Notes from a site visit to Sightsavers in Conakry, Guinea, October 12, 2017

Participants

Sightsavers staff

- Dicko Boubacar Morou Country Director for Benin, Burkina Faso, Côte d'Ivoire, Guinea, and Togo
- Fanfode Kondé Program Manager for Togo and Benin
- Midiaou Bah NTDs Program Manager for Guinea, Côte d'Ivoire, and Burkina Faso
- Alpha Bah Finance and Support Service Manager for Guinea, Togo, and Benin
- Abdourahim Cissé Monitoring & Evaluation Consultant
- Bintou Condé Administrative Assistant
- Interpreter, hired by Sightsavers

GiveWell staff

- Josh Rosenberg Senior Research Analyst
- Isabel Arimand Research Analyst
- Andrew Martin Research Analyst

Guinea Ministry of Health staff

- Robert Camara Director of Prevention and Community Health (including NTDs)
- Dr. Bachir Kante Health Program Advisor
- Dr. NBalou Diakhaby Cooperation Adviser, Ministry of Health, and Focal Point, West African Health Organization

Diplôme d'Etudes Supérieures Spécialisées en Ophtalmologie (DESSO) staff

• Dr. Amde-Michael Ketema – DESSO Administrator and Ophthalmologist

Summary

As part of a site visit to Guinea in October 2017, GiveWell staff met with Sightsavers at its office in Guinea, followed by visits to the Ministry of Health, the Diplôme d'Etudes Supérieures Spécialisées en Ophtalmologie (DESSO, a West African post-graduate ophthalmology training institution), and the national medical stores at Pharmacie Centrale de Guinée.

Meeting with Sightsavers staff

Sightsavers shared a presentation, which covered:

- The history of its work in Guinea
- Background information on neglected tropical diseases (NTDs)
- The GiveWell-funded mass drug administration (MDA) Sightsavers supported in the N'Zérékoré region
- What it would like to do in Guinea with additional funding

• What it plans to do in Guinea in the year ahead

N'Zérékoré distribution

- Note: N'Zérékoré is the name of a city, the prefecture in which that city is located, and the region in which that prefecture is located. The region of N'Zérékoré includes (among other prefectures) the prefectures of Yomou, Lola, and N'Zérékoré, which is where the GiveWell-funded MDA took place. N'Zérékoré is in Guinée forestière, or the forested region of Guinea, in the southeastern part of the country.
- There are 38 health districts in Guinea, of which 17 are endemic for soil-transmitted helminths (STH), 31 are endemic for schistosomiasis (SCH), and 15 are co-endemic.
- The districts with the highest prevalence of STH in the country are in the N'Zérékoré region. In N'Zérékoré prefecture, STH prevalence was estimated at 54.7%. SCH prevalence in Yomou, Lola, and N'Zérékoré was estimated at between 70% and 80%.
- Next year, Sightsavers would like to do adult MDAs in N'Zérékoré region, as per the World Health Organization (WHO) recommendation for areas with prevalence this high.
- Sightsavers wants to do both community- and school-based distributions in the same regions because community-based distributions are an effective way to ensure all children are reached, including those who are not in school.
- When conducting both community and school-based distributions, Sightsavers avoids double-treating children by conducting both distributions in the same week, and by marking the fingernail of children who have been treated, so that they can avoid treating children who already have a mark.

Uses of additional funding

With additional funding, Sightsavers would like to work in several districts near Conakry. Sightsavers initially chose this area because of a gap in these districts. Other districts in Guinea have MDAs supported by Helen Keller International (HKI) or Catholic Relief Services. A map of which partners are covering which regions exists.

Coverage surveys

- N'Zérékoré coverage survey:
 - With 14 surveyors, the coverage survey reached 700+ children.
 - o Surveyors were not involved in the MDA.
 - Limitations:
 - Schools closed for the holidays before the coverage survey took place, so children may have been difficult to reach because of vacation.
 - Because of the holidays, an abnormally high number of people may have moved from the Conakry region or other parts of Guinea to N'Zérékore between the MDA and the coverage survey, deflating coverage figures.
 - Next year, they plan to do the campaign earlier in the year.

