

Jhpiego in Chad

Quick Facts

Estimated total population:¹
13.7 million

Maternal mortality ratio:²
1,100/100,000 live births

Infant mortality rate:²
89/1,000 live births

Under-five mortality rate:²
150/1,000 live births

Total fertility rate:¹
6.5

Contraceptive prevalence:¹
2% (modern methods)
5% (all methods)

HIV prevalence:³
3.4%

Births with skilled provider:²
22.7%

Sources:

¹ Population Reference Bureau
2015 World Population Data Sheet;

² UNICEF statistics;

³ UNAIDS *2010 Report on the Global AIDS Epidemic*.

Background

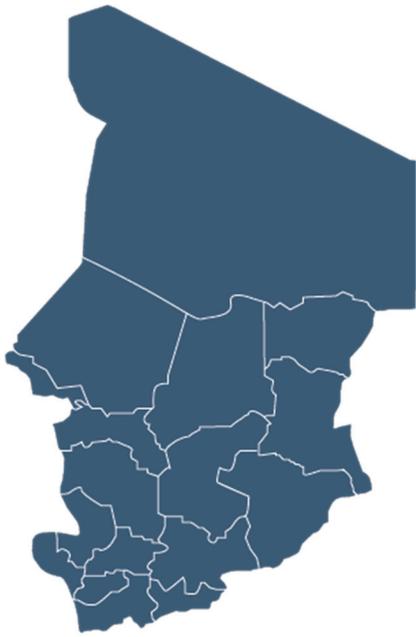
A landlocked country located in central Africa, Chad faces numerous health challenges, including one of the lowest rates of contraceptive use in Africa—which subsequently contributes to a high maternal mortality ratio and high total fertility rate. In addition, malaria is the leading cause of disease (22%) and death (19%) in Chad, with an estimated 500,000 malaria cases every year. Reports show that 10% of children under five years of age sleep under a specially treated bed net, and only 12% of pregnant women receive the recommended treatment to prevent malaria—far short of the internationally accepted standard of 80%. Pregnant women are especially vulnerable to malaria because pregnancy reduces their immunity to the disease, increasing the risk of illness, severe anemia and death. Maternal malaria also carries an increased risk of spontaneous abortion, stillbirth, premature delivery and low birth weight, which is a leading cause of child mortality.

Jhpiego first worked in Chad in the early 1990s, when it implemented a project, funded by the U.S. Agency for International Development, to strengthen reproductive health pre-service education at the National School of Public Health and Social Services. After a hiatus, Jhpiego began implementing activities again in Chad in 2011, focusing on malaria prevention and treatment with support from ExxonMobil.

Current Program Highlights

Jhpiego is implementing an ExxonMobil-supported malaria prevention and treatment program in five malaria-endemic communities along the oil pipeline in Chad and Cameroon. In Chad, the project is being implemented in all seven districts of the East Logone Region, and targets 114 health facilities. The project is being conducted in collaboration with the national malaria control program, known by its French abbreviation as the PNLN. The purpose of this initiative is to introduce and strengthen malaria control services in the selected districts to increase access to prevention, treatment and support for malaria. Activities are conducted at the following levels:

- At the national level, Jhpiego has worked closely with the PNLN to provide technical guidance to the PNLN to develop evidence-based, national-level tools for malaria prevention and control services, including updated malaria guidelines and protocols, training materials, reference materials and supervision tools.



- At the district level, Jhpiego is developing a strong training foundation based on the guidelines and protocols developed at the national level. Jhpiego has conducted training of trainers workshops with the Regional Health Delegate in Doba. These trainers, in turn, provide in-service training of health care providers and ongoing supportive supervision within the districts.
- At the facility level, Jhpiego is working to enhance the quality and range of malaria services at 114 health facilities, or 100% of facilities in the targeted region. At these facilities, Jhpiego, in conjunction with the Chadian Ministry of Public Health, promotes formative supervision (related to supervisee learning and development of skills and professional identity) during routine, integrated supervision visits.
- Finally, at the community level, Jhpiego has trained 130 community mobilizers to educate communities about malaria through malaria sensitization campaigns and is applying the Community-Directed Interventions (CDI) model implemented in Nigeria to enhance the quality and range of malaria services in the targeted districts. Given that health facilities are scarce and access to basic health care limited, Jhpiego, in conjunction with the district health delegates, is building on existing community volunteer programs to provide first contact malaria control services.

Key Accomplishments

Jhpiego's collaboration with the Chadian government under this initiative has led to the accomplishment of the following:

- The percentage of deaths due to malaria in the district hospitals decreased from 66% in the first nine months of 2013 to 44% by September 2014 and 27% by June 2015.
- Thanks to more testing of suspected cases of malaria, the percentage of people appropriately treated for malaria increased from 74% in the first semester of 2014 to above 95% in the first semester of 2015.
- Jhpiego assisted the PNLN to revise the national guidelines and procedures for malaria treatment, as well as developing the following documents: Training Manual on the Prevention and Treatment of Malaria, Reference Manual on Integrated Supervision, Training Manual for Community Volunteers for Malaria, Reference Manual for the Prevention and Treatment of Malaria during Pregnancy and Guidelines on Intermittent Preventive Treatment for Pregnant Women. The training materials were used to conduct two training of trainers workshops for 22 participants.
- By the end of 2015, these trainers in turn had trained 132 health care providers on malaria prevention and treatment, and 49 on data collection and commodity management.
- By the end of 2015, 41 regional and district supervisors had been trained to provide coaching in malaria prevention and treatment, skills they used during 169 supervision visits to support improvements in service provision at the facilities.

- Training and supervision are leading to improved performance at health care sites, which in turn leads to improved results: coverage of the first dose of intermittent preventive treatment of malaria in pregnancy increased from 40% in 2012 to 80% in 2014; for these same years, coverage of the second dose increased from 30% to 48%.
- In the first six months of 2015, Jhpiego-trained Community Health Volunteers visited over 15,000 households and held 19,039 community health sessions. They provided health education on malaria transmission and prevention, the use of long-lasting insecticide-treated nets, the importance of intermittent preventive treatment for pregnant women, and the importance of seeking medical care promptly for suspected malaria cases. As a result, 6,600 children suspected of having malaria were referred to health centers.
- Jhpiego provided technical and financial support to the Ministry of Public Health through the PNLP to organize World Malaria Day each year from 2012 to 2015.

Partners/Donors

Jhpiego's donor in Chad is ExxonMobil. Jhpiego also partners closely with the PNLP, the district-level staff, health facilities, community groups and nongovernmental organizations such as Africare and Malaria No More.

References

Joint United Nations Programme on HIV/AIDS (UNAIDS). *2010 Report on the Global AIDS Epidemic*.

Population Reference Bureau. *2015 World Population Data Sheet*. Washington, D.C.

Roll Back Malaria. *2010 Chad Road Map*. Accessed at: http://www.rbm.who.int/countryaction/chad_roadmap.html

United Nations Children's Fund (UNICEF), Census Bureau (Chad), National Institute of Statistical, Economic and Demographic Studies (Chad). *Chad Multiple Indicator Cluster Survey 2000*. Accessed at: <http://www.healthmetricsandevaluation.org/ghdx/record/chad-multiple-indicator-cluster-survey-2000>

UNICEF. *Country statistics for Chad*. At: http://www.unicef.org/infobycountry/chad_statistics.html

World Health Organization (WHO). *World Malaria Report 2009*. Accessed at: http://whqlibdoc.who.int/publications/2009/9789241563901_eng.pdf

