LLIN Distribution Programme – Detailed Information



Summary

| # of LLINS | Country | Location | When | By whom | |
|------------|--------------|------------|--------------|--|--|
| 5,000 | Burkina Faso | Kenedougou | Oct-Nov 2008 | SOS Enfants/ Orodara, Burkina Faso | |

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.)

Kenedougou is a province in Burkina Faso with an area of 8265 km². It is located between 4°30 and 5°30 longitude west and 10°10 and 12°05 latitude north. The administrative capital of the province is Orodara, an urban commune that is situated 75 km from Bobo-Dioulasso (the second largest city in Burkina Faso) and 100km from Sikasso (in the Republic of Mali). The departments of Kenedougou that will benefit from this program are as follows:

| Department | Orodara | Kangala | Djigouera | Koloko | Kourouma | Samogorouan | |
|---------------------------------|---------|---------|-----------|--------|----------|-------------|--|
| Number of LLINs requested | 900 | 1,200 | 600 | 700 | 1000 | 600 | |

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

With the exception of Orodara, an urban commune, the other department administrative centres are situated in rural zones. The populations of each distribution location are as follows:

| Department | Orodara | Kangala | Djigouera | Koloko | Kourouma | Samogorouan | |
|-----------------------------------|---------|---------|-----------|--------|----------|-------------|--|
| Estimated Population (2007) | 22,832 | 17,558 | 13,730 | 14,515 | 24,233 | 22,614 | |

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

In Kenedougou, malaria infects at least two members of every household each year. Taking into account poverty and the insufficiency of information concerning the disease, many individuals in this region fail to seek medical attention when infected with malaria. These factors, among others, contribute to the designation of this region as a high risk malaria area.

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.

Malaria affects more individuals than any other illness in the province of Kenedougou. The following statistics were taken from 2005-2007 Kenedougou health census:

| Illness | 2005 | | 2006 | | | 2007 | | | |
|---------|-------|----------|------------|-------|----------|------------|-------|----------|------------|
| | Cases | Fatality | Proportion | Cases | Fatality | Proportion | cases | fatality | Proportion |
| | | | | | | | | | |
| Malaria | 40359 | 10.2 % | 44.4% | 50183 | 11.0% | 51.2% | 60273 | 2.3% | 53.4% |

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 LLINs will be distributed to orphans and vulnerable children and to pregnant women because they are the portion of the population that are most severely affected by malaria.

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

Concerning the population of Orodara as a whole, only an estimated 25% of people currently regularly sleep under mosquito nets. The health district of Orodara maintains a program that sells LLINs at a subsidized price of approximately \$3.50 USD. The availability of these nets, however, is not consistent. There were no subsidized LLINs available at the health district during the year 2007.

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.

The province of Kenedougou was chosen as a LLIN distribution area because there are currently no non-governmental organizations working in the region concerning the fight against malaria. In addition, the almost constant humidity in this region due to the favourable rain increases the development and propagation of malaria vector agents. These are the principle reasons that the persons in charge of SOS Enfants, whose names follow, chose to elaborate the present project in Kenedougou.

- SOULAMA Yaya, President of SOS Enfants, Tel: (+226) 76.68.61.09

- NAGALO Babou, General Secretary of SOS Enfants, Tel: (+226) 70.74.30.62

- PATTENN Audrie, American Peace Corps Volunteer, Tel: (+226) 76.18.50.91

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 head of the National Program for the Fight Against Malaria (Programme National de la Lutte Contre le Paludisme, PNLP) has been informed about this LLIN distribution project and agrees with the distribution approach. Coordination of this project was done through Dr. Jean Eric Ouedraogou, president of the PNLP, who can be contacted during office hours at (+226)50.37.46.54 or on his cellular telephone at (+226)78.83.52.15.

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

We have programmed community outreach and education activities in the form of theatre troupe presentations followed by forum-debates in each of the distribution sites. These activities will be carried out before the distribution.

