



Summary

# of LLINS	Country	Location	When	By whom
3,500	Nicaragua	Sahsa (Tasba Pri), Región Autónoma Atlántico Norte (RAAN)	October 2007	PCI/Nicaragua

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.)

PCI will concentrate its distribution in the area of Sahsa (indigenous population affected 26,000), that have access by tertiary road, is 2 days away from Managua, the capital city. It has 49 villages and distribution will take place among these located in the Tasba Pri (free land), which are located on Nicaragua’s northeast “Miskito Coast,” in the “Región Autónoma Atlántico Norte” (RAAN). It’s coordinates are as follows: Longitude: 85° 1' 60W/Latitude: 14° 34' 60N. A total of 1-2 nets will be distributed to each family as needed. See list attached at end of form.

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

The RAAN is primarily a rural area, and has a total population of 314,130 (PAHO, 2005). While distribution will be centered in the town of Sahsa (indigenous population affected 26,000), PCI’s operations will extend to the surrounding areas where the populations are primarily Miskito Indians and have been affected by the rising levels of flooding.

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

Yes. With 10.2 API (number of positive cases per capita), the Autonomous Northern Atlantic Region (RAAN) is considered by PAHO as one of the two areas within Nicaragua that are at high-risk for malaria. In addition, RAAN was declared to be in 'state of disaster' by the national government after was hit and destroyed by Hurricane Félix, leaving thousands of people affected, 67 confirmed deaths, and large damage to private and public property, including all the harvest that was destroyed. This, combined with tropical humidity and high temperatures creates high risk conditions for malaria outbreaks.

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.

An average of 1,400 cases of Malaria per year has been notified by the Ministry of Health of Nicaragua. This Region is well known because the high prevalence of Malaria caused by Plasmodium Falciparum. As part of the fight against Malaria, treated mosquito net has been successful in reducing the Malaria.

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.

Select vulnerable group - Indigenous/Sahsa and other hurricane victims. The selection will be done in the field, base on current situation of Malaria and conditions where typically has occurred more cases, because now the conditions are more likely to increase the incidence of the disease due to the current flooding area.

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

With the aid of the Global Fund the Ministry of Health together with NGO was implementing in certain communities the ITN. The last report we had demonstrated a huge impact in reduction of the high incidence of malaria.

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.

All the area in the Caribbean was affected by Hurricane Félix, we selected Sahsa because it is one of the most remote communities and is not easily accessible, also because of the high incidence of Malaria previous to the natural disaster and because we have local partners working in this area that will help us to select the right beneficiaries and the follow up. Dr. Leonel Arguello, PCI Country Director in Nicaragua, Former chief of Epidemiology in the Country.

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.

Dr. Francisco Acevedo, head of Malaria Program in the Ministry of Health. He supports the distribution of ITN. Phone +505-2894700.

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

Before we received the ITN, we will review the epidemiological data of the villages available at the regional or national level, we will select the most affected and review the current situation of the population affected. The distribution per house or per family (because the majority of them lost their houses and live in temporal

settlement) will be done, taking into account the number of family members and mostly the number of beds or similar that they are using to sleep.

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.

After 10 days of the disaster the mosquito population will grow and then the number of malaria cases will increase. PCI Nicaragua together with AMC (local NGO working in those communities for at least 10 years) will be distributed. This will be part of a hygiene educational program that PCI will implement in this area. A basic training for ITN use, maintenance and the importance of using them will be developed with local indigenous group and with the aid of natural leaders and key persons in the community. The cultural aspect will be respected and local health volunteers (already trained in health) will be key for the implementation phase.

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?

Due that PCI Nicaragua will focus efforts in this community (Sahsa) during the next 9 months, the local health volunteers (already trained in health) will be key for the monitoring of level of usage and impact. PCI together with a Private enterprise will obtain around 1,500 ITN that will complement the donation. The distribution will be done in a period of 15 days, previous that we will train the community. We expect to have information regarding the acceptance, % of family that use the ITN. The monitor will be done every 3 months up to 3 times.

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.

