



Summary

# of LLINS	Country	Location	When	By whom
1,000	Uganda	Mbarara district	Jan-Feb09	Holy Innocents Children's Malaria Hospital, Uganda & Catholic Archdiocese of Mbarara

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 distributed to these specific locations. Location changes will only be considered, and may be refused, if due to exceptional/unforeseen circumstances.)

The distribution will be done at the Health Clinic in Rushooka Village in Mbarara District of Uganda, between 0°00' and 1°00' S Longitude: approx. 30°40' E.

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

This is a rural setting of ~4,000 people. Mbarara district has 2.4M people (<http://www.catholic-hierarchy.org/country/scug1.html>)

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

Yes. See the MARA/ARMA malaria transmission season map (<http://www.mara.org.za/pdfmaps/AfSeasonality.pdf>)

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.

488,000 cases of malaria in Mbarara district in 2003, and on the rise (http://www.rbm.who.int/wmr2005/pdf/WMReport_lr.pdf). 17,000 deaths of children 0 - 12 in 2006 (per Catholic Archdiocese of Mbarara)

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.

Distribution is for children 0 - 12, the group most susceptible to malaria.

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

There have been promises for distribution. We did a blanket distribution in Kyabirukwa already (90 miles from Rushooka) of 2,300 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 above-named villages were chosen by Rev. Fr. Bonaventure Turyomumazima, Chancellor of Mbarara Archdiocese, because they have the highest risk for children under 12 based on input from the two hospitals and 18 clinics operated by the Catholic Archdiocese of Mbarara. Rushooka has the next highest risk after Kyabirukwa.

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 worked with the Kyabirukwa district health officer. We will need to liaise with corresponding person in Rushooka.

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

Usually the Health Units Staff take records, and from these records statistics are compiled and co-ordinated through the Diocesan Health Co-ordinator's office.

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.

Bednets will be driven to the local Catholic Archdiocese clinic in each target area. They will be distributed to families coming to the clinics seeking treatment for a child with malaria, and families will be taught proper use of the bednets. In addition, the Catholic Archdiocese will announce the availability of bednets to the general population in the target areas and will arrange events to distribute the nets and teach their proper usage.

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?

we will create an outreach team, also co-ordinated through the Diocesan Health Co-ordinator's office. We will provide you findings.

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.

Information to be submitted.

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

The bednets will absolutely be distributed free to all 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 will do so.

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.*

We will do so.

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

Yes, we will provide a Post-Distribution Summary.

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

Lane Freestone
Vice Chairman
Holy Innocents Children's Malaria Hospital Uganda, Inc.
12463 Rancho Bernardo Rd. #501
San Diego, CA 92128-2143
858.231.9187
Lane@AT.cox.net
www.holyinnocentsuganda.org
an IRS 501(c)(3) non-profit corporation

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