From ACTwatch to Action: Working with the private sector in Lao PDR

GMS Elimination of Malaria through Surveillance Program (GEMS)

ACTwatch Lao PDR Dissemination Meeting
Vientiane | 25 October, 2016
Increased private sector malaria testing, treatment and reporting according to national policies in target areas of Cambodia, Lao PDR, Myanmar and Vietnam.
1. How is GEMS supporting the Lao National Strategic Plan?

2. How is GEMS using the evidence produced by ACTwatch?
How is GEMS supporting the Lao National Strategic Plan?
1. NSP recognizes growing patients seeking care in the private sector

2. Private sector important in management & coordination (Obj. 1)

3. Private sector essential in universal case management (Obj. 2)

4. Private sector data is needed for complete national surveillance (Obj. 4)
1. GEMS provides training to private sector providers on national treatment guidelines.

2. GEMS provides supervisory support and quality assurance.

3. GEMS coordinates with CMPE to stock private sector outlets with quality ACTs & RDTs.

4. GEMS ensures private sector outlets regularly report case data into the national database.
1. Mobile migrant workers are identified as a key at risk group

2. Mobile workers need access to malaria testing and treatment
1. GEMS is mapping worksites to identify at risk workers

2. Malaria test and treat services will be established on worksites with quality assurance support

3. Data from worksites will contribute to national surveillance
1. Surveillance system must detect and immediately notify, investigate, classify and report.

2. Private, village and mobile teams should all be reporting.
1. GEMS will use a case surveillance app that collects data in real time.

2. Data will be immediately accessible to CMPE through DHIS2, or shortly made available through other formats.
How is GEMS using the evidence produced by ACTwatch?
Private sector positioning

Up to 80% of patients seek fever treatment through the private sector. What does ACTwatch tell us about:

- The availability of quality ACTs and RDTs in the private sector?
- The private sector’s knowledge of national treatment guidelines?
- Supervision of the private sector?
- The private sector’s contribution to national surveillance data?
Availability of any antimalarial in the private sector

Private-sector availability is lower than public sector

Pharmacies had the highest stock of antimalarials, at 71%
### Availability of any antimalarial in the private sector

<table>
<thead>
<tr>
<th>Outlet Type</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private for-profit facilities</td>
<td>62</td>
</tr>
<tr>
<td>Pharmacies</td>
<td>338</td>
</tr>
<tr>
<td>Drug Stores</td>
<td>3</td>
</tr>
<tr>
<td>General Retailers</td>
<td>31</td>
</tr>
<tr>
<td>Itinerant Drug Vendors</td>
<td>3</td>
</tr>
<tr>
<td>Total Private Sector</td>
<td>169</td>
</tr>
</tbody>
</table>

Among all screened outlets in the survey, there were 62 private for-profit facilities, 338 pharmacies, 3 drug stores, 31 general retailers, and 169 itinerant drug vendors. The total number of screened outlets in the private sector was 7,028.

<table>
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<tr>
<th>Outlet Type</th>
<th>Count</th>
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<tbody>
<tr>
<td>Health Facility</td>
<td>n = 172</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>479</td>
</tr>
<tr>
<td>Drug Store</td>
<td>15</td>
</tr>
<tr>
<td>General Retailer</td>
<td>6,295</td>
</tr>
<tr>
<td>Itinerant Drug Vendor</td>
<td>67</td>
</tr>
<tr>
<td>Total Private Sector</td>
<td>7,028</td>
</tr>
</tbody>
</table>
Availability of any antimalarial in the private sector

Among all antimalarial stocking outlets

- Any Antimalarial
- First-Line ACT
- Chloroquine
- Primaquine

PERCENT OF OUTLETS

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Antimalarial market composition in 2015

35% of antimalarial market is comprised of the private sector

N=402

- Public Health Facility
- Community Health Worker
- Health Facility
- Pharmacy
- Drug Store
- General Retailer
Antimalarial Availability among PPM and non PPM outlets

Among all screened outlets across PPM and non-PPM programs.
Among all screened outlets across PPM and non-PPM programs

Antimalarial Availability among PPM and non PPM outlets

PERCENT OF OUTLETS

Private Health Facility

Pharmacy

PPM Any AM

PPM Any ACT

Non-PPM Any AM

Non-PPM Any ACT
Among all outlets with at least one AM in stock or in the past 3 months

Availability of malaria blood testing: PPM and non-PPM areas 2015
Availability of malaria blood testing: PPM and non-PPM areas 2015

Among all outlets with at least one AM in stock or in the past 3 months, the availability of malaria blood testing is shown in the chart. The chart compares PPM Any Test and Non-PPM Any Test outlets.

- **PPM Any Test**
  - Availability in PPM areas

- **Non-PPM Any Test**
  - Availability in non-PPM areas

The chart indicates a significant disparity in availability between PPM and non-PPM areas.
Among all outlets with at least one AM in stock or in the past 3 months

Availability of malaria blood testing: PPM and non-PPM areas 2015
Availability of malaria blood testing: PPM and non-PPM areas 2015

Among all outlets with at least one AM in stock or in the past 3 months.
Providers who correctly state the first-line treatment and first-line dosing regimen for uncomplicated malaria in 2015

Among all outlets with at least one AM or malaria test in stock.

Health Facility
Pharmacy
General Retailer
Total Private Sector

PERCENT OF OUTLETS

Treatment
Dosing
PPM and non-PPM Private Sector Engagement, 2015

Among all outlets with at least one AM in stock or in the past 3 months

<table>
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<tbody>
<tr>
<td><strong>PPM</strong></td>
<td>50</td>
</tr>
<tr>
<td><strong>Non-PPM</strong></td>
<td>10</td>
</tr>
<tr>
<td>Training on Malaria Diagnosis</td>
<td></td>
</tr>
<tr>
<td><strong>PPM</strong></td>
<td>30</td>
</tr>
<tr>
<td><strong>Non-PPM</strong></td>
<td>10</td>
</tr>
<tr>
<td>Training on Treatment Guidelines</td>
<td></td>
</tr>
<tr>
<td><strong>PPM</strong></td>
<td>70</td>
</tr>
<tr>
<td><strong>Non-PPM</strong></td>
<td>10</td>
</tr>
<tr>
<td>Keep records on number of patients tested/treated for malaria</td>
<td></td>
</tr>
<tr>
<td><strong>PPM</strong></td>
<td>80</td>
</tr>
<tr>
<td><strong>Non-PPM</strong></td>
<td>10</td>
</tr>
<tr>
<td>Report numbers of patients tested/treated for malaria to government or non-governmental organization</td>
<td></td>
</tr>
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Private for-Profit and Pharmacy
Key Strategies

1. Expand the PPM network
2. Provide first-line treatment stock and remove other drugs
3. Provide and train on use of quality malaria blood testing (RDTs)
4. Provide training, supervision and quality assurance
5. Link private sector data into national surveillance system
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