

Alliance for Malaria Prevention

Chad Situation Report: December 13th, 2016

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Terms of reference – Provide distance technical support to NMCP Chad and the Global Fund Principal recipient UNDP/PALAT in preparing for the 2017 universal coverage LLIN distribution campaign, to be carried out in 12 regions.

AMP Distance Support: for implementation December 26th, 2016 to January 5th, 2017

Context: 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.

The distributions are planned so as to finish in the month preceding the heavy rains in the different regions.

Regions	Distribution	Rains	Log base
Mandoul, Moyen Chari	January	Late March	Moundou
Logone occidentale, Logone orientale	February	Late March	Moundou
Mayo Kebbi Est, Mayo Kebbi Ouest, Tandjilé	Mid March	Mid April	Bongor
Guera, Salamat	April	May, June	Mongo
Chari Baguirmi, Hadjer Lamis, Lac	May	June	Ndjamena

Past campaigns in 2011 and 2014 have shown a difference in the population projection from the 2009 census and household registration results. A buffer stock of 1 million LLINs (+19%) has also been purchased to compensate for this. Surplus nets if any can be added to the continuous distribution stocks. One more Region (Sila) has been included making a total of 13 of the 23 and planning for this 13th Region is being finalised.

Implementation December 26th, 2016 to January 5th, 2017

- Distance TA has been provided towards the complete handing over to the local team (PR and NMCP) to continue deploying the campaign strategies according to each phase of implementation as planned.
- The process of organizing, including the use of micro planning and Hreg tools, has been appropriated by the country after conducting:
 - Micro planning exercises in 04 health regions namely Mandoul, Moyen Chari, Logone Occidentale and Logonne Orientale. Lessons drawn from the experience for the 1st phase (Mandoul and Moyen Chari) have served to improve the process and tools for the 2nd phase (Logonne Occ and OR).

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- Hreg for the 1st phase. AMP noted that the team that supervised Hreg in Mandoul did not use the recommended tools. This can be explained by the fact that this particular team did not attend the final briefing organized for the central level supervisors in Moundou just before the launch of the Hreg exercise. This aspect has to be followed up by the PR and the NMCP campaign managers so that a refresher can be organized to this effect before the realization of the subsequent phases of Hreg.
- Both Hreg and Microplanning activities ended around the same time (3rd week of December) and the quality of the results thereof has been verified and data consolidated with the help of AMP. With respect to the quality of data, AMP noted a key issue which is that of missing data with respect to:
 - Missing population estimates of some villages during micro planning
 - Missing population figures of some villages (identified during micro planning) after Hreg. The later requiring specific follow up to establish the exact reason why such key data is missing.
- Though the briefing of the partners (WHO and INSEED) on the organization of the independent monitoring took place on the 14/12/16, teams only set out for the field by the 23rd December at the end of Hreg. By implication, the independent monitoring of the first phase Hreg will not contribute to improving the quality of the Hreg exercise but could however, serve as a learning opportunity and for drawing of lessons in view of a timely and adequate organisation of the independent Hreg monitoring for the subsequent phases.
- Refresher briefings of the micro-planning teams took place in Moundou (December 9th) and in Goré (December 12th) in prelude of the micro-planning exercises organised successively in 13 health districts from Dec 10 to 21, 2016 in the Logone occidental and Logone oriental regions of the second campaign phase for distribution in mid-February.
- GF has suggested a longer term international technical support to be funded from the grant. UNDP has advertised the recruitment of an expert to this effect. http://procurement-notices-admin.undp.org/view_notice.cfm?notice_id=34934

Logistics/supply chain: December 6th to 13th

- The trend, following the Hreg for the first phase campaign has confirmed, as initially suggested by the results of the micro plans), an increase in the quantity of the LLINs that will be needed to ensure a universal coverage at the recommended ratio of 1 LLIN to every 1.8 persons in 100% of Households. The increase in LLIN needs ranges from 171 864 in Mandoul to 333 865 in Moyen Chari representing respectively 37% and 77 % increase compared to project estimates. This is about 57% increase in needs for the 1st phase which, is an alarming issue requiring to be addressed. Considering a buffer provision of 20%, the real Gap will be around 37%.
- Micro planning results in the 2 logones suggest that there will also be an unexpected increase in the number of LLINS ranging from 236 004 (87%) in Logone Occ to 248 673 (30%) in Log Or.

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Upcoming activities:

- 1st phase: The launch of phase 1 Mandoul and Moyen Chari LLIN distribution, initially scheduled for the 13-01-17 has been postponed to 23-01-17.
- Meeting at central level to validate the results of Hreg in the Mandoul and Moyen Chari regions based on the findings of the independent monitoring exercise: Date
- Draw lessons from the 1st phase experience in order to improve implementation during the subsequent phases: Date
- 2nd Phase (Log OCC and Log Or) key mile stones:
 - Microplanning: DONE
 - LLIN prepositioning: Health Districts and Health Centres, 6-12/01/17; Health centres to Distribution sites, 23-28/01/17
 - Training of trainers at health district level: 08-22/01/17
 - Training of Community relays for Hreg: 02 - 03 /02/17.
 - Hreg: 04-11/02/17.
 - Training of monitors and realisation of independent monitoring: 04-05/02/17
 - Training of community relays for LLIN distribution: 24/02/17
 - LLIN distribution: 28/02 – 02/03/17
- 3rd Phase (Mayo-Kebbi +Tandjilé):
 - Microplanning: 08-22/01/17