

BULLETIN FROM THE PRIMARY HEALTH CARE CENTERS IMPLEMENTING ALMANACH IN SOMALIA

DECEMBER 2020



WHAT IS ALMANACH

For a parent it is important to be sure that his/her child receive the best attention and treatment possible when he/she is sick. For a health worker it is important to be confident in his/her decisions and to be supported in his/ her job. For this ALMANACH was born. In one tablet the most recent medical knowledge has been summarized by a group of international specialists in algorithms to guarantee the best consultation possible in compliance with international and validated guidelines.

The tablet leads the healthcare providers to seek and ask for the right symptoms, to perform an exhaustive physical examination, to request the laboratory tests really needed and to conclude with a pertinent conclusion and the most effective treatment and, in case, to refer the child if he cannot be treated in the health facility. ALMANACH has been thought for your health facility's resource in terms of drugs, staff availability and laboratory tests and it can be used by medical practitioners including doctors, nurses, community health workers even in remote, resource scarce locations. When you bring your child to the health facility, the health worker will consult your child with the help of the tablet. The health worker will enter the illness of your child and on the base of your child's complaints will provide the health workers with the right diagnosis and treatment for a better quality of care. With

ALMANACH you, as a parent, will be sure that your child will be treated according the most recent medical evidence, he will receive a better consultation and you will buy only the medicine that are really in need. Ask your health workers to be consulted through the tablet for the benefit of your child.

ALMANACH has been already successfully implemented in Afghanistan and Nigeria and it is now in use at the health facilities of Radar, Gubadley and Afgoi. More health facilities will be included in the future.

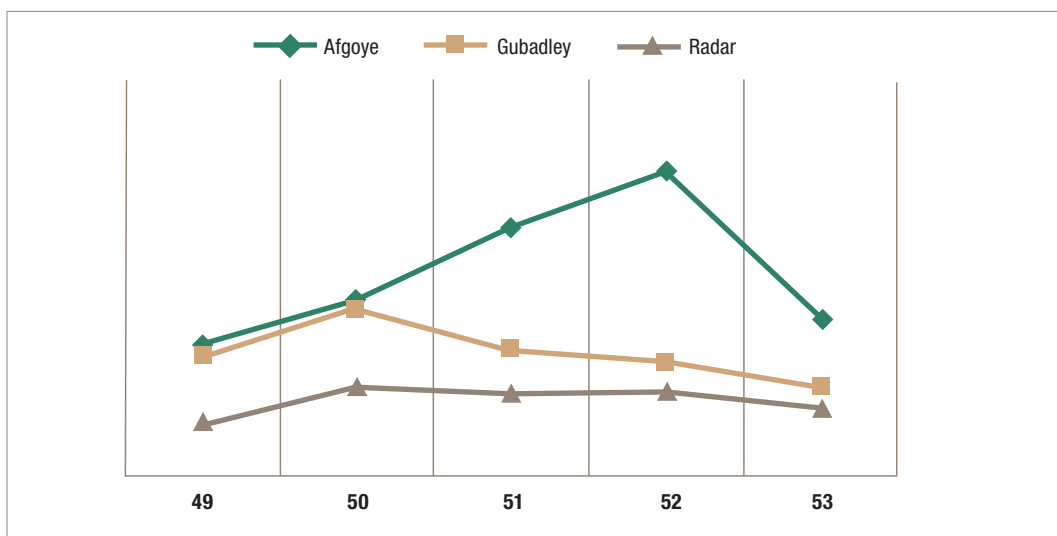


DECEMBER EPIDEMIOLOGICAL DATA

DEMOGRAPHY

During the month of December 2020, 1273 children were consulted at the Health Facilities through ALMANACH. Out of these, 644 (50.6%) were from Afgoi, 387 (30.4%) from Gubadley and 242 (19.0%) from Radar. In terms of gender composition, 690 (54.2%) were males, 583 (45.8%) females. Generally, there was a drop in the number consulted compared to the previous month attributed to clinic staff taking their leave days.

NO OF ALMANACH CONSULTATIONS DURING THE MONTH OF DECEMBER



Most of the consultations were new visits (95.3%), few of them were follow up consultations (4.0%) with a meagre 0.3% of children coming back due to a worsening health condition or no improvement.

