

WORLD SWIM AGAINST MALARIA Free Net Distribution Report 15th – 20th January 2008



Mothers waiting to receive their Nets

THE GAMBIA RED CROSS SOCIETY

INTRODUCTION

The Gambia Red Cross Society (GRCS) is recognized by the Government of the Gambia as a voluntary relief organization, auxiliary to the Public Authority, particularly to the Medical Service of the Armed Forces in accordance with the Geneva Convention. The GRCS started as a Branch of the British Red Cross in 1948, and become a recognized independent National Society (NS) in 1966 when Government of The Gambia ratified the Geneva Convention in 1965 and established by Act of GRCS.

In the Gambia, malaria is one of the leading causes of morbidity and mortality especially among children under five years of age and pregnant women. About 20% antenatal attendance and 40% under five visits in Maternal and Child Health Clinics are due to malaria. Malaria has a reorganised link with poverty and is consistent with the overall government strategy on poverty reduction. The villages targeted lie along the river ring of the Northern part of the Gambia characterised mainly by a swampy environment. The warm climate encourages rapid vector breeding and increase vector population in all these districts. The region has the lowest rate of Insecticide Treated Bed Nets (19%) distributed as indicated in the 2004 situational analysis survey.

North bank Region is a rural area and the inhabitants are local farmers. The target population has a total of 117,828 people who live in the rural areas. Children under five years and pregnant women were the main beneficiaries of the long lasting Bed nets (LLN) distribution provided by World Swim Against Malaria through the International Federation of Red Cross and Red Crescent Societies. While conducting the house to house sensitization on community IMCI, the nets were distributed to the target beneficiaries.

<u>Goal:</u>

Support the Government (DOSH) to reduce the incidence of malaria and other child hood illnesses in the North Bank Region.

Objective

- Distribute bed nets (LLIN) to the target population of the North Bank Region
- Integrate ITN distribution with Community Sensitization of Community IMCI within North Bank West Region

Launching Ceremony

The IMCI house to house sensitization was launched at the North Bank West Regional Health Management Team Headquarters in Esau. The launching of the bed net was also incorporated in the program and the ceremony was held at Essau Health centre. The program was attended by the secretary of state for health, officers of the Regional Health team, the secretary General of the



Gambia Red Cross and other GRCS Staff, local government authorities, Red Cross Volunteers in North Bank, Community Health Nurses, Media representatives from GRTS, Community Radios in NBR, private radios in the greater Banjul and the members of the print media and community members.



The Secretary of State for Health handing over the first Bed Net during the launching ceremony

The Secretary of State, the Secretary General and the head of the Regional Health Team delivered special remarks and deliberated on the strong collaboration between the Gambia Red Cross Society and the Department of State for Health. The ceremony was chaired by the GRCS Health Program Officer. In his launching statement, the Secretary of State emphasised on the importance of distributing ITNs to those in need and lamented on the partnership the National Society is having with the department of State and urged the continuation of the strategic partnership that exist between the two. He handed over the first bed net to the first under five child of the distribution exercise and the GRCS Secretary General handed over the second bed net to the second child.



Nets Distributed

The bed net distribution targeted all six districts in the North bank region namely Lower Nuimi, Upper Nuini, Jokadou, Lower Badibou, Upper Badibou, and Central Badibou, while the IMCI house to house sensitisation targeted only three districts in North Bank West Region. A total of 4,599 under five children and 1,771 pregnant women were the target for the exercise. However, due to the increase in the Nets received, the total nets distributed are 4,730 for children under five years and 1,755 pregnant women. The total number of bed nets distributed to both children under five and pregnant women totals to 6,485 ITNs which is distributed in one hundred and seventeen villages.



A Pregnant Women about to received ITN

The bed net distribution and sensitisation of community households on integrated management of childhood illness was conducted in collaboration with the department of state for health. Eighteen (18) Community Health Nurses, forty two (42) GRCS Volunteers and six (6) supervisors participated and the whole exercise took duration of five days.

