



Annual Partners' Meeting

Rethinking the ITN status quo: Maximizing the impact on malaria

Day 2: Assessing effectiveness and impact

ITN distribution channel selection and optimizing channels in use

Tuesday, April 8th



Channel selection to address emerging gaps within evolving funding context (1)

- When considering channel selection to address emerging gaps within an evolving funding context, it's crucial to adopt a strategic and adaptable approach.
- The most effective ITNs should continue to be selected according to insecticide resistance profiles.
- NMPs are encouraged, **in line with use of data for decision-making** at sub-national levels, to explore optimal channel mixes to ensure sustained ITN access and use.
- **Selection of both ITN type and the optimal mix of ITN distribution channels is critical to maximizing impact.**



Channel selection to address emerging gaps within evolving funding context (2)

The main objective of channel selection is to provide guidance for NMPs and partners to

1. Assess existing distribution channel capacity, effectiveness and efficiency in reaching and maintaining equitable access in the targeted populations.
2. Understand strengths and limitations of each channel and distribution strategy.
3. Determine the optimal ITN distribution channel and mix based on data and local context.

For more information

<https://allianceformalariaprevention.com/resource-library/resource/insecticide-treated-nets-itn-distribution-best-practice-update/>

Optimizing Channels Selected and in Use

Channel: ITN Mass Distribution Campaigns

Campaigns have been a key channel for rapidly scaling up access to ITNs. Generally, mass campaigns achieve high and equitable access to ITNs across populations.

Operational considerations: Campaign distribution strategies need to be tailored to the operational context. E.g. a door-to-door approach in a hard-to-reach area may be most appropriate, while fixed site distribution may be best for a community in a more accessible area. Distribution in low burden areas, where needed, needs to be as cost-effective as possible to allocate scarce resources where they are needed.

Epidemiological and entomological considerations: Tailored strategies based on malaria epidemiological, entomological, and human-behavioural data are important for prioritizing resources to optimize ITN access.

Timing: ITN campaigns are typically planned with an interval of 30—36 months.

Optimizing Channels Selected and in Use

Channel: ITN Mass Distribution Campaigns

Operational efficiencies are critical within the current context

- Where operational costs are limited, learning from previous campaigns can inform efficiencies, e.g., Exploring options to
 - Leverage existing digital data from past ITN or other health campaigns to support key campaign activities
 - Use routine data to inform planning, quantification, and logistics
 - Return to consideration for
 - Integrated/targeted campaigns (including under five campaigns)
 - Changing ITN allocation approaches, raising the HH ITN cap
 - Combine microplanning and HH registration?
 - Strengthen planning and monitoring through strategic use of WhatsApp or other platforms to facilitate information sharing
 - Use virtual tools and meetings to support health system actors to gather data with lower costs

Optimizing resources = Saving lives

Assessing Channels Selected and in Use

Channel: ITN Distribution through Routine Health Services (e.g., ANC/EPI)

PMI VectorLink – Assessment Approach used for the four assessments

To be explored: Adaptation for implementation through existing communication channels and meetings

Evaluation questions

- To what extent is continuous ITN distribution implemented according to existing international best practice and national guidelines?
- What improvements could deliver immediate, mid-term and long-term efficiencies?

Adapted methods

- Desk review to inform development of discussion guide
- Teamwork approach (using WhatsApp and other tools) for data collection and analysis – leverage planned meetings with regional and district health authorities




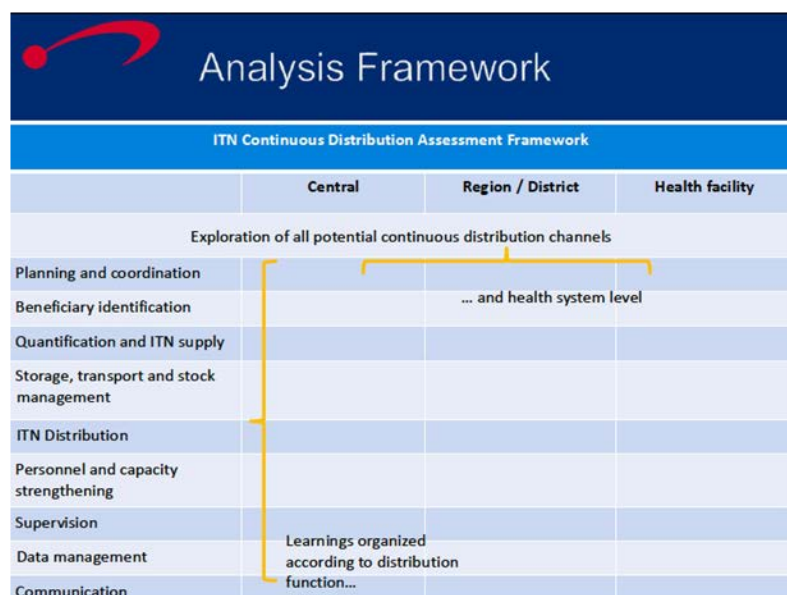
Link: <https://www.continuousdistribution.org/wp-content/uploads/2022/03/ITN-CD-Assessment-Toolkit.pdf>

