



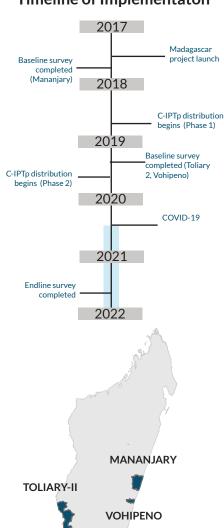
Madagascar Overview Results from Mananjary, Toliary 2, and Vohipeno Districts

TIPTOP Summary

The Transforming Intermittent Preventive Treatment for Optimal Pregnancy (TIPTOP) project is an innovative, community-based approach that aims to dramatically increase the number of pregnant women in malaria-affected countries in sub-Saharan Africa receiving antimalarial preventive therapy, thus saving the lives of thousands of mothers and newborns.

The TIPTOP project aims to increase coverage of the third dose of intermittent preventive treatment in pregnancy (IPTp3) through distribution at the community level, without decreasing antenatal care (ANC) attendance.

Timeline of Implementation



Household Survey Results

Household surveys were collected as cross-sectional surveys using Multi-Stage Cluster Household Survey method. Information collected included ANC clinic attendance and IPTp coverage through interviews with women who had ended a pregnancy within the past six months.

	Manajary		Toliary 2		Vohipeno	
	Baseline	Endline	Baseline	Endline	Baseline*	Endline
IPTp3	23.26%	70.50%	11.97%	68.75%	36.59%	84.07%
ANC4	55.21%	58.57%	47.18%	58.10%	50.40%	79.41%

^{*}Repeat baseline conducted

District Details

	Mananjary	Toliary 2	Vohipeno
Region	Vatovavy Fitovinany	Atsimo Andrefana	Vatovavy Fitovinany
Population	303,444	496,755	158,520
Area	5,353 sq km	7,321 sq km	1,020 sq km
Density	57 people/ sq km	56 people/sq km	155 people/sq km
Expected pregnant women	13,655	18,304	7,133

Rapid Facility Assessments

TIPTOP-supported health facilities in order to evaluate their readiness to provide ANC and IPTp, and to assess the linkage between health facilities and community health workers (CHW) for better activity coordination.

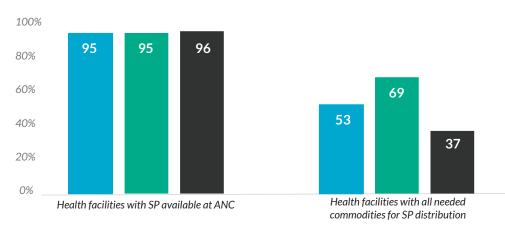
Number of Phase 1 facilities in Mananjary sampled through one stage stratified random sampling: 40/40

Number of Phase 2 facilities in Toliary 2 and Vohipeno assessed: 42/42, 27/27

Data below are from rapid facility assessments or data quality audits.

Facility Readiness

Percent of facilties reporting SP and necessary components needed for SP distribution



- All needed commodities for SP distribution include cups, water purification tablets/solution, and jerrycans
- SP procured for community distribution also acted as a buffer stock for local facilities, improving SP availability
- Mananjary

 Toliary-II
 - Vohipeno

97%

health facilities offer malaria services at ANC

88%health facilities have community education in their catchment areas on

benefits of IPTp

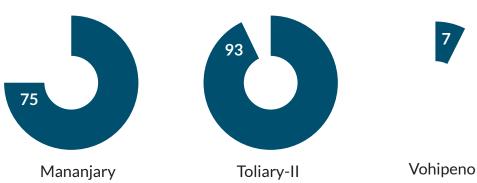
health facilities have most up-to-date data collection & reporting tools at endline



Photo of SP blister packet Photo credit: Kristen Vibbert

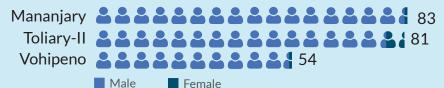
SP stock management improvement

Percent of facilties with SP stock count matching stock card in 3 districts

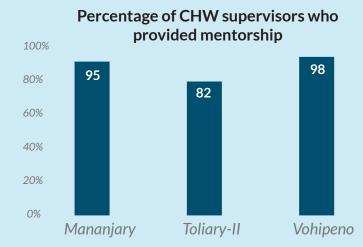


Community Health Workers

Average # of CHWs supporting catchment area



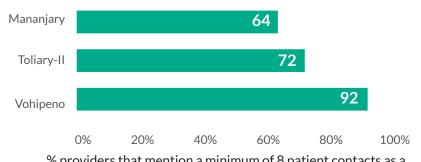
Each icon represents 5 CHWs.



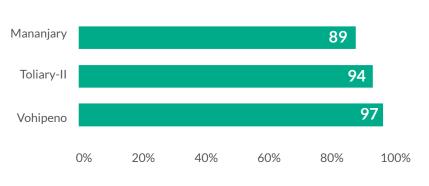
In Madagascar, CHWs are responsible for volunteers who are given incentives, ncluding atravel stipend. They are responsible for community-integrated management of childhood illness, family planning services, and sensitization about a variety of topics, including malaria, nutrition, reproductive health, and immunization.

Each community typically has 2 CHWs that are elected by the community. On average, each CHW in Madagascar support about 600 individuals.

ANC Provider Knowledge



% providers that mention a minimum of 8 patient contacts as a key aspect of quality antenatal care



% providers that mention IPTp as a key measure to be taken to prevent malaria in pregnancy

100% of health facilities surveyed had evidence of data analysis and utilization, including:

- ANC wall chart
- Malaria graph
- IPTp wall chart
- Other materials

Rapid Data Quality Assessment

Facilities were surveyed for data quality, with acceptable data quality defined as (+/- 5%). The proportion of facilities with acceptable data quality among key measures are listed below:

	ANC1	ANC4	IPTp3	C-IPTp3
Mananjary	45%	45%	50%	90%
Toliary-II	62%	62%	67%	98%
Vohipeno	59%	59%	59%	96%

Implementation Highlights CHW Peer System

CHWs in Madagascar are not linked directly with a health facilty, which can mean limited support and mentorship for data collection & data quality review. To provide more support to CHWs, high-performing CHWs were selected in each district to act as peer supports to other CHWs. The CHW Peers perform on-site supervision and provide support during monthly reporting & data review meetings. The system is voluntary, but the team has seen an increase in data quality and report completeness from 2018 to 2019 after introduction of the CHW Peers.

TIPTOP()

On-site supervision from CHW peers.

Puppet Shows

Civil Society Organizations (CSOs) have played an important role in the TIPTOP project. In Madagascar, Action Socio-sanitaire Organisation Secours (ASSOS) is a local organization that specializes in puppet shows for mass sensitization and community health promotion. The puppet shows are a form of edu-tainment that was captivating for audience members and include key messages about malaria in pregnancy and prevntion strategies. These types of educational puppet shows were present in all TIPTOP districts and are a popular way to engage communities in Madagascar.



Puppet show performed by a CSO to spread key messages about malaria in pregnancy.