Strengthening malaria diagnostics in Liberia

The MalariaCare partnership is a five-year effort led by PATH and funded by the US Agency for International Development (USAID) under the President’s Malaria Initiative (PMI). The partnership works in PMI focus countries and other countries in Africa and the Mekong Region to scale up high-quality diagnosis and treatment services for malaria and other life-threatening illnesses.

MalariaCare collaborates with the Liberia Ministry of Health and Social Welfare’s (MOHSW) National Malaria Control Program (NMCP) to strengthen malaria diagnosis in all 15 counties across the country. Key activities include strengthening the capacity of county health teams (CHTs) to conduct malaria diagnostic quality assurance, training, supervision, and data management.

CONTEXT FOR MALARIA CARE IN LIBERIA

Liberia launched PMI-supported activities in 2008. The country’s health infrastructure was severely damaged during a long civil war, leaving only about 45 percent of the population with access to essential health services.

The entire population of approximately 3.5 million is at risk for malaria. Despite continuing challenges, Liberia has recently made progress toward improving malaria diagnostic capacity. A total of 1.8 million malaria cases were diagnosed in 2011, representing approximately 61 percent of all consultations. A gap analysis conducted by MalariaCare revealed that 78 percent of malaria cases seen between January and June 2013 had a confirmed diagnosis. Around two-thirds of cases were diagnosed with rapid diagnostic tests (RDTs).

From 2008 to 2012, the Improving Malaria Diagnostics (IMaD) project led activities to strengthen capacity for malaria diagnosis at the central level, with the ultimate goal of shifting key responsibility to CHTs. With IMaD’s support, the NMCP introduced an outreach training and supportive supervision program at 98 health facilities. Currently there is a need to expand the program because some counties still do not have trained supervisors.

Guidelines on laboratory diagnosis of malaria were completed in 2010 but need to be updated to reflect current World Health Organization (WHO) recommendations on universal access to diagnostic testing and treatment.

OBJECTIVES

MalariaCare’s activities in Liberia aim to achieve the following objectives:

- The accuracy of diagnostic testing for malaria is improved to greater than 90 percent.
- Increased percentage of patients suspected to have malaria or febrile illnesses who receive a diagnostic test for malaria.
- Increased percentage of patients who receive appropriate treatment for malaria or other febrile illnesses—consistent with the result of the diagnostic test.
- Strengthened laboratory systems at the country level for detecting malaria and other infectious diseases.
KEY ACTIVITIES

**Updating national policies and guidelines.** MalariaCare is assisting the NMCP to update national policies and guidelines on laboratory diagnosis of malaria. In collaboration with a wide range of stakeholders, the project is ensuring that policies reflect the latest WHO recommendations and national guidance. The project will also help develop supporting materials such as laboratory manuals and job aids for health providers.

**Building diagnostic capacity.** To build diagnostic capacity at the local level, MalariaCare is supporting “training of trainers” workshops for diagnostic supervisors from 15 counties. During the workshops, supervisors improve their own malaria microscopy and RDT proficiency in addition to gaining training and supervision skills. Supervisors then lead refresher skills building workshops for laboratory technicians. To further strengthen Liberia’s diagnostic capacity, the project is sponsoring three national experts to obtain WHO accreditation for malaria microscopy.

**Strengthening supervision at the county level.** In collaboration with the Rebuilding Basic Health Services Project, the Clinton Health Access Initiative, and other partners, MalariaCare is integrating on-site training and supportive supervision for malaria diagnostics into existing CHT supervisory tools, training materials, and policy guidelines. Activities include transferring key tasks from the central level to the county level and building the capacity of CHTs to conduct supervision visits of laboratory technicians.

**Decentralizing data management systems.** The project is also supporting the MOHSW and CHTs to decentralize and strengthen data management systems for malaria diagnosis.

**CONTACT MALARIACARE**

**Phone:** 202.822.0033
**Email:** MalariaCare@path.org

---

Photo: © 2005 Kevin McNulty, Courtesy of Photoshare