Incorporating social and behavior change communication into provider training and support programs positively improves malaria testing and treatment practices.

Providing patent proprietary medicine vendors with trainings and job aids led to improved counseling and vending practices. The program increased the proportion of vendors who asked the correct history questions, referred to dose guidelines and gave the correct treatment – from about 40% at baseline to 90% at end-line for all behaviors.4

A program in Cambodia that trained village malaria workers to adhere to national guidelines and to refer severe cases to hospitals was associated with improved service quality. At the end of the program, 100% of workers reported always treating positive RDT cases with artesunate and mefloquine.5

A program in Uganda that trained drug distributors to educate mothers about malaria care and treatment and provide free chloroquine plus SP tablets helped improve appropriate dosage by 12% and drug choice by 25.8%. This work was ultimately associated with a 14% improvement in the proportion of febrile children completing all treatment steps.3

An intervention in Zambia that gave community health workers job aids and training resulted in 95% correct RDT use and 93% correct interpretation, compared to the 57% and 54% respectively seen among the control group that was just given the instructions on the package.1

References: