



Strengthening Health Care Workers' Capacity to Monitor Malaria Program Performance in Côte d'Ivoire with Data Visualization Tools

Kouassi Eugène EBA, CHISU, Côte d'Ivoire; RAHIM Kebe, CHISU, Côte d'Ivoire; YEO Tuogoh Ali, CHISU, Côte d'Ivoire; Coralie Marie Aude, CHISU, Côte d'Ivoire

Key Messages

Like other countries in Sub-Saharan Africa. Côte d'Ivoire has made the fight against malaria a top priority. This requires strategy implementation and, above all, access to high-quality data at all levels of the health system for informed decision-making. Access to information at all levels of the health system, and particularly at the grassroots level, is essential to improving the quality of health services and ultimately health outcomes.

Introduction

In Côte d'Ivoire, the central level transforms raw data collected daily in primary health care facilities (ESPCs, Etablissement Sanitaire de Premier Contact)—and transmitted monthly to intermediate and higher levelsinto useful information. This raw data transformed into useful information is not always disseminated to the people who produce it, and is only accessible at the intermediate and upper levels of the system. This is because data producers do not always have access to automated tools for visualizing trends and progress for performance indicators.



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Methods

The CHISU Côte d'Ivoire team has conducted an experimental before-and-after study. The intervention consisted of installing performance indicator visualization tools in 16 ESPCs for the benefit of their care providers, and then training them on its use. This tool, installed on mobiles phone and/or a computer, helps them access their processed information in real time, and then identify their own service-related problems in order to respond as quickly as possible. CHISU analyzed the performance of the indicators by calculating the rate of increase in these indicators over the seven months of intervention implementation.



Results

After seven months of the targeted ESPCs regularly using the information visualization tools, malaria performance indicators have improved considerably:

- 50% of sites have made progress in at least 2/3 of performance indicators
- 29% of sites saw half of their performance indicators improve
- 20% of sites saw improvement in a third of performance indicators
- · An average of 60% of malaria performance indicators improved across all monitored sites.

Figure 1: Percent of performance indicators (n=6) with improvements after 7 months, by health facility (n=14 sites)

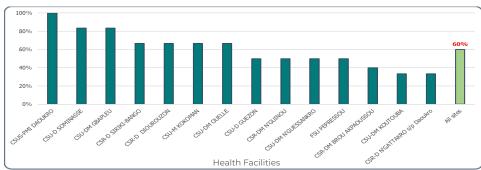
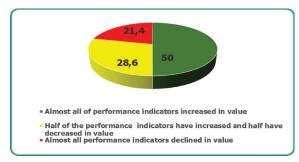


Figure 2: Percent of performance indicators (n=6) with improvement after seven months



Conclusion

In conclusion, the findings suggest that access to information on malaria program status by data producers improves the performance of malaria indicators. More facilities, and longer follow-up are required to draw more definitive conclusions.