

# AMP The Alliance for Malaria Prevention

Expanding the ownership and use of mosquito nets

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**AMP Conference call minutes:** [www.allianceformalariaprevention.com](http://www.allianceformalariaprevention.com)

1<sup>st</sup> February 2017

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If you wish to be added to or taken off of this mailing list please contact: [melanie.caruso@ifrc.org](mailto:melanie.caruso@ifrc.org)

Do you have a topic / issue / country specific update to share with the AMP partnership? Send a summary of the topic you would like to discuss to: [jason.peat@ifrc.org](mailto:jason.peat@ifrc.org) or [melanie.caruso@ifrc.org](mailto:melanie.caruso@ifrc.org) and we will schedule your update at the start of an upcoming AMP conference call.

## **Agenda – February 1st AMP conference call**

Chair : Melanie Caruso  
Rapporteur : Melanie Caruso

- Introductions
- Country Updates
- Working Group Updates
- AOB

Next conference call: Wednesday, 15<sup>th</sup> February 2017 10:00 EST, 14:00 GMT / UTC, 16:00 CET

## **Participants:**

ALMA :	
AMF:	Peter Sheratt
AMP participants :	Melanie Caruso, James Ssekitooleko, Jean-Marc Grégoire
BASF:	Alex Heimsch
Buy a Net:	
CDC / PMI:	Mark Maire, David Gittelman
CRS:	
Disease Control Technologies:	
Global Fund:	
Global Health Partners:	
IFRC:	
Independent participants:	Kevin Starace
Intelligent Insect Control:	
IPHA:	Jessica Rockwood
JC Flowers Foundation:	
JHU Centre for Communications:	Sean Blaufuss
JSI:	Chris Warren
MCDI:	
Milliner Global Associates:	John Milliner



For additional information:

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Nets for Life: Gifty Tetteh  
 PLAN Canada:  
 PSI: Charlotte Eddis  
 Real Relief Health: Annette Braae  
 Rotarians Action Group on Malaria: Drake Zimmerman  
 RTI:  
 Sumitomo:  
 Tana Netting:  
 UMCOR:  
 UNICEF:  
 UN Foundation:  
 USAID / PMI:  
 VF:  
 WHO:  
 World Vision: Gagik Karapetyan

**General updates:**

**AMP 2017 Partners' meeting**

- The dates of the 2017 partners meeting: 6-7<sup>th</sup> February prior to the VCWG meeting scheduled 8-10<sup>th</sup> February and will take place at the Movenpick Hotel in Geneva.
- Draft agenda and list of participants attached
- Theme for the meeting: Improving delivery efficiency and quality

**AMP working group updates:**

**Country support working group:**

Chair: Marcy Erskine IFRC – [marcy.erskine@ifrc.org](mailto:marcy.erskine@ifrc.org)

Current AMP TA missions :

Country	Type of technical support requested from AMP	Partner / Funding source	Mission dates
Tanzania	CMA	VectorWorks	January 2017
Nigeria	Implementation	AMP	February 2017
Guinea Bissau	Implementation and Logistics	AMP/UNDP	January 2017
DRC	Implementation	AMP	February 2017
Togo	Logistics	AMP	February 2017

Planned AMP TA missions 2017:

Country	Type of technical support requested from AMP	Partner / Funding source	Mission dates
DRC	Implementation and Logistics	AMP	February/March 2017
Benin	Implementation, Communications and Logistics	AMP	Continuous 2017

<b>Burundi</b>	Implementation and Logistics	AMP/IFRC	Continuous 2017
<b>CAR</b>	Logistics and Communication	AMP	Q1 2017
<b>Guinea Bissau</b>	Implementation, Logistics and Communication	AMP	Q1/Q2 2017
<b>Nigeria</b>	Implementation	AMP/IFRC	Continuous 2017
<b>Mozambique</b>	Implementation and Logistics	AMP	Continuous 2017
<b>Sierra Leone</b>	Implementation, Logistics and Communication	AMP	February 2017
<b>Liberia</b>	Implementation, Logistics and Communication	AMP	Continuous 2017

Completed AMP TA support (distance and in-country) in 2017:

Country	Type of technical support requested from AMP	Partner / Funding source	Mission dates
<b>Sierra Leone</b>	Implementation (x2) and Logistics	AMP	January 2017
<b>Total # of countries supported by AMP in 2017 (in-country):</b>			<b>1</b>

**Emerging issues working group:**

**Co-chairs: Megan Fotheringham – USAID/PMI [mfotheringham@usaid.gov](mailto:mfotheringham@usaid.gov) ; Caroline Desrousseaux VF - [cde@vestergaard.com](mailto:cde@vestergaard.com))**

- EIWG call was held 24<sup>th</sup> January
- Minutes of this call attached to the minutes of the weekly AMP call
- Following the EIWG November 22 2016 call, Sara Berte drafted a working paper, “Repurposing Recommendations for country Level Messaging and Action”. Participants on today’s call reviewed and discussed the paper. Key feedback on the paper included:
  - The goal of this document is to fill an information gap between using an ITN for malaria prevention and the point at which it is ready for full disposal. There is a window—albeit sometimes a small one, when ITNs may be used for other purposes. Once the draft working paper is revised, it will be shared with WHO to receive guidance on possible next steps and to see if GMP finds it a useful tool for country programs.
  - ITNs do have a “shelf life”. They cannot stay in their packaging forever and maintain full efficacy. So, there needs to be a balance of encouraging households to “use up” their older nets and then replacing them with the newer nets as needed.
  - Consider improving the clarity of terms used—older/expired/non viable can mean different things. Need to be careful on how to clarify what stage of the net’s life we mean when we speak of “repurposing”.
  - In its most recent campaign, a country considered but ultimately did not include repurposing messages in its communication messages, fearing that discussing repurposing may inadvertently promote misuse. This is an important consideration and it is critical to find the right balance of permission to use old, expired nets for alternative purposes while confirming that new and still viable nets must be used for malaria prevention. Mozambique included some messaging about repurposing in its campaign. Examples of the materials will be collected, reviewed, and included as references.
  - Next steps:
    - o Feedback on draft document is welcome via email, phone, etc. Ideally before February 1, so that the feedback can be incorporated into the presentation that will be given at the AMP meeting. Please contact Hannah Koenker to provide that feedback.
    - o The content of the final draft paper will be presented at the 2017 AMP Annual Partners Meeting. That presentation will be designed to raise the issue, describe the proposed way forward and to

- receive input and feedback. This is an excellent way to receive country program feedback and ensure their perspectives are included in the final working paper.
- o Seek WHO input as well head of the AMP meeting. And request advice on the best way forward. If GMP is interested, it is possible this could be added to a VCTEG agenda for further discussion.
- Next Meeting: Monday February 6, 2017, in person meeting during the lunch break at the 2017 AMP Partners Meeting

**Monitoring, Operational Research, and Evaluation (MORE) working group:**

**Co-chairs:** (David Gittelman - CDC/PMI [dmg1@cdc.gov](mailto:dmg1@cdc.gov) and Elizabeth Ivanovich UNF - [eivanovich@unfoundation.org](mailto:eivanovich@unfoundation.org) ; Mame Birame – USAID/PMI Senegal [mbdiouf@usaid.gov](mailto:mbdiouf@usaid.gov); and Sylvester Maleghemi – WHO, Nigeria [tojumaleghemi@yahoo.co.uk](mailto:tojumaleghemi@yahoo.co.uk))

- Next Meeting: Tuesday February 7, 2017, in person meeting during the lunch break at the 2017 AMP Partners Meeting to talk about progress and questions for the larger community on reviewing the AMP toolkit M&E section, post campaign evaluation, update on minimum data requirements.

