

Optimizing ITN Channel Delivery: Decision tool to support strengthening ITN routine distribution

AMP, February 2026
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To optimize routine ITN channel delivery with limited resources, current routine systems should be evaluated to prioritize areas for improvement based on what would have the greatest impact on net access and use among target populations

PROBLEM STATEMENT

Malaria programs use routine delivery systems to get nets to those most at risk of dying from malaria – pregnant women and young children. As global funding shrinks and health budgets tighten, these systems become even more critical. Yet, coverage gaps persist in routine distribution. With fewer resources, smarter use of this channel is no longer optional – it is essential to reducing malaria deaths.



ASSESS CURRENT ROUTINE DISTRIBUTION SYSTEM PERFORMANCE

To address these challenges, countries need structured ways to examine their LLIN distribution channels – identifying where the system is working, where there are gaps, and where targeted action will have the greatest impact.



IDENTIFY SPECIFIC CHALLENGES

A key part of this is **root cause analysis**: understanding *why* certain coverage gaps exist.

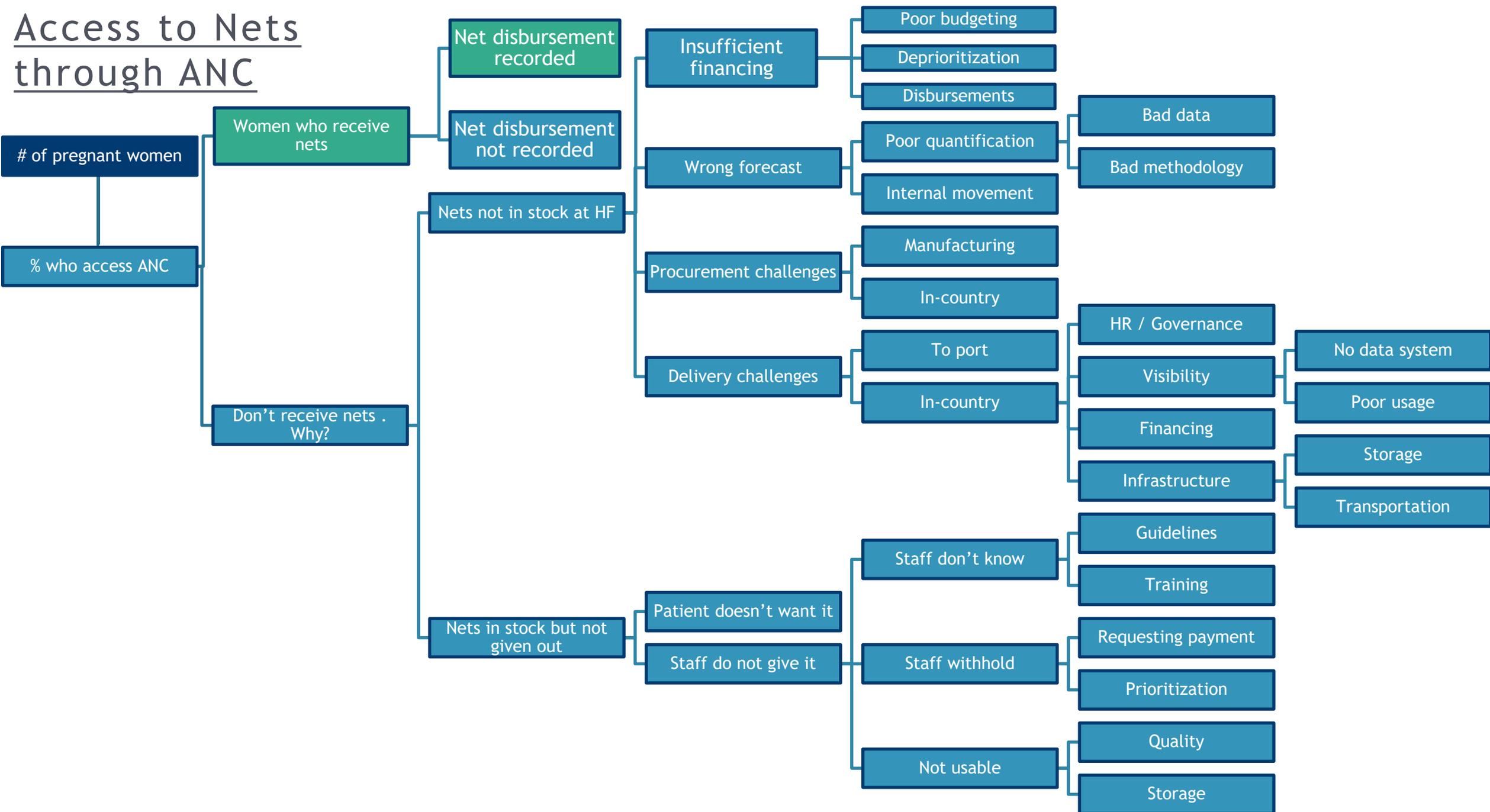


MEASURE THE IMPACT OF CORRECTIVE ACTIONS

CHAI teams have been supporting countries with examining their LLIN distribution systems to pinpoint the specific barriers

