

Tanzania: Operational Research Priorities

September 2012

Malaria & fever case management

Malaria is one of the leading causes of morbidity and mortality in Tanzania



...however, many suspected cases of malaria are treated without being diagnosed, and there is insufficient data on other causes of fever



We propose an operational research program to increase diagnosis of malaria, as a first step to better identifying and treating the actual causes of fever



- Over 40% of outpatient visits are attributed to malaria
- 44% of deaths of children under 5 at health facilities are attributed to malaria
- 26% of deaths of age 5 years and up at health facilities are attributed to malaria
- NMCP estimates that 60,000-80,000 deaths due to malaria occur annually

Operational Research: National scale-up of mRDTs in formal sector and pilot to administer mRDTs in informal retail sector, beginning in January 2013

GOAL Increase access to, use of, and adherence to mRDTs in the private sector

OBJECTIVES

1

Implement a nation-wide scale up of low-cost mRDTs in private sector health facilities

2

Conduct a pilot study of the administration of mRDTs in pharmacies & accredited drug dispensing outlets

RESEARCH QUESTIONS

A

Can mRDTs be administered safely & effectively in drug outlets?

B

Is a subsidy necessary to encourage the use of mRDTs?

C

What kind of demand generations activities are needed to change usage behavior?

Over the next year, mRDT scale-up and pilot study will give us new information about the feasibility & effectiveness of diagnosis in the private sector

Sept. 2012

Nov. 2012

Dec. 2012

Nov. 2013

NATIONAL SCALE-UP

Preparation

- Agreements with suppliers
- Product reg.

Baseline assessment

- Nationally representative sample to assess starting point

Implementation

- Sales across all private sector outlets
- Administration in formal health facilities

Endline assessment

- Nationally representative sample to assess impact

PILOT STUDY

Preparation

- Selection of pilot districts
- Training in administration

Baseline assessment

- Survey of all drug outlets in pilot regions to assess starting point

Implementation

Quarterly monitoring

- Administration in drug outlets
- Subsidy in half of outlets, low-cost mRDTs in others
- Quarterly monitoring visits to assess safety & efficacy

Endline assessment

- Survey of all drug outlets in pilot regions to assess impact

Details of operational research plans are currently in development

	Suggested survey design	Purpose	Inputs needed to launch survey
National scale-up in formal facilities	<ul style="list-style-type: none"> • Baseline & endline HF survey • FLB sales data collected throughout implementation • Test BCC methods by region 	Determine the impact of national scale-up of RDTs on confirmatory diagnosis	Develop sampling frame of private health facilities in which to do interviews
Pilot in pharmacies & ADDOs	<ul style="list-style-type: none"> • Pilot in district or set of districts with 150-200 ADDOs and 25-50 pharmacies • Pilot district(s) should be representative of Tanzania, with significant private sector health treatment • Use low-cost mRDTs in one area and subsidized mRDTs in another • Baseline & endline surveys with pharmacist/shop attendant • Quarterly monitoring visits 	Through sub-national study, determine feasibility of administration in pharmacies & ADDOs in order to consider future policy options	Selection of district(s) for pilot: <ul style="list-style-type: none"> • Sufficient number of outlets • Representative of Tanzania in malaria prevalence, urban/rural breakdown, economic indicators, treatment seeking behavior, and accessibility

Additional research questions on fever case management

- **Tanzania currently has no plans for operational research on the broader question of non-malaria febrile case management**
- **However, this will be an important topic to examine in the future – particularly as we scale up diagnosis, we will need to determine the best way to manage malaria-negative patients**

