Dedza District, Malawi

**Post-Distribution Check-Up (PDCU)
at 12 months**

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PLANNING DOCUMENT

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Contents

1. Purpose

The PDCU, at the health centre (HC) level, assesses the level of continued net use and provides statistically significant and locally-actionable information to the relevant health/NMCP leaders, including The District health officer (DHO), Malaria Coordinator (MC), to contribute to health intervention decisions and planning. Timely data-based information on net use and condition can help in allocating resources to maintain high levels of coverage. There is some evidence that community-awareness of the PDCUs also contribute to behaviour change and higher levels of net hang-up and correct use.

The initial distribution of 245,489 LLINs took place between September and October 2014. The first post-distribution check-up (PDCU-6) took place in June 2014.

2. Frequency

Every six months until 30 months post-distribution. Further PDCUs will be assessed depending upon their usefulness, taking into account anticipated levels of community coverage and the timing of any subsequent community-wide universal coverage campaign.

3. Sample size

5% of all households (HHs) that received nets in the universal coverage distribution are randomly-selected and visited unannounced.

4. Distribution catchment area

Population: **792,422**
Number of Households (HHs): **186,105**
5% of households, to be visited: **9,100**
Number of Health Centre Areas (HCAs): **33**
Average population per HCA: **23,306**
Average number of HHs per HCA: **5,405**
5% of HHs (average) per HCA: **275**

5. Cost

The budget cost is **US$13,492**. Detailed budget attached.
Budget cost: **US$1.48** / HH visited.

6. Information to be collected

A half-page, six-question form focuses on net presence, use and condition. Appendix 1.

7. Collection format

Data will be collected in paper form, two households per landscape A4 page.

8. Locations

The survey will be conducted in 33 of the 34 HCCAs in Dedza District. All were involved

in the September to November 2013 universal coverage net distribution. In each HCA 5% of the HHs will be visited (Range: 100 to 500, average 275) via selecting at random a number of villages and HHs for unannounced visits. In total, the PDCU will collect information from 9,100 households. See Appendix 2.

9. Timing

The PDCU will start on 28th September 2015 and will be completed within 6 weeks with the enumerators collecting data from at least one health facility per day.

10. Personnel

Project Leader (1): Management and overall responsibility, providing guidance and support to the Project Manager and reporting to AMF. Nelson Coelho, Project Coordinator, CU.

Project Manager (1): Operational management and overall responsibility, reporting to the District Helath Officer (DHO) and to the Project Leader. Chimemwe Nyoni, Project Manager, CU.

Field Supervisors (1): Responsible for monitoring the enumerators and checking their work. This will be a senior member from the district, specifically either the Malaria Coordinator or the Environmental Health Officer.

Enumerators (Data collectors) (10): Responsible for collecting data from the randomly selected households. Each enumerator will be accompanied by the HAS responsible for the village being visited. The enumerators will be selected, hired and trained by CU.

Data clerks (4): Responsible for checking and entering data into the database on the online weblink. Each of the data clerks will be assigned data for a set of HCAs.

Drivers (2): There will be two vehicles involved in the exercise, responsible for carrying personnel and materials to the field and to the data center.

19 personnel will be involved in the PDCU over six weeks.

11. Specific roles and responsibilities

Project Leader

- Ensure all logistical arrangements for the survey have been put in place
- Monitor, mentor and advise the Project Manager
- Produce reports

Project Manager

- Facilitate printing of questionnaires
- Liaise with Ministry of Health officials on sampling of villages and households
- Facilitate transport and booking of sampled villages
- Train and orient all the HSAs involved in the exercise

- Train and orient the data personnel
- Administer the survey process
- Provide a list of HHs to be visited by each data collector (main) and each data collector (checking)
- Collect and cross-check filled questionnaires from supervisors
- Submit filled questionnaires to the data clerks
- Facilitate availability of online internet accessibility for data capturing
- Liaise and monitor data capturing with data entry clerks
- Link data queries with supervisors for follow ups

Field supervisors

- Facilitate and distribute questionnaires to the data collectors
- Facilitate identification of sampled households at village level
- Monitor how the data is being collected (quality, relevance and validity)
- Cross-check that forms have been correctly filled in by enumerators
- Respond to on-the-spot queries from both sampled communities and data collectors
- Work with Project Manager to provide a list of HHs to be visited by each data collector (main) and each data collector (checking)
- Submit filled forms to the project manager

Data collectors - Main

- Identify and verify households to be visited
- Collect data from the sampled households and complete questionnaire as required
- Verify the data collected is a true reflection of the situation
- Submit filled questionnaire to the supervisor

Data collectors - Checking

- Visit 5% of households visited by <u>each</u> of the main data collectors to check data accuracy
- Identify and verify households to be visited
- Collect data from the sampled households and complete questionnaire as required
- Verify the data collected is a true reflection of the situation
- Submit filled questionnaire to the supervisor

