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## APPENDIX F

### Vendor-to-Vendor One-Day Training of Counter Attendants and Mobile Vendors Facilitators' Manual

#### *“Treat Malaria Correctly”*

#### **8:30-9:00 Introduction and Climate Setting (30 mins.)**

Welcome

Introductions

Objectives of the day:

- Understand new malaria treatment guidelines
- To be able to communicate new guidelines to shopkeepers

Training will consist of presentations, discussion, role plays and a quiz

#### **9:00-10:00 Explanation of Activity (60 mins.)**

Objective: Understand the Vendor-to-Vendor Activity and what their role is

- Community members, rather than going to a health clinic, often buy drugs for treating malaria at local shops or pharmacies. When a person buys a drug for malaria at a shop or pharmacy we want to make sure that they receive an effective drug, the correct dosage and correct instructions on how to take the drug.
- The DHMT has designed a programme to have drug wholesalers educate drug retailers on malaria treatment guidelines

Here is how you can help us to accomplish our goals:

1. Pay close attention to this training. We will be giving you the latest information on malaria treatment.
2. Educate shopkeepers about what you learned today.
3. Give shopkeepers the job aids so they can refer to them if they have questions
4. Make sure that you understand the guidelines.

*Notes to facilitators:*

Put up flipchart of “Objectives”

- Review with participants
- Let them ask questions

#### **What is vendor to vendor?**

You (an attendant or mobile vendor) supply drugs to shops, kiosks, chemists and private doctors. When you next sell them drugs you will also educate them about the information you learned here today. The activity is called vendor to vendor because wholesale vendors educate retail vendors.

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## Why involve the private sector?

We would like to form a partnership with you, counter attendants and mobile vendors, because you already interact daily with shopkeepers, private doctors and rural chemists. You have an established relationship with them. There are so many shops in this district that it would be very difficult for health workers to reach them all.

### *Notes to facilitators:*

- Put up flip chart with graphic of activity (see Fig. 1 in this manual).
  - Ask participants to refer to checklist in folder.
  - Read checklist out loud with group
- Refer to checklist (at end of Facilitator's Manual) for attendants or mobile vendors depending on audience

## Why you should participate in this activity

- You will be supplying shops and chemists with the most effective malaria drug.
- By selling the most effective drug you will get positive feedback and you will have a good reputation in the community.
- The continued selling of an ineffective drug could hurt your reputation.
- You will assist the community to fight malaria.
- **You will help save lives**, especially of babies and children under 5 years.

### *Notes to facilitators:*

- Put up blank flipchart
- Ask them to state why they should participate, put on flipchart, discuss
- Add any not mentioned

## 10:00-11:00 General Information on Malaria (60 mins.)

Objective: Learn basic information on malaria (extent of disease, causes, symptoms)

### Status of Malaria Worldwide and in Sub-Saharan Africa

- Each year there are more than 300 million cases of malaria worldwide
- Malaria kills more than 1 million people each year worldwide
- 3,000 people die from malaria each day worldwide
- Malaria is responsible for one out of every four childhood deaths in Africa
- Children often die of malaria within 48 hours of the first symptom
- The economic costs of malaria are estimated at US\$2 billion a year, or about [use local currency]

### *Notes to facilitators:*

- Ask participants if they know how many people die from malaria, how many get malaria, etc.
- Put up flipchart and read statistics out loud.

### Status of Malaria Here [example: Kenya and Bungoma District]

Malaria occurs in most parts of Kenya (except at some very high altitude areas), but it varies from region to region. In the lake region (including Bungoma District) and coastal areas, malaria is transmitted year round. Malaria is one of the most serious public health problems in Kenya.

- About 26,000 Kenyan children die each year from malaria. This is equal to an average of 72 children per day.
- Malaria causes disability among adults which significantly affects the nation's economy.

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In Bungoma district, malaria is a very serious problem

- Nearly half of the people admitted to the hospital have malaria.
- 1 in 3 people who die in hospitals die from malaria.