**Net mapping project working group:**

**Chair:** John Milliner – Milliner Global Associates [jemilliner@gmail.com](mailto:jemilliner@gmail.com)

- Q4 report is in
- Tweaks to mapping being made for presentation at the partners meeting

**Toolkit working group:**

**Co-chairs:** Hannah Koenker – JHU [hkoenker@jhuccp.org](mailto:hkoenker@jhuccp.org) ; Jessica Rockwood – IPHA [jessicarockwood@verizon.net](mailto:jessicarockwood@verizon.net); Marcy Erskine IFRC – [marcy.erskine@ifrc.org](mailto:marcy.erskine@ifrc.org)

- No update

**AMP ‘ACTIVE COUNTRIES’**

*Countries where AMP is currently providing technical assistance via in-country missions or distance support.*

**AMP ‘Active Countries’ updates provided on February 1st AMP call: Angola, DRC, Guinea, Guinea Bissau, Nigeria, Sierra Leone, Tanzania, Togo**

**Angola:**

<b>Population at risk of malaria in Angola :</b>				<i>19,600,000 (World Malaria Report, 2012)</i>			
<b>Required LLINs :</b>				<i>10,888,888</i>			
<b>LLINs imported into the country three years prior to update :</b>				<i>4,850,646 (AMP Net Mapping Project)</i>			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	Phased approach by province – 1LLIN/2 people - 2013	11,700,000	7,484,312	3,669,125		Implementation , Logistics	03.04.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>11,700,000</b>	<b>7,484,312</b>	<b>3,669,125</b>			<b>N/A</b>

**Update on February 1st AMP conference call:**

- In May of 2017, Angola will implement its first simultaneously implemented national mass LLIN distribution campaign. The LLIN distribution campaign is part of a larger effort to increase net ownership and usage that includes strategies such as social and behavioural communication change and continuous net distributions. Local and international consultants supported by VectorWorks to assist the Angolan National Malaria Control Program (NMCP) in the planning, implementation and evaluation of the campaign.
- This mission is a follow up to the mission that took place in December 2016. Despite significant work by all parties, the macro planning documentation, campaign plan of action, campaign coordination (committees and subcommittees) and budget still need to be worked out and refined to ensure that all documents are both aligned with the campaign strategy and also aligned with one another. This is to prevent a long clarification process with the various funders of the campaign.
- VW technical support for this mission will focus on the following elements:
  1. Co-facilitate micro-planning workshop/training for NMCP, provincial staff, and local partners
  2. Support the procurement process for universal coverage resources such as pamphlets, forms, vouchers, and t-shirts
  3. Develop and share with relevant partners systems and tools for effective and efficient tracking of LLINs
  4. Provide continuous logistics support planning, management, and coordination during pre-campaign activities
- VW technical support have developed a draft agenda and are gathering tools that are being adapted for the Angola campaign 2017 context. This draft agenda and pp. presentation will be finalized on Monday and shared with NMCP and partner
- Substantial number of tools such as data collection tools, micro planning template, warehouses assessment guides, were gathered and are to be shared with the participants during the TOT for micro planning, to allow them a proper micro planning exercise at municipal levels.
- Logistics tracking tools (Waybill and stock card) have been gathered and are being adapted for the Angola campaign 2017
- Quantification for these tools has also been completed and shared with NMCP logistics focal point for consideration and procurement purposes (printing)
- Quantification of LLINs which includes transport and warehouse requirements based on projection has been shared with PSM

**Ongoing issues:**

- Vector Works will continue to provide technical support to the LLIN campaign
- First phase of the distribution is taking place in May 2017
- Now conducting micro planning and wrapping up on Friday.
- In January/February there will be a communications consultant deployed
- Logistics TA provider needed for the new year – AMP will suggest potential TA providers to VW
- First LLINs arrive in March 2017
- 3.4 million LLINs to be distributed in Phase 1 (May – Sept 2017)
- Phase 1 will cover 6 provinces
- Phase 2 will cover 6 provinces in 2017
- Phase 3 will cover 6 provinces in 2018
- Election in September 2017 which may cause delays in the campaign.

**Benin:**

<b>Population at risk of malaria in Benin</b>				10,328,934 (2014 population)			
<b>Required LLINs :</b>				5,738,297			
<b>LLINs imported into the country three years prior to update :</b>				4,845,882 (AMP Net Mapping Project)			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date	Date of most recent update

			channel			per distribution channel	
<b>Mass distribution</b>	<i>National universal coverage replacement campaign</i>	5,738,297	6,050,272 (GF 5.245.272, USAID 280.000)	0		<i>Logistics and longer term coordination</i>	16.07.14
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>	5,738,297	6,050,272	<b>0</b>			<b>N/A</b>

**Ongoing issues:**

- Three years after the last universal access campaign, and in line with international recommendations, the Ministry of Health, with the support of financial and technical partners, is planning a new mass distribution in September 2017 to maintain universal household access to LLINs.
- For this purpose, more than 6 million LLINs will be distributed free to the entire population. In order to improve implementation, the country considered it appropriate to revise the manual and the training guide for the activities of the campaign. This revision will take into account all the changes observed in the lessons learned from the 2014 evaluation workshop.
- Procurement: 45% of nets will be in country in April and remaining will be in country mid-august
- AMP has worked with the country on the updating of the protocol of the campaign which has been finalised
- Plan of action finalised and submitted to NMCP
- Developed and finalised the log plan
- All will be submitted to MoH for validation
- 5 members of NMCP joining AMP meeting and will be able to meet with GF and AMP to move forward with TA planning for the rest of the year
- Working on finalising detailed budget of campaign and timeline.

**Burundi:**

<b>Population at risk of malaria in Burundi :</b>		6,690,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		3,716,667					
<b>LLINs imported into the country three years prior to update :</b>		4,433,813 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
<b>Mass distribution</b>	UC 1.8 ratio Feb/March 2014	5,165,200	5,158,410	6,790		Implementation , Logistics	03.04.13
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>	<b>5,165,200</b>	<b>5,158,410</b>	<b>6,790</b>			<b>N/A</b>

**Ongoing issues:**

- National campaign planned for June 2017 – 6,471,692, but it is likely that the dates will shift to July given problems with the cost quotation for the LLINs. The LLIN order was placed at the start of November, with 180 days quoted for delivery to Burundi (likely April).
- The majority of taxes are waived on import of LLINs, but a new tax has been introduced that must be covered by the Ministry of Health, which risks a delay in timely clearance through customs.
- Quantification has been done taking account of population projections and the results of the 2014 household registration, which were validated through a large survey to verify coverage. The ISTEERU population projection for 2017 was increased by 12% to account for the difference found in 2014.
- Campaign strategy modified – will be microplanning, following by household registration / distribution of vouchers and fixed site (plus advanced) LLIN distribution.
- Two PRs – PNILP and CARITAS Burundi
- The major priority of the current mission is:
  - o Finalize the macro planning documents developed in draft in May – June 2016, as well as review the microplanning documents and templates to make changes before the roll out in early 2017
- All macro planning documents expected from the consultants have been submitted (e.g. campaign plan of action, logistics plan, timeline and budget) last week and are pending feedback from the in-country team.
- Conference call held with the GF CT – significant concerns over budget and funding available
- In-country team responsible for the development of the risk assessment and mitigation planning, which will be reviewed by the AMP team when available.
- AMP team to send on microplanning documents, list of implementation documents required, etc. in advance of PNILP organizing retreats for the sub-committees and the national technical committee.
- Follow up mission planned for January 2017 (TBC)