Data clerks

- Cross-check collected data
- Enter collected data correctly online
- Liaise with the team leader regarding any logistical challenges
- Enter data from Data Collectors (checking) so separately identifiable and check against data from Data Collectors (main) can be made

12. Operations

i) Establish responsibilities and schedule

This includes management and personnel selection and establishing a project timeline.

ii) Brief all staff involved

A one day PDCU orientation training will be carried out involving the enumerators and their supervisors who will be involved in the exercise. This exercise will cover how to collect and check the information required. The quantity of forms needed will be distributed at this briefing.

iii) Collect data

Data collectors will visit HHs to collect data. Supervisors will monitor their work and check forms. This will ensure compliance with data collection procedures. Forms will be sent to the central data-entry location as soon as the set of household forms from the HCCA is complete.

v) Enter data

Data will be entered from forms into an existing, online database. Four data entry clerks will start entering data on day 2 or 3 of the data collection phase and are expected to complete their work, including checking, within two weeks of the end of the data collection phase.

vi) Report to DHO and health leaders and AMF

All data will be available to the MC and AMF as they are entered. A summary will be sent to the MC and AMF as soon as all data is entered. The complete data set will be passed to the MC.

Appendix 1 – Post Distribution Check-Up (PDCU) data collection form

POST-DISTRIBUTION SURVEY OF MOSQUITO NET USAGE (Against Malaria Foundation)

Country:	Health Centre name:
Date of distribution:	Village name:
Reference:	Date of this survey:

Form Number: _____

To the Householder In the past, you received mosquito nets for free in a community distribution. We are conducting a survey of randomly selected 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 to enter my home, in my presence, to assess the use and condition of my mosquito nets.
_____ Signature of Householder

1. How many regularly used sleeping spaces are there in the household? _____
2. What is the condition of the HUNG nets?

	Brand of net (tick one)			Is it an AMF Net?	Net condition (tick one)			How many slept under this net last night?				Net condition
	Diyad	Perma Net	Other	☑	Very Good	OK	Poor	# Children Under 5	# Children 6 to 18 years	# Preg W	# Other adult	Very Good fewer than 2 holes of less than 2cm each
Example	O	☑	O	☑	☑	O	O	1			1	
Net 1	O	O	O	☐	O	O	O					OK fewer than 10 small holes
Net 2	O	O	O	☐	O	O	O					
Net 3	O	O	O	☐	O	O	O					
Net 4	O	O	O	☐	O	O	O					Poor more than 10 small holes or 1 big hole, larger than 10 cm
Net 5	O	O	O	☐	O	O	O					
Net 6	O	O	O	☐	O	O	O					
Net 7	O	O	O	☐	O	O	O					If there are more than 10 nets continue on another form (and mark both forms).
Net 8	O	O	O	☐	O	O	O					
Net 9	O	O	O	☐	O	O	O					
Net 10	O	O	O	☐	O	O	O					

3. Of the Against Malaria Foundation nets ONLY:

Number originally received	Hung (= # ticked above)	Present but not hung *	Not present	
			Worn out	Other *

* Reason:

4. Does the householder know how to hang and use a net correctly?   **Yes / No**
Please ask the householder to demonstrate how the nets are used at night if not obvious from the nets hanging

5. How many people in this household have had blood-test diagnosed malaria in the last month? _____

6. How many people are there in this household? _____

Form Number: _____

CERTIFICATION:
I certify the information in this form is correct

Surveyor's name and position:	Surveyor's organisation:	Official Stamp

Against Malaria Foundation www.AgainstMalaria.com   100% of our funds buy nets, they are put over heads and beds and we demonstrate that has happened.