### **What is Malaria?**

Malaria is a disease caused by the blood parasite *plasmodium*. The disease is transmitted when an anopheles mosquito carrying malaria parasites bites a person.

### **Signs and Symptoms of Malaria**

The harmful effects of malaria are mostly seen in babies, young children and pregnant women. Malaria can vary from mild to severe disease. Most people with malaria have the following signs and symptoms:

- Fever or a history of fever lasting a few days
- Headache
- Body and joint pains
- Feeling cold and sometimes shivering
- Loss of appetite
- Sometimes – stomach pains, diarrhea, nausea and vomiting

The following are signs and symptoms of **severe or serious malaria**:

- Fever or history of fever and any or all of the following:
- Unconsciousness
- Had convulsions or fits (with this fever)
- Fast or difficult breathing
- Pale hands, tongue and inner part of the eyelids
- Generalized body weakness
- Dehydration

Any person with severe malaria should go to a health center immediately.

### **11:00-11:15 Tea Break (15 mins.)**

### **11:15-11:45 New National Malaria Guidelines (30 mins.)**

Objective: understand current malaria guidelines and know names of approved drugs

#### **[Example: Kenya]**

In 1998, the Ministry of Health adopted new guidelines for the treatment of malaria, due to resistance to chloroquine (about 85% of malaria cases in Bungoma were found to be resistant, which means that the drug had become ineffective.) These new guidelines changed the recommended first-line drug for malaria from chloroquine (CQ) to SP (sulfadoxine-pyrimethamine or sulfalene-pyrimethamine).

#### *Exercise*

- Ask participants to make a list of the signs and symptoms of malaria
- Write responses on flipchart
- Cross out any that are not symptoms of malaria – explain that it is not
- Add any that are missing

Ask if they know symptoms of severe malaria – add them, or circle them on list

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Among the SP drugs now being sold, only **Fansidar, Metakelfin, Laridox, Orodar and Falcidin** passed quality control tests in Nairobi in October 1999. Therefore, these are the only drugs that are approved by the Ministry of Health.

**Discussion:**

What are the main anti-malarial drugs sold in this district? At pharmacies? At shops?  
Which drugs are best? Why? How can retailers be convinced to stock approved drugs?

**Remember:**

- SP is now available without prescription and can be sold in shops
- A benefit of SP is that it is one dose; this is easier for people to remember, and it means that it is less likely that they will buy an underdose.

## **11:45-12:45 Explanation of Job Aids (60 mins.)**

Objective: To understand the content and use of the two job aids

A job aid is a tool to help someone do his or her job correctly.

**The shopkeeper job aid** contains the correct malaria treatment dosages as well as advice on what to do in situations when it might be difficult to follow the guidelines. It should be used by shopkeepers, private practitioners and attendants who are dispensing drugs to customers

*Notes to facilitators:* Hand out the job aids to all participants. Read through the job aids item by item with the group. After each section, stop and check their understanding.

**The client job aid** is to make people aware that shopkeepers can sell and advise them on correct malaria treatment.

## **12:45- 1:00 Agreements (receipts) (15 mins.)**

You will ask each shopkeeper or private practitioner that you educate on the job aids to sign the front of the posters, as well as a special agreement form (receipt) saying that they will follow the new guidelines. You will sign it also. They will be left with one copy and we will collect the other copy, or you can turn them in to the District Health Office.

## **1:00-2:00 Lunch (60 mins.)**

## **2:00-2:15 Interpersonal Communication Skills (15 mins.)**

The following are some tips for effective communication when you orient the shopkeeper or private practitioner to the job aid:

- Use words that the shopkeeper will understand
- Emphasize the importance of using SP as first-line drug, even for young children
- Make eye contact
- Allow the shopkeeper to ask questions

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- Ask the shopkeeper to repeat main concepts
  - Be friendly and helpful

In the next section, you each will practice communicating these job aids to retailers. We will be observing you and telling you which interpersonal communication skills you need to strengthen.

## **2:15-3:45 Practice with Job Aid (20 mins.)**

For most of the afternoon we will work in small groups to practice how to educate shopkeepers and private practitioners on the job aids.

