LLIN Distribution Programme – Detailed Information



Summary

# of LLIN	S Country	Location	When	By whom
10,000	Liberia	Margibi, Bong, Nimba, Grand Bassa, Montserrado counties	Jan-Feb08	Liberia National Red Cross Society

Further Information

1. Please describe the specific locations & villages to receive nets and the number to each? Please provide longitude/latitude information. (Important note: If the distribution is approved, approval will be for the nets to be distribution to these specific locations. Location changes will only be considered, and may be refused, if due to exceptional/unforeseen circumstances.)

Under 5s County Total Pop Pregnant women Nets Margibi 15,000 2,250 750 3,000 Communities Selected: Konemah, Vahyeamah, Polan Town, Weamu, Kwalakomah, Gbomokollie, Cinta Town 13,000 650 Bong 1,950 2,600 Communities selected: Gbarngasaiquelleh, Naiweh, Namaa, Kpaiiyah, Kpanya Nimba 8,200 1,230 410 1,640 Communities selected: New Saniquelleh, Civilised Community, Gabien, Catholic Compound Community, Central Saniquelleh, Town Hall community Grand Bassa 12,000 1,800 600 2,400 Communities selected: Barseeqiah, Bannie, Kanquee, Zennah, Tibmbo, Saturday, Boeglay, Zoe Town, Gaye Town 270 90 Montserado 1,800 360 Community selected: Duala, Paynesville Red Light, Clara Town, Logan Town, West Point East, Duport Road, Matadi, Fiamah, PUCC Community, 72nd Community

2. Is this an urban or rural area and how many people live in this specific area?

These counties are rural areas with an estimated cumulative population of 50,000 inhabitants (in all five counties).

3. Is this a high risk malaria area? If yes, why do you designate it as high?

Yes, it is a high risk malaria area because malaria is endemic in Liberia. Additionally, clinical records show malaria as the highest cause of morbidity in the country, especially among pregnant women and children under five years.

There have been frequent occurrences of anaemia and abortion/miscarriage among pregnant women and sudden deaths among children under five years as a result of suspected and confirmed malaria cases.

4. How many *reported* cases of malaria and malaria deaths were there in this area in 2005? If you do not have statistics please make a qualitative comment.

The cases from clinics and hospital consultations revealed about 38% of out-patient attendants and 42.3% of in-patient deaths were due to malaria.

Figures for the 5 counties targeted:

2005 Simple Malaria Cases: recorded figure is 23,336 Complicated Malaria: recorded figure is 3,057

2006 Simple Malaria: recorded figure is 82,816 Complicated Malaria: recorded is 204,104

5. Is this distribution of nets 'blanket coverage' of an area/village or to a select/vulnerable group? If the latter, please describe this group.

The net distribution is for a targeted group. The nets will be distributed to children under five years and pregnant women because they are the most vulnerable groups and are now being targeted for net distribution per the National Malaria Control working guidelines.

6. What is the existing level of ITN use in this area? Are there existing bednet distribution programmes in this area?

The National Malaria Control Program and other partners including the Liberian Red Cross distributed nets once or twice in these areas in 2005 and 2006. A follow-up on hang-up and keep-up of these nets are satisfactory.

However, there is a need to redistribute ITNs because most of the communities that will be targeted now could not be reached during the time of distribution earlier on this year. This was due to insufficient human and logistical resources by the MoH.

The LRCS has adequate well trained volunteers in place and the necessary logistical ability to ensure that the villages are assessed and distribution is done. The areas mentioned for redistribution are highly infested with the female Anopheles mosquitoes that cause malaria. Additionally, health facilities records in these areas show that malaria is the primary cause of clinics and hospitals visitations especially among the under five years and pregnant women.

7. Why was the area/villages chosen for bednet distribution and who made this decision? Please provide the name, position and organisation of the person/s making the decision.

These counties were selected based upon frequent recorded reported cases of malaria in consultation with the National Malaria Control Division. Secondly, they were chosen because there is a strong Liberian Red Cross community base of volunteers that are willing to work in these areas.

Decision making: Dr. Joel Jones, Director, National Malaria Control Programme jjonesdr AT yahoo.com Phone : +231 651 6577

8. Have you **consulted with the National Malaria Programme** in your country about this distribution and what was their response? Please provide the name, position and contact details of the person/s with whom you have liaised.