**Central African Republic (CAR):**

<b>Population at risk of malaria in CAR :</b>				4,490,000 (World Malaria Report, 2012)			
<b>Required LLINs :</b>				2,494,445			
<b>LLINs imported into the country three years prior to update :</b>				162,870 (AMP Net Mapping Project)			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	2014 phase 2 rolling distribution according to security situation	2.2 million	2.2 million GF R8 phase 2	0		Micro planning	30.04.2014
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>2.2 million</b>	<b>2.2 million</b>	<b>0</b>			<b>N/A</b>

**Ongoing issues:**

- CAR covered 4 of its 7 health regions in 2014 – 2015, but is left with three regions to cover. In addition, Bangui (4<sup>th</sup> region covered in 2014) needs to be done again in 2017. LLINs have been procured with GF



- funding and nets are expected to arrive in late December and first quarter 2017. Storage is planned in empty containers from previous campaign still sitting at the ASECNA site at Bangui airport.
- Despite a period of calm in many parts of the country, including Bangui, the regions targeted for the 2017 first phase distribution (e.g. not Bangui) are still insecure and have significant access difficulties, as well as challenges in terms of infrastructure (e.g. roads, warehouse options, etc.) and resources (e.g. banks and other means to facilitate payments). The planning must account for these specificities, as well as the real possibility that there will be shifts in both access and security between the planning and implementation periods. Recent security issues in Kaga-Bandoro have led to population movement towards IDP camps within the sous-prefecture and in Bangui as people flee from the current spikes in unrest. This situation is typical, particularly in large urban centres (e.g. Bambari, Bria, etc.), where careful planning and regular updates on risk and mitigation measures will be needed.
  - Consultants travelled to Bangui on November 16<sup>th</sup> for a 10-day mission that includes a logistics training workshop, as well as a workshop to gather lessons learned and recommendations, a presentation of the strategy submitted in the grant documents and methods for the improvement of the strategy based on a difficult context at this time.
  - Workshop done from 22<sup>nd</sup> to 23<sup>rd</sup>. Mapping of partners done at end – identified partners for all SP, but necessity to follow up (confirm selection / inform secondary candidates of outcome)
  - Consultants conducted a logistics training workshop on November 19<sup>th</sup> and 21<sup>st</sup> focusing specifically on LLIN tracking and accountability. A comprehensive and detailed practical exercise was carried out, simulating (1) the initial reception of containers and storage of LLINs at central level, (2) shipment/transport of LLINs to sous-préfectures, (3) reception and storage at sous-préfecture warehouses, (4) shipment/transport to pre-positioning sites, (5) reception and storage at pre-positioning sites, (6) issuing LLINs to distribution teams, and return of undistributed nets to pre-positioning sites at end of day, (7) physical inventories in warehouses at all levels, and (8) reverse logistics procedures from pre-positioning sites to sous-préfecture warehouses (for undistributed nets at end of campaign).
    - o Package and certificates for participants developed
    - o Report from the workshops in review

**Chad:**

<b>Population at risk of malaria in Tchad :</b>				<i>11,410,000 (World Malaria Report, 2012)</i>			
<b>Required LLINs :</b>				<i>6,338,889</i>			
<b>LLINs imported into the country three years prior to update :</b>				<i>8,577,547 (AMP Net Mapping Project)</i>			
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
<b>Mass distribution</b>	2014 TFM to cover 9 regions out of 11	8,177,640	8 151 792	146 943			03.04.13
<b>Continuous distribution</b>	2013 routine distribution only		762,941				
<b>ANC</b>							
<b>EPI</b>							



<b>Totals</b>	<b>N/A</b>	<b>8,177,640</b>	<b>7,148,020</b>	<b>1,792,561</b>			<b>N/A</b>
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**Ongoing issues:**

- The Chad NMCP are planning a Universal Coverage LLIN distribution campaign starting in January 2017 for an estimated population of 9 428 950 living in 12 of the country's 23 regions. The national population is estimated at 14 650 165 in 2017. To cover the needs of the 12 chosen regions, it is planned to distribute 5 238 306 LLINs to 1 571 492 households in 63 of the country's 82 health districts through 890 of 1 278 health centres in Chad.
- Call this week was held with the country team and AMP TA providers
- Running into surprises after HH registration population numbers are much higher than estimated during micro planning phase
- First distribution that should have been carried out in January is now programmed for Feb 15<sup>th</sup>
- Reassessing and identifying nets to move into first 2 regions is causing delays
- HH registration for the second and third distribution phases – will set a cap for max number of nets per HH – rounding down and not rounding up
- May have to redo a number of regions
- AMP hopes to be able to support Chad in next weeks with additional TA
- UNDP has moved forward with recruitment of international TA provider

**DRC:**

<b>Population at risk of malaria in DRC :</b>		<i>67,730,000 (World Malaria Report, 2012)</i>					
<b>Required LLINs :</b>		<i>37,627,777</i>					
<b>LLINs imported into the country three years prior to update :</b>		<i>30,803,765 (AMP Net Mapping Project)</i>					
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
<b>Mass distribution</b>	Rolling region by region – 2010-2012	35 million	19,094,251	13,445,599	2.3 million\$		03.04.13
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>	<b>35,000,000</b>	<b>19,094,251</b>	<b>13,445,599</b>			<b>N/A</b>

**Update on February 1st AMP conference call:**

- DRC planning review of campaigns but delaying until AMP can provide support.
- 3 phases planned: 1. Lessons learned from last campaign; 2. Setting normative guidance for coming campaign; 3. Redefining their macro documents.
- AMP consultant is in country this week for the first workshop
- AMP is planning to have someone on ground for each workshop as requested by the country and the GF
- Finalising in March the macro plans will be tight for distribution planned in May
- Following up to figure out source of funding for TA

**Ghana:**

<b>Population at risk of malaria in Ghana :</b>	<i>25,000,000 (World Malaria Report, 2012)</i>
<b>Required LLINs :</b>	<i>13,888,888</i>
<b>LLINs imported into the country three years prior to update :</b>	<i>15,780,153 (AMP Net Mapping Project)</i>

Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	Door-to-door stand alone hang up campaigns completed in 2012	13 million		0			03.04.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>13 million</b>		<b>0</b>			<b>N/A</b>

**Ongoing issues:**

- LLIN distribution has been completed in Northern Ghana and Greater Accra
- The Upper West Region of the country has still not been covered.
- AMF is supporting a 2.7 million net distribution which is ongoing in Ghana
- First part completed
- Next 2 phases to be completed in July in Upper West and Greater Accra regions
- Working well with partner ERD
- NMCP had a tough period last year and now things are up and running again and no delays are foreseen

