting quality standards for local drug shops and accreditation for dispensers. An important element of the strategy was the use of radio to mobilize communities to go to the local ADDO for advice on caring for children when they are ill, giving and completing medicine, recognizing the danger signs of malaria, diarrheal disease, and pneumonia in children, and referring sick children to health facilities to ensure prompt and appropriate treatment.

USAID/BASICS' principle contributions to these objectives included conducting formative research on health worker and community attitudes and practices for preventing illness and caring for sick children; strategic planning and behavior change communication capacity building with community leaders, ministry staff and local and national radio journalists; and producing and broadcasting radio spots on child health issues. The Rational Pharmaceutical Management Plus Project (RPM Plus) of Management Sciences for Health (MSH) was a partner in this effort.

In 2006, USAID/BASICS also led an assessment of pediatric HIV care and treatment service access in three regions. The assessment team—which included experts from CDC, USAID, and the Elizabeth Glaser Pediatric AIDS Foundation—documented missed opportunities for identification, care, and treatment of HIV-exposed and infected infants and children and made recommendations to increase access to care and treatment services.

Finally, in November 2007, as part of its mandate to support the Global Partnership for Maternal, Newborn and Child Health, USAID/BASICS contributed to development of the One Maternal, Newborn and Child Health Plan in Tanzania (the OnePlan).

## ACTIVITIES AND RESULTS

### Malaria, Pneumonia, and Diarrhea

#### *Integrating a child health component into the Ministry of Health and Social Welfare's national roll-out strategy for Accredited Drug Dispensing Outlets (ADDOs)*

Pursuing the integration of child health into the ADDO program as a way to improve accessibility to essential medicines for malaria, pneumonia, and diarrhea began with qualitative and quantitative assessments. Community knowledge and beliefs on childhood illnesses and care-seeking behaviors were assessed through focus group discussions with men, mothers and grandmothers and in-depth interviews with community leaders and traditional healers. This information was complemented by a baseline survey to determine the quality of services provided by the ADDOs including care-seeking behavior and medicine use by caretakers. Tools used for the quantitative assessment included:

1. A dispenser questionnaire for ADDOs
2. An ADDO record review
3. Simulated client scenarios in the ADDOs
4. A household survey

These studies were designed to inform community mobilization and behavior change communication strategies to promote the ADDOs as an option for appropriate advice and treatment of common childhood illness including referral. More specific to the work carried out by BASICS, the formative assessments provided a foundation for the creation of targeted radio spots on child health tailored specifically to the needs and interests of audiences living in that particular area of the country.

During the summer of 2006, USAID/BASICS awarded a contract to Tanzania's Centre for Enhancement of Effective Malaria Interventions (CEEMI) to conduct qualitative formative research on community knowledge and beliefs about childhood illness and care seeking behaviors in one region (Ruvuma) and a baseline survey in two regions (Ruvuma and Ulanga). The results showed that ADDOs have been an important source of medicine for young children (especially amongst the poorest members of the community), but their use is affected by caretakers' inconsistent knowledge. As noted in the qualitative study —

*Myths and misconceptions...are influencing how children are being cared for and how illness is being prevented and treated. For example, parents did not have a good understanding of some preventive methods to avoid disease, such as the significance of hand washing with soap, nor did they understand the importance of completing a full course of treatment for illness. People coming from the low socio-economic strata in rural areas...suffered the most, with poor access to formal health care services and an inability to afford even basic medical care, compounding the problem.*

The quantitative baseline study further suggested that quality standards set out for ADDOs were not being fully satisfied—

*ADDOs are intended to fill the gap of providing quality-assured basic essential medicines and services when medicines are out of stock at government health facilities or when government health facilities are far away and not easily accessible...However, dispensing practices need to be improved at ADDOs to properly manage childhood illness, as defined in the IMCI guidelines for Tanzania. Although the ADDO accreditation training stipulates that dispensers receive standard training in basic pharmaceutical management and recognition of common illnesses, including malaria, (pneumonia), and diarrhea, inappropriate dispensing practices with repercussions for child health still occur.*

Results of this research were shared through large-scale dissemination meetings attended by representatives of with the Ministry of Health, partner organization, communities, and media outlets

Click [here](#) to download *Improving Child Health through the Accredited Drug Dispensing Outlet Program*.