The Net distribution was easily completed. In each community, community members were first sensitized by informing them of the distribution date. However, since our target was to cover only 20% of children under five and pregnant women within communities that were identified in



the project proposal, prior to the proper distribution, in each beneficiary village the village head together with Traditional Birth Attendance, Village Health Worker and Village Health Committee were sensitized on the distribution of the nets; this sensitization was followed by the net distribution. The distribution was conducted by starting from one edge of each village and compound by compound beneficiaries were given a net. For pregnant women that received nets it was recorded into your Antenatal Card and Infant Welfare Card for children under five years. The distribution was complemented with sensitization of beneficiaries based on the following:

- *Utilization:* process of proper nets hanging, how to maintain it, process of how to wash and dry them and etc.
- *Malaria prevention:* importance of sleeping under treated nets, environment sanitation, proper refuse and waste management, proper drainage system, protective clothing to prevent mosquito bite, and early treatment.
- *Early Signs of malaria:* fever, vomiting, headache, loss of appetite.
- *Referral:* Immediate referral to the nearest health facility.



Message Dissemination during Nets Distribution The following is the distribution breakdown:



Total Net Distributed								
No	District	Target Beneficiaries			Actual Beneficiaries			Additional
		<5yr	Pregnant Women	Nets Required	<5yr	Pregnant Women	Nets Distributed	Nets Distributed
1	Lower Nuimi	1029	396	1425	1062	380	1442	17
2	Upper Nuimi	650	250	900	668	250	918	18
3	Jokadou	682	263	945	700	263	963	18
4	Lower Badibou	643	246	889	659	246	905	16
5	Central Badibou	592	228	820	612	228	840	20
6	Upper Badibou	1003	388	1391	1029	388	1417	26
Totals		4599	1771	6370	4730	1755	6485	115

The table above indicates the target group for both children under five years of age and pregnant women and actual distribution numbers. All nets were distributed in each of the six districts. A total of 6,500 nets were received out of which 6,485 were distributed to beneficiaries and the remaining 15 nets was given to Essau Health Centre to complement their patients admission ward. The below bar chart indicates each district quantities requested as opposed to quantities distributed to the communities.





Achievements:

- All the targeted children and pregnant women were issued with LLINs with an additional one hundred and fifteen LLINs (as a result of receiving nets above the requested amount).
- Five thousand and sixty house holds were sensitised on effective use of LLINs and IMCI during the house to house in North Bank Region.
- Recognition of the Red Cross intervention by the community members. Most of the beneficiaries are poor and do not have access to long lasting nets which are treated. Because it is also relatively expensive for the ordinary villager, the net distribution was a milestone in contribution to the alleviation of the suffering these people were faced with.

Constraints:

- Due to budgetary constraints, fuel cost was an inevitable problem during the distribution of nets to villages to facilitate the easy distribution by volunteers and nurses.
- With the availability of only a single vehicle, the GRCS was unable to do all the distribution of nets to the different villages which are the target beneficiaries. DOSH supported us with GRCS providing the necessary fuel to do the job.



The only GRCS vehicle available during the distribution



Recommendations

There are very dedicated Red Cross Volunteers in the North Bank and the IMCI program is effectively contributing towards the improvement in the quality of life and health. The program needs to be strengthened and extended to North Bank East. Refresher training on IMCI needs to be conducted at least on yearly bases and the volunteer that were not trained needs to be trained.

The house to house sensitisation needs to be strengthened in the region. Volunteers need support to be visiting communities on regular basis to monitor the effective use of the nets and effective practices of other IMCI activities. In addition to the hang-up survey to be conduct later in the year, a survey should be conducted on the effective use of LLINs and the incidence of malaria in the region as part of the exit activities.

Conclusion

In conclusion, the intervention was appreciated by the communities that benefited, however, the distribution needs to be replicated in other communities which did not receive nets. The distribution also contributed to the recognition of GRCS at a grassroots level and level of the volunteers. The Gambia Red Cross appreciates the provision of the LLINs by World Swim Against Malaria and the support provided by the International Federation of Red Cross and Red Crescent Societies. We also thank the Department of State for health for their relenting service and support in the provision of technical support and logistics such as vehicle, launching ground, storage facilities in the North Bank, and etc.

