

Mission Report – Republic of Uganda
AMP Technical Assistance

Mission Dates: 16th April to 8th May 2016 (inclusive of travel time)
Locations: Kampala, Uganda
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Subject of Report: Uganda UC LLIN Campaign – 2016/2017

Proviso

In preparation of all documents, every effort has been made to represent the most current, correct, and clearly expressed information possible. Nevertheless, inadvertent errors in information may occur. The information and data included have been gathered from a variety of sources and through collaborative meetings, but are subject to change as Uganda program decisions are made at various levels. This report represents a summary of the collaborative processes / discussions engaged in between 16th April to 8th May 2016.

Reference documents reviewed / utilized (partial list):

1. Uganda Implementation Guidelines, dated July 2013 and draft from October 2015
2. Draft Logistics Plan of Action, October 2015
3. Draft timeline, October 2015
4. National Communication Strategy for Malaria Control in Uganda, dated September 2015
5. Report on the Mass Distribution of LLINs to Achieve UC in Uganda, dated October 2014
6. GFATM Round 7 Phase 1 LLIN Report, dated August 2011
7. UC of LLINs in Uganda – Insights into the Campaign Implementation, dated October 2014
8. Mass Distribution of LLINs for UC in Uganda – Evaluation Report, dated December 2014
9. Uganda MIS Survey 2014-2015
10. PMI ITN Access and Use Report - 2016
11. Decision-making on intra-household allocation of bed nets in Uganda, 2014
12. Impact of a behaviour change communication programme on net durability in eastern Uganda, 2015
13. Qualitative Assessment of Campaign Reach and Effectiveness of Approaches in Increasing Demand for Long Lasting Insecticide Treated Nets (LLINs). Malaria Control Culture Project – Tororo, December, 2014
14. Timing of malaria messages for target audience on radio airwaves, 2012

Contacts during mission period

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Background

Uganda has the third highest number of annual deaths from malaria in Africa, as well as some of the highest reported malaria transmission rates in the world, with approximately 16 million cases reported in 2013 and over 10,500 deaths annually (UMRSP, 2014 – 2020). In addition, malaria has an indirect impact on the economy and development in general. The socioeconomic impact of malaria includes out-of-pocket expenditure for consultation fees, drugs, transport and subsistence at a distant health facility. These costs are estimated to be between USD 0.41 and USD 3.88 per person per month (equivalent to USD 1.88 and USD 26 per household). Household expenditure for malaria treatment is a high burden to the Ugandan population, consuming a larger proportion of the incomes in the poorest households.

Malaria has a significant negative impact on the economy of Uganda due to loss of workdays because of sickness, decreased productivity, and decreased school attendance. A single episode of malaria costs a family on average 9 US dollars, or 3% of their annual income. Workers suffering from malaria may be unable to work for an estimated 5-20 days per episode. Given that many people are infected multiple times a year, this has substantial financial consequences to families, as well as the economy of the country as a whole. A poor family in a malaria endemic area may spend up to 25% of the household income on malaria prevention and treatment.

In response to this heavy burden of disease due to malaria, the Government of Uganda's (GoU) National Malaria Control Program (NMCP) has adopted a multi-faceted approach to malaria control and prevention that is embodied in the Uganda Malaria Reduction Strategic Plan (UMRSP). The purpose of the UMRSP 2014 – 2020 is to provide a common framework for all stakeholders to accelerate nationwide scale up of evidence-led malaria reduction interventions by the government, its development partners, the private sector and all stakeholders. It stipulates the priority interventions, the strategic re-orientations and the investments required for achieving the goals and targets.

The national long-lasting insecticidal net (LLIN) universal coverage distribution planned for 2016 – 2017 directly responds to the UMRSP strategic objective of achieving and sustaining protection of at least 85% of the population at risk through recommended malaria prevention measures by 2017. In addition, the opportunity for Uganda to both respond to its own insecticide resistance problems and to contribute to the global body of knowledge on the effectiveness of new mosquito nets, is an enormous opportunity for advancing malaria prevention.

