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# Burkina Faso's promising strategy to eradicate malaria

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Luc Serme A member of the research team surveys a mother in Boulsa, Burkina Faso, about her district's seasonal malaria chemoprevention campaign.

Last year on World Malaria Day, Burkina Faso's president, Roch Marc Christian Kaboré, pledged to eradicate malaria in the country by 2030. While the disease remains one of the country's most serious public health problems, recent research gives hope that the ambitious goal can be achieved.

The linchpin of the National Malaria Prevention Program is the country's seasonal malaria chemoprevention (SMC) campaign. Officially recommended by the World Health Organization in 2012, SMC involves administering long-acting antimalarial drugs to children under five in doses on three successive days per month during the July to October rainy season.

An evaluation of the SMC program in Burkina Faso found that the number of malaria infections in children under five was cut by half in one health district over a period of four years. In addition, cases of anemia — a complication of malaria — were reduced by one-third. The study of SMC's effectiveness was carried out by a team of researchers and decision-makers from Burkina Faso and Canada and funded by the Innovating for Maternal and Child Health in Africa (IMCHA) initiative.

## Ingredients for successful implementation

Launched in seven districts in 2014, the campaign was effectively scaled up over the following three years to cover almost the entire country. Burkina Faso is one of the first countries in the world to successfully implement SMC nationally as part of its malaria control program.

How has the country succeeded despite a fragile health system? That's what the IMCHA team set out to explore, in one of the first studies to assess both the implementation and effectiveness of a large-scale SMC program.

At the start of the campaign in 2015, researchers from the *Société d'études et de recherche en santé publique* in Burkina Faso and the hospital research centres of Université Laval and Université de Montréal in Canada evaluated SMC effectiveness in the Kaya health district. Survey and malaria test data for 2,523 children under five revealed that episodes of malaria in children who had been treated were 51% lower than in untreated children. Episodes of fever were 46% fewer and anemia was reduced by 32%. "These findings suggest that it could be possible to reduce malaria to substantially lower levels," say the researchers.

But reaching all children isn't easy. The SMC program requires a high degree of planning and coordination to mobilize regional and local health authorities, ensure an adequate supply of medications, train and supervise volunteer community

medication distributors, inform community members about the program, and ensure that all households and children are covered.

*While community workers deliver the free medications door-to-door and administer them on the first day of each month, parents need to administer the medications the subsequent two days each month. Enlisting parents' support requires deploying effective awareness campaigns through health clinics, churches and mosques, town criers, media, and other means.*

## **From national to local commitment**

In 2017-2018, the research team set out to determine how this complex new program had been rapidly scaled up to the national level. The research, carried out by analyzing national data and through surveys in three health districts, identified three key drivers of success:

- The National Malaria Control Program
- Commitment at the local level
- Awareness and support of SMC.

The first driver of success, the national malaria control program, decentralized SMC implementation to all levels of the health system. Regional directorates and local health districts were entrusted with organizing the annual campaign, managing supplies, assigning tasks, and creating distribution teams.

Commitment at the local level was the second driver of success. Chief nurses at health facilities coordinated the training and deployment of teams of volunteer medication distributors. Surveys of 456 community distributors in 24 health centres in 2017 confirmed the effectiveness of training. The distributors' commitment to ensuring that all children were treated extended to telephoning families, at their own cost, to remind them that they were coming.

The third key driver to success was raising awareness and support of SMC. The team found that 93% of mothers in the three health districts in 2017 knew about the upcoming campaign — proof of the effective planning and organization. The harmonious integration of this type of program throughout the health system means that it can meet the population's expectations and, the researchers added, ultimately become sustainable.

## **A concerted approach to implementation**

This innovative evaluation, due to be completed later in 2019, is of critical importance for policy and programming because it has identified the successful drivers of implementation and scaling up in Burkina Faso, which could be relevant elsewhere.

It also shows what can be accomplished when a national health authority effectively plans and organizes a large, complex program in a way that bridges the various levels of the existing health system and the community, mobilizes a corps of volunteer distributors, and ultimately meets the communities' expectations. "The credit for reaching such high coverage and effectively implementing the program in such a short time really belongs to the National Malaria Control Program," says the research team.

This research study will inform ongoing efforts in Burkina Faso and in neighbouring countries that are exploring the use of SMC to reduce the number of malaria infections in children under five.

The Innovating for Maternal and Child Health in Africa initiative is a seven-year CA\$36 million partnership funded by Global Affairs Canada, the Canadian Institutes of Health Research, and IDRC.

## Learn more

Read more about IDRC's [Innovating for Maternal and Child Health in Africa](#) initiative.

Read more about the research in two policy briefs (in French only):

- [Chimio-prophylaxie saisonnière du paludisme](#)
- [Comprendre le succès de l'implantation et l'expansion de la chimio-prophylaxie saisonnière du paludisme au Burkina Faso](#)

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