**Guinea**

<b>Population at risk of malaria in Guinea :</b>		12,132,795 (PMI, 2015)					
<b>Required LLINs :</b>		6,949,395 (2016)					
<b>LLINs imported into the country three years prior to update :</b>		3,502,437 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	2016	6,949,395 (2016)		0			17.02.15
Continuous distribution	Under Round10 following mass distribution	949,391	347,000				
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>7,898,786</b>	<b>347,000</b>	<b>0</b>			<b>N/A</b>

**Update on February 1st AMP conference call:**

- Last mass campaign was held in 2016
- Health facility assessment for routine distribution conducted by VW last week
- Main take aways: majority of time nets are finding a wayback into routine system, but nets are not always successfully distributed through the mass campaigns especially in an urban context

**Guinea Bissau:**

Population at risk of malaria in Equatorial Guinea :							
Required LLINs :							
LLINs imported into the country three years prior to update :							
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution							
ANC							
EPI							
Totals							

**Update on February 1st AMP conference call:**

- Terms of reference of current AMP mission –Provide technical support to PNLG Guinea Bissau (NMCP) and the Global Fund Principal Recipient (UNDP) in preparing for the 2017 universal coverage countywide LLIN distribution campaign.
- AMP consultant mission : January 22<sup>nd</sup> to February 5<sup>th</sup>, 2017 for implementation and logistics
- Context: Guinea-Bissau is planning to implement in 2017 a Universal Coverage LLIN distribution campaign for an estimated population of 1 821 040 (2.5% annual increase since Census 2019). In compliance with the three-year replacement cycle to maintain universal coverage the 2017 campaign is a follow up to the last June 2014 LLIN universal distribution campaign
- After quantification for a universal coverage campaign (population/1,8) based on giving 1 net per 2 people, a purchase of 1,112,858 LLINs was processed and the nets have arrived in country. They are in secured storage awaiting shipment from Bissau to regions, health areas and eventually Distribution Points.
- A national coordination committee for campaign planning and monitoring of the at all levels has been reinstated by official decree on December 5<sup>th</sup>, 2016.
- Bissau 2017 campaign documents suggested a distribution end of April before the rainy season, and the national cashew nut harvest which will overload the country's transport capacity.
- Past campaigns have shown a 19 % difference (2011 8%, and 2014 %) in the population projection from the 2009 census and household registration figures.
- The PR in Guinea Bissau had originally scheduled the distribution for end of April however; lead time for printing of coupons necessary for household registration has caused the distribution to be re-programmed for the last week of May.
- The call for tenders for printing 450,000 coupons is to be launched January 25<sup>th</sup> so that these will be available in the field by April 15<sup>th</sup> for household registration activities.
- Considering the lateness in staffing (UNDP) for the National consultants and support staff for the campaign (in place 3 or 4<sup>th</sup> week of Feb) a distribution the last week of May could be a challenge. A compromise is having a plan B for a June 15<sup>th</sup> distribution.
- The procured 1,112,858 LLINs are packaged in biodegradable individual bags which will be withheld at the distribution point. The waste management solution for disposal of these bags which are to be considered as used insecticide containers is has yet to be determined. Criteria for protection of water sources from leeching of insecticides need to be implemented.

- The National Coordination Commission will hold its 1<sup>st</sup> meeting on February 1<sup>st</sup> presided by the Minister of Health. Potential campaign partner organisations at the meeting will be invited to participate in organisational sub-committees. (Technical, Logistics, Communication and Finance).
- Information received in a meeting with transport contractors on January 30<sup>th</sup>, establishes that because of the cashew harvest, the last feasible dates (at reasonable prices) for transport to Health Centre areas are from April 15<sup>th</sup> to 30
- The positioning strategy will have the LLINS in Health center storage areas for 3-4 weeks between delivery (April) and distribution end of May. Increased security costs must be budgeted.
- After positioning 80 % of needs forecast at Health centres and the extra 20 % for top up at Region level in April, the top up positioning (20%) after household registration is programmed for week 3-4 of May. This will be at a greater cost, than the 1<sup>st</sup> 80%.

**Liberia:**

<b>Population at risk of malaria in Liberia :</b>				4,130,000 (World Malaria Report, 2012)			
<b>Required LLINs :</b>				2,294,444			
<b>LLINs imported into the country three years prior to update :</b>				2,896,136 (AMP Net Mapping Project)			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	Planned country wide mass distribution (last quarter of 2014)	2,195,796	1,159,089 GF 289,280 surplus from routine LLINs	169,726		Logistics and Implementation TA	09.10.13
ANC			577,700 USAID-PMI				
EPI							
<b>Totals</b>	<b>N/A</b>	<b>2,195,796</b>	<b>2,026,069</b>	<b>169,726</b>			<b>N/A</b>

**Ongoing issues:**

- Liberia has requested AMP TA support for 2018 campaign.
- Starting January, AMP will put a plan for support down over the course of 2017

**Mauritania:**

<b>Population at risk of malaria in Mauritania:</b>							
<b>Required LLINs :</b>							
<b>LLINs imported into the country three years prior to update :</b>							
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update

<b>Mass distribution</b>							
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>							

**Ongoing issues:**

- This is the first Mass Campaign for Mauritania in the endemic areas, so a big learning curve
- Mass campaign planned in May 2017
- Procurement is ongoing total quantity is 1.2 million nets
- Working on micro planning session at district and regional level
- Done training of trainers and supervisors for micro planning
- 4 people from NMCP and 4 from PR (SENLS) are joining the AMP meeting in February

**Mozambique:**

<b>Population at risk of malaria in Mozambique:</b>				<i>25,800,000 (World Malaria Report, 2014)</i>			
<b>Required LLINs :</b>				<i>14,333,333</i>			
<b>LLINs imported into the country three years prior to update :</b>				<i>11,784,524 (AMP Net Mapping Project)</i>			
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
<b>Mass distribution</b>	Universal 2016-2017	16,207,964	Campaign: 2,800,000 + 200k buffer for Nampula in 2016 ; remainder for distribution in 2017.	0	0 (but TBC with approval of GAC)	Next TA mission TBC but likely for micro-planning (end April)	15.03.2016
<b>ANC</b>			Needs covered by PMI (quantity TBC)				
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>						<b>N/A</b>

**Ongoing issues:**

- Distribution in Nampula completed end of November, with over 3M LLINs distributed
- Roll out plan developed has three provinces (Cabo del Gado, Niassa, Zambezia) beginning implementation Q4 2016 / Q1 2017 under the responsibility of the MOH / NMCP and the SRs
- Training to cover lessons learned from Nampula campaign and updating guidance especially on coordination which was weak in Nampula campaign

- Plan for next TA missions in early 2017 for the training and microplanning periods, and further TA needed to develop logistics plans and transport plans