ANEMIA CASE MANAGEMENT

	AFGOYE	GUBADHLEY	RADAR	TOTAL
Anaemia	2	12	5	19
Severe Anaemia	1	0	0	1
	3	12	5	20
Prevalence Rate	0,2%	0,9%	0,4%	1,6%

During December there were 19 cases of anaemia were diagnosed with the support of ALAMANACH (Afgoi 2, Radar 5 and Gubadley 12) and a single case of severe anemia in Afgoi. Gubadley still diagnosing high number of anaemia cases possibly due to high number of malnutrition cases

TRIAGE

In each of the clinics, temperature, weight and MUAC are measured before entering the consultation room, this is normally done when patients come to the clinic while adhering to COVID19 preventive measures. Almost all the children were weighed (97.9%) and measured (99.9%) for the temperature. MUAC was measured for 1378 children above 6 months with the results shown in the table below:

COLOR	#	%
Green	1013	85,5%
Yellow	143	12,1%
Red	29	2,4%
Total	1185	100,0%

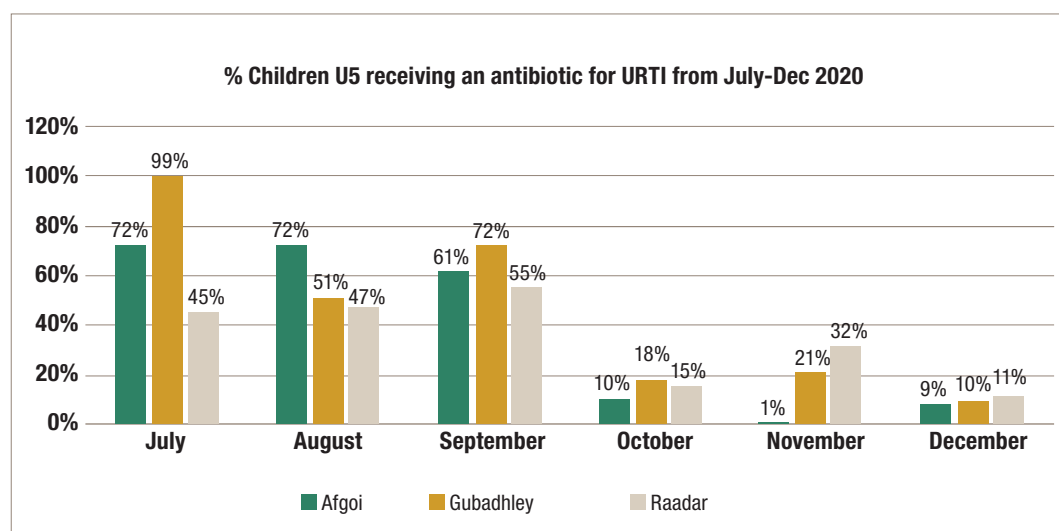
Majority of the screened children (85.5%) were in the green color code meaning they are in the normal nutrition status whereas 12.1% were in the yellow category indicating Moderate Acute Malnutrition that were referred to nearest supplementary feeding programme (SFP). Only 2.4% of the children were diagnosed with Severe Acute Malnutrition (red MUAC) and referred to the Outpatient Therapeutic Center (OTP) for further management. Mothers who bring children with green color code are provided with health messages on how to maintain their children's' good nutrition status.

MALARIA

MALARIA	AFGOYE	GUBADHLEY	RADAR	TOTAL
Very severe febrile disease likely malaria	0	0	0	0
Very severe febrile disease not malaria	1	0	0	1
Severe malaria	0	0	0	0
Possible malaria	22	22	62	106

During December, there was only one case of fever that was not malaria seen in Afgoi clinic. The case was referred to Afgoi hospital for further treatment. In all the clinics, there is stock out of malaria rapid diagnostic test kits (RDTs)ALMANACH suggests that all feverish children to be checked for malaria. There are 106 febrile cases (possible malaria) were seen in three clinics (Afgoi 22, Gubadley 22 and Radar 62) but not confirmed malaria.

ANTIBIOTICS PRESCRIPTION



There are certain conditions that do not require antibiotic prescription, Upper Respiratory Tract Infections URTI is one of them. ALMANACH indicator for antibiotic prescription threshold for URTI is <15%.

In December 2020, interestingly all clinics are below the set threshold of <15%. Gubadley and Radar that were high in November have significantly improved. Looking back at the pre-ALMANACH implementation period from July to September 2020 where ALMANACH was not implemented the figures were as high as >50% as can be seen from the above graph.