Assessing Channels Selected and in Use

Channel: ITN Distribution through Routine Health Services (e.g., ANC/EPI)

PMI VectorLink – Assessment Approach

To be explored: Adaptation for implementation through existing communication channels and meetings



Cameroon Teamwork Approach

Sites	Yaoundé North and Extreme North Regions Lagdo et Yagoua Health Districts
Teams	North: Salomon Patchoke/NMCP, Mary Kante/PMI VectorLink, Laure Moukam, ACMS Extreme North: Raymond Tabue/NMCP, Eloi Oboussou, VectorLink (and AMP) Consultant, Albertine Lele/ACMS
Interviews	Central
	Region / District
	Health facilities

	<i>Interviews with: NMCP, DSF, PLMI, WHO, UNICEF, PSM, Malaria No More</i>
	<i>Interviews with:</i> <ul style="list-style-type: none"> - Governor, Regional Technical Coordinator, and FPSP in Garoua ; Representative of the Governor, Regional Health Director and Regional Technical Coordinator in Maroua - District health team, Sous-Préfet and Mayor in Lagdo - District health team, Malaria Focal Point, Surveillant Général, ANC lead in Yagoua
	<i>Interviews with Health center directors and CHWs in Djippordé, Mayo Bouki, and Badankali (Lagdo) and in Dana, Yagoua, Gabaraye-Widigue (Yagoua)</i>

Optimizing Channels Selected and in Use

Channel: ITN Distribution through Routine Health Services (e.g., ANC/EPI)

Improving ITN access through routine health services ITN distribution

PMI VectorLink – Highlights of results from in-depth process assessments in four countries

- **Planning:** Develop or finalize and disseminate ITN distribution guidelines, instructions at all levels
- **Clarify eligibility instructions:** Clarifying which priority groups are eligible; reduce administrative burdens impeding receipt of ITNs (e.g., ID card requirements)
- **Supply chain:** Reinforce ITN requisition and “pull” systems, establish stock alert systems, minimum stock level indicators; add ITNs into national eLMIS (e.g. ZAMMSA)
- **Transport and storage :** Ensure last-mile ITN transport; collaborate with municipalities for ITN storage and transport, provide recognition and support

Optimizing Channels Selected and in Use

Channel: ITN Distribution through Routine Health Services (e.g., ANC/EPI)

Improving ITN access through routine health services ITN distribution

PMI VectorLink – Highlights of results from in-depth process assessments in four countries

- **Training:** Integrate on-the-job ITN training and modules with other health service delivery training (e.g., IPTp, case management)
- **Communication:** Provide malaria communication tools in health centers, for CHWs to promote ITN use
- **Supervision:** Include data verification checks during supervision visits to review and compare the number of ITNs received, the number distributed, the number in stock, and the numbers of beneficiaries seen
- **Data management:** Streamline the number of tools to track ITN stock and distribution

Note: AMP Toolkit for ITN distribution through routine health services (soon to be in progress), please reach out if you are interested in collaborating and/or providing country inputs.

Assessing Channels Selected and in Use

Channels: ITN School-Based Distribution (SBD) and Community-Based Distribution (CBD)

Key considerations: PMI VectorWorks Question table to guide choices (More on Day 3)

- Would it be practical for health facilities or community groups to conduct LLIN distribution as outreach activities? (Consider logistics and experience with running outreaches: Has it been possible to maintain outreach activities previously?)
- Is primary school attendance fair to good in some areas of the country?
- Even if attendance is not high, is primary school enrolment fair to good in some areas of the country?
- Are there any functioning community-based networks that could be modified to oversee LLIN distributions?
- Do you have serious concerns about feasibility or cost of ensuring a supply chain through any channel?

