

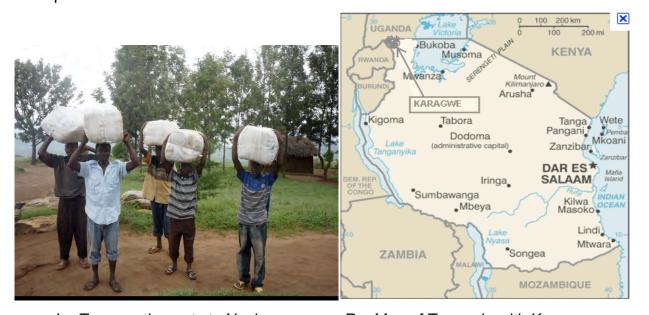
# Ahakishaka and Nyakagoyegoye Free Net Distribution November 27<sup>th</sup> – December 6<sup>th</sup>, 2009



#### Introduction

In the communities of the Karagwe district of northwestern Tanzania, malaria is endemic. Malaria is the single greatest contributor to the burden of disease, devastating families and communities. A prevalence of 16.1% was found in a study we conducted in July (dry season) of 2009. In the summer of 2006, a malaria epidemic swept through these communities affecting 65% of women and 80% of children, leaving nearly 4,000 dead. Long Lasting Insecticidal Mosquito Nets (LLIN) have been shown to reduce infection rates by over 50% when used properly.

The World Institute for Leadership and Management in Africa (WILMA) is an US based economic development NGO that has worked for over 10 years to improve the livelihoods and prospects of the communities of Karagwe District, Tanzania. From 2007 to 2008, WILMA has worked with the Global Health Center at the Mount Sinai School of Medicine to provide over 3,100 nets to the villages of Ahakishaka and Nyakagoyagoya. This project is succeeding in increasing proper net-use, reducing malaria cases, and most importantly saving lives from this preventable disease.



L - Transporting nets to Nyakagoyegoye R – Map of Tanzania with Karagwe

# Objective

To provide a comprehensive malaria prevention education and to distribute free long lasting nets to the villages of Ahakishaka and Nyakagoyegoye.

## Needs Assessment/Registration

After assessing the most recent data from our past distribution and a local census we determined that a house to house survey was needed to accurately access household need. During the week of July 15-22, 2009, we trained representatives from each hamlet in the two villages to identify sleeping spaces, number of nets present, number of nets hanging, and number of children under 5 (entitled to a free LLIN from the government) sleeping in the household. Based on the data we determined household need and created registration cards that could be used to redeem a net on distribution day.



L – Net card, R – Nyakagoyegoye needs assessment team.

### Net distribution/education

Nyakagoyegoye distribution – Village Center – November 27, 2009

Ahakishaka distribution – Solar Village Institute - December 6th, 2009

Hundreds of villagers turned out to both distribution days to receive their free nets and learn about malaria prevention.

#### The Program:

In Nyakagoyegoye, the village chairman and Petson (community health worker) introduced the program and detailed the format of the day and the importance to the community. In Ahakishaka, Hamlet leaders, and Johansen Ernest (WILMA Coordinator) introduced the project.

Before receiving their net, the community members participated in a 2 hour education program. Johansen Ernest, WILMA project coordinator first addressed the community on the following issues:

- the proper use and care for the long lasting Olyset nets
- · effectiveness of sleeping under a net every night
- making malaria prevention a community priority
- the economic impact of malaria on households and the community.
- vector behavior active at dawn, dusk, and night.
- dispelling falsehoods regarding malaria (e.g. you can't get malaria during the dry season).

Nurse Prisca who works at nearby Nyabiyonza dispensary addressed the following issues:

- · malaria and how it is transmitted.
- the epidemiology of malaria in the community.
- early signs of malaria and the need for early treatment.

 her experience as a nurse and how she has seen nets reduce the number of malaria cases in the village.





Nyakagoyegoye distribution

Community members presented their net cards and were checked off the register after signing or leaving their fingerprint. Nets were then removed from the package and distributed.



Ernest speaking at the Ahakishaka distribution

# **Achievements**

## Nyakagoyegoye Village Distribution

Kabisha -28

Nyameli B - 69

Nyameli A – 17

Nyamitoko – 103

Nyakagoyegoye A - 64

Rwemigogo – 20

Nyakagoyegoye B – 91

Total: 392 nets

Assessed need for nets: 445

#### **Ahakishaka Village Distribution**

Rukanja – 85

Ahakisharara – 14

Nyakasheni – 16

Ahakishaka – 89

Total: 204 nets

Assessed need for nets: 254

The nets that were not distributed during the designated distribution day have been distributed on an individual bases as community members have come to the village government with their net cards.

Getting more nets into the community is an accomplishment on its' own, however, the education and behavior change necessary to insure that bednets are valued and used every night is just as important. A strength of the project is the number of direct encounters with each and every household in the community. Not only had we worked with the community in years past educating and distributing nets, but this year each household had 3 additional malaria education moments:

- 1 volunteers educated during the initial evaluation.
- 2 the mandatory education at the net distribution.
- 3 the education during the post distribution hanging survey.



Hanging a net in Nyakagoyegoye

### Constraints

Communication with the WILMA coordinator was a significant challenge as he was without internet access and phone access for a considerable period of time. We were unable to distribute nets to every single targeted household. With better organization these nets could be delivered to the households. In the future, we will spend more resources (time and stipends) to train the hamlet survey volunteers, as some were not as effective as others. A lack of funding prevented additional hanging surveys, which are an excellent opportunities to insure net usage.

#### Recommendations

Better cooperation and sharing of best practices with the National Malaria Control Program (NMCP) should be the priority going forward. Our survey results suggest that some households were not reached by the NMCP and that even with our interventions there is still a lot of progress to be made in terms of coverage and effective net use. The results of future hanging surveys and dispensary data should help determine the effectiveness of a comprehensive education/blanket LLIN distribution.

### Conclusions

We also involved more members of the community and village government. This should lead to a more aware and invested leadership who will take malaria prevention seriously and help the community work together to improve the health and livelihood of all. We will share the results of our work with the District Medical Officer and the local representatives of the NMCP in the hopes of improving future distributions and behavior change programs. We would like to thank the hamlet leaders, village executive officers, and village chairmen of both Ahakishaka and Nyakagoyegoye. The program would not be possible without their hard work and many long hours of donated time. We would also like to thank all the volunteers who helped to transport the nets and who went door to door to register households and conduct the hanging surveys.