**Nigeria:**

<b>Population at risk of malaria in Nigeria :</b>				162,000,000 (World Malaria Report 2012)			
<b>Required LLINs :</b>				90,000,000			
<b>LLINs imported into the country three years prior to update :</b>				37,915,945 (AMP Net Mapping Project)			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	UC - 2 LLIN/HH rolling state by state countrywide )started in May 2009 – completed in May 2013)	64,064,949	57,773,191 distributed from 2009 to 2013 (90.2% of the total National target.)	4,442,853	Operational costs for 27 million LLINs		04.09.13
ANC			33 million nets available for routine distribution in 2013				
EPI							
<b>Totals</b>	<b>N/A</b>	<b>72 million</b>	<b>51,703,880</b>	<b>4,442,853</b>			<b>N/A</b>

**Update on February 1st AMP conference call:**

- Meeting between CRS and NMEP and GF country team, EPI and partners taking place this week
- Delays in implementation: GF and PR have agreed on roles and responsibilities for each party
- AMP will support to finalise micro panning tools and training manuals
- Also discussed pilot testing on data collection system that CRS want to implement in the campaign.
- State engagement meeting planned week of 18<sup>th</sup> February
- Campaign implementation training to take place after this
- Then will concentrate on micro planning in second week of March in 3 states.
- Nets are arriving last week of March. Production is completed and shipment should start soon.
- Campaign in supposed to start in July in first 3 states, and further 2 states in September.
- Adamawa state in September funded by PMI – potential IFRC implementation. Will be agreed on 3<sup>rd</sup> week of March

**Ongoing issues:**

- PMI campaign is ongoing in one state 4.5 mil nets procured. During household registration, more net cards were distributed than there are nets so there is a gap
- NMEP pushing forward with activities in November: release of MIS results soon and then following that will be the state managers meeting
- Holding back Northern states to talk through the strategy of LLIN distribution in these areas.

- State engagement meeting for the first 5 states planned under the replacement campaign meetings – meeting before end of the month of relevant stakeholders and partners on the planned replacement LLINs campaigns

**Senegal:**

<b>Population at risk of malaria in Senegal :</b> <i>(World Malaria Report, 2012)</i>							
<b>Required LLINs :</b>							
<b>LLINs imported into the country three years prior to update :</b> <i>(AMP Net Mapping Project)</i>							
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution							
ANC							
EPI							
<b>Totals</b>							

**Ongoing issues:**

- Local consultant in country - Moussa NDour: 1st February-30<sup>th</sup> September 2016
- Distribution in phase 2 is underway
- About half the districts in each region are complete as of Monday
- For phase 3 the coordination committee met on Friday and spoke of recommendations from last AMP mission. They are going ahead with training activities for phase 3 in regions
- Timeline for phase 3 should be revised to avoid delays in activities and overlapping of certain activities and to apply lessons learned from phase 1 and 2 around HH registration.

**Sierra Leone:**

<b>Population at risk of malaria in Sierra Leone :</b> <i>6,000,000 (World Malaria Report, 2012)</i>							
<b>Required LLINs :</b> <i>3,333,334</i>							
<b>LLINs imported into the country three years prior to update :</b> <i>4,195,850 (AMP Net Mapping Project)</i>							
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	UC – June 2017	4.18 million				Logistics	18.08.16
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>4.18 million</b>					<b>N/A</b>

**Update on February 1st AMP conference call:**



- Current TA mission in country for implementation and logistics support: January 10 - 31, 2017
- Sierra Leone will be conducting integrated 2017 campaign tied to the biannual mother-child health weeks. The interventions, vitamin A and albendazole targeting children under five years of age, will be integrated with the universal coverage LLIN distribution. The strategy for LLINs is 1 net for 2 people, with a maximum of 3 nets per household.
- AMP technical support continued with NMCP during this past week, specifically in supporting the national level training of trainers/national campaign supervisors on microplanning plan for the campaign (including social mobilization and logistic microplanning) and fine-tuning the microplan tools and assisting in determining a clear understanding of the microplanning process for Western Area Urban
- Campaign dates for the MCHW in Sierra Leone have yet to be confirmed by MoHS. Presently two dates have been suggested for the Sierra Leone MCHW being late May or first week of June, 2017.
- Final draft of the PoA was shared with NMCP and partners for their final review and finalization. PoA is now aligned with the campaign budget, logistic plan and communication plan. NMCP will need to review and adjust the final few areas both in the budget and PoA that need clarification prior to accepting as a final document.
- AMP continues to provide technical assistance to the NMCP ToT workshop. Fifty-six national supervisors plus national facilitators and malaria partners (from UNICEF, WHO, CRS) attended a 4 days participatory training from January 23 – 26. The participants undertook hands on practise in drawing community maps, data entry into the microplanning template, completion of logistics tools and social mobilization microplanning tools. In order to test the understanding of national supervisors of the integrated campaign in general and specifically microplanning process, a post test was designed and undertaken by all the supervisors with an average score of 64 (range 54 – 94 percent). This allowed the facilitators to emphasize some of the points that appeared unclear to some supervisors. One day (January 27) further discussions were held with the Western Area Urban DHMT, NMCP, malaria partners and AMP consultants to determine a clear schedule of activities developed to fast track implementation of quality microplanning in these densely populated urban communities. Field trips to all the districts are scheduled to commence on 31 January 2017 pending funding.
- The SocMob timeline was reviewed and shared with NMCP, HED and partners for finalization as well. In addition, the hang-up write and budget were finalized for review by NMCP and HED. The communication activities need to move forward rapidly in terms of development of key messages and materials to allow for timely production for the campaign. Social mobilization and community engagement micro data gathering tools were further modified and presented at the NMCP micro planning workshop.
- Logistics micro data gathering information were presented at the NMCP microplanning workshop ran during January 23-26, 2017. This campaign workshop utilized presentations and detail group work with mapping exercises and simulated data gathering activities. During this training of trainers, all participants were crossed trained in all areas of the data collection process, thus ensuring a complete picture of facts get gathered from each district.
- NMCP standalone logistics training is tentatively schedule for the third week of last week in February 2017. It will take place in the district town of Bo for a 2-day period. Four district personnel from the 14 districts will attend this training to include the district logistics officer (DLO), malaria focal person (MFP), district pharmacist, and the district store person. This training must be completed prior to delivery of LLIN from central level. Presently the first 22 containers are schedule to arrive in selected districts around the first week of March 2017.
- NMCP must convene the logistics sub-committee (LSC) to detail LLIN strategic plan for LLIN movement within urban/rural Freetown with UNICEF and the IDA contracted agent in-country. NMCP has asked IDA for their selected in-country freight forwarder and are awaiting confirmation as to company name and location. Once provided, NMCP logistics and the LSC will need to commence detailed planning of the macro delivery system for the district LLINs.