EAR INFECTIONS

Acute ear infection with discharge accounts for 86%(108) of the ear infection cases consulted in the three clinics. Only 13.5%(17) of the children had chronic ear infection with discharge. Only a single case of acute ear infection without antibiotics was seen.

RESPIRATORY INFECTIONS

Cough/difficulty in breathing and upper respiratory tract infections remain the most common diagnosis in the respiratory conditions accounting for 54.5% and 37.4% of the total cases respectively that were consulted during the month. Two cases of severe pneumonia were seen in Gubadley that were referred to the nearest hospital. The highest prevalence of the respiratory conditions remains Afgoi clinic (37%) with lowest prevalence this time in Gubadley (14%) compared to November data that revealed lowest prevalence was in Radar clinic.

GASTROENTERIC CONDITIONS

During the month, a total of 212 cases of gastroenteric conditions which is 11.5% increase from the November consultations. This means that there are more cases identified and treated in the clinics. Acute watery diarrhea accounts for 56% of the total conditions seen with dysentery 37.2%. High prevalence is seen in Afgoi (8.4%) and Radar (5.2%) as was the case in November.

THROAT INFECTIONS

There were 162 cases of throat infections seen in the three clinics with Afgoi seeing 78% of the total cases consulted during the month. Uncomplicated viral sore throat makes the highest percentage (83%) among throat infections. Radar clinic had the least prevalence.

OTHERS

There were 30 cases of conjunctivitis across the three clinics with Gubadley and Afgoi reporting 13 and 12 cases respectively. Radar had only 5 cases.

Measles- two complicated measles were seen in Radar and reported to the nearest hospital for further management.

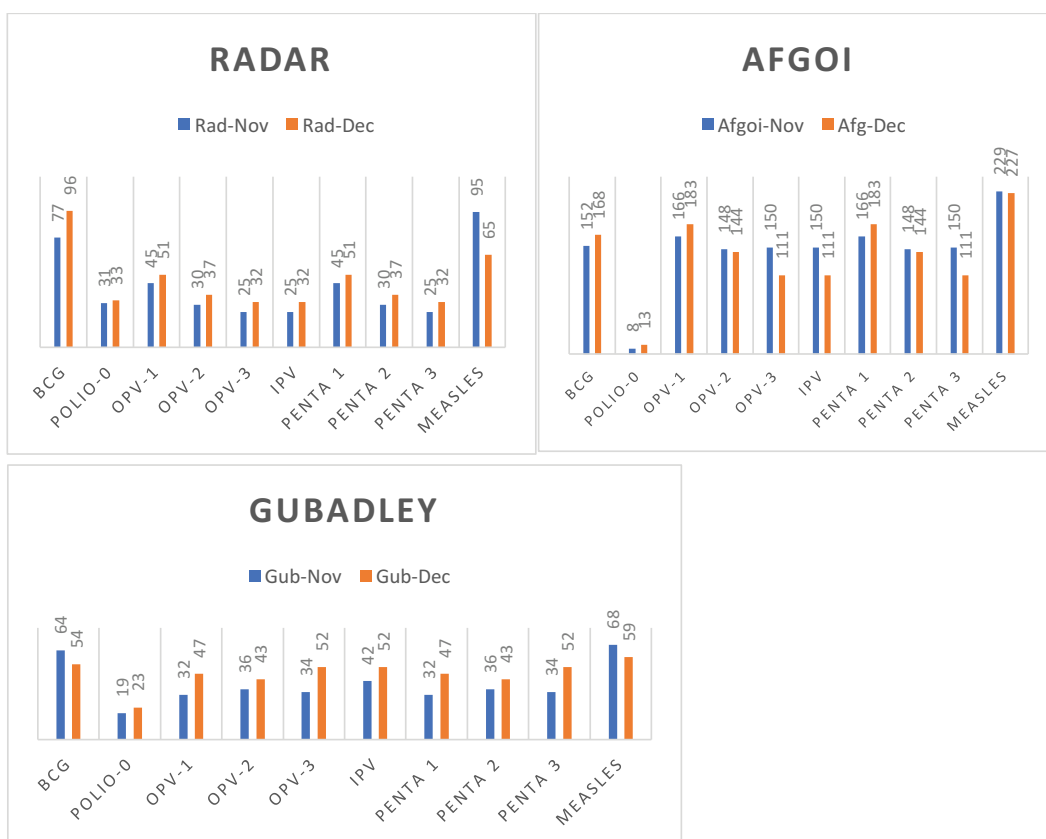
PREVENTION

VITAMIN A AND DEWORMING IN DECEMBER 2020

	VITAMIN A		DEWORMING	
	#	%	#	%
Afgoye	537	83%	394	61%
Gubadhley	197	51%	172	44%
Radar	206	85%	183	76%
Total	940	74%	749	59%