Each participant will orient a shopkeeper to the job aid.

Break into groups of 4-6 people, with one facilitator per group.

First give a few minutes to look over the job aid. Clarify if they have questions. Ask questions on dosage to check understanding. (10 mins.)

Clarify that they understand when they are supposed to educate. Discuss issues specific to attendants/mobile vendors (10 mins.)

## **Mock Encounters –Round 1 (70 mins.)**

Facilitator should demonstrate how to educate a shopkeeper on the job aids, while the others watch. If possible, arrange for real 4-5 real shopkeepers to come in for this session. If this is not possible, one participant will pretend to be a shopkeeper. Then have each of the participants play the part of an educator, followed by feedback from the whole group. Give feedback on technical information and interpersonal skills. Have the participants also sign agreement forms and suggest locations for the job aids. (70 mins.)

## **3:45-4:00 Tea Break**

## **4:00-4:30 Mock Encounters –Round 2 (30 mins.)**

Continue the role plays. If all participants have had a chance to role play, facilitators should have weaker participants try again in order to correct mistakes.

## **4:30-4:50 Quiz (20 mins.)**

Administer a 10-question quiz to participants on malaria (see Appendix J for an example). Have participants pass their quiz to the neighbor on left for scoring. Clarify any issues.

## **4:50-5:15 Final Discussion; Questions and Answers (25 mins.)**

This is an opportunity to have a final discussion on the vendor-to-vendor concept. Make sure that participants do not leave without having any questions answered. Remind them of the

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importance of their participation. Also tell them that there will be awards to the vendors who communicate the guidelines the most widely and correctly. Advise them that there will be a mystery shopping evaluation, as well as monitoring visits in the next six months.

### **5:15-5:30 Distribution of Materials and Certificates (15 mins.)**

Distribute: Job aids (20 of each job aid per participant) and agreement booklets. Each job aid should be numbered. The facilitators should record who gets which job aids (e.g, Job aids 501-520, Thomas Sembo, Bungoma Mobile Vendor) for monitoring purposes.

*Note: If anyone feels that they can distribute more than 20 job aids, give them as many as they think they can distribute (maximum of 40). They can get more from the District Health Office.*

Also distribute: Certificate of Completion of Training, caps, t-shirts (if available)

### **5:30 Close**

Thank the participants for coming and encourage them to communicate the guidelines. Have appropriate send-off.

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## APPENDIX G

### **Vendor-to-Vendor Training of Counter Attendants and Mobile Vendors Participant Hand-Out Bungoma District, Kenya**

*“Tibu Malaria Sawasawa”*

#### **Purpose**

Malaria is a serious health issue in Bungoma District. However, when properly treated a person with Malaria is quickly cured. As part of a District initiative to prevent and control malaria, we want all people to get effective treatment for Malaria whether they go to a health center, a shop or a private practitioner.

The District Health Management Team has developed a way to teach shopkeepers and other private practitioners how to treat Malaria properly. We have named the strategy “Vendor to Vendor: Malaria Drug Education Project” because you, a wholesale vendor, sell drugs to retail vendors.

Our goal is that when you sell anti-malarial drugs to shops, kiosks, chemists and private practitioners, you will also educate them about the treatment information you learned here today.

#### **Why Involve the Private Sector?**

We have chosen to involve you in this activity, because you already interact with the shopkeepers, chemists and private practitioners. There are so many shops and private practitioners in this district that it would be very difficult for health workers to reach them all and it would be difficult to bring them all together for a training.

#### **Responsibilities of Wholesale Attendants**

1. When a shopkeeper comes to buy malaria drugs, explain which drugs are the most effective for malaria and are recommended by the Ministry of Health.
2. Explain to the shopkeeper or private practitioner that SP can now be sold without a prescription at a shop.
3. Give the shopkeeper or private practitioner a job aid, explain the meaning of each section, and tell them to hang it in the shop where they can easily use it when someone wants to buy a malaria drug. (*Note: if they have already received a job aid, do not give them another one.*)
4. Ask the shopkeeper or private practitioner to sign his or her name on the front of job aid.
5. Ask the shopkeeper or private practitioner to explain the job aid back to you so that you know that they understood it.

