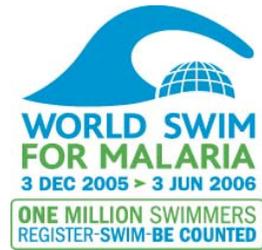


World Swim For Malaria Foundation

LLIN Distribution Programme – Detailed Information



Summary

# of LLINS	Country	Location	When	By whom
10,000	Cameroon	Batouri	Oct-Dec 2006	PSI

Further Information

1. Please describe the specific location & villages that will receive nets and the number to each?

ACMS (Association Camerounaise pour le Marketing Social, a PSI affiliate), in partnership with the National Malaria Control Program (NMCP), intend to use the WSM free LLITN (Long Lasting Insecticide Treated Net) donation to ensure the protection and full coverage of children under five in Batouri health district through free distribution of LLITNs. It is a rural area with an aggregate of villages and pygmy settlements. This net distribution would be conducted in conjunction with the measles vaccination campaign.

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

Batouri is a health district located in the East province of Cameroon at the heart of the equatorial forest. It has a population of about 125 243 persons among whom are 22 544 children under the age of five. It is a rural area and an educationally disadvantaged region where more than 70% of people live under poverty level.

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

Yes, it is a high risk malaria area for belonging to a region of perennial *Plasmodium. falciparum* transmission. The disease is endemic in this region with 12 months transmission. Malaria is known to be the leading cause of morbidity and mortality in Batouri and yet effort to tackle the deadly disease there remains highly limited particularly among vulnerable groups.

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.

A study carried out by the NMCP (2004) reported that 57% of morbidity among children under five is due to malaria. It is also known that it remains the primary cause mortality among children under five.

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.

This distribution of nets will target only children under age five who are more vulnerable due to their low immunity. The distribution will occur during the annual measles vaccination campaign, providing an added incentive for the children to be vaccinated.

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

Recent study carried out under the Expanded Impact Program on Child Survival (financed by USAID) indicated that only 2.5% of the population slept under ITNs the previous night in the East province with 7.4% attributed to children aged 0-23 months in Batouri.

ACMS is presently marketing nets through the commercial sector at full commodity cost recovery in the area but the price of net remains a major obstacle to its acquisition by the population. Sporadic distribution of insecticide treated nets has been conducted by Plan Cameroon

7. Why was the area/villages chosen for bednet distribution and who made this decision?

Many factors contributed to this situation:

- Malaria is highly endemic in the area
- There is an ongoing Integrated Management of Childhood Illnesses (malaria included) program in the area
- The extreme poverty of people of the area who cannot afford socially marketed nets
- The high level of illiteracy
- It is a zone that is difficult to reach.

The decision to target this area was made by ACMS in partnership the NMCP.

8. Have you consulted with the National Malaria Programme in your country about this distribution and what was their response?

The NMCP is presently planning to ensure free distribution of ITNs to children under five in November 2006, this, coupled with the measles campaign. But there are not enough nets to carry out this activity. They have issued a call for help to all partners to achieve this goal. Hence having heard of this opportunity, we have therefore discussed with them and they were overjoyed and ready to bear the transportation cost of nets from manufacturer to the user.

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

The population of Batouri is of about 125,243 persons among whom an estimated 22,500 children are under the age of five. At present, no program of free distribution of nets has reached this age group in Batouri. The NMCP seeks to cover 80 % of this group by 2010. Distribution of 10,000 LLITNs to

this group would achieve a coverage rate of 88% in a single season.

10. Please describe how the bednets will be distributed, by whom, between which dates, 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?

The nets will be distributed through the joint effort of ACMS and the NMCP during the measles campaign already planned for the month of November 2006. The nets will be distributed by NMCP and the activities will be accompanied by a communications campaign carried out by ACMS with USAID funding.

11. What post-distribution follow-up is planned to assess the level of usage of these nets?

The NMCP has developed materials that help to identify beneficiaries and their localisation. These allow smooth follow up and monitoring of the distribution intervention. Moreover, the USAID funded Expanded Impact Project (EIP) carried out by ACMS, Plan Cameroon and Helen Keller International has established a monitoring and evaluation system which involves District medical officers, Local Non Governmental Organizations and Community Based Organisations. Evaluation of net utilisation is already integrated into the EIP evaluation system.