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 distribution of the LLINs will be done by the members of SOS Enfants in association with the health agents of the each perspective community health facility and the mayors of each SOS Enfants will make an official rural commune. presentation of the LLINs to the head of the regional health district (Médecin Chef du District) of Orodara as well as the provincial director of Social Action and National Solidarity (l'Action Sociale et de la Solidarité Nationale) of Kenedougou. After this presentation, SOS Enfants will visit each distribution site to conduct community education and outreach projects to include taking measures to improve living space hygiene to avoid standing water and education concerning preventative measures that may be taken to reduce the number of malaria cases.

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?

We have programmed a community level follow-up survey to be conducted one month after LLIN distribution to assess the level of LLIN use and the adoption of proper household hygiene and other preventative techniques. If this survey reveals any insufficiencies in LLIN use, we will conduct follow-up outreach activities to encourage regular use of the LLINs and to promote proper hygiene as a preventative measure. A report of our findings will be sent to Against Malaria Foundation.

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.

MEDA Clément, Médecin Chef du District de Orodara, Tel: (+226) 20.99.50.06

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

I verify the LLINs will be distributed free of charge to 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.*

I confirm SOS Enfants will send at least forty digital photographs taken at each of the eight distribution sites to Against Malaria Foundation. Against Malaria Foundation may use these photographs as they see fit.

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.*

SOS Enfants has the capacity to record a video clip of 30 minutes during the course of our LLIN distribution. This video will be sent to Against Malaria Foundation.

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

SOS Enfants will provide Against Malaria Foundation with a Post-Distribution Summary.

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

NAGALO Babou General Secretary of SOS Enfants / Orodara BP 53 Orodara, Burkina Faso E-Mail: sosenfants2004 AT yahoo.fr Tel:(+226)20.99.53.45, Cellular:(+226)70.74.30.62 or (+226) 78.15.35.56

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

Additional Information

09May08 – Questions sent 16May08 – Responses received

1. How were the number of nets per department derived? You say in Q5 distribution will be to orphans, vulnerable children and pregnant women but the number of nets is not a constant proportion of the estimated population which we might expect to see. Is that because the number of nets required is based on specific data of the actual number of children/orphans/pregnant women per department. We would expect the proportion of children and pregnant women to be approx the same – which suggest the number of orphans is the variable. If data based, can you indicate which organisation has collected this data and when?

SOS Enfants in cooperation with The Provincial Direction for Social Action and National Solidarity and Save the Children Canada conducted a survey in 2007 to determine the number of "vulnerable children" in every village in the province. "Vulnerable children" included but was not limited to orphans (who have lost one or both parents), children from families in particularly serious financial situations, children of handicapped parents or handicapped children, and refugees from the Ivory Coast.

2. What is the age range of children intended to be covered? 0-15.

3. Please can you provide detailed background on the organisation on the ground in Burkina Faso that will be responsible for the distribution i.e. SOS Enfants? Do they have a website? See the attached document. (as a side note, I'm assuming that you work with other francophone countries. Because of lack of Internet access, it has been easier for me to be the main communicator but if they would like to continue working with you in the future, do they have to find someone to translate documents into English or do you have all the same services in french as well?)

17May08 – Questions sent 16May08 – Responses received

Request for appropriate details about the organisation who would be responsible for the net distribution.

1. Can you let me have the names and contact details for individuals at Save the Children Canada, Provincial Direction of the Environment, United Nations Development Program (UNDP), United Nations Children's Fund (UNICEF) who have worked recently (in the last year) with SOS Enfants. Concerning contact information with their partners:

UNDP: Amidou Baba-Moussa, Office phone: (226) 50.30.67.62

<u>UNICEF</u>: They have not worked directly with someone at UNICEF in the last year, they work mainly with them through their other partners who receive funding to carry out projects that are done in partnership with SOS Enfants.