The implementation guidelines that have been developed provide the framework and guidance for all partners involved in the LLIN campaign to ensure that all actors are working according to the principle of the three 1's: one strategic plan, one coordination structure and one monitoring and evaluation plan. It is to be noted that the guidelines and associated communication and logistics plans will need to be updated as more information becomes available about the framework for evaluation of the PBO nets.

Mission terms of reference

Operations support:

1. Assist the National Malaria Control Program (NMCP) in updating the Implementation Guidelines (IG) based on the results of the last campaign;
2. Together with Communication Consultant, assist the advocacy, communication and social mobilization sub-committee in developing a plan of action and timeline, including key messages and channels for dissemination and a plan for managing any rumors/negative communication, and ensuring that messages for repurposing/recycling old/non-viable nets in households are included;
3. Together with Communication Consultant, assist the operations and advocacy, communication and social mobilization sub-committees in developing job aids for

social mobilization, household registration and LLIN distribution to be used by Village Health Teams (VHTs);

4. Assist the operations and monitoring and evaluation (M&E) Committees in developing training manuals in the overall implementation of the campaign to be used by central, regional, district and sub-county teams, as well as manuals for VHTs in household registration and LLIN distribution;
5. Assist the operations and M&E sub-committee in developing an agenda and materials for the training of the district biostatistician and data management teams;
6. Assist the operations and M&E sub-committee in finalizing the data collection and data summary forms for household registration and LLIN distribution; and
7. Assist the operations and M&E sub-committee and the Ministry of Health Resource Center in refining the Data Quality Assurance (DQA) protocol and tools.

Advocacy, communication and social mobilization support:

1. Develop a plan of action and timeline, including key messages and channels for dissemination and a plan for managing any rumours/negative communication, and ensuring that messages for repurposing/recycling old/non-viable nets in households are included.
2. Assist the advocacy, communication and social mobilization sub-committee in developing a scope of work and selecting a communication firm to produce a campaign branding package, including slogan, logo, song, messages, etc.
3. Support the advocacy, communication and social mobilization sub-committee with the development, pretesting and production of radio and television spots.
4. Assist the advocacy, communication and social mobilization sub-committee in developing advocacy and engagement packages for specific audiences identified in the Implementation Guidelines, to include key messages, answers to frequently asked questions, and details about the campaign.
5. Assist the advocacy, communication and social mobilization sub-committee in developing a post-campaign BCC plan to ensure the engagement of districts and sub-counties to support continuous promotion of LLIN use, care and repair.
6. Together with the Technical Consultant, assist the operations and advocacy, communication and social mobilization sub-committees in developing job aids for social mobilization, household registration and LLIN distribution to be used by Village Health Teams (VHTs).

Logistics TORs to be inserted

General overview of planned distribution

The 2016-17 campaign aims to achieve the following objectives:

- 90% of all households with enough LLINs to reach 1 net for every 2 people
- 85% utilization of LLINs distributed

The campaign will focus on behaviour change communication to ensure that already high knowledge of malaria is translated into high LLIN hanging and utilization rates, as well as net care and repair actions.

Uganda undertook a UCC in 2013/14 after which the exercise was evaluated and key lesson learnt were earmarked for performance improvement of the planned 2016-17 campaign. Planning documents were developed in late 2015, and at the time of the last AMP TA mission, Uganda was facing a large gap in both nets and operational costs. Since the last TA mission, the gaps in nets and operational costs appear to have been addressed, with a final confirmation on operational costs still to come once the budget is available.

