

# Against Malaria Foundation

## LLIN Distribution Programme – Detailed Information



### Summary

# of LLINS	Country	Location	When	By whom
3,500	Togo	Pesside Nouveau	May-June 2011	ASEDA & local Hospital

### 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.)

We will distribute nets in just one canton: Pesside. 10°01'N and 0°59'E. Please see attached picture of the area.

VILLAGE/AREA	POPULATION	PEOPLE WITHOUT BED NET	PEOPLE WITH BED NET	CHILDREN AND BABIES	NEED OF BED NETS
ANTENNE	676	516	160	171	345
HOULIO	659	551	108	180	371
NAMBOU	472	408	64	170	238
NARIA	564	474	90	172	302
NANDJITA	399	309	90	175	134
WOUTOTA	355	289	66	174	115
PESSIDE ANCIEN	1,048	893	155	190	703
KANTE TAR	559	469	90	176	293
NAMBOUTA BAR	623	450	173	177	273
NABINE	648	623	25	181	442
<b>TOTAL</b>	<b>6,003</b>	<b>4,982</b>	<b>1,021</b>	<b>1,766</b>	<b>3,216</b>

Plus up to 1,000 additional nets – see Q5. Min. addtnl: 300

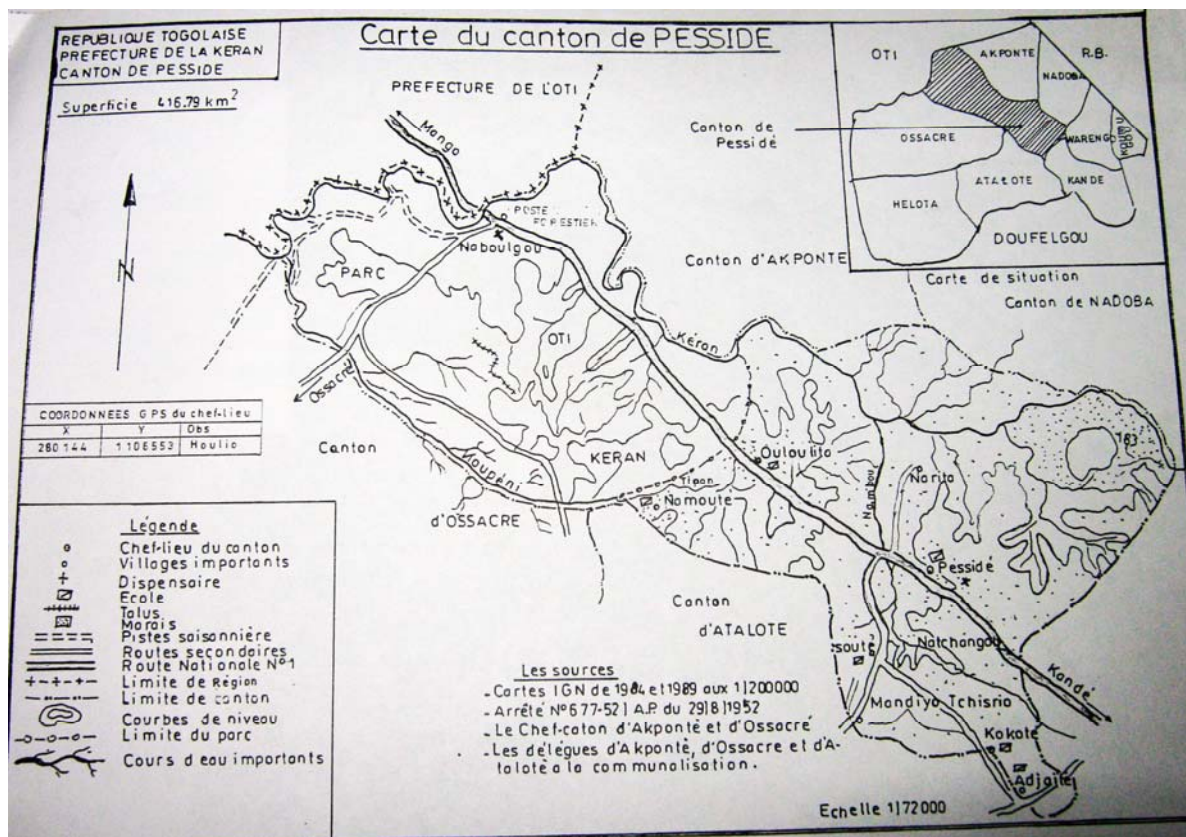
2. Is this an **urban or rural** area and how many people live in this specific area?

It is a rural village with a population of around 6,000.

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

Yes. The doctor at the local hospital designated this as a high risk area. It is near a river and a forest, and there have been an increased number of malaria cases in this area. Rainy season is from May to November. This is the high peak for malaria cases. Prevention methods have been in place

(i.e. educate people not to keep standing water by houses, keep standing pools of water covered etc.) but the problem continues.



4. Baseline malaria case information. How many **reported cases of malaria** and **malaria deaths** were there in this **specific** area in the most recent period available? We are looking for data from health clinics in the area. Month by month information is strongly preferred. We are NOT looking for regional level/national level information. Please cite your source. Baseline malaria case information forms the basis of comparison post-distribution.