Appendix 2 - Health Centres and relevant numbers

DATA COLLECTION PLAN

VILLAGES

DAY	HEALTH CENTRE	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1	KACHINDAMOTO	CHATEWA	DZIKO	CHATATA	NKALIWAFA	NANYANJE															
1	MGANJA	MGANJA	KANKHANDE	KANYERERE	KUWERUZA	PHUMULA															
2	NAKALAZI	CHIMSEU	KAMWACHOKA	KANJIRAWAYA	KASAKALA	MCHENEKA	BALALA	CHITULE	KANZINGENI	WENDERELA	KAMUSI										
3	MTAKATAKA	FWALIKILE	MACHAPA	MTAKATAKA T	LIWIMBI	CHIPOLOPOLO	CHIDZONDO	HUWA	CHIKOMBA	KAPHULIKA	CHIMGWANDALI										
4	MUA	KAFULA BWINJ	MALUZA	KANKHANDE	KANYERA	NDELEMA	KAKWINJA	MSOLO 1	NANKUMBA	FOLE	ZIOYA										
5	KAUNDU	DZINDEVU	CHAGUNDA 2	GWAZA	MSUKA	SITOLO 2	LUMWIRA	KAMWENDO	KHOSWE	CHAGUNDA 1	KAMPHALE										
6	GOLOMOTI	CHIPWAILA	THUKULIZA	MPANGO	ASANI	ELIAS	KUCHIPANGA	KANJOVU	KASALO	CHAGONTHA	TAILOSI	ANDREW	DUWIZA	KANKHWANI	MTSATAMANJA	NKHOLOKOMB	WILSON	CHISAKA	KALUMO	CHIMPINI	JOHN
7	MGANJA	KANKHANDE	KANYERERE	KUWERUZA	MGANJA	PHUMILA															
7	MPHATI	JONASI	MATOLA	NANDAYA	MCHENGA	LAUDENI	NJATI														
8	DZINDEVU	WINDROSE	CHIGOME	MWEYEYANO	TCHOZA	LUMWIRA	NGONDA	SAMAMA	KALINDIZA	KWILOMBE	LIPANDA	MKULAMWEND	NAKAONA	KAMBWIRI	MBIMBI	NDEMBO					
9	KANYAMA	KAPATUKA	KUMACHEMBA	CHIPHUKA	LUMWIRA	GOLIATI	MPHEZIWA	CHALINDA	KACHITSA	KADZOLA	MAKHUNYULA										
10	KALULU	MATUPA	CHAFWALA	MZIKAMANDA	KAYANJA 2	KUDEMBE	MANGWIZA														
10	POLICE COLLEGE	KAMPINI	NADZIKHALE	KALONGA	POLICE COLLEGE																
11	CHIKUSE	CHIMPHANDU	MALIKA	MKUZIWALERA	CHILORE	SANI	WISIKI	CHIKUSE	KHOMBE	NJOLO	NAMAESA	MWENJE	CHEYINANI								
12	MJINI	AJIBU	NYONGO	MBUZIYADULA	MCHALO	MMANGIRA	TAMBALA	TSUCHI													
13	CHIPHWANYA	MANGULENJE	MNENULA	CHAMBA	NJAO	MKOKOKO	BOWA														
14	MAYANI	KAOLE	MZINDO	MKOMBA	DULE	MUYOWE	TIMBIRI	KAMERO	KAMPHINDA	MASAMBA	MKAJENDA										
15	KAPHUKA	BIWI-CHAUNDU	CHILIMATA	CHIZWA	KASULO	UNDI	KAYESELA	NG'OMBEYAYE	NTHENGA	BWANALI	CHABINDA	KASONDA	MTONYA	CHIMOMBO	LUMWILA	MALIWATA	NYAU	SOSOLA	KAWECHE	MTEMA	MANGUMBI
16	TSOYO	MAGOLA	TSINKHA	MITUMBI	MPHASA	CHITSATSA	KHWANANGWI	DAWE	MKOLA	KACHULU	MATENJE										
17	KASINA	CHILANGA	CHIMTENGO	KASINA	MPENI	MNDENDE	MNTHAMBWE	CHIBWANA	MWALAMBA	SEFASI	ZIKABUMA	KAKHOME WES	MAKOKO	CHILUNGA	NAMPALA	CHIMAMBA					
18	MDEZA	KANAME	MACHEWELA	NTAUKA	KATHUVU	SILIYA	KAKHOMBA	CHIMUTU	MNYANGA												
19	CHITOWO H/C	CHITIMBE	MBINGWANI	KABANGA	KAKUTA	MNUKHAWAN	NGONGOMWA	THAMBALIKA	CHANG'OMBE	CHAPALUKA	MBALIRA	MBWADZULU	MNJONDA	MBIDZI	MTHALA	CHIPENI					
20	MAONDE	CHALENDEWA	MATONGA	MATOPE	SOKOSA	BONDO	HEZEKIA	KAPITAPITA	BAULENI	CHINZU	MKOKAMASA										
21	LOBI	CHIMOMBO	MANASE	ABRAHAM	HASHANI	PETROSI 1	MALUKU	KANYIMBI	MSANGU	CHABUKA	MTANDE										
22	MTENDERE	CHINTHAKWA	KAPUZANG'ON	ELIYA CHINTEN	KALONGA 2	KANYOMBO	TULO	MBALAMEYAN	MSEKAKANYE	CHILALA	KAPIKIRA	CHIKOLOLERE	MTEMBE	KAUDZU	CHIOKO	MTALIMANJA	NYANGU	CHIMOMBO	KUKADA	KUDEMERA	MPEKA
23	KAFERE	KAFERE	MTAWALIKA	MKANTHAMA		BULIMO	KAPISENI	MILALE	KHOLOWA	MAJAMANDA	ZIMONDO										
24	MIKONDO	SALUZAWO 2	KABANGA	KUCHINAMWA	MILIYASI	NDEBVU	BEMA	KAMPHINDA	KANGO	MTENGOWAGV	CHIMKWITA										
25	MATUMBA	KALIKUTI	PHALE	CHIWALA	KAPHESI	MPHANYAMA	KAKHOME	KAMADZI	KATSALAPOTI	MPIRA	MWAMPANDA	NAMILAZA	CHISINDO	KALIPINDE	KUMITENGO	KAIMVI	MGOMBE	ASAFU	LOMBWA	LUFESI	MNOLO
26	CHIMOTO	KADZOMBE	MSOMEKERA	ZOPANGANA	CHENTAMBO	CHIKULUNGEN	GENDA	GWAZA	PIKO	CHIKAMPHALIK	LASANI	STORE	CHINKHU	JOLAMU	LOMBWA	MBUTA					
27	KANYEZI	CHIKAONEKA	MPHIZI	ZINYONGO	CHILEMBA	CHATSIKA	TEMBWE	GWENGWE	CHEZENJE	MPIRA	NJATI	MLOMBWA	DULAMPINGO	KAKHOSI	MPHANDO	KABWAZI					
28	CHONGONI	DAMIANO	UNDI	KANYANDA	HINDA	FOURMILES	MAKWANGWA	MCHIWIRI	TIOPAIZI	CHITOSI	KALIMANJIRA										
29	MPHUNZI	BISKET	KUCHIPALA	LUMWIRA	MKUZI	KHULUNGIRA	KAPHALA	DZINKAMBANI	KALEMBELE	NAMPANTHA	SIMONI										
30	MLANGALI	DAILESI	ZUZE 1	CHAPATALI	DZANJA	MFERA	MASATO	MLULIMA	PAULO	BOWA	MKONO										
30	BEMBEKE	KUNTHINDI	KAMTANDE	KAUYEMAOND	MARTEN	MWADYANJI	MCHOCHOMA	KAULALO	CHINYAMULA	SIMUKA	BUYA										