The NMCP is planning to distribute LLINs to all 112 districts in Uganda, in an effort to bring down malaria-related morbidity and mortality. There is no gap in LLINs for the campaign at this time as 24 million nets have been committed to campaign. Nets will be provided through a variety of sources:

- 12.3 million LLINs through the GF's Pooled Procurement Mechanism (PPM) process
- 10.7 million LLINs that AMF will purchase and a yet unknown shipping and inward processing mechanism;
 - 5.1 million PBO nets
 - 5.2 million non-PBO nets have operational funding from DFID
- 1 million PMI procurement process

Situation on arrival

On arrival in Uganda, the Programme Manager (PM) welcomed the technical assistance and reviewed the terms of reference and the expected work (deliverables) to be completed. The TAs had received the documents from the previous AMP TA mission as well as documents and tools from the first targeted campaign, which did not include the PBO nets nor aspects related to their acquisition (such as 105% monitoring), so these needed to be updated.

At the beginning of the mission, three of the base documents existed in one form or another (implementation guidelines, logistics plan of action, timeline), while the budget had not yet been adapted in line with the revised guidelines and approach. The addition of the PBO nets adds a new level of complexity to the planning, particularly given the fact that these will be evaluated in terms of their effectiveness, and all documents will need to be updated to account for new planning parameters. Unfortunately, all information for the PBO net deployment was not available during the in-country mission, so documents will need to be updated as more is known.

During the mission, the NMCP was working on getting everything ready for submission of the reprogramming request to the Global Fund, which will be the primary source of funds for implementation of activities. The Harmonization Working Group consultant was on ground to support development and finalization of needed documents. AMF representatives were in Uganda for meetings with NMCP, and were actively sourcing for an NGO to fund to conduct the 6-monthly post distribution surveys that are in the AMF/MoH MOU.

AMP's technical support to NMCP for the UCC focused on the LLIN distribution (versus PBO nets). Global partners are discussing the deployment and evaluation of the PBO nets in

Uganda. Clarification of issues concerning PBO distribution and evaluations will set the stage for the development of messages around these issues, and AMP included such future message development in the ACSM work plan. Information on the PBO distribution and evaluation will also be required to finalize logistics and operations / M&E plans to ensure high quality implementation that will facilitate the evaluation of the effectiveness and impact of the PBO nets.

Issues and points for discussion

Uganda's UCC will be very complicated in 2016-2017 and will require a lot of attention to detail on the planning and implementation.

1. It will be critical to ensure sufficient staffing for the campaign, including a campaign coordinator. The focal point needs to be able to convene individuals in sub-committees and formal and informal meetings to gain consensus on issues and continue moving the campaign forward between NCC meetings. The role of a campaign coordinator was identified as a priority during the previous AMP mission in the recommendations: "Identification of a focal person who will oversee the activities and keep things moving forward with finalizing the implementation guidelines, training materials, communication plan and materials, data collection and synthesis tools, logistics plan and tools and updating timelines for all activities." The campaign coordinator will be attached to NMCP and will track, communicate, report and otherwise coordinate all of the campaign activities, as this is a major project. This person would be a 100% campaign person working with the full assistance of the vector control teams. There should also be a lead agency TA campaign coordinator. These two persons are required to keep the campaign on track and assist the Program Manager in communicating to higher-level leadership and partners.
2. AMP recommends that net cards (vouchers) be used in urban areas to streamline the distribution process. In some campaigns, distribution in urban settings is organized by site (the beneficiary can only go to the site listed on the voucher), by day (only on the day listed on the voucher) or both. The vouchers facilitate the distribution process and ensure that there are not delays that create crowd control problems. The beneficiaries can sign the vouchers when they are exchanged for nets (versus signing the household registration and LLIN distribution sheets). Using net cards for the whole country would be easier for the printing of campaign related manuals, tools and BCC messaging as "One net card, one net" is a very clear message (Equally clear is "No net card, no net"). Celebrity endorsements are also very catchy "Do you have your net card? Bebe Cool has his!" However, special tools can be developed and printed for just the urban centres if nets cards will only be used for urban centres.