Click [here](#) to download *Improving Child Health through the Accredited Drug Dispensing Outlet Program: Baseline Survey from Five Districts in Tanzania*.

A primary recommendation from the studies was that a comprehensive communication strategy be developed to disseminate accurate information to communities on how malaria, diarrhea, and pneumonia can be prevented. Results were shared again in May 2007 at a planning meeting to facilitate the organization of radio production workshops with community leaders and radio journalists. Attending the meeting were MOHSW staff and other ADDO stakeholders in Ruvuma who were tasked with reviewing major findings from the formative research and recommending key audiences and child health messages to be addressed during the radio workshops.

Two workshops on developing radio programs were conducted by USAID/BASICS with support from RPM Plus. Workshop content included:

1. writing briefs and scripts
2. planning programs and spots
3. consulting the community on their radio listening preferences (i.e., determining formats for the spots)
4. recording spots
5. pretesting and revising spots for final production

The results of the workshop were the development of 8 spots on malaria in May 2007, and 9 spots on diarrhea and pneumonia in March 2008.

Click [here](#) to download English language translations of the radio scripts.

Prior to conducting the second radio program workshop, a simple listener assessment was carried out to determine if the malaria spots from the first workshop had been aired, and what listeners thought about them. Over a three-day period, 54 interviews were conducted with ADDO dispensers, caretakers (mothers and fathers), community leaders, radio station personnel, and past workshop participants. The key findings were:

- All respondents said they had heard radio spots on malaria; most spontaneously mentioned hearing messages on insecticide-treated nets.
- When prompted, about 80% of respondents recalled hearing radio messages on the key malaria themes covered by the radio workshop in May 2007.
- Some 87% of the 15 ADDO dispensers interviewed said that clients have mentioned radio spots on malaria
- Some 93% of ADDO dispensers said they have noticed that the radio spots had increased business and demand for services; many ADDO dispensers gave examples of caretakers going to them for additional information on how to give medicine obtained from a health facility or what to do when a child has a danger sign.

For continuation of this radio message approach, MSH will continue working with the MOHSW on improving community access to information and services on child health through the private sector. A community mobilization strategy was drafted that positions child health and radio as a core component of the national Accredited Drug Dispensing Outlet (ADDO) program. As a follow-up activity to the radio workshops, paying for radio time to broadcast the spots during optimal listening hours and producing other radio programs on child health and the ADDOs is an important planned activity by MSH for the future.

*Assessing pediatric HIV care and access to treatment services*

Though significant progress had been made in increasing access to HIV care and treatment for children in Tanzania by 2006, the government recognized that achieving a goal of ensuring that children represent at least 20% of recipients of antiretroviral treatment would require an improvement in pediatric HIV services. USAID/BASICS led an assessment of pediatric HIV care and treatment service access in three regions. The assessment team—which included experts from CDC, USAID, and the Elizabeth Glaser Pediatric AIDS Foundation—documented missed opportunities for identification, care, and treatment of HIV-exposed and -infected infants and children, and made recommendations to increase access to care and treatment services.

The assessment team found that several health services in Tanzania cater to children, but no single service has clear responsibility for HIV-exposed children. Many services, such as PMTCT, Maternal and Child Health Care, and care and treatment clinics function vertically and have only weak linkages between them. Moreover, it can be said that children are not “at the center” when it comes to HIV services. And, there are multiple steps involved when mothers seek HIV diagnosis, care, and treatment for their infants and children.

Recommendations were based on the assessment team’s conclusion that there is a solid foundation for service expansion, with significant health care worker and health system assets in place for these services. These included more immediate steps, such as developing and disseminating a memo to all health facilities that spelled out steps to increase pediatric HIV identification and care and treatment. Longer-term actions of training more health care workers in HIV and AIDS care and treatment, and streamlining current antiretroviral treatment services were also included as core recommendations. Streamlining services by devolving routine follow-up of stable patients to lower-level facilities so that care and treatment centers can take on new patients was also a key recommendation.

Click [here](#) to download *Report of a Pediatric HIV/AIDS Care and Treatment Assessment in the Kilimanjaro, Iringa, and Mbeya Regions of Tanzania*

## **Partnership for Maternal, Newborn and Child Health (PMNCH)**

As part of a team that included ACCESS and UNICEF, USAID/BASICS reviewed and revised the 2007 draft OnePlan for the Tanzania PMNCH. The OnePlan is a national strategy to ensure improved coordination of MNCH interventions and delivery of services across the continuum of care. The document also serves as a guide to implementation across operational levels of the system. The OnePlan is now being implemented in Tanzania.