Yes, the National Control Program has been consulted and they have provided a positive response. The Liberian National Red Cross is an active member of the National Malaria Country Program Steering Committee.

The contact person at the NMCP is: Dr. Joel Jones, information as above

9. Please describe any **pre-distribution activity**, in particular how the size of the target group and number of nets required will be ascertained?

The LNRCS has been implementing a five years community based Health programme in these counties focusing on malaria prevention and HIV/AIDS prevention. It also focuses on the dissemination of key health and hygiene behaviours as well as providing water and sanitation facilities. The bed net distribution and follow up activities could be integrated in these already existing well structured programmes.

Distribution activities will include: -Mobilization and sensitization of selected communities in local dialect using radio messages, megaphones, town crier. -Education on the usage and maintenance of bed nets. -Selection and training of community based Red Cross Volunteers on distribution strategy. -Registration of beneficiaries under five years and pregnant women before the actual distribution. -Documentation of the % of under fives and % of the pregnant women against the total population in each community (15% and 5%, respectively).

County	Population	
Margibi	15,000	
Bong	13,000	
Nimba	8,200	
Grand Bassa	12,000	
Montserado	1,800	

Note: According to recent government pronouncement, the acceptable figures for calculating number of under five yrs and pregnant women are: 15% for less the five yrs and 5% for pregnant women against the accumulative population.

10. Please describe how the bednets will be distributed, by whom, whether distribution will be a focussed effort or part of a combined programme and if there will be an information/education component to the distribution? Please indicate over what time period (typically, the number of days or weeks) the distribution will occur.

The elders of each community will help to identify the beneficiaries.
Selection and training of community-based Red Cross Volunteers on the distribution strategy.
Distribution cards will be issued to each targeted beneficiary, e.g. mothers of under fives and pregnant women.

-A distribution will be done at strategic points with names of recipients recorded.

-The information and education components are noted above in question #9.

Timeline of distribution is as follows:

Maribi	Bong	Nimba	Grand Bassa	Montserrado
7 communities	5	6	9	10
January	Jan.	February	February	February

11. What **post-distribution follow-up** is planned to assess the level of usage (hang-up percentage) of the nets? How long after the distribution will this assessment take place? Will you provide us with the findings? What will you be able to do subsequently to increase net hang-up if relevant?

Follow up and monitoring of distributed nets by community health volunteers and Red Cross staff will be included. During this period, each staff will do all regular check to ensure that the net is used properly. Additionally, to ensure that the net is tucked under the mattress or mat (if sleeping on floor) to prevent mosquitoes from entering and that the net is properly treated and maintained.

12. Please give the name and contact information for the (government) head of the district health management team for the/each area. Please ensure you include contact information.

County	Contact information
Margibi	Dr. Hawa M. Kromah, County Health Officer +231 653 9910 Bhawakromah AT yahoo.com
Bong	Dr. Garfee Williams, County Health Officer +231 658 8369 garfeew@yahoo.com
Nimba	Dr.Cuallaw Jabbeh, County Health Officer +231 651 2992 Cuallaujabbeb @yahoo.com

Grand Bassa	Dr. Jerry F. Brown, County Health Officer +231-6527698 Bachte AT yahoo.com
Montserado	Dr. Cleekonah Nyanzeh, County Health Officer +231-6519825 Cleekonah AT yahoo.com

13. Please confirm the nets will be distributed free-to-recipients, a requirement for us to fund nets.

The nets will distributed free of charge to the recipients.

14. Please confirm you will send us, post-distribution, at least 40 digital photos per sub-location, taken at the distribution/s, to be added to our website as we report on the distribution to donors.*

Yes, the national society has a digital camera to take photos during the net distribution and will send photos.

15. Please indicate if you will be able to provide video footage from each sublocation. This is not mandatory but is preferred and aids reporting to donors and encourages further donor giving.*

We will try to video parts of the distribution.

16. Please confirm you will send a **Post-Distribution Summary** when the distribution is complete.*

The national society will send post distribution summary upon completion.

17. Please provide your name, role and organisation and full contact information.

S. Kokpar B. Wohwoh Director for Health and Disaster management E-mail: oshec1234 AT yahoo.com Tel: +231 440 944 Responsible for both curative and preventive health activities in 15 counties, Liberia National Red Cross Society

*Information on providing photos, video and a Post-distribution Summary is included in the attached document.