During the LLIN distribution, the household registration forms can be consulted as needed when there are concerns on the accuracy of the information on a voucher or that the voucher may have been falsified. The vouchers can be kept as part of the documentation trail for the campaign and will have the beneficiary signature as proof of distribution. AMP is concerned that urban residents, who typically are not as community-oriented as people living in rural areas, can create problems during distribution if they are not served quickly and extensive time is taken out of their day to wait to receive a net. Where people are busy and the process is slow, there is a risk of beneficiaries leaving sites prior to receiving a net. Vouchers help facilitate and speed up distribution and can mitigate confusion and disorder that may occur at urban distribution sites.

In the urban areas, it is advisable to set a cap on the number of nets per household to avoid oversupply and leakage onto the market. Based on NMCP and partner experiences, the maximum number of nets per household should be set and should be emphasized during the training of all campaign personnel working in urban areas.

3. The 105% data collection has been incorporated into the implementation guidelines and training materials to ensure the quality of the household registration phase. District-level electronic data entry is also incorporated in the IG and TM. However, there is a need to ensure a rapid monitoring at the end of the LLIN distribution in order to verify the coverage and quality of the UCC prior to moving LLINs away from distribution or pre-positioning sites.
4. The training manual needs to be highly reduced in size, simplified and less specific. This is because most of the information in it should be in the Implementation Guidelines. Additionally, a training package will be provided in electronic form that will contain folders of ready-made presentations, meeting agendas, campaign tools and even speeches. Before a training session, the facilitators must review the specific package designed for their training. There will be flexibility to adjust the content as lessons are learned and also as we work in special areas, e.g. urban; PBO study areas. Basically, when it is time for registration, there will be a HHR folder within the training package that can easily be accessed and used as it is and when PBO-related issues are settled, slides can be added into the presentations and messages into the BCC folder. After a wave, trainers can propose and the sub-committee members and field teams can easily review and improve small aspects of one or two presentations such as phrasing or arrangement of content based on experience without interrupting the campaign or going through a review process. A template of a training package has been provided that is based on one that was developed by Roll Back Malaria partners, reviewed in 2016 with MC leading the process. A small working group should be formed to finalize the contents of the training package as more information is made available.

The National TOT is a single event that will train approximately 40 people and should be a 4-day training. This will provide the core people with skills in all aspects of the campaign and a high level of knowledge about their specific work stream. In short, the core team has to be technically sound so that the quality of trainings being cascaded to the districts is very high and the assistance provided is of equal quality.

PBO nets

The introduction of PBOs as part of the UCC gives rise to number of issues that require resolution before these nets can be delivered and implementation guidelines finalized. It will be important for NMCP, AMF and all partners involved in this campaign to work together to address these issues.

- In order to help finalize the UCC's planning and budget for logistics, it is imperative that AMP receive details of the design of the PBO evaluation and the level of randomization. It will be important to understand how the PBO and non-PBO control localities are to be selected and broken down. For instance, will these be catchment areas of a given health facility? This will help determine how to organize transport to prevent mixing up of PBO and standard LLINs and to plan net type for each distribution site to help achieve sound evaluation outcomes. It is also important to know how large a sampling frame will be needed in terms of the numbers of PBO and control localities. Are all of the PBO net areas part of the evaluation or are there specific areas or sentinel sites that will require additional focus?
- Will old standard LLINs need to be withdrawn from the PBO and/or control communities and, in line with the point above, are there areas where this needs to take place and areas where it does not because of the focus of the evaluation framework. This will be important for determining the distribution strategy and the disposal of old net strategy, as well as the budget associated with these activities. Furthermore, distribution and retrieval of old nets will have a lot of implications for both process and communication in these areas including the design of training for Village Health Team members.
- A related point but not one that affects the campaign planning is what will be done for routine service delivery of nets to pregnant women or children through EPI. It will be important to consider whether PBOs will be distributed through routine and, if so, quantify for these accordingly and for the period of the evaluation of the PBO nets.
- Will the PBO nets undergo the in-country evaluation process with NDA? While NDA has capacity to do this for the LLINs that are coming in and which are a familiar technology, it will be important that any specificities for the evaluation of the PBO

nets are communicated to NDA as soon as possible for them to review and determine what the process will look like.