Other key considerations

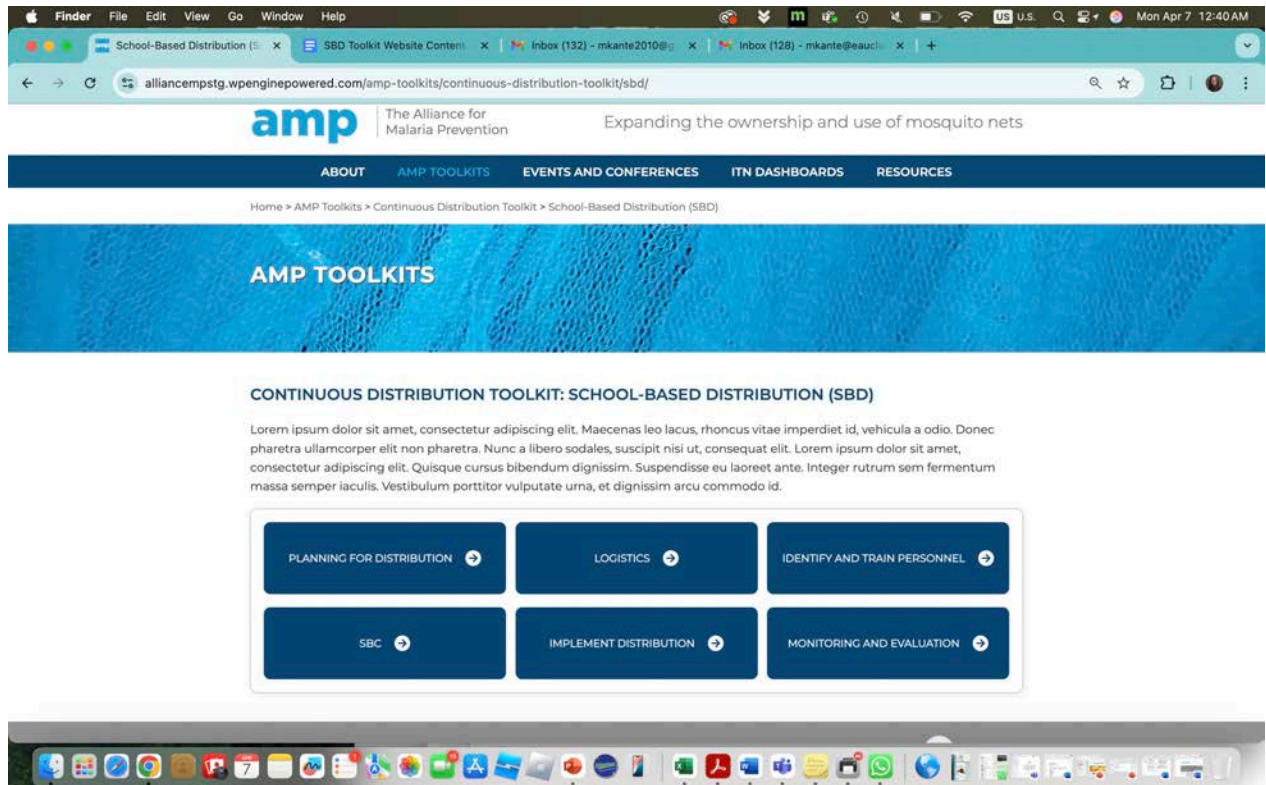
- Storage and logistical feasibility
- Channel efficiency
- Understand access to and quality of CHW networks and options to incorporate ITNs
- Considerations for flexibility and providing ITNs as needed
- Exploring the combination of iCCM and ITN distribution

Optimizing Channels Selected and in Use

Channel: ITN School-Based Distribution (SBD)

Progress on the ITN SBD Toolkit

The AMP Continuous Distribution Working Group has developed the draft ITN SBD toolkit, which will soon be available.



