



## Summary

# of LLINS	Country	Location	When	By whom
5,000	Nepal	Kavre District	May-Jun 2007	PSI/Nepal

## 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.)

It is proposed to distribute the LLINs in Village Development Committees (VDCs) with high Annual Parasite Incidence (API) in the Kavre district of Nepal. Kavre is one of the 3 priority districts in this year's (2007) national malaria program. The identification of the VDCs for the LLIN distribution will be done once the VDC selection is finalized by the Government of Nepal. The Epidemiology and Disease Control Division (EDCD) of the Department of Health Services and Population is currently in the process of selecting the VDCs with the highest incidence of malaria cases. The selection is expected to be finalized by 2<sup>nd</sup> week of April.

The LLINs received from 'World SWIM for Malaria Foundation' will be distributed among households in the selected VDCs that have not received LLINs through the national program due to LLIN shortage.

S N	VDC's Name	Total No. of Net Distributed	GPS Data	
			North	East
1.	Jyamdi	1,000	27° 40' 85.4"	85° 39' 49.6"
2.	Sathighar	735	27° 37' 55.7"	85° 40' 68.1"
3.	Gairibisauna	1,000	27° 44' 82.0"	85° 36' 32.2"
4.	Chandeni	1,000	27° 42' 70.3"	85° 38' 70.2"
5.	Devbhumi	1,265	27° 37' 29.7"	85° 38' 23.2"
Total		5,000		

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

Proposed net distribution will be to rural communities. Official figures (based on the 2001 census) of the population of the Kavre is 385,672 (70,509 households). Number of households in the targeted VDCs are:

- Chandeni VDC : Population 4489, Households 898
- Jyamdi VDC : Population 6150, Households 1230
- Gairibisaun VDC : Population 7220, Households 1444
- Sathighar VDC : Population 3608, Households 722
- Devbhumi VDC : Population 7855, Households 1309

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

Kavre is of the most high risk malaria districts in the country (defined by the Government of Nepal) due to high prevalence of reported 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.**

Based on Ministry of Health and Population (MOHP), Department of Health Services Annual Report 2004/2005 the malaria Annual Parasite Incidence (API) per 1,000 in the Kavre district is 1.71. However malaria is severely under-reported across Nepal and actual incidence is thought to be much higher.

**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.**

Based on 2001 census figures, the number of households are Kavre: 70,509 households.

This suggests that there exists a significant gap in the number of LLINs available through the national program and the number of households. PSI proposes to target households in the high risk VDCs of the district that have not received LLINs through the national program.

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

There is no existing LLIN use in these districts. PSI/Nepal in coordination with EDCD will be conducting a national LLIN distribution program in the district in May/June 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 Kavre district was chosen to support the Government of Nepal's National Malaria Program for this year, primarily due to two reasons:

- 1) There are district wide shortages within the currently planned distribution areas;
- 2) Government of Nepal is worried after the recent Nepal malaria outbreak in 2006 and want to make sure as many people as possible are covered in the 2007 priority districts.

**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.**

The National Malaria Control Program was consulted about this potential activity and the response was supportive and favourable.

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

A pre-distribution survey in the selected VDCs of the district will be conducted to identify registered households for identification for LLIN recipients. This survey will be used to collect data on the number of households that will not be receiving LLINs through the National Malaria Program. These households will be considered for the proposed 'World SWIM for Malaria' net distribution project.

**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.**

How the nets will be distributed:

The LLINs will be distributed to target households by engaging local community based organisations to deliver the LLINs to each household.

By whom the nets will be distributed:

PSI will partner with the local Non-Government Organization (NGO) who is selected for the government LLIN distribution program. The NGO distribution partner is currently in the process of being selected jointly by EDCD and PSI.

Which Dates:

The Malaria season in Nepal ranges from April to September with the prevalence being highest during the Monsoon season of June to August. The 'World SWIM for Malaria' net distribution project will be conducted along with the government LLIN distribution program in the district for better synergy and coordination in May/June 2007.

Focussed effort or part of a combined programme?

The World Swim for Malaria nets will be integrated into the National Malaria Control Program strategy.

Will there will be an information/education component?

LLIN distribution will be coupled with comprehensive Behaviour Change Communication activities in support of consistent net usage and the need to seek prompt care if malaria is suspected.

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?

GPS point of each net distributed will be collected during the distribution phase and PSI will randomly assess that each recorded household has received a LLIN during field monitoring visits.

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.

Being provided.

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

Confirmed.

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.\*

Confirmed.

15. Please indicate if you will be able to provide **video footage** from each sub-location. This is not mandatory but is strongly preferred and aids reporting. \*

Confirmed.

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

Confirmed.

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

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