## **COMPARATIVE ANALYSIS OF PRIMARY HEALTH CARE PROVIDERS'** ADHERENCE TO PARASITOLOGICAL DIAGNOSIS OF UNCOMPLICATED MALARIA USING BEHAVIORAL ECONOMIC PROTOTYPES INAKWA IBOM, NIGERIA

Methodius Okouzi<sup>1</sup>, Ubong Umoren<sup>1</sup>, Ime Akpan<sup>1</sup>, Chinwe Nweze<sup>2</sup>, Abimbola Olayemi<sup>3</sup>, Uchenna Nwokenna<sup>3</sup>, IniAbasi Nglass<sup>3</sup>, Ekaette Ekong<sup>4</sup>, John Orok<sup>4</sup>, Arja Huestis<sup>5</sup>, Thomas Hall<sup>5</sup>, Olugbenga Mokuolu<sup>5</sup>, Veronica Momoh<sup>6</sup>, Erkwagh Dagba<sup>6</sup>, Jules Mihigo<sup>6</sup>



Malaria is a major global public health problem with an estimated 232 million annual cases. Nigeria accounts for 27% of the 2022 global burden.



- The US Presidents' Malaria Initiative for States (PMI-S) collaborated with project partners and state stakeholders to provide comprehensive malaria case management (prompt parasitological confirmation and appropriate treatment of confirmed cases).
- The Behavioral Economics Prototypes (BEP) are decision-making-centered delivery approaches to improve health provider adherence to testing, differential diagnosis, and treatment of confirmed malaria cases in line with national guidelines.

Persons presenting with fever & tested by RDT

Persons tested positive for malaria by RDT

low 100%: More ACTs best results	0%											
C	o Jan	Je6	Mar	-regite	мау	Jun	Jul	- .ныд	0ep	027	Nov	Dec
Data	Mon	Monthly consumption tally										
No. of Monthly Positive RDT												
No. of Monthly ACTs Consumed												
Dept. name	Monthly department head signatures											
FACILITY HEAD												
LABORATORY												
PHARMACY												

global intervention.

Adhering to testing of all fever cases for malaria is

## Methods

- PMI-S collaborated with the SMEP to train 355 health providers from 275 PHCs on the application of BEPs for fever case management using a stepwise cascade approach.
- There was on-site post-training followup supportive supervision for one and a half years.
- 50 BEP facilities were randomly selected from those trained using inclusion criteria during the study period.

Persons with Confirmed Uncomplicated Malaria treated with ACT

-Testing rate

-Test positivty rate

Figure I. Malaria case management cascade in BEP-implementing health facilities in Akwa Ibom

## Results

- The study showed a statistically significant increase in testing rates (W=771, p-value=9.9 x 10-4), 94% before to 99% after 2 years of intervention.
- Decrease in test positivity from 73% to 62% was also  $\bullet$ significant (W=1,637, p-value= $3.0 \times 10-4$ )

• The increase in fever testing suggests that the proportion of persons with fever tested by RDT after BEP intervention is significantly higher than before the intervention (94.6 and 99.7%).

pivotal to meeting the NMSP 100% target of fever testing before treatment to improve the efficient use of antimalarials for confirmed cases.

BEP can improve health care workers' belief and confidence in parasitological confirmation of uncomplicated malaria, leading to higher fever testing and rational use of drugs to improve treatment outcomes.



Figure 3. BEP supervisory team supervising and mentoring a PMI-Ssupported health facility. Photo credit: PMI-S Project

Quantitative data (2020 pre-BEP and 2022) during BEP implementation) from the National Health Management Information System were analyzed for adherence to parasitological diagnosis.





I. World Health Organization World Malaria Report 2021

2. National Malaria Strategic Plan (NMSP) 2021 to 2025

<sup>1</sup>Management Sciences for Health, PMI-S, Akwa Ibom, Nigeria; <sup>3</sup>Management Sciences for Health, PMI-S, Abuja, Nigeria; <sup>4</sup>State Malaria Elimination Program, Ministry of Health, Akwa Ibom, Nigeria; <sup>5</sup>Management Sciences for Health, Arlington, USA; <sup>6</sup>United States President's Malaria Initiative, Abuja, Nigeria