- The PBO nets will come with individual packages and it will be necessary to confirm with NDA the planning and budgeting for the waste management since the volume is larger than what would be expected if only naked nets were procured.
- In terms of the identification of PBOs especially for evaluative purposes, it is important to make sure that the PBOs are easily distinguishable from standard LLINs, so local community volunteers such as VHTs determine if a net is a PBO. If there is any doubt that PBOs are easily identifiable, there should be a test whether the differences in appearance are sufficiently recognizable by local volunteers. And if not, consider putting some sort of distinguishing mark or tag to aid in determining what kinds of nets are in a household. Otherwise, there may be confusion.
- There needs to be a communication plan in place for informing the local authorities and the public why different types of nets are being distributed to prevent the differences in the types of nets being distributed from becoming fodder for the promotion of negative rumours about a government-sponsored campaign. Accordingly, the following are steps that should be taken to address potential fallout.
 - develop a set of key messages on this issue and pre-test them well in advance of the delivery of PBO nets
 - incorporate these messages into the ToT trainings and for local trainings and orientations in and near all localities where PBO nets are to be distributed
 - make a detailed mapping of the distribution points where PBOs will be distributed to aid in the communication planning and to aid in the logistic planning
 - place the purpose of PBO distribution into the national narrative about the campaign that gets conveyed to champions, the media and the public more generally as well as to relevant parliamentary committees and ministries that are the target of the advocacy effort; messages should be designed and tested to assure that confusion is not created among the public.
 - involve ethnic, religious and political minorities in information activities as a rumour prevention mechanism.
 - ensure that national and local political actors representing governing and opposition parties are oriented on the campaign including the PBO issue and are asked to be designated spokespersons, should a disinformation crisis arise and need to be managed; ideally diverse political actors and religious leaders will be involved in Public Service Announcements about the UCC, to help prevent any manipulation of the different types of nets for parochial ends.

Commented [ME1]: I am not too clear on this comment. I don't think that a volunteer would encounter two types of nets in their work area.

Greg: What if not all the nets in a PBO area get retrieved? What if there is bleeding between areas, such as when extended families reside in two different localities with different nets. What if nets are purchased? What if nets from routine distribution get mixed up?

Dorothy: I don't think that it is possible to have policing of nets and enforcing the use of the net. All things being equal, there should be some leakage at all borders but on a whole, a study area will have more of one type of net. The logistics and ops workstreams absolutely have to ensure that the correct nets reach the correct VHT. After that, it should not be up to the VHT to recognize nets and make a big deal of it. They should just distribute.

Greg: Yes, but aren't volunteers supposed to go door to door every six months for the post distribution survey? That's what I understood from AMF looking for a Ugandan NGO. If my understanding is correct, then there needs to be some way of ascertaining what nets are actually in the households.

Commented [ME2]: On this point, do we want to emphasize that part of the narrative needs to describe the science and the rationale? On one side, this seems like a good idea to mention that this is a way to address some of the insecticide resistance issues that Uganda is facing, but on the other side, I worry that if that message is not clear, the people receiving normal nets could infer that they are no longer working and not use them / cause problems. Your thoughts?

Greg: openness is the best policy. Devising messages that say that the PBOs are responding to localized situation would probably work, but this is my opinion. That would have to be tested. Your point is well taken.