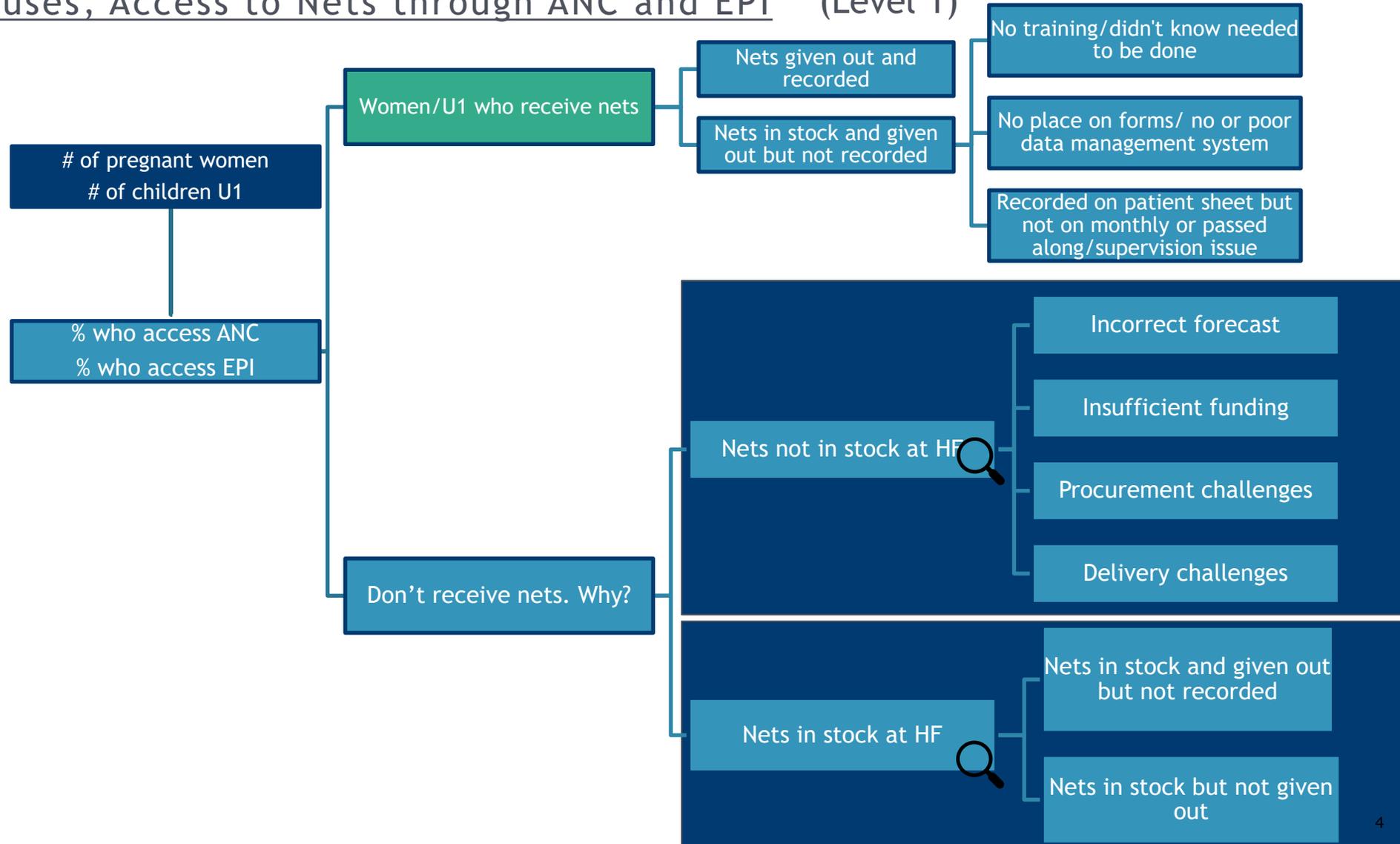
This **decision tree tool** was created as a practical visual to help **National Malaria Control Programs and their partners** have a clear, systematic way to understand system weaknesses and which gaps to **prioritize investment in resolving** to maximize impact with limited resources.