Compared to last month, there was an increase in the number of children receiving Vitamin A supplementation. However, there was a significant drop in the number who received deworming tablets. The reason could be the low number of children consulted during the month

VACCINATION:



Vaccination of children Under-5 is a key intervention that needs to be upscaled in clinics.

ALMANACH helps to remind health workers to ask if a child has been immunized. It's good to note that most of the antigens has seen increase from the previous month in all the three clinics. However, there was a drop-in measles vaccine uptake in all the clinics. Afgoi experience a slight drop in Penta 2 and 3 while a slight drop in uptake of BCG was seen in Gubadhley. The ALMANACH HFOs will unearth reasons for the decline in uptake of these critical antigens.

CONCLUSION

There is a decline in the number of children Under-five consultations done in December. This is attributed to Under-five nurses taking their leave days and perhaps reduced community mobilization in the villages. Fewer cases of anemia were identified and treated as per the algorithm.

ALMANACH implementation has contributed significantly to a reduction in antibiotics prescription for Upper respiratory tract infection. The pre-ALMANACH implementation figures were as high as >80% but three months after ALMANACH implementation, in December, all the clinics report <15% antibiotic prescription for URI. This figure is within the threshold of ALMANACH indicator.

OUR PARTNER IN SWITZERLAND

ALMANACH Somalia is the product of four years of experience and passion from a solid collaboration between the ICRC and the Swiss TPH. The Swiss TPH team is adapting the clinical algorithms and programming the software, to keep ALMANACH updated with latest clinical evidence applicable for the Somali context.

But who is the Swiss TPH? The Swiss Tropical and Public Health Institute (Swiss TPH, www.swisstph.ch) is a world-leading institute in global health with a focus on low- and middle-income countries. Swiss TPH teams work on innovative ideas like ALMANACH and combine research, education and implementation services at local, national and international levels. Our aim is to take science and innovation to impact, to enable and bring novel diagnostics, drugs and vaccines directly to people, communities, policy and decision makers in a way to improve health comprehensively around the globe

About 850 people from 80 nations work at Swiss TPH, focusing on infectious and non-communicable diseases, environment, society and health as well as health systems and interventions.

In 2020, Swiss TPH is managing more than 285 projects in more than 100 countries. ALMANACH Somalia is one of these projects.



The historical headquarter of the Swiss TPH in Basel

ALMANACH IN THE COMMUNITIES

ALMANACH is a new programme in Somalia that needs to get ownership and support from the community. To achieve this, the ALMANACH team conducted community awareness campaigns to enhance community understanding about the programme. The ALMANACH team first sensitized the clinic staff (nurses, health promoters, Community Health Committees (CHCs) and Female Community Health Workers (FCHWs) using various educational materials developed for the programme (Flip charts and posters). Thereafter, the health promoter together with CHCs and FCHWs developed a schedule for going out to the community to discuss ALMANACH programme. The discussion revolved around target beneficiaries, benefits of ALMANACH, discussing the story of Bishara, a girl in the flip chart to trigger community discussion as well as welcoming their testimonies of real life situations they encountered. The feedback and opinion we can collect from the population is extremely important for us to develop the tool. The community engagement is not one-off activity continues to happen in the three clinics. The goal is to have a community that understands, supports and fully utilizes the programme.

WHAT IS AN ALGORITHM

You have heard many times that ALMANACH is based on algorithms but... what is an algorithm? An algorithm is a set of steps to be followed to complete a process. Even the recipe to cook a chocolate cake could become an algorithm: it takes inputs (ingredients) and produces an output (the chocolate cake). We could call an algorithm a “list of steps”. Obviously, the medical algorithms behind ALMANACH are a bit more complex than the recipe for the chocolate cake but the concept is the same.

The little computer in the hand of your health workers suggests him/her which steps to complete to pursue the best consultation possible for your child. ALMANACH will lead the nurse from collecting the symptoms to performing the examination, to request a laboratory test to finally reach a diagnosis and provide a therapy. These steps have been scientifically proven and internationally recognized so little is left to chance.