Dr. Juan José Amador, Ministry of Health of Nicaragua. Due to current disaster he is coordinating the communicable disease program. The health center at local level was destroyed. Medical brigades are coming into the communities. Phone; 505-8864809. Address: Ministerio de Salud de Nicaragua, Conchita Palacios. Managua, Nicaragua.

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

The nets will be distributed at no-cost to recipients.

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.*

We confirm that at least 40 digital photos per sub-location will be taken and sent to you.

COMITÉ TERRITORIAL DE EMERGENCIA/TERRITORIAL
EMERGENCY COMMITTEE

No.	Nombre de la Comunidad/ <i>Community Name</i>	Poblacion Total/ <i>Total Population</i>	Estimado Promedio/ <i>Estimated</i>	Prioritized Areas for Nets to be Distributed (1-2 per family)
			familia/ <i>Families</i>	
	Puesto de Distribución en Sumubila			
1	SUMUBILA	878	146	146
2	ALTAMIRA	66	11	22
3	KUAKUIL	115	19	38
4	EL NARANJAL	731	122	244
5	ARENAL	608	101	102
6	AKAWAS Sta. FE	250	42	84
	Sub total	2,648	441	636
	Greyton Central			
1	GREYTON	1,094	182	182
2	EL CAMARON	672	112	224
3	LOS MILAGROS	498	83	166
4	SUKUAS ABAJO	328	55	110
5	LA GLORIA	333	56	112
6	WACAMBAI	400	67	134
7	Nva. ESPERANZA	280	47	94
	Sub total	3,325	554	928
	Breña			
1	Las Breñas	1,803	301	301
2	Danto I	170	28	56
3	Danto II	635	106	112
4	Waspado Breñas	234	39	78
5	El Pollo	274	46	92
6	Yakalwas	420	70	140
7	La Yasiksa II	402	67	134
	Sub total	3,938	656	913
	Puesto de Distribución Nazareth			
1	NAZARETH I Y TAMARINDO	952	159	320
2	NAZARETH II	419	70	140
3	SAN MIGUEL	470	78	156
4	EL PROGRESO INGENIERO	167	28	56
5	EL PORVENIR Y TRUSLAYA	695	116	232
6	KM 51	600	100	100
7	AKAWASITO	345	58	58
	Sub total	3,648	608	1,062
	TOTAL	13,559	2,259	3,539

Unfunded from this proposal:

COMITÉ TERRITORIAL DE EMERGENCIA/TERRITORIAL
EMERGENCY COMMITTEE

No.	Nombre de la Comunidad/ Community Name	Poblacion Total/ Total Population	Estimado Promedio/ Estimated	Prioritized Areas for Nets to be Distributed (1-2 per family)
			familia/ Families	
	Puestos de Distribución en Sasha			
1	SAHSA	2,023	337	337
2	SAN PABLO,TERCIOPELO Y CALLADO	1,558	260	520
3	SUKUAS ARRIBA	150	25	50
4	WAKIWAS/TUNGLA	321	54	108
5	SALPAKA I	500	83	166
6	SALPAKA II	242	40	80
7	COLUMBOS	1,261	210	410
8	EMPALME COLUMBOS	245	41	82
9	SISKA	438	73	143
10	EL GUASIMO	442	74	148
11	ESPERANZA ACAWAS	105	18	36
	Sub total	7,285	1,214	2,080
	Puesto de distribución en KuKalaya			
1	KUKALAYA	419	70	70
2	HUJUMBILA	630	105	210
3	LEYMUS KUKALAYA	291	49	48
4	BOCANA GREYTON	129	22	44
5	WASPADO KUKALAYA	288	48	96
6	DOS BOCAS	327	55	110
7	EL RETIRO	284	47	94
8	SUKLIN TINGNI	136	23	46
9	SAN JOSE KUSKALAYA	300	50	100
8	UNAWASITO	250	42	84
9	EL BUEN SAMARITANO	150	25	50
10	EL PIAKO	250	42	84
11	WASBUSO	200	33	66
	Sub total	3,654	609	1,102
	TOTAL	10,939	5,297	3,182