



**POST-DISTRIBUTION SURVEY  
OF MOSQUITO NET USAGE**

1

Country: **Malawi** Location/Sub-location: **Chowe/Nkhula**  
 Date of Original Distribution: **NOV 2010** Date of this Review: **16/07/11**

**To the Householder**

In the past, you received mosquito nets for free in a community distribution. We are conducting a random review of 50 households to assess net usage and net condition. We would like to ask for your permission to enter your home to gather this information. Information is gathered anonymously; your personal details are not recorded.

I agree to allow you enter my home in my presence for a few minutes for the purpose of assessing the use and condition of my mosquito nets.

Signature of Householder: **Chrissey Bwami**

1. How many nets are there in the household? **2**

Number of (regularly used) sleeping spaces	Total number with nets
<b>2</b>	<b>2</b>

2. How many of the nets are being used at night? **2**

ALL or number of nets: **2**

3. Are all the nets being used correctly? **Yes**

Yes /  No

Please ask the Householder to demonstrate how the nets are used at night.

4. Of the **Against Malaria Foundation** nets **ONLY**

Number originally received	Hung	Present but not hung *	Not present *
<b>2</b>	<b>= 2</b>	<b>+ 0</b>	<b>+ 0</b>

\*Reason:

5. What is the condition of the **Against Malaria Foundation** nets **ONLY**?

Please select: Very Good (>2 holes or <20%), OK (fewer than 10 small holes), Poor (more than 10 small holes or 1 big hole)

Condition	Who slept under this net last night?	Condition	Who slept under this net last night?
Net 1 <b>Very good</b>	<b>2</b>	Net 6	
Net 2 <b>Very good</b>	<b>3</b>	Net 7	
Net 3		Net 8	
Net 4		Net 9	
Net 5		Net 10	

**CERTIFICATION**

I certify the information in this form is correct.

Reviewer's name and position: **A. MULOIWA (MJA)** **2011-07-16**  
 Reviewer's organization: **ST. LUKES HOSPITAL** Official Stamp

**P.O. BOX 21  
CHILEMA**

Against Malaria Foundation [www.AMF.org](http://www.AMF.org)

100% of our funds buy nets; they are put over heads and beds and



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I agree to allow you enter my home in my presence for a few minutes for the purpose of assessing the use and condition of my mosquito nets.

Signature of Householder: **Esonet Bwami**

1. How many nets are there in the household? **1**

Number of (regularly used) sleeping spaces	Total number with nets
<b>1</b>	<b>1</b>

2. How many of the nets are being used at night? **1**

ALL or number of nets: **1**

3. Are all the nets being used correctly? **Yes**

Yes /  No

Please ask the Householder to demonstrate how the nets are used at night.

4. Of the **Against Malaria Foundation** nets **ONLY**

Number originally received	Hung	Present but not hung *	Not present *
<b>1</b>	<b>= 1</b>	<b>+ 0</b>	<b>+ 0</b>

\*Reason:

5. What is the condition of the **Against Malaria Foundation** nets **ONLY**?

Please select: Very Good (>2 holes or <20%), OK (fewer than 10 small holes), Poor (more than 10 small holes or 1 big hole)

Condition	Who slept under this net last night?	Condition	Who slept under this net last night?
Net 1 <b>Very good</b>	<b>3</b>	Net 6	
Net 2		Net 7	
Net 3		Net 8	
Net 4		Net 9	
Net 5		Net 10	

**CERTIFICATION**

I certify the information in this form is correct.

Reviewer's name and position: **A. MULOIWA (MJA)**  
 Reviewer's organization: **ST. LUKES HOSPITAL** **2011-07-16**

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I agree to allow you enter my home in my presence for a few minutes for the purpose of assessing the use and condition of my mosquito nets.

Signature of Householder: Hawa WiriSoni

1. How many nets are there in the household? 2

Number of (regularly used) sleeping spaces	Total number with nets
<u>3</u>	<u>2</u>

2. How many of the nets are being used at night? ALL or number of nets: 0

3. Are all the nets being used correctly? Yes / No

4. Of the **Against Malaria Foundation** nets ONLY:

Number originally received	Hung	Present but not hung*	Not present*
<u>2</u>	<u>= 0</u>	<u>+ 0</u>	<u>+ 0</u>
*Reason: <u>due to disappearance of mosquitoes</u>			

5. What is the condition of the **Against Malaria Foundation** nets ONLY?

Please select: Very Good (2 holes <2cm), OK (fewer than 10 small holes), Poor (more than 10 small holes or 1 big hole)

Condition	Who slept under this net last night?	Condition	Who slept under this net last night?
Net 1: <u>Very Good</u>	<u>0</u>	Net 6	
Net 2: <u>Very Good</u>	<u>0</u>	Net 7	
Net 3		Net 8	
Net 4		Net 9	
Net 5		Net 10	

CERTIFICATION

I certify the information in this form is correct.

Reviewer's name and position: A. MULO TIWA (HSA)  
Reviewer's organization: ST. LUKES HOSPITAL

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I agree to allow you enter my home in my presence for a few minutes for the purpose of assessing the use and condition of my mosquito nets.

Signature of Householder: Enpher Jackson

1. How many nets are there in the household? 2

Number of (regularly used) sleeping spaces	Total number with nets
<u>2</u>	<u>2</u>

2. How many of the nets are being used at night? ALL or number of nets: 0

3. Are all the nets being used correctly? Yes / No

4. Of the **Against Malaria Foundation** nets ONLY:

Number originally received	Hung	Present but not hung*	Not present*
<u>2</u>	<u>= 2</u>	<u>+ 0</u>	<u>+ 0</u>
*Reason:			

5. What is the condition of the **Against Malaria Foundation** nets ONLY?

Please select: Very Good (2 holes <2cm), OK (fewer than 10 small holes), Poor (more than 10 small holes or 1 big hole)

Condition	Who slept under this net last night?	Condition	Who slept under this net last night?
Net 1: <u>Very Good</u>	<u>1</u>	Net 6	
Net 2: <u>Very Good</u>	<u>1</u>	Net 7	
Net 3		Net 8	
Net 4		Net 9	
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