Click [here](#) to download *Tanzania One Integrated Maternal Newborn and Child Health Strategic Plan*

Click on the titles below to access reports and other materials developed during USAID/BASICS' Tanzania country program.

Title	Type	Description	Technical Focus Area(s)	Key items of importance in this document include...
<a href="#">Improving Child Health through the Accredited Drug Dispensing Outlet Program</a>	Assessment Report	Qualitative findings and recommendations from a desk study and formative research on the Accredited Drug Dispensing Outlet (ADDO) program in Tanzania's Ruvuma region.	<ul style="list-style-type: none"> <li>• Diarrhea</li> <li>• Malaria</li> <li>• Pneumonia</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment methodology (pg. 4)</li> </ul>
<a href="#">Improving Child Health through the Accredited Drug Dispensing Outlet Program: Baseline Survey from Five Districts in Tanzania</a>	Assessment Report	A companion to the qualitative assessment, this report presents quantitative findings aimed at informing the planned integration of child health into the ADDO program by obtaining information on the knowledge and practices of drug dispensers, the availability of key medicines, and caretakers' practices and beliefs on treating sick children.	<ul style="list-style-type: none"> <li>• Diarrhea</li> <li>• Malaria</li> <li>• Pneumonia</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment methodology (pg. 3)</li> </ul>
<a href="#">One Integrated Maternal Newborn and Child Health Strategic Plan</a>	Strategy	A national strategy to ensure improved coordination of MNCH interventions and delivery of services across the continuum of care. The document also serves as a guide to implementation across operational levels of the system.	<ul style="list-style-type: none"> <li>• Maternal, Newborn, and Child Health</li> </ul>	<ul style="list-style-type: none"> <li>• Strategic plan (pg. 29)</li> </ul>

Title	Type	Description	Technical Focus Area(s)	Key items of importance in this document include...
<a href="#">Radio Scripts</a> (translated into English)	IEC Messages	<p>A series of radio spots intended for caretakers with children under five years of age and aimed at supporting decreases in child mortality through improved prevention and care-seeking behavior. Script themes include:</p> <ul style="list-style-type: none"> <li>• Use of Latrines</li> <li>• Recognizing General Danger Signs</li> <li>• Recognizing Fast Breathing as a Sign of Pneumonia</li> <li>• Hand Washing</li> <li>• Use of ORS and Zinc</li> <li>• Recognizing the signs of Diarrhea</li> <li>• Protecting Children from the Cold Using Lemon and Honey to Treat Coughs</li> <li>• Using ORS and increasing Fluids</li> <li>• General dangers signs (a song)</li> <li>• Promoting the ADDOS as a Place to Get Advice on Caring for Sick Children</li> <li>• Promoting the New Malaria Medicine</li> <li>• Actions after Recognizing the Signs of Malaria</li> <li>• SP and Pregnant Women</li> <li>• How to Take the New Malaria Medicine</li> <li>• Actions to Take During and After Illness</li> <li>• Taking Away the Fear about the Number of Pills of the New Medicine</li> <li>• Using ITNs for Pregnant Women and Children</li> </ul>	<ul style="list-style-type: none"> <li>• Diarrhea</li> <li>• Malaria</li> <li>• Pneumonia</li> </ul>	

Title	Type	Description	Technical Focus Area(s)	Key items of importance in this document include...
<a href="#">Report of a Pediatric HIV/AIDS Care and Treatment Assessment in the Kilimanjaro, Iringa, and Mbeya Regions of Tanzania</a>	Assessment Report	Findings from an assessment of the current status of pediatric HIV care and treatment services at the facility and community levels in three regions of Tanzania; document missed opportunities for identification and care and treatment of HIV-exposed and/or infected infants and children; and make recommendations to increase access to pediatric HIV care and treatment services.	<ul style="list-style-type: none"> <li>• Pediatric HIV/AIDS</li> </ul>	<ul style="list-style-type: none"> <li>• Assessment methodology (pg. 3)</li> <li>• Pediatric HIV/AIDS assessment tools (p. 59)</li> </ul>