



COMMUNITY HEALTH WORKERS IN BENIN SAVE LIVES BY DIAGNOSING MALARIA

Eleven-month old Basile might have died without timely intervention from Cossi Dansou, a Community Health Worker (CHW) who diagnosed severe malaria and quickly referred him to a local health center. Basile's story illustrates the potential life-saving contributions that CHWs trained by USAID's Integrated Family Health Program (*Projet Intégré de Santé Familial or PISAF*) make in remote areas of Benin. PISAF is implemented by University Research Co., LLC (URC).

Realizing that Basile was likely to die without immediate medical care, Cossi located the boy's father, who was working in the family's field, and helped arrange transport to the nearest health center at Agoue.

Infant Referred Just in Time

Basile had been sick for almost a week and was getting worse when his mother took him to Cossi, the PISAF-trained community health worker serving her village. Cossi recognized several signs of severe malaria including white palms, convulsions and exhaustion. Realizing that Basile was likely to die without immediate medical care, Cossi located the boy's father, who was working in the family's field, and helped arrange transport to the nearest health center at Agoue. Noting the severity of the illness, the nurse at Agoue immediately referred the family on to the Savalou-Bantè district hospital.



Basile was diagnosed with severe malaria at 11 months old by PISAF-trained community health worker Cossi Dansou (center). Basile's mother (right) and older brother (left) look on. Cossi's rapid intervention probably saved Basile's life.

Severe Malaria: A Deadly Disease

Severe malaria in young children can lead to death within hours if left untreated. Treatment differs depending on symptoms which can include convulsions, coma, shock, severe anemia, and acidosis. Treatment usually requires hospitalization, and incorrect treatment can do more harm than good. Thus a CHW's responsibility, according to Benin's national standards, is not to treat severe malaria but to recognize symptoms suggestive of it and transfer the patient to a health

facility immediately. Since severe malaria is an emergency, PISAF has worked with the Ministry of Health to introduce emergency triage and treatment (TETU or *Tri, Evaluation, Traitement, et Urgence* in French). TETU ensures that very sick children receive highest priority for immediate care rather than waiting hours in pediatric outpatient lines. Since severe malaria treatment is complex, PISAF has developed a job aid that helps clinicians select interventions appropriate to each child's symptoms.

As a CHW, I know that even if I don't gain anything from this work, it will give me a name. Maybe someday I can even work at a health facility. It is important to seek out honor.

Cossi Dansou, CHW

Health workers at the Savalou-Bantè hospital confirmed Basile's diagnosis and diagnosed severe anemia, a complication that occurs in over 50% of cases. As indicated in Beninese and WHO guidelines, Basile received a blood transfusion to treat the anemia. He recovered completely. Had the family waited any longer to seek care, Basile might not have survived.

PISAF Trains Community Health Workers (CHWs) in Malaria Diagnosis and Treatment

PISAF works to increase access to and improve the quality of family health services. In remote areas where formal health workers are scarce, the project trains volunteer community health workers (CHWs) to provide basic services. Known locally as *relais communautaires*, the CHWs receive kits with long-lasting insecticide-treated bednets (LLINs), oral rehydration salts (ORS) and zinc for diarrhea, condoms, paracetamol, aspirin, oral contraceptives and behavior change communication (BCC) materials. Though unpaid, CHWs are allowed to earn a small profit from selling health supplies. In 2009, when Benin began allowing CHWs to treat uncomplicated malaria in children under five, PISAF trained 150 CHWs from the departments of Zou and Collines in

community case management of malaria and community-integrated management of childhood illnesses (c-IMCI). CHWs in the area now treat over 2,000 presumptive cases of malaria per month in children under five.

CHWs Value Training

CHWs report increased demand for services, possibly due to growing community confidence in their work. Beyond case management training, they learn to recognize and manage illness in children from 6 months to 5 years old and to counsel mothers on infant feeding, birth planning, family planning, and healthy practices during pregnancy, such as sleeping under a bed net, helping to alleviate the health workforce crisis, which is more acute in Benin than the sub-Saharan average. Antoine Togni, a PISAF-trained CHW, said the knowledge he gained has helped him care for his own

community. He said, "people can come look for you anytime, even when you're sleeping. You can be in the field and people will call for you because a child is sick." Cossi's primary hardship is finding transport: even when a child is severely ill, he may lack the means to transport the child to a health center. This undermines his ability to save lives. Several CHWs have mentioned that a motorcycle to transport patients and thermometers to verify fever would equip them better. Some communities have developed innovative ways to assist CHWs: one created a village fund to pay for health center visits and transport. Financial incentives are also an issue: CHWs make only a small profit from selling medicines and mosquito nets. To assist them, village residents often agree to work in their fields, but this help can be slow to materialize.

Other CHW programs in developing countries face similar challenges. PISAF

[The CHW] training has boosted my standing in my village. It has also helped in my own household on numerous occasions. Since the trainings, I don't need to bring my children to the hospital—instead I treat them myself at home. If referral to a health facility is not necessary, I don't bring them.

Antoine Togni, CHW

family as well as his neighbors. He plans to continue serving the community even after the project ends.

Highly Motivated CHWs Face Challenges

Cossi Dansou, the CHW who worked with Basile, cited many difficulties with his position, including being on call 24 hours a day and having to repeat messages many times to effectively educate the

and initiatives like it continue to look for sustainable incentives to keep CHWs motivated. Nonetheless, many CHWs find the work immensely satisfying and remain committed to helping their communities despite the challenges. In Cossi's words, "At the beginning of this work there are difficulties. If you do not love your village, you cannot do this work; it is the love you have for your village that makes you able to do this job."

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