There were 350 cases and 70 deaths in this village last year. No monthly information is available. Kante (country capital) health centre collects the information.

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.

It is blanket coverage of the whole village. Population = 6,000. Active sleeping spaces = 4,237. Nets needed = 3216. Additionally, we will provide replacement nets (up to approx. 1,000) for those individuals who previously received nets that will be expiring by the time of this distribution (See Q6 below). Proximity to the river and standing bodies of water also contribute to the malaria cases. When nets are distributed they will reinforce these points with the community. (See Village Report for more information)

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

The government gave nets to newborns and their mothers in April 2007. The people continue to use these nets. When we

did the house to house assessments we still saw nets hanging in rooms.

They were LLINs, but by the time the May 2011 distribution takes place, these nets will be four years old and need to be replaced. Based on our best information, this will require approximately 1,000 additional nets bringing the total nets to 4,200.

**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.**

I talked to District Director for Health, Health Ministry, Doctor Djato Akondo [contact: (+288) 902 90 03; e-mail bdjato AT yahoo.fr] about our project and he gave me the list of priority villages. He said that an increasing number of patients suffering from malaria are coming to the hospital.

**8. Have you consulted with the country's National Malaria Programme 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, they like the project because it comes to help. Anti-malaria contact is Sonte Stephan, health assistant in Kante, (+288) 970 96 41.

He works for the NMCP but does not have email. You can write to Doctor Djato Akondo [contact: (+288) 902 90 03; e-mail bdjato AT yahoo.fr] (Kante Doctor) to get a hold of him.

**9. 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.**

National Coordinator for malaria program: Dr. Tossa (+288) 912 08 73. tsvbr AT yahoo.fr

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

Yes, they will be free to people receiving the nets.

**11. Please describe all pre-distribution activity, including how the size of the target group and number of nets required will be ascertained and how the local community and leaders will be involved in this phase of the work?**

A team from the hospital and clinics decided what villages to help. We will go from house to house to explain to people about the nets. We will also invite resource people like nurses or community health workers to talk to people and do local radio emissions.

- Attiti Panimaliline (Social Assistant) - guest speaker to deliver main message
- Nifa Gaston - Materials and logistics coordinator
- Akanto Jean Bosco - project manager and photographer

**12. Please describe how the bednets will be distributed and by whom. Please give detail. Please indicate over what time period (typically, the number of days or weeks) the distribution will occur.**

Bed net distribution will take place over 5 days. Volunteers will hold Morning and Evening sessions with neighbourhoods to distribute nets. The number of sessions will allow volunteers to talk to smaller groups of people and ensure all questions are answered.

ASEDA volunteers will gather neighbourhood members in a central location and demonstrate the process of hanging bed nets, importance of coverage, and answer questions. After demonstration, nets will be distributed to head of households present who are in need of nets. As participants are in line to get net, individual volunteers will circulate to ensure all questions are answered. Information will be recorded as nets are distributed.

**13. Please describe the malaria education component of the distribution. Please give a detailed answer.**

ASEDA team will do a 5-10 minute skit with for each neighbourhood gathering to cover the following topics:

- How people get malaria
- How bed nets can help prevent infection
- How to hang bed nets
- Insecticide treated nets are not dangerous for people
- Symptoms/signs of malaria
- Question and answer

**14. Please confirm: a) you will conduct immediate post-distribution follow-up to assess the level of usage (hang-up %) of the nets; b) this take place within four weeks of the distribution; c) you will provide us with the findings.**

Yes, the same ASEDA volunteer team that hosts the neighbourhood demonstrations will follow up with households that received the nets. Neighbourhoods will gather to report:  
If they hung up their bed nets  
How many members of the house are sleeping under bed net at all times

Information will be collected and sent to AMF office.

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

We will write and send a summary after the distribution.

**16. Please confirm you will send us, post-distribution, at least 60 digital photos per sub-location\*, taken at the distribution/s, to be added to our website as we report on the distribution to donors.\*\***

We will have a cameraman who will take all the photographs for activities at important times during the distribution process.

**17. Please confirm you will provide at least 15 minutes video footage from each sub-location. It does not need to be 'broadcast' quality and can be taken with a handheld digital video camera.\*\***

We will make some video sequences for every location to show how the distribution process happens.

**18. Please confirm: you will carry out longer-term Post-Distribution Reviews (PDRs)\*\* to assess the level of usage (hang-up %), correct usage and condition of the nets; b) this will take place 6, 18, 30 and 42 months after the distribution of the nets; c) you will provide us with the findings.**

Yes, we will organize the community health agents, ASEDA members, and local nurses to do these surveys and the results will be in a report to Against Malaria.

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

Akanto Akpasso Jean Bosco, Founder of NGO ASEDA and agriculture training center/community garden in Kante, Togo and PeacePal facilitator in Togo. [Contact: (+288) 908 47 69, e-mail jbakanto AT gmail.com, B.P. 65, Kante, Togo, West Africa.]

\*Sub-locations are mutually agreed and are typically a portion of the total distribution ie A 20,000 net distribution, for photo and video reporting purposes, might be divided into 5 sub-locations.

\*\*Information on the provision of photos, video, Post-distribution Summary and Post-Distribution Reviews is included in the attached document.

Ends—

**THANK YOU!**