- Sightsavers asked 'verification questions' in the form of presenting children with drug samples and asking if they recognized them. This process involved showing children only the medications they took, praziquantel and albendazole. It was unclear to us whether all children were asked these verification questions, and what happens if e.g. a child says they were dewormed but fails to recognize the deworming tablet. Sightsavers also asks verification questions about the timing of the MDA based on social events, like holidays.
- o Parents were used as a proxy for children when the child was absent.
- We briefly saw part of the questionnaire used by surveyors.
- We asked about data quality control, and Sightsavers followed up with the following information: In Guinea, MDA data are analyzed and amended at four levels of the health system in order to guarantee quality and share experiences to improve the next campaign. The four steps are: synthesis at the level of the neighboring health center, district review, regional review, and national review. This involves supervisors cross-checking information such as age and gender against another source, such as the census.
- \circ The survey found 57.58% coverage. We asked why ${\sim}40\%$ of children were missed. Sightsavers told us:
 - There were inaccuracies in population-level data. We believe Sightsavers was commenting on the discrepancy between administrative coverage and the survey results.
 - The community-based campaign may not have been particularly effective. (According to the survey we've seen, coverage was 70% among school-enrolled children and 14% among children not in school. 91% of treated children were treated at a school rather than at a community location.)
 - As previously noted, children may have moved to N'Zérékoré between the MDA and the coverage survey, because of the start of summer vacation.
- Sightsavers did not randomly select a district in the N'Zérékoré region for the coverage survey because the selected district represented a mixture of urban and rural settlements. Communities within that district were randomly selected for the survey.
- Sightsavers plans to re-survey N'Zérékoré district next year, and might randomly choose one of either Lola or Yomou and one of the five districts in Conakry for coverage surveys.
- Sightsavers is interested in understanding whether people with disabilities have access to its programs, and may ask about that next year.

Priorities for the year ahead

Sightsavers' priorities for the year ahead include:

• Strengthening distribution capacity

- Strengthening 'supervision through independent oversight'—more specifically, contracting with third parties for supervision during the MDA
- Improving social mobilization
- Integrating NTD and water, sanitation, and hygiene (WASH) programs
- Reinforcing community drug distribution strategy
- Improving data quality
- Implementing MDAs for adults in N'Zérékoré, Yomou, and Lola

Meeting with Ministry of Health staff

Robert Camara, Director of Prevention and Community Health (including NTDs)

We briefly met with Robert Camara and had time to ask one question after introductions and before being led to a meeting with other Ministry of Health staff.

We asked what had been happening in the N'Zérékoré region in terms of MDAs for SCH/STH prior to Sightsavers' involvement. In 2012, there was an MDA supported by USAID through HKI that covered lymphatic filariasis (LF) as well as SCH/STH. Mapping was also done in 2012, which revealed that while SCH/STH rates are high in N'Zérékoré, LF was not very prevalent, so USAID did not continue funding MDAs in this region through HKI. The 2012 MDA is the only MDA that took place in this region prior to Sightsavers' involvement.

Dr. Bachir Kante, Health Program Advisor for the Ministry of Health, and Dr. NBalou Diakhaby, Cooperation Adviser for the Ministry of Health and Focal Point for the West African Health Organization

We met with two more senior staff members at the Ministry of Health. This meeting was entirely in French, with limited translation. We explained that we were interested in learning more about the Ministry of Health's work on NTDs and the role that Sightsavers played.

Visit to Diplôme d'Etudes Supérieures Spécialisées en Ophtalmologie (DESSO)

We received a tour of DESSO, a post-graduate Francophone training institution established in 2000 by the West African Health Organization (WAHO) and the Government of Guinea to train ophthalmologists in eight francophone West African countries. We met with Dr. Amde-Michael Ketema, DESSO administrator and ophthalmologist. The tour included exam rooms, equipment for procedures, the room where glasses are manufactured, the sales room, and the storage spaces. Sightsavers told us it supported 80% of the building construction and the provision of some equipment, alongside continuing to support DESSO operational costs and student scholarships. Much of the equipment had been donated by CBM. We were told that the organization is now financially self-sustaining. We also learned that prior to the existence of DESSO, it was very difficult to obtain the lenses needed for cataract surgery in Guinea.

Visit to Pharmacie Centrale de Guinée

We visited the Central Government Pharmacy of Guinea, where all Ministry of Health drugs for the public health service, including drugs for MDA distribution campaigns, are stored. There are also smaller regional drug stores located across the country, which receive shipments from this center to then distribute to government health centers. There was recently a fire that destroyed two warehouses at the Central Pharmacy and partially destroyed another.

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