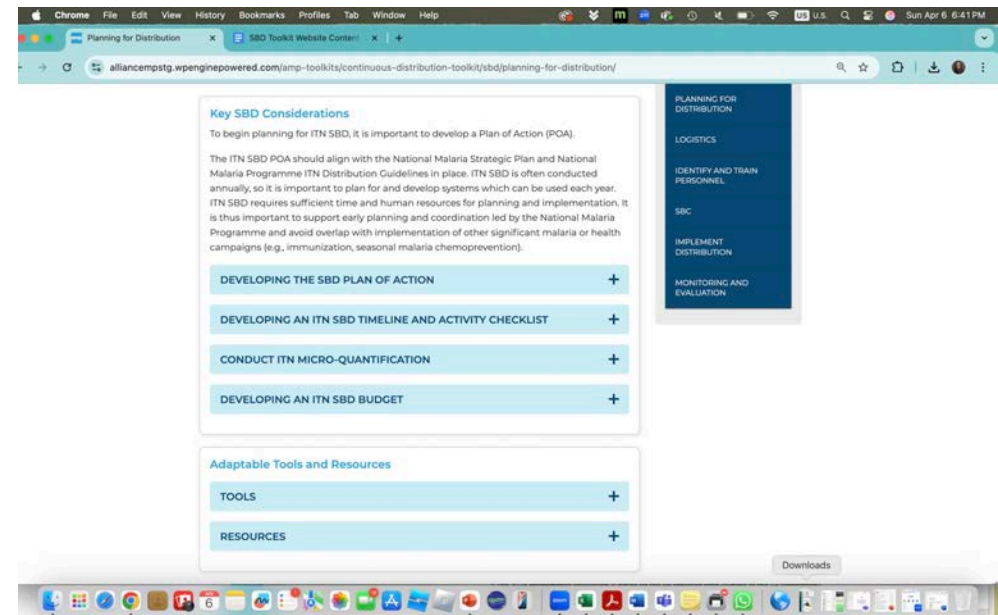
Optimizing Channels Selected and in Use

Channel: ITN School-Based Distribution (SBD)

Progress on the ITN SBD Toolkit

ITN SBD toolkit annexes – Adaptable tools

- **Plan of Action** template
- **Risk Assessment and Mitigation Plan** Guide and Excel Template
- **Terms of reference (TORs)** for ITN SBD human
- **Budget and Planning Checklist** for planning details, timeline and budgeting considerations
- **Timeline**



Optimizing Channels Selected and in Use

Recognizing country experiences and expertise

- **Burundi:** PNILP developed an approach to identify HHs with ITN gaps piloted in 2 districts.
- **Madagascar:** Building on a CHW program in place, the NMCP had included *Distribution communautaire continue* as part of its NMSP to fill in gaps in ITN access between campaigns.
- **Zanzibar:** Integrated ITN community distribution with reproductive and child health distribution. Health facilities serve as decentralized points for storage and issuing ITNs, as well as reporting and management of voucher/coupon supply.
- As will be presented next, following a pilot study and data analysis began, **Zimbabwe**, undertook ITN distribution through community channel using a coupon system (since 2017).

Optimizing Channels Selected and in Use

Other Channels – Direct distribution to vulnerable populations, Market-based and other options

Key considerations: PMI VectorWorks Question table to guide choices (More on Day 3)

- In the opinion of the stakeholder group, will some of the population be willing and able to pay for LLINs?
- Is there an existing retail net market that could be supported to expand and sell good-quality LLINs?
- Is there an existing retail market for other goods that has potential to be supported to distribute LLINs?

Other considerations

- Promotion of ITN culture and use
- Consider market-based options
 - Market facilitation to encourage pharmaceutical and FMCGs sales, e.g., in urban areas no longer covered by institutional distribution
 - Social marketing with low or non-subsidized sales

Future perspectives

The context continues to evolve.

Country-led expertise and experience will best guide the approaches to the questions and issues arising from the changes.

Coordination, creative approaches, optimizing the right mix of channels, assessing and strengthening each channel uses will all be necessary to maximize impact on malaria and save lives.

Questions for further reflection

- What are your impressions of and thoughts on the optimizing channels selected and in use presented?
 - Which proposed items may work better?
 - Or which may not be feasible?
- Which other ideas and innovations for operational efficiencies are you considering, or would propose for consideration?
- Quelles sont vos impressions et réflexions sur les canaux d'optimisation sélectionnés et utilisés présentés?
 - Quelles propositions pourraient être plus efficaces ?
 - Ou lesquelles pourraient ne pas être réalisables ?
- Quelles autres idées et innovations en matière d'efficacité opérationnelle envisagez-vous ou proposeriez-vous?

Q&A

amp

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