Provincial Direction of the Environment: Ilboudo Romain, Office phone: (226) 20.99.51.53

Save the Children Canada: Madame Kinda Tene, AEC Ouagadougou, Mobile phone: (226) 76.64.71.71 email: tdkinda@savethechildrencanada.bf

2. Can you provide information on what activities SOS Enfants have completed this year? Activities realized in the last year:

- Instalation 17 disadvantaged youth in micro enterprize activities

- Two theatre performances and debates concerning the fight against Tuberculosis

- Two large public animation performances on hygeine and malaria prevention

- Thatre troupe training for children under 17 years old to perform sesitisation and outreach activities on HIV/AIDS

- Training of 41 peer educators on HIV/AIDS (to include modes of transmission, ways of prevention, mother to child transmission, and community programs available to support and assist people infected or effected by HIV/AIDS)

- Organization of a 1 week long camp which gathered youth currently maintaining self-sustained micro enterprise projects to allow productive exchange of ideas and techniques of project management. These youth came from the entire Haute-Basin region (Kenedougou, Houet, and Tuy)

- Organization of a workshop to put in place a bureau to manage communication between all of the regional organizations working with disadvantaged youth. This workshop was targeted at encouraging active partnership between the organizations to increase the efficiency, timing, and results of their projects.

- Participation in an international conference in Bamako, Mali with ADEN International concerning the maintenence and management of the community internet center.

Celebration of International Internet Week to encourage the community to utilize technical resources. This included free computer and internet classes offered at their internet center.
Creation of Anti-HIV/AIDS clubs in every sector and primary school in Orodara (there are now 21 existing clubs). These clubs are run by youth and SOS Enfants provided them with animation materials.

3. Can you let me know if they have conducted bednet distribution campaigns before and if so when and how many nets were involved?

No, this will be the first time.

4. Can you provide information on the directors/leaders of the organisation ie who they are?4. The members of the executive board:

- Soulala Yaya - President of SOS Enfants Orodara, Primary school teacher.

- Nagalo Babou - General Secretary of SOS Enfants Orodara, Primary school teacher.

- Kyedrebeogo Narcise - Vice Secretary of SOS Enfants Orodara; Primary school teacher.

- Sanou Solange - Tresurer of SOS Enfants Orodara, Primary school teacher.

- Kabore Roger - Training Manager of SOS Enfants Orodara, Primary school inspector

- Sanogo Allissane - In charge of External Relations of SOS Enfants Orodara, Community agent for SNV (NGO from the Netherlands).

- Ouattara Mamadou - Organization manager of SOS Enfants Orodara, Primary school teacher.

- Traore Kadi - Vice Tresorer of SOS Enfants Orodara, Primary school teacher.

- Apouri Jean - Assistant of External Relations of SOS Enfants Orodara, Primary school inspector.

I think that covers all of the questions posed in the last email. If there is anything else, please let me know. I will Try to check email again this weekend or will have phone reception starting this Friday. You can also send me a text message at any time, and I will receive it that day. Or, you could also try to reach me at my telecenter in village (226.20.99.58.73 and just ask for Audrie, or the white girl and they will come find me) or call directly to Nagalo Babou (For both of these options, you need a French-speaker). I also meant to ask you the other day if you could send me an electronic copy of the distribution agreement in French. Seeings how it is Nagalo that will be signing that, I think a translation coming directly from you guys would be better for him. Let me know if that is possible. Ok, I think that covers it. Keep me updated and again, thank you!!

04Jun08 – Questions sent 07Jun08 – Responses received

1. One aspect of the distribution the Malaria Advisory Group wants to have a stronger understanding of is exactly who will be responsible for the distribution. You mention in Q10:

"The distribution of the LLINs will be done throughout the month of July 2008 by the members of SOS Enfants in association with the health agents of the each perspective community health facility and the mayors of each rural commune. SOS Enfants will make an official presentation of the LLINs to the head of the regional health district (Médecin Chef du District) of Orodara as well as the provincial director of Social Action and National Solidarity (l'Action Sociale et de la Solidarité Nationale) of Kenedougou. After this presentation, SOS Enfants will visit each distribution site to conduct community education and outreach projects to include taking measures to improve living space hygiene to avoid standing water and education concerning preventative measures that may be taken to reduce the number of malaria cases."

Does this mean the SOS Enfants will be handing over the nets to others?