Appendix 2 - Health Centres and relevant numbers (contd)

List of HHs per Health Facility

No.	Health Centre	Health Facilty registered HHs	Total Registered Villages per Health Facilty	Villages to be sampled	% of Vllgs	HHs sampled per village	# of HHs sampled per Health Facility
1	KACHINDAMOTO	2,288	20	5	25%	25	125
2	NAKALAZI	5,769	16	10	63%	25	250
3	MTAKATAKA	4,765	52	10	19%	25	250
4	POLICE COLLEGE	1,066	11	4	36%	25	100
5	MUA	5,769	23	10	43%	25	250
6	KAUNDU	4,708	62	10	16%	25	250
7	GOLOMOTI	8,208	62	20	32%	25	500
8	MGANJA	1,348	9	5	56%	25	125
9	DZINDEVU	7,531	55	15	27%	25	375
10	KANYAMA	4,818	63	10	16%	25	250
11	KALULU	2,651	46	6	13%	25	150
12	CHIKUSE	6,217	57	12	21%	25	300
13	MJINI	3,532	109	7	6%	25	175
14	CHIPHWANYA	2,911	38	6	16%	25	150
15	MAYANI	5,891	65	10	15%	25	250
16	KAPHUKA	9,058	98	20	20%	25	500
17	TSOYO	5,030	93	10	11%	25	250
18	KASINA	7,801	71	15	21%	25	375
19	MDEZA	3,710	72	8	11%	25	200
20	CHITOWO H/C	7,375	61	15	25%	25	375
21	MPHATI	2,859	29	6	21%	25	150
22	MAONDE	4,486	45	10	22%	25	250
23	LOBI	5,833	54	10	19%	25	250
24	MTENDERE	10,149	131	20	15%	25	500
25	KAFERE	2,648	82	10	12%	25	250
26	MIKONDO	4,662	73	10	14%	25	250
27	MATUMBA	10,164	116	20	17%	25	500
28	CHIMOTO	8,219	83	15	18%	25	375
29	KANYEZI	6,806	88	15	17%	25	375
30	CHONGONI	5,565	58	10	17%	25	250
31	MPHUNZI	5,025	34	10	29%	25	250
32	MLANGALI	4,449	35	10	29%	25	250
33	BEMBEKE	7,073	88	10	11%	25	250
		178,384	1,999	364	18%	825	9,100

DEDZA 12 months PDCU - Timeline

No.	ACTIVITY	SEPTEMBER			OCTOBER				NOVEMBER			
		14	21	28	5	12	19	26	2	9	16	23
1	Briefing of enumerators and supervisors			▓								
2	Data collection			▓	▓	▓	▓	▓	▓			
3	Data entry					▓	▓	▓				
4	Report writing									▓		