ALGORITHM TO PREPARE A CHOCOLATE CAKE

Recipe

CHOCOLATE CAKE

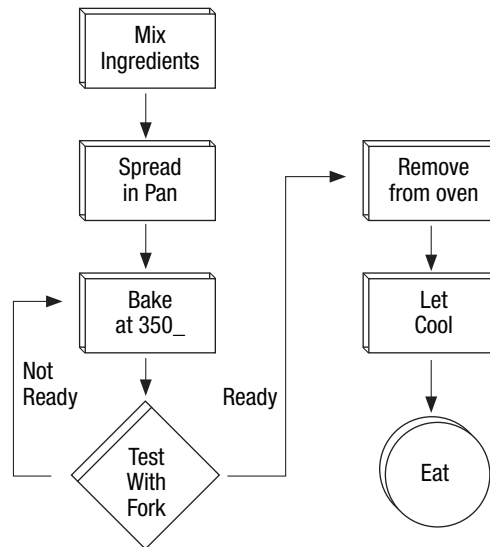
4 oz. chocolate 3 eggs
 1 cup butter 1 tsp. vanilla
 2 cups sugar 1 cup flour
 Melt chocolate and butter. Stir sugar into melted chocolate.
 Stir in eggs and vanilla. Mix flour. Spread mix in greased
 pan. Bake at 350_ for 40 minutes or until inserted fork
 comes out almost clean. Cool in pan before eating.

Program Code

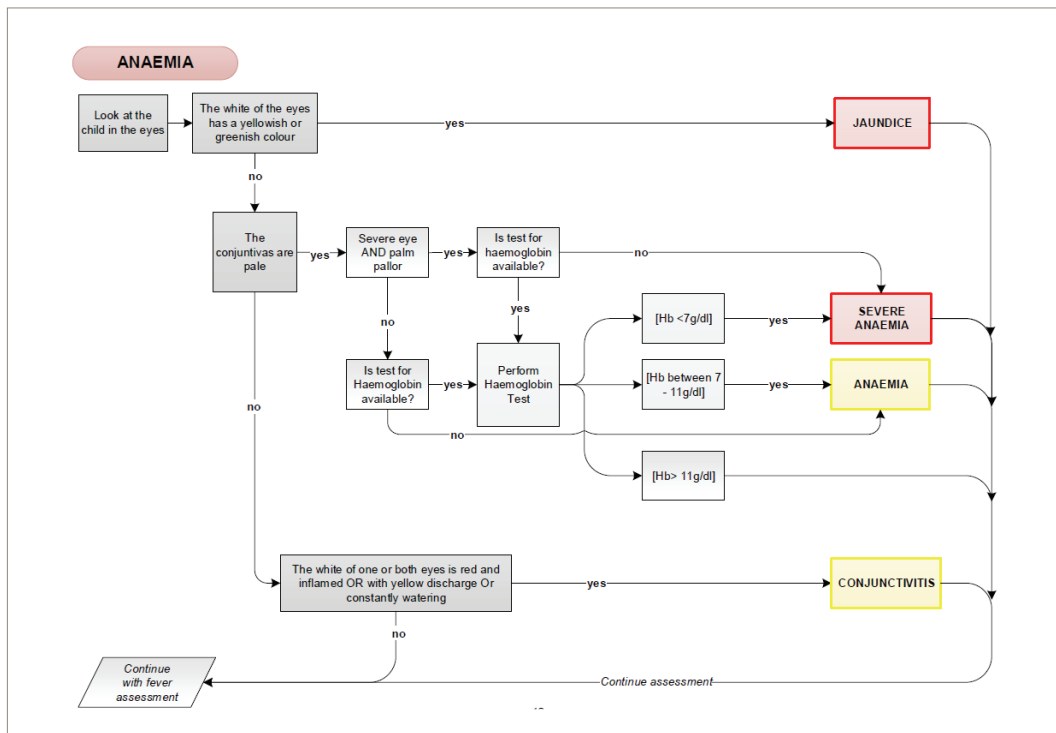
Declare variables

Chocolate Eggs Mix
 butter vanilla
 sugar flour

mix=melted ((4^w chocolate) + butter)
 mix=stir (mix + (2^w sugar))
 mix=stir (mix + (3^w eggs) + vanilla)
 mix=mix + flour
 spread (mix)
 While not clean (fork)
 bake (mix, 350)