**Tanzania:**

<b>Population at risk of malaria in Sierra Leone :</b>					<i>(World Malaria Report, 2012)</i>		
<b>Required LLINs :</b>							
<b>LLINs imported into the country three years prior to update :</b> )							
<b>Distribution</b>	<b>Scale of</b>	<b># LLINs</b>	<b># LLINs</b>	<b>LLIN gap</b>	<b>Budget gap</b>	<b>Technical</b>	<b>Date of</b>

channel	distribution	needed per distribution channel	available per distribution channel	per distribution channel	per distribution channel	assistance requested with date per distribution channel	most recent update
Mass distribution						CMA	26.01.17
ANC							
EPI							
Totals							

**Update on February 1st AMP conference call:**

- During the course of 2016, Vectorworks has implemented, in collaboration with Tanzania's NMCP, a school-based LLIN distribution program in 7 of the 26 regions of the country. The SNP4 program covered 5,231 schools with a total of 1,153,955 LLINs distributed.
- Vectorworks is now planning to conduct a commodity management assessment (CMA) of the SNP4 supply chain in order to document the level of accountability and transparency achieved in the management of the LLINs from point of entry to distribution to beneficiaries, specifically to:
  - o Verify that adequate tools and procedures were used for proper tracking of LLINs and control of the supply chain (receiving, warehousing, transport and distribution of the nets).
  - o Verify the existence of clear and complete "audit trails" for the nets: a series of documents (waybills, stock sheets, inventory control cards, tally sheets) recording each step in the transport, storage and distribution of the nets.
  - o Verify the proper filing and quality of supply chain tracking tools. Document the extent to which reports are complete and reliable (supported by corresponding waybills, stock sheets, inventory control cards and tally sheets).
- AMP was requested to provide TA for the development of a CMA package and training of a local firm to conduct the CMA field work and produce a report outlining detailed findings, including recommendations for improvement of the logistics systems if/where needed.
- Continued meetings last week with entities involved in the SNP4 supply chain to finalize the gathering of all information and data required for the development of the CMA tools, SoPs and CMA report format.
- Meeting last Friday with the representatives of the firm contracted to carry out the CMA in order to review all the data and information obtained thus far and to introduce the basic principles on which the CMA data collection tools will be developed
- Development of the CMA data collection tools and drafting of the CMA SoPs over the course of last weekend. Development of the tools posed some particular challenges as the SNP4 supply chain structure and management tools differ in many aspects from normal/standard setup and procedures.
- Beginning of the training (of the contracted firm) on Monday and Tuesday (today).

**Togo:**

<b>Population at risk of malaria in Togo :</b>		<i>6,150,000 (World Malaria Report, 2012)</i>					
<b>Required LLINs :</b>		<i>3,416,667</i>					
<b>LLINs imported into the country three years prior to update :</b>		<i>3,009,135 (AMP Net Mapping Project)</i>					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update

<b>Mass distribution</b>	Q4 2014 replacement campaign	3.9 million (national)	3.970.624 GFATM	None anticipated		Implementation and logistics	30.04.14
<b>Continuous distribution</b>	All routine services interrupted since 2011		Possible surplus from 2014 mass campaign if Lomé is not covered		Funds for continuous distribution available in R9 grant but no disbursement to date		
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>	<b>3.9 million</b>	<b>3.970.624</b>	<b>0</b>			<b>N/A</b>

**Update on February 1st AMP conference call:**

- Togo getting ready with logistics management and training of trainers.
- AMP is supporting this exercise. Doing training at regional level as well in prep for arrival of nets in country in April.
- No problems with the distribution scheduled for mid June
- Half of the nets sourced through AMF
- Looking for longer term TA through AMP in the lead up to the campaign

**Ongoing:**

- Togo's last mass distribution campaign was in 2014. To sustain the gains achieved in the past, the Ministry of Health is planning a mass LLIN replacement campaign to distribute LLINs nationwide to beneficiaries in June 2017. The strategy is to provide one LLIN for every two people, rounding up in the case of an uneven number of household members.
- The Togo population is estimated at 7 531 928 derived on a projection from the 2010 census adjusted by a 2,84% annual increase. The GF has accepted adding a 14% buffer in the LLIN needs quantification exercise based on the 2014 household registration experience. Thus the result of dividing the population by 1,8 to provide 1 net for every 2 people (rounded up) and adding 14 % establishes that **4 770 250** LLINs need to be procured for the 2017 campaign.
- The Togo government and the GF have agreed to co-finance the campaign with the GF and Togo government each providing 50% of the nets. Operational costs necessary to take the LLINs from the Port of Lomé and distribute them to the targeted population are also to be shared, Togo providing 40 % of operational costs and the GF grant the remaining 60%.
- The Against Malaria Foundation (AMF) has financed the Togo government's contribution of 2 413 250 LLINs and the GF will procure 2 357 000 LLINs. Both purchases comply with Togo's request to have campaign nets delivered in bulk packaging (without individual plastic bags).
- The National Campaign Coordination Committee was created by official decree in September 2016 and campaign subcommittees have been appointed to review plans and budgets
- Aside from contributing to the review and finalising of the 4 campaign core documents in order to have activities start by January 1<sup>st</sup>, 2017
- clarification of policy and procedures related to disbursement for activities so that funding will be available when needed(January)
- development and review of a streamlined competitive bid process to identify transport providers (government normally take 6 months) to have contracts signed so that transport to districts can start by April 2017.
- Sub-committee plans and budgets will be reviewed to include in Campaign Plan of Action, activities timeline Logistics Plan of Action, and macro-budget.
- Due to lengthy government procedures, it is proposed that the transport call for tenders will be managed through a contractual agreement with UNDP TOGO.
- Launch date should be in time for opening of bids and selection of transporters in January 2017
- Meeting with GF, Ministry of Health PR, and NMCP programmed for November 23<sup>rd</sup> to review LLIN campaign preparedness

- Campaign preparation activities to start January 1<sup>st</sup> to prepare for start-up of micro-planning end of February, 2017, four months before planned distribution.

**Uganda:**

<b>Population at risk of malaria in Uganda :</b>				<i>34,550,000 (World Malaria Report, 2012)</i>			
<b>Required LLINs :</b>				<i>19,194,444</i>			
<b>LLINs imported into the country three years prior to update :</b>				<i>12,480,685 (AMP Net Mapping Project)</i>			
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
<b>Mass distribution</b>	Two phases: P1 completed – May 2010-January 2011 (7,293,689 LLINs distributed) ; P2 distribution planned to start in 2013	19.64 million	11,653,054 (11,003,054 from GFATM Rd7 Phase II and 650,000 from USAID/PMI )	4 million		Implementation	03.04.13
<b>ANC</b>	PMI supported ANC distribution ongoing in approx. 40% of the country						
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>	<b>19.64 million</b>	<b>11,653,054</b>	<b>4 million</b>			<b>N/A</b>

**Ongoing:**

- Timing for distribution has been moved forward
- On AMF nets, 10.6 million, there are half going out to East region and half to West region.
- January distribution coming up soon.
- Half AMF nets are PBO nets and research study still to be conducted.
- High level of political discussion makes things complex to move forward.
- Concerns about plans and timelines.
- HH registration starting November 6<sup>th</sup> but too tight as no materials are printed yet
- Evaluation plans: Liverpool School is the lead on the study. Working with them are LSHTM and main implementer is McCarey University in Kampala. Talked about possibility of scaling up current research

which is based on test positivity rates. But after discussion, it was felt that prevalence would be a more accurate way forward. Similar to current study in Tanzania but at larger scale. Timeline for baseline was January but timelines have changed.

- AMF contact for interested parties: [psherratt@againstmalaria.com](mailto:psherratt@againstmalaria.com) (Peter Sheratt)
- The national mass campaign includes 10.7 million nets from AMF
- Over 5 million of those will be PBO nets
- AMF nets will go out in January next year
- Idea is to have PBO nets go out in later phases to give more time for approvals to be put in place and monitoring of effectiveness to be set up

## WEST AFRICA REGIONAL NETWORK

WARN countries where update provided listed below. NB: This does not include all WARN countries.