This is the phrasing from the MAG:

"A question arises as to who manages the nets. It looks like SOS Enfants hands them over to the District health authorities, and only does outreach and education. How confident are we that the District will be capable of timely and effective distribution. This is not described. Is it house-to-

house or pick up at a health facility? How do they control who qualifies? More detail on these points please."

Can you deal with these issues so we are clear?

1. First, concerning the details for the distribution, i think there is some confusion as to what we meant by the "official presentation." In the original proposal, we wrote that "SOS Enfants will make an official presentation of the LLINs to the head of the regional health district (Médecin Chef du District) of Orodara as well as the provincial director of Social Action and National Solidarity (l'Action Sociale et de la Solidarité Nationale) of Kenedougou." This is still the plan but I would like to clarify that by "official presentation," we simply mean that we will hold a ceremony to mark the beginning of the distribution. Protocol is of utmost importance here so it is simply a way of showing all of the authorities (to include the health district heads, the mayor, and Social Action) that SOS Enfants has received the nets and will begin distributing them. During this ceremony, SOS Enfants will present certain recipients (those who come from Orodara and would be able to attend the ceremony) with their nets. The nets will not be "handed over" to the health district, the mayor, or Social Action, those individuals and organizations will simply be present at the ceremony.

After this official opening of distribution, SOS Enfants will be responsible for distributing the remainder of the nets to the remaining target population in Orodara. They will also be responsible for distributing the nets to all of the remaining department. For each smaller department, however, distribution will be done with the assistance of the community health centers. The pre-determined vulnerable children (that were identified during the survey conducted by SOS Enfants and Social Action) will receive their nets at the community health center, directly from a member of SOS Enfants.

Concerning the pregnant women, each department's health centers will be responsible for distributing the nets to women who come in for their prenatal consultations. This will still be monitored by SOS Enfants, the nets will not simply be handed over to each health center. Reviewing our usual occurrence of Prenatal consultations, completion of the distribution to pregnant women will be done over a period of approximately one month.

I hope that this clarifies a little. Please let me know if you need more details.

2. Could you also address this question from one of the MAG members:-

"It appears it is the nig settlements (urban or district Hqs) that are targeted. It is possible these centres are the ones who also benefit from whatever other programme is in place. Targeting the more remote villages might be more important. Please can this be commented upon."

With regards to the other question posed by a MAG member: "It appears it is the nig settlements (urban or district Hqs) that are targeted. It is possible these centres are the ones who also benefit from whatever other programme is in place. Targeting the more remote villages might be more important. Please can this be commented upon."

I completely understand where this member is coming from and 100% agree. So I want to assure you that the distribution will indeed be reaching the remote villages. That is precisely what inspired me and SOS Enfants to write this proposal.

The health system here in Burkina Faso underwent a reform starting in 1987 in an attempt to decentralize their services to ensure that basic health care is more effective and available to more remote communities. As a result of this, the national health system is broken down into districts which serve each region in Burkina (like the health district of Orodara, which serves the region of Kenedougou). Each of these districts is broken down into departments (like the 6 departments listed in our proposal: Orodara, Kangala, Djigouera, Koloko, Kourouma, and Samogorouan) Each of these departments is then broken down into individual *Centres de Sante et Promotion Sociale*, which I have referred to as "community health centers." Each of these centers serves a number of remote villages. (As an example: I live and work in the village of Mahon. We have a community health center which serves our and 2 other villages: a total population of around 5,350. We are in the department of Kangala which has a total of 5 community health centers and the department of Kangala is under the District of Orodara). As this may be complicated to those who are not familiar with the system here in Burkina, I have attached a visual diagram which details the breakdown for my village in particular.

For the terms of this distribution, each *department* can therefore be thought of as a collection of Community Health Centers, each of which serves a number of remote villages. So when we say that each department will receive x-number of nets, these nets will be distributed at the community health centers of that department. There is not really any 'department headquarters' involved.

The commune of Orodara is the only urban commune that will be served. The remainder are all rural communes. As a Peace Corps Volunteer who has lived and worked in this region for almost 2 years, I can assure you that these nets will be reaching individuals that would otherwise not have access. Even those living in the urban commune of Orodara do not have reliable access to LLINs.