Against Malaria Foundation

LLIN Distribution Programme - Detailed Information



Summary

# of LLINS	Country	Location	When	By whom
10,000	Ghana	Sissala East & Sissala West, Upper West Region (UWR)	Jul-Aug 07	UNICEF and Ghana Health Service

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.)

The nets will be distributed to young children and pregnant women in two districts in the Upper West Region (UWR) - Sissala East and Sissala West. These are the most deprived districts in the region with the lowest current ITN coverage. Details are as follows:

- Sissala East approximately 10,000 children under five and 2,000 pregnant women; Main communities are: Bawiesibelle, Kulfuo, Kunchogu, Nabugbelle and Nabulo; Latitude 10.56851 and Longitude -1.74581.
- Sissala West approximately 9,000 U5s and 1,800 PW; main communities are: Fielmua, Gwollu, Jeffisi, Zini and Mbo; Latitude 10.81060 and Longitude -2.25153.

In both cases there is at least a 50% gap in ITN coverage, so the nets will be distributed to children and pregnant women who currently do not have a net.

Identification of the districts in UWR with the highest need (based on lowest ITN coverage and highest levels of malaria morbidity/mortality) is coordinated by the Regional Health Administration under the direction of the Regional Health Director (Dr. Erasmus Agongo).

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

This is a predominantly rural setting. The region had a projected population of 637,578 in 2006. There are 8 districts in UWR, each ranging in population from 50,000 to 100,000. There are an estimated 25,000 pregnant women (annually) and 100,000 children under five across the region.

Estimated Population figures by district for UWR:

District	Pop of under fives	Pregnant women (annual)		
Jirapa	18,000	4,500		
Lawra	12,500	3,125		
Nadowli	17,000	4,250		
Wa East	11,500	2,900		
Wa Municipal	14,000	3,500		
Wa West	12,000	3,000		
Distribution districts:				
Sissala East	8,000	2,000		
Sissala West	7,000	1,800		

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

Malaria is endemic throughout Ghana and the Upper West Region as a whole is a malaria risk area. The region had an under-5 mortality rate of 208 deaths per 1000 live births. Malaria transmission is throughout the year though highest during the rain season (May -October). Malaria is the largest single killer of children in Ghana, with 25% of childhood deaths attributed to malaria.

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.

Health Institution figures indicate that there were over 110,000 cases of malaria and 184 deaths as a result of malaria in the region. 131 of the malaria deaths were children below the age of 5 years.

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 nets will be distributed to the most vulnerable population groups, children under five years of age and pregnant women. The free LLIN distribution in UWR would be a stand alone "catch-up" distribution to increase coverage among young children and pregnant women. This would be complemented by the ongoing routine subsidized sales of ITNs to pregnant women attending antenatal care and to young children attending child welfare (immunization) clinics.

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

The 2006 Multiple Indicator Cluster Survey gives the level of ITN use among children under 5 years in the region as 37% although there are variations between districts and communities. There are currently subsidized sales of ITNs to pregnant women and young children through antenatal care and child welfare clinics.

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.

Decision made in collaboration between UNICEF, National Malaria Control Programme and Ghana Health Service based on the following:

- The Upper West region has the highest under-5 mortality rate (208/1000 compared to national average of 111/1000). An estimated 25% of these deaths are due to malaria.
- The Upper West Region has low socio-economic indicators, and has been identified by the MOH as the most "deprived" region.
- UNICEF and Ghana Health Service are currently collaborating on scaling up child survival interventions in UWR, with a focus on prevention and treatment of malaria. This is resulting in a slight reduction in the number of cases and deaths due to malaria and it will be strategic to push to sustain these initial gains.
- The prevention of malaria through scaling up LLINs will compliment the community-based malaria treatment with ACTs that is being piloted in the region.
- There is strong political leadership in the region to reducing under-5 mortality.
- There is a strong commitment of Ghana Health Service in the region to partner with UNICEF.
- The region has few donors and NGOs supporting the Health sector compared to other regions.
- 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, NMCP is in agreement with the proposed distribution of LLINs, as this fits well within the National Plan for scaling up coverage of ITNs among children under five and pregnant women. Contacts: Dr. Daniel Yayemain - Acting Regional Director of Health Services, Upper West Region; email: ntcp@africaonline.com.gh and Ms. Aba Baffoe - Deputy Programme Manager, National Malaria Control Programme; email: ababaffoe@hotmail.com

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

In 2006 the Ghana Health Service with support from UNICEF and other development partners undertook a campaign to distribute ITNs to children below 24 months. GHS in the region has estimated target population of pregnant women for 2007. As part of the planning for this exercise population figures for the various target groups were computed. UNICEF will use these figures to guide 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 ITNs will be distributed by staff of the Ghana Health Service working in close collaboration with District Assembly officials, other stakeholders, local community leaders and Community Based Agents (CBAs). These CBAs have been trained with support from UNICEF and are already provided community level health services. Nets will be distributed over a period of weeks during antenatal (ANC) and Child Welfare Clinics, primarily during the months of July and August.

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?

The CBAs will do home visiting to assess the level of use. We will be undertaking a household survey in October of this year, and this will provide very good data on ITN household coverage post-distribution. In addition we are undertaking training of community volunteers and NGOs for strengthening community level education on ITN use. This is taking place during July and will coincide with ITN distribution so will support community efforts to ensure ITNs are properly used.

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.

Regional Director of Health Services for Upper West Region is Dr. E. Agongo (ghs-uwr@africaonline.com.gh)

UNICEF Health Project Officer responsible for UWR is Dr. Jonathan Adda (jadda@unicef.org)

UNICEF Chief of Health in Ghana (overall coordination) is Dr. Mark Young (myoung@unicef.org)

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 preferred and aids reporting to donors and encourages further donor giving.*

Yes.

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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Dr Mark Young, Unicef Chief of Health, Ghana, (myoung@unicef.org)
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^{*}Information on providing photos, video and a Post-distribution Summary is included in the attached document.