(For rumor challenges in past vaccination campaigns in Uganda, see http://www.path.org/vaccineresources/files/Combating_Antivac_Rumors_UNICEF.pdf)

- The logistics operation will be extremely complex versus what has been done in the past distributions. It is imperative that the logistics plan of action is established, that the microplanning is of the highest quality in terms of the detailed plans for each district and sub-county, that the personnel involved with supply chain management receive needed training on control of the operation and the tools that must be filled out. The use of multiple waybills for a single truck may be necessary to track each type of LLIN being transported and if this is the case, it is an important element for the logistics training to avoid later problems with accountability.
- The implementation of the campaign in the areas targeted for the evaluation will require a strong focus on supervision and monitoring, including the use of tools for collection of data during these activities. The daily review meetings must take place to determine where there are areas that have been missed or that have been incorrectly registered, in order to rectify an issues arising as quickly as possible. While the household registration will use the 105% monitoring, it will be equally important to assess the effectiveness of the distribution to ensure that households have the correct number of nets for universal coverage to prevent malaria and to allow for the evaluation of the new nets being distributed.
- Waste management planning will need to be done for the PBO nets since they will come individually packaged, unlike the LLINs.

Additional BCC/ACSM key challenges and recommendations

The biggest challenge for the ACSM subcommittee is one of accomplishing all the preparatory work needed for the roll out of the campaign. This will mean assuring that the partners remain on target with the various levels of branding, message development, BCC training components, advocacy, development of advocacy and media toolkits, etc.

It is imperative that the ACSM subcommittee meet on a regular basis, at least once every two weeks, and even weekly if required to achieve work plan goals and objectives.

It will be important for NMCP to continue developing its institutional capacity in ACSM; one way of contributing to this goal is to create an accessible online archive of research study findings about ACSM issues relating to LLINs. This will help ensure that future message and branding design are based on scientific data and will help to inform a coordinated ACSM research agenda.

The time frame will be challenging, and the exercise of strong coordination leadership by the NMCP's communication team will be an important contribution to achieving the UCC goals.

Key next steps

There is a lot of information on the distribution of the PBO nets that needs to be shared as soon as possible in order to finalize the documents. In addition, it will be important for NMCP to get clear information from all partners on any conditions related to their funds (e.g. if funds can only support distribution of PBO nets once the evaluation protocol is agreed to, if funds need to be spent in a certain time period, etc.). In order to have a fruitful discussion with partners, it will be necessary to have a budget that partners can review. The issue of the timing for the distribution of the PBO nets will be related to funds for their distribution and thus it is critical for the logistics planning to understand which nets will be distributed when and where. If it is unlikely that the protocol will be agreed to in time for funding of the distribution of PBO nets in Q3 or Q4 of 2016, the planning should be that these areas roll out in Q1 of 2017. It will be necessary for NMCP to: (1) finalize the budget; (2) organize a NCC meeting to discuss partner contributions and gaps; and (3) organize a partners conference call or meeting to align all partners under the leadership of the NMCP.

Three of the four core documents (Implementation Guidelines, Logistics Plan of Action, timeline) will be submitted to NMCP for review and it will be important to flag any key issues that affect their finalization. It is advised that NMCP submit the core documents to their partners and donors once they are reviewed, with the caveat that further work is required to incorporate specific information related to the PBO nets once it is available.

The budget is being reviewed by NMCP based on known costing elements and will be reviewed by the AMP technical team once available.

Next steps for moving the UCC's ACSM component forward are spelled in considerable detail in the annexed work plan. It will be important to identify gaps and weaknesses during ACSM implementation so that corrective actions can be taken. If further TA is required, then this should be supported.

Work will continue to finalize the training and data collection materials, the toolkit, etc. over the coming few weeks, with an objective of everything being ready at the beginning of June.

Once the first wave of the distribution is decided (based on type of nets, funding, etc.), the microplanning should take place as soon as possible to collect the information needed to have the district-level operational budgets and plans to avoid delays in implementation.

Conclusion

With the completion of this T.A. mission, we would like to extend our sincere thanks to NMCP and their partners for all their cooperation. Distance support and assistance in the

campaign planning is available (if needed). We look forward to receiving feedback on the developed resources and following up with the NMCP team to get the IG and supporting documents finalized. We wish NMCP, stakeholders and all partners continued success with the planning and, eventually, the implementation of LLIN UC campaign in 2016/2017.