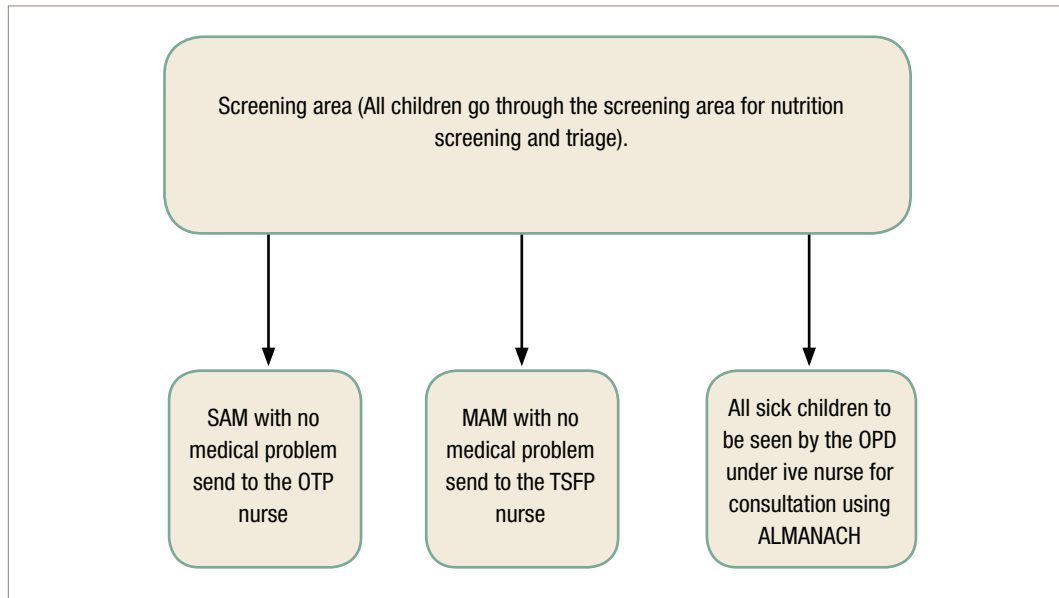


ALGORITHM TO DIAGNOSE ANAEMIA IN ALMANACH



COVID-19 PANDEMIC

Somalia reported a total of 4,744 cases of Covid19 and 130 deaths since the first case of Covid19 was reported in March 2020. There are currently 948 active cases.



THE VOICE FROM THE FIELD

Nasra (Under-5 nurse) says 'ALMANACH is a good help in dissemination of correct messages e.g. for breastfeeding exclusively for under 6 months, community understands more and more, health education level increasing''

'The biggest changes and improvements were seen in the diagnosis and treatment of respiratory infections, ear infections and severe Anaemia. ALMANACH is handy in providing guidance to health workers'' Mohamed (Radar U5 nurse)



Mohamed (U5 Nurse in Radar) doing consultation using ALMANACH.

NEXT STEPS

During the month, the ALMANACH team developed an action plan detailing the next steps of the programme implementation. Sensitization of Community Health Committees, Health Promoters and Female Community Health Workers was conducted in preparation for training of Under-Five nurses from Howlwadaag, Farjano and Beletwein clinics, Over-Five nurses from Radar, Afgoi and Gubadley.

The objective of the sensitization is to ensure that communities fully understand the ALMANACH programme in terms the scope, target population and benefits of the programme. Additionally, before training, the team will conduct clinical observation study in Howlwadaag, Farjano and Beletwein clinics to understand the use and the adherence to IMCI guidelines. This direct clinical observation will serve as a baseline/benchmark to monitor and evaluate expected changes and improvements on the provided quality of care for the management of sick children through ALMANACH.

If you like this bulletin, if you have any suggestion, question or if you want to collaborate with us.... dont hesitate! You can write an email or text a WhatsApp to Hassan Ali: habdulahiali@icrc.org; WhtasApp +254 722 409106

Made for the people with love..... ALMANACH team

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www.icrc.org
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The ICRC helps people around the world affected by armed conflict and other situations of violence, doing everything it can to protect their dignity and relieve their suffering, often with its Red Cross and Red Crescent partners. The organization also seeks to prevent hardship by promoting and strengthening humanitarian law and championing Universal humanitarian principles.

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