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6. Give these key messages:
    - SP is not too strong for young children
    - Panadol should always be given with SP, even if the child is not feverish
    - If you treat malaria right the first time you will save money later
  7. Tell the shopkeeper or private practitioner to hang the job aid where they can easily see it when serving clients.
  8. Give the shopkeeper a client job aid poster to hang at the shop where clients can see it. They should also sign the front of this job aid.
  9. Ask the shopkeeper or private practitioner to sign an agreement saying that they received the job aids and will follow the new guidelines. Sign the agreement yourself. Give one copy to the shopkeeper or private practitioner; keep the other copy. Keep the agreements and a DHMT member will pick them up.
  10. When the shopkeeper or private practitioner returns, ask them if they have any questions about the malaria treatment guidelines or about the job aid.

### **Why you should participate in this activity**

- You will be supplying shops and private practitioners with the most effective malaria drug.
- By selling the most effective drug you will get positive feedback from your customers and you will have a good reputation in the community.
- The continued selling of an ineffective drug could hurt your reputation or the reputation of the business you work for.
- You will assist the community to fight malaria.
- **You will help save lives**, especially of babies and children under 5 years.

### **How we will monitor the activity**

After you have had the opportunity to orient shopkeepers and private practitioners with the Job Aid, their performance will be evaluated using Mystery Shoppers. Mystery Shoppers are people who will pose as customers. They will enter a shop or chemist and say that they have a child at home with malaria. After the Mystery Shopper visits the shop or chemist he or she will make note of what drug shopkeeper/private practitioner sold and in what dosage. The Mystery Shopper will check to see if the Job Aid is present and if the shopkeeper/chemist used it.

## **GENERAL INFORMATION ON MALARIA**

### **Status of Malaria Worldwide and in Sub-Saharan Africa**

- Each year there are more than 300 million cases of malaria worldwide
- Malaria kills more than 1 million people each year worldwide
- 3,000 people die from malaria each day worldwide
- Malaria is responsible for one out of every four childhood deaths in Africa
- Children often die of malaria within 48 hours of the first symptom
- The economic costs of malaria are estimated at US\$2 billion a year, or about [put in local currency]

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## Status of Malaria in Kenya and Bungoma District

### *Kenya*

- Approximately 26,000 Kenyan children die each year from malaria. This is equal to an average of 72 children per day.
- Malaria causes disability among adults which significantly affects the nation's economy.

### *Bungoma District*

- Malaria is transmitted year round.
- Nearly half of the people admitted to the hospital have malaria.
- 1 in 3 hospital deaths is due to malaria.

## What is Malaria?

Malaria is a disease caused by the blood parasite *plasmodium*. The disease is transmitted when an anopheles mosquito carrying malaria parasites bites a person.

## Current National Malaria Treatment Guidelines

The Ministry of Health has stated that an approved SP drug—namely, **Fansidar, Metakelfin, Orodor, Laridox, and Falcidin**—is the recommended first-line drug at all levels of the health care system, including home treatment. These drugs were previously only available at pharmacies but now can be sold by shops. The new drug is easier to take because only one dose is necessary.

The change was made because malaria had become resistant to chloroquine (CQ). That is, people who took CQ were not getting cured of their malaria. In Bungoma district, if 100 people take CQ, less than 15 will be cured of their malaria.

**\*\*SP does not reduce fever so it should always be taken with Panadol**

See the dosage chart on the Shopkeeper Job Aid

## Inter-Personal Communication Skills

The following are some tips for effective communication when you orient the shopkeeper to the job aid:

- Use words that the shopkeeper will understand
- Emphasize the importance of using SP as first-line drug, even for young children
- Make eye contact
- Allow the shopkeeper to ask questions
- Ask the shopkeeper to repeat main concepts
- Be friendly and helpful