WARN country updates provided on February 1<sup>st</sup> AMP call: None

### Burkina Faso:

<b>Population at risk of malaria in Burkina Faso</b>		10,328,934 (2014 population)					
<b>Required LLINs :</b>		5,738,297					
<b>LLINs imported into the country three years prior to update :</b>		4,845,882 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution							
ANC							
EPI							
<b>Totals</b>							

### Ongoing issues:

- Distribution report received
- There were big gaps in planning in terms of quality. AMP will feedback to Global Fund to discuss with country how plans can be modified in next funding opportunity. Include lessons learned to help increase quality.

### Gambia:

<b>Population at risk of malaria in Gambia:</b>		1,780,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		988,889					
<b>LLINs imported into the country three years prior to update :</b>		1,181,386 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass	2014		746,000				30.04.14

<b>distribution</b>	replacement campaign						
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>		<b>746,000</b>				<b>N/A</b>

**Ongoing issues:**

- None

**Mali:**

<b>Population at risk of malaria in Mali :</b>		<i>15,880,000 (World Malaria Report, 2012)</i>					
<b>Required LLINs :</b>		<i>8,822,222</i>					
<b>LLINs imported into the country three years prior to update :</b>		<i>5,888,050 (AMP Net Mapping Project)</i>					
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
<b>Mass distribution</b>	Roll out by region – UC 1 LLIN/2 people 2012	8.67 million	4.5 million	4,473,801	7,981,194\$		03.04.13
<b>Continuous distribution</b>				695,126			
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>	<b>N/A</b>	<b>8.67 million</b>	<b>4.5 million</b>	<b>5,168,927</b>	<b>7,981,194</b>		<b>N/A</b>

**Ongoing issues:**

- New Global Fund grant has been signed

**Niger:**

<b>Population at risk of malaria in Niger :</b>		<i>16,080,000 (World Malaria Report, 2012)</i>					
<b>Required LLINs :</b>		<i>8,933,334</i>					
<b>LLINs imported into the country three years prior to update :</b>		<i>1,266,562 (AMP Net Mapping Project)</i>					
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
<b>Mass distribution</b>	June 2014 – Dosso		1.6 million			Support to NFM proposal	23.07.14

	April 2015: Southern regions		6.4 million				
<b>ANC</b>							
<b>EPI</b>	Routine distribution through EPI clinics						
<b>Totals</b>	<b>N/A</b>		<b>TBC</b>				<b>N/A</b>

**Ongoing issues:**

- For the 2018 mass campaign, the country is currently negotiating with the Global Fund to include it in the NFM.

**CENTRAL AFRICA REGIONAL NETWORK (CARN)**

CARN countries where update provided listed below. NB: This does not include all CARN countries.

**CARN country updates provided on February 1st AMP call: None**

**Cameroun:**

<b>Population at risk of malaria in Cameroun :</b>				22,250,000 (World Malaria Report, 2014)			
<b>Required LLINs :</b>				12,361,111			
<b>LLINs imported into the country three years prior to update :</b>				1,537,744 (AMP Net Mapping Project)			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
<b>Mass distribution</b>	UC March 2015	12,322,059	12,322,059 (GF)	0		Implementation and Logistics	24.03.2015
<b>ANC</b>							
<b>EPI</b>							
<b>Totals</b>		<b>12,322,059</b>	<b>12,322,059</b>	<b>0</b>			

**Ongoing issues:**

- Focus on pulling out lessons learnt from last campaign during upcoming AMP mission
- Not sure yet on design of strategy for next campaign
- Timelines are tight as nets arrive early January so logistics training needs to happen soon.
- With support from the Global Fund, IFRC as PR has supported distribution of more than 1 million nets in RS 1,2 and 3.
- RS 4, 5 and 6 are still to be covered. Small populations hard to reach
- Last 22'000 nets going out to region sanitaire 4 on border with Sudan/Chad
- Finalising the extension of the malaria grant for completion of mass distribution in most difficult to reach areas of the country - 2 mil bed nets for mass distribution and expansion of routine services
- Country is finalising a malaria indicator survey and data is being cleaned. Results in a month and country will provide presentation of results
- Next mass distribution will start first quarter of 2017



**Equatorial Guinea:**

<b>Population at risk of malaria in Equatorial Guinea :</b>		720,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		400,000					
<b>LLINs imported into the country three years prior to update :</b>		52,000 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	2011 campaign never rolled out	433,000	449,226	0			03.04.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>433,000</b>	<b>449,226</b>	<b>0</b>			<b>N/A</b>

**Ongoing issues:**

- Bioko Island top up distribution of 10,000 LLINs completed early August in high incidence communities
- Larger school based distribution is on hold and won't be underway until January 2017
- Donation of 54,000 nets to be distributed on mainland is currently waiting in port

**EAST AFRICA REGIONAL NETWORK (EARN)**

EARN countries where update provided listed below. NB: This does not include all EARN countries.

**EARN country updates provided on February 1st AMP call: None**

**Kenya:**

<b>Population at risk of malaria in Benin</b>		9,662,685 (2013 population census)					
<b>Required LLINs :</b>		5,368,158					
<b>LLINs imported into the country three years prior to update :</b>		4,845,882 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	National universal coverage replacement campaign in 23 counties		12.6 million	0		Logistics and longer term coordination	30.06.14
ANC							
EPI							

Totals	N/A		12.6 million	0			N/A
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**Ongoing issues:**

- Massive gaps still exist for 2017

**South Sudan:**

<b>Population at risk of malaria in South Sudan:</b>							
<b>Required LLINs :</b>							
<b>LLINs imported into the country three years prior to update :</b>							
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution							
ANC							
EPI							
Totals							

**Ongoing issues:**

- Completed distribution in 2 states
- Other state to be completed by end of September
- 120,000 nets looted in July, and think there may be another 500,000 at risk.
- The rest of the stocks are in a secured compound in Juba
- PSI has found 11 local partners to work with
- Malaria is the top cause of morbidity in IDPs and non-conflict affected areas (see attached WHO surveillance bulletin).
- Malaria cases in Bentiu PoC and Malakal PoC exceeded expected levels in the week. Response:
  - o Bentiu POC – PSI has completed the distribution of LLINs in the POC site. Last week also sent RDTs and ACTs to UNICEF who are on the ground to help with any response. With this, we expect the Malaria situation to be contained.
  - o Malakal POC – Due to challenges of insecurity, we were not able to deliver the LLINs by road. We are engaging constantly with the Logistics Cluster for support in Airlifting the LLINs.
- An “expedited” distribution process has been developed based on food distributions. This means that we register and issue nets immediately.

**Sudan:**

<b>Population at risk of malaria in Sudan :</b>				37,970,000 (World Malaria Report, 2014)			
<b>Required LLINs :</b>				21,094,444			
<b>LLINs imported into the country three years prior to update :</b>				9,040,385 (AMP Net Mapping Project)			
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date	Date of most recent update

			n channel			per distributio n channel	
<b>Mass distribution</b>			4,262,414 (for 12 states)			M&E	11.03.2015
<b>ANC</b>			122,000				
<b>EPI</b>							
<b>Totals</b>							

**Ongoing issues:**

- LLIN tracking system report based on experience in Sudan has been finalised. Will be distributed at AMP meeting in print and shared through the AMP website

**SOUTHERN AFRICA REGIONAL NETWORK (SARN)**

SARN countries where update provided listed below. NB: This does not included all SARN countries.

