

# Against Malaria Foundation

LLIN Distribution Programme – Detailed Information



## Summary

# of LLINS	Country	Location	When	By whom
5,000	Cameroon	Sanaga Valley	Dec07-Jan 08	Yaounde Initiative Foundation (YIF)

## 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 Yaounde Initiative Foundation (YIF) currently runs a project following a request by the Cameroon Minister of Planning, Programming and Regional Development, H. E. A. F. Kodock to help reduce the impact of malaria and the nuisance blackflies in six villages of the Nyong Sanaga river area of Cameroon.

The aim is to extend the distribution of treated bed nets to the area surrounding these six villages in the YIF pilot area.

Table: List of the selected villages:

N°	Division	N°	Council	N°	Village	Geographic situation	Number of Nets
1	UPPER-SANAGA	1	Mbandjock	1	Njoré	11°50'30 E / 4°20'50 N	100
				2	Minkouma		112
		2	Batchenga	3	Nachtigal B		113
2	LEKIE	3	Monatéle	4	Monatéle I Plage	11°10'10 E / 4°10'50 N	150
				5	Nkolngal		100
		4	Ntui	6	Nachtigal N		103
		5	Sa'a	7	Nkolmesseng		100
				8	Ebebda II		150
3	NYONG-&-KELLE	6	Eséka	9	Ilanga	10°40'50 E / 3°40'00 N	120
				10	Eséka village Song Mayi		150
		7	Bôt-Makak	11	Bobog II	11°00'00 E / 4°00'70 N	120
				12	Manguénda 1		130
				13	Ntouleng		100
				14	Mangok		100
				15	Making		103

		8	Nguibassal	16	Nguibassal		110
		9	Dibang	17	Béda	10°40'30 E / 4°00'00 N	100
				18	Ngog-Mba		100
				19	Ngodi -si		100
				20	Mom		150
		10	Makak	21	Ngombas	11°30' E / 3°30'00 N	100
				22	Minka		120
				23	Bakoukoué		150
				24	Leplibong		120
				25	Libamba		120
				26	Makak II		120
		11	Matomb	27	Mayébég	11°00'40 E / 3°50'10 N	120
				28	Nkongtok		100
		12	Ngog- Mapubi	29	Boumnyébél	10°50'30 E / 3°50'30 N	120
				30	Song-Mpeck		150
				31	Mode		100
4	SANAGA- MARITIME	13	Edéa Rurale	32	Bessombe	10°00'50 E / 3°50'00 N	100
				33	Malimba II		100
				34	Metounga		100
				35	Bonepoupa SM		100
		14	Ngambe	36	Ngambe Centre	10°30'50 E / 4°10'40 N	120
				37	Log-Pagal		100
				38	Kan		100
		15	Ndom	39	Ndom Centre		120
		16	Pouma	40	Sackbayémé III Hôpital	10°30'10 E / 4°00'20 N	109
				41	Nkonga		100
17	Massok S- L	42	Massok	10°20'80 E / 4°00'50 N	120		
5	NKAM	18	Yabassi	43	Bonepoupa I	10°00'20 E / 4°00'50 N	100
				44	Bonepoupa II		100
<b>Total</b>							<b>5,000</b>

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

This is a rural area with some farming - e.g. cocoa and some fishing along the river. The population is about 13,500. It is situated about 2 hours by road from Yaounde.

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

Malaria is present every month in the year. The number of cases declines only slightly during a short dry period usually around December- January.

**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 national survey carried out and published in 2005 by the National Malaria Control Programme (NMCP) showed a malaria morbidity rate of 40.1 ± 0.6% and mortality rate of 2.2 ± 0.03%. These indicators varied from one epidemiological zone

to another. Children under five years (Morbidity 42.1 ± 0.1%, mortality 36.5%) and pregnant women (Morbidity 33.6± 0.2%, mortality 11.6%) are most affected.

Malaria remains a major public health problem in Cameroon. Existing climatic conditions favour the development of the vectors. There are several anopheles mosquitoes which are responsible for malaria transmission. *An. gambiae* s.l. is the main vector but there exist several secondary ones (*An. funestus*, *An. nili*, *An. moucheti* and *An. ovengensis* ). *P. falciparum* is the most frequent plasmodium species, followed by *P. malariae* and *P. ovale*.

Table: malaria morbidity in the Centre Province, year 2005

	Number of consultations for all disease cases	Malaria morbidity (%)
< 5 years	100,802	47.0
> 5 years	184,143	35.6
Pregnant women	13,927	29.2
Total/Mean	298,872	37.3

**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 will be 'blanket coverage'.

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

There are no active ITN distribution campaigns at present. A recent YIF survey showed that less than 4% of the people in the area had nets.

**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.**

The area was chosen because of the severity of vector-borne diseases, especially malaria. The area has been depopulated due to migration to the cities. YIF is introducing Vector Intervention Teams (VIT) in each village as part of our approach responsible for vector control, principally for malaria but also for blackfly.

YIF made the decision together with H. E. A. F. Kodock, Cameroon Minister of Planning, Programming and Regional Development.

**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.**

We discussed the programme with the National Programme e.g. Dr Okalla Raphael, Secretary of the NPMC, mobile: (237) 96 29 79 98 and Dr Fondjo Etienne, Assistant Secretary of NPMC, email:fondjoetienne@yahoo.fr, mobile: (237) 77 78 67 14, Ministry of Public Health, Yaounde-Cameroon and more recently with the Minister of Public Health.

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

We are currently studying the problem in 6 villages and have detailed knowledge. We work very closely with the Mayors and village leaders in these areas and in the surrounding villages so that it is relatively easy to assess the beds size and distribution of the nets YIF and VITs have done characterisation of houses in this zone thus data on the number of houses and number of beds and their sizes, nature of houses; plank, mud, cement, etc so a good knowledge of the zone.

**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.**

YIF staff is training VITs in each village and supplies of ITNs will be delivered by YIF to them to make sure they are installed and used in the houses. YIF will also liaise with VIT and supervise. An important aspect is the VITs are trained in correct setting up and use of the nets in the houses.

**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?**

There will be post-distribution sample surveys to check percentage of nets hanging and perception of the villagers within 6 months Yes, a report of the survey will be sent. There will be a VIT follow-up in each village to encourage their use by as a high a percentage as possible.

**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 ESSAMA, District Health Centre, Monatélé.  
Mobile: +(237) 77 74 51 05
- Dr NGONO Bienvenu, District Health Centre, Esseka, PO Box 7

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

The nets and all the inputs we have described will be free to the villagers.

**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 will take digital photos as requested during and after the distribution.

**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.\***

Video footage will be taken during the process of distribution of the nets.

**16. Please confirm you will send a [Post-Distribution Summary](#) when the distribution is complete.\***

A summary report will be compiled and sent.

**17. Please provide your name, role and organisation and [full contact information](#).**

UK

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\*Information on providing photos, video and a Post-distribution Summary is included in the attached document.