**SARN country updates provided on February 1st AMP call: None**

**Madagascar:**

Population at risk of malaria in Madagascar : 19.176.420							
Required LLINs : 12 632 024 (10,653,567 campagne ; 1 678 457 routine et 300 000 SM)							
LLINs imported into the country three years prior to update : 11,236,039							
Distributio n channel	Scale of distributio n	# LLINs needed per distributio n channel	# LLINs available per distributio n channel	LLIN gap per distributio n channel	Budget gap per distributio n channel	Technical assistance requested with date per distributio n channel	Date of most recent update
<b>Mass distribution</b>	92 districts	10,653,567	10,653,567			No	18.09.2015
<b>ANC</b>	92 districts	1,678,457	354,727	1,323,730	4,633,055		
<b>EPI</b>	92 districts						
<b>Social Marketing</b>	92 districts	300,000		300,000	990,000		
<b>Totals</b>		<b>12,632,024</b>	<b>11,008,294</b>	<b>1,323,730</b>	<b>5,623,055</b>		

**Ongoing issues:**

- 2018 campaigns are not yet funded
- GF current grant does not integrate 2018 campaign and most current GF grants are ending end 2017.
- More TA will be needed to conclude the current grant's campaign.
- Would be useful if the Global Fund could join a call to update us on how many countries are ending grants in 2017 and how concept notes will be done for 2018. Get an update on NFM 2.
- AMP to ask Susie Nassr to join an upcoming call with an update on the above
- WHO GMP has sent 10,000 USD to NMCP to start developing and printing HH malaria protection cards lolling example of EPI and test them in 2 districts for replenishment purposes where people can use this card to renew LLIN ownership after the campaign last year.
- Ideas and collaboration within AMP are most welcome

- There is no funded evaluation of this project yet. The protocol is attached to the minutes of this week's call for more information.
- Contacts: Stefan Hoyer/WHO [hoyers@who.int](mailto:hoyers@who.int) and Charlotte Eddis/PSI [ceddis@psi.org](mailto:ceddis@psi.org)

**Malawi:**

<b>Population at risk of malaria in Malawi :</b>		15,400,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		8,555,556					
<b>LLINs imported into the country three years prior to update :</b>		9,040,385 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	Need to fill remaining gap from 2012 mass distribution	800,000					10.04.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>	<b>800,000</b>					<b>N/A</b>

**Ongoing issues:**

**Swaziland:**

<b>Population at risk of malaria in Swaziland :</b>		337,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		187,223					
<b>LLINs imported into the country three years prior to update :</b>		91,725 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution						BCC	03.04.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>						<b>N/A</b>

**Ongoing issues:**

- Need to follow up with the country after communication mission last year to see how far they have come with recommendations and plan next phase of support
- Swaziland is currently working towards elimination

- NMCP and AMP TA provider have reviewed previous communication strategic plans aimed at the community at large.
- NMCP and AMP TA provider are reviewing the acceptance of interventions
- Will work on outreach via health workers in rural health areas. Will focus on population travelling through Swaziland mainly from Mozambique
- Are looking at a plan to have malaria prevention meeting with both traders that travel to boarder countries and Mozambique population in Swaziland
- Working to enhance communication activities in high burden areas via the creation of malaria elimination committee meetings
- Looking at targeting the transport industry with IEC materials for lorry drivers.
- Messaging to travellers to take precautions when they travel to Mozambique
- Will pass messages on malaria prevention in schools, churches, mosques.
- The programme is working on the concept note for the NFM to be submitted by June 15th - the concept note is now close to final, but they are still revising the health promotion section.
- They have just finished data collection in the field for the KAP survey which they are conducting
- Just from being in the field even though analysis has not been done yet, the team have clearly observed that nets are not being used. There is low risk perception because of the low malaria disease burden in the country
- In their NSP, nets have not been included and the Global Fund (whose team is currently in-country) agree that they should not be
- However, there are nets that were procured last year which had not yet been distributed. The plan with those was to replace/replenish the old nets. Now Global Fund has given the Programme the go-ahead to distribute them
- The exercise may commence beginning of the malaria season round September or so
- These will probably be the last batch of nets
- The strategy will then be to focus on IRS, environmental management etc.
- The plan is still to promote usage as there are nets currently awaiting distribution.

## ASIA PACIFIC

Asia Pacific country updates provided on February 1st AMP call: None

### Haiti:

Population at risk of malaria in Haiti :							
Required LLINs :							
LLINs imported into the country three years prior to update :							
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	2017						10.10.16
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>		<b>365,000</b>				<b>N/A</b>

### Ongoing issues:

- PSI has made a request for TA for 2017 Haiti campaign

- AMP has reached its maximum capacity from now until the end of the year and it is possible that no TA providers may be available to support this request unfortunately.

**Indonesia:**

<b>Population at risk of malaria in Indonesia :</b>		51,900,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		28,833,333					
<b>LLINs imported into the country three years prior to update :</b>		8,192,770 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution	2014						25.09.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>		<b>365,000</b>				<b>N/A</b>

**Pakistan:**

<b>Population at risk of malaria in Pakistan:</b>		147,773,000 (World Malaria Report, 2013)					
<b>Required LLINs :</b>		26,599,140					
<b>LLINs imported into the country three years prior to update :</b>		3,338,948 (AMP Net Mapping Project)					
Distribution channel	Scale of distribution	# LLINs needed per distribution channel	# LLINs available per distribution channel	LLIN gap per distribution channel	Budget gap per distribution channel	Technical assistance requested with date per distribution channel	Date of most recent update
Mass distribution							
ANC							
EPI							
<b>Totals</b>							

**Ongoing issues:**

- AMP is working on protocol for CMA in Pakistan
- AMP TA provider has made initial draft for the protocol
- AMP had a call with Pakistan Global Fund country team to discuss what needs to be done on CMA exercise.
- Bringing on a consultant specific to CMA to focus on countries considering this type of support.
- Currently conducting LLIN distribution in some areas from March to June
- More than 3.08 million nets will be distributed in 2016 – finalising the plan now.

**Papua New Guinea:**

<b>Population at risk of malaria in Papua New Guinea :</b>		7,011,000 (World Malaria Report, 2012)					
<b>Required LLINs :</b>		3,895,000					
<b>LLINs imported into the country three years prior to update :</b>		3,464,400 (AMP Net Mapping Project)					
<b>Distribution channel</b>	<b>Scale of distribution</b>	<b># LLINs needed per distribution channel</b>	<b># LLINs available per distribution channel</b>	<b>LLIN gap per distribution channel</b>	<b>Budget gap per distribution channel</b>	<b>Technical assistance requested with date per distribution channel</b>	<b>Date of most recent update</b>
Mass distribution							03.04.13
ANC							
EPI							
<b>Totals</b>	<b>N/A</b>		<b>365,000</b>				<b>N/A</b>

**Ongoing issues:**

- 1.2 million nets from AMF for 2017
- 1.6 million nets from AMF for 2018
- Looking to shift to school based distributions. Would like help assessing this.