Access to Nets through ANC



This decision tree helps programs identify the routine ITN channel challenges and their root causes (1/3)

Root Causes, Access to Nets through ANC and EPI (Level 1)

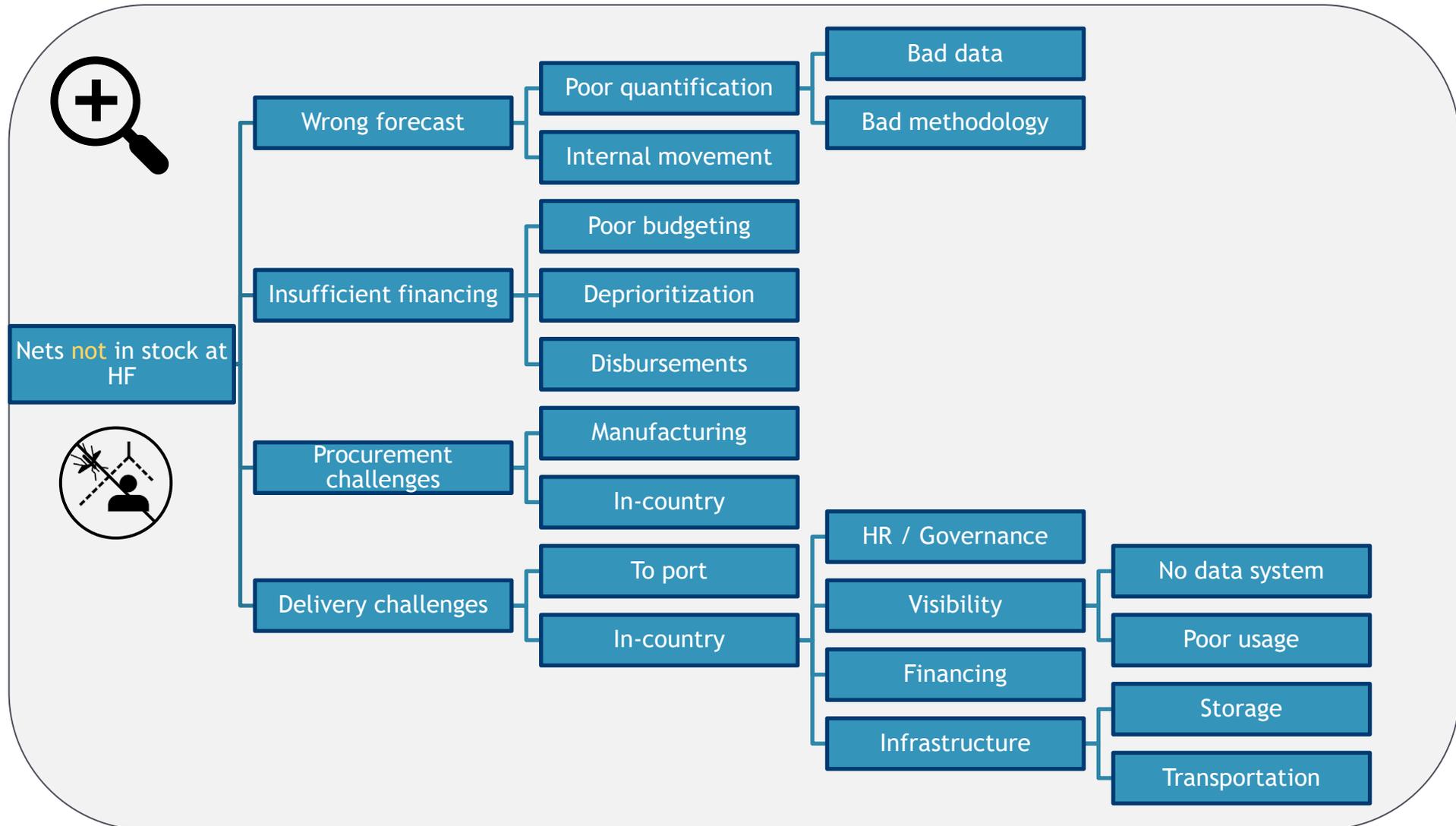


1

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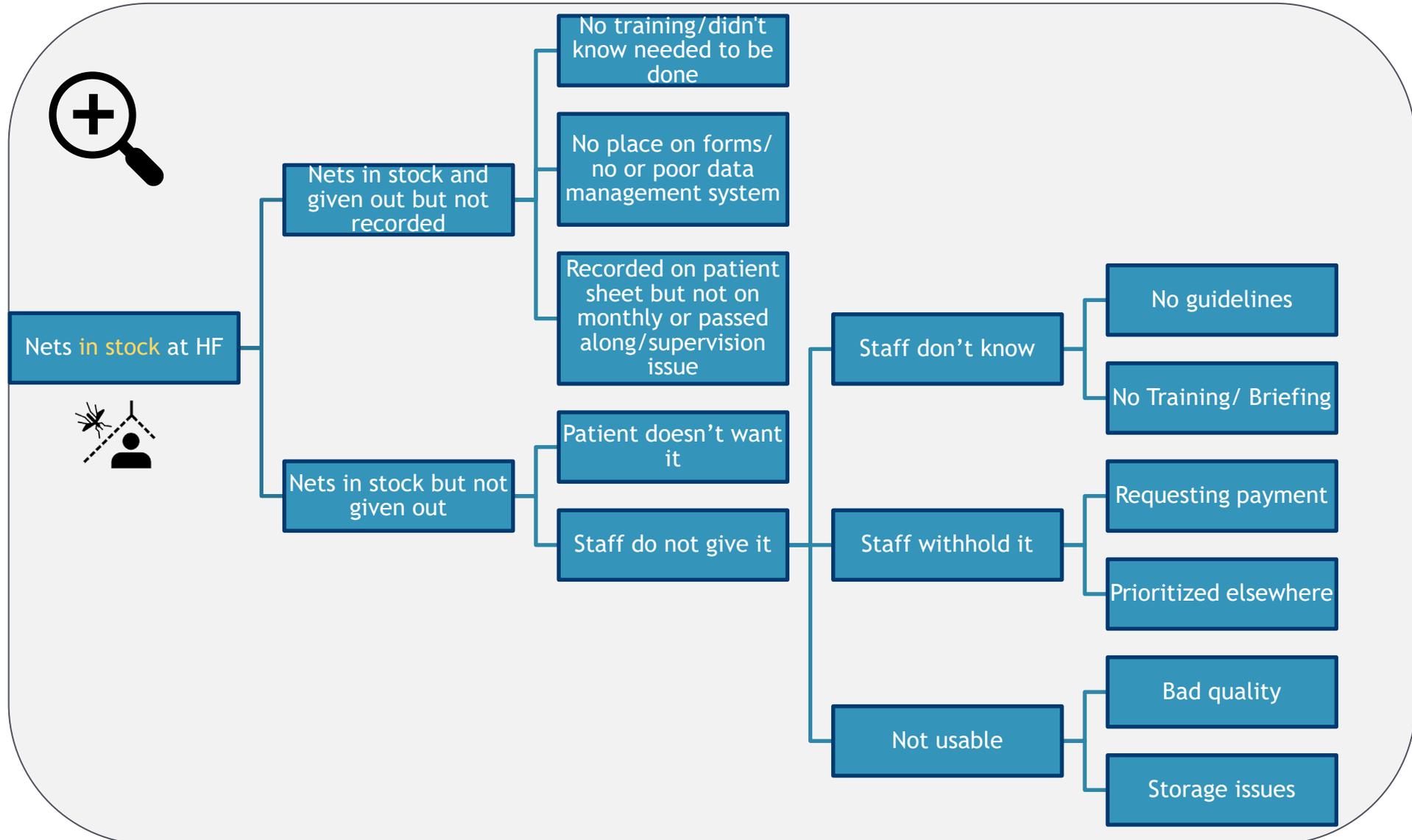
This decision tree helps programs identify the routine ITN channel challenges and their root causes (2/3)

Root Causes, Nets not in stock, ANC and EPI (Level 2)



This decision tree helps programs identify the routine ITN channel challenges and their root causes (3/3)

Root Causes, Nets not in stock, ANC and EPI (Level 2)



Access to Nets through EPI



Access to Nets through ANC: CMR Center region

482,030
of pregnant women

Women who receive nets

52%=223K women

% who access ANC

89%= 429,007

Don't receive nets . Why?

30%= 270K women

Net disbursement recorded

Net disbursement not recorded

Nets not in stock at HF

35% stockout rate=75K women

80% due to supply chain= 75.6K

Nets in stock but not given out

65% =134k

Insufficient financing

48%=37k Rd procurement gap: 233K net shortage

Wrong forecast

Procurement challenges

52% due to supply chain planning/transport=39K

Delivery challenges

Patient doesn't want it

Staff do not give it

Poor budgeting

Deprioritization

Disbursements

Poor quantification

Internal movement

Manufacturing

In-country

To port

In-country

Staff don't know

Staff withhold

Not usable

Bad data

Bad methodology

HR / Governance

Visibility

Financing

Infrastructure

Guidelines

Training

Requesting payment

Prioritization

Quality

Storage

No data system

Poor usage

Storage

Transportation

65% - Nets physically present but NOT given to patients (service delivery)

18% - Nets in wrong location (maldistribution)

17% - Not enough nets procured

A few considerations and tips...

- ▶ These trees look at gaps in *access* through the routine system. It is also important to **look at *use*** after people receive access
- ▶ These trees could/should be **replicated at subnational levels** to capture heterogeneity in system performance within the country
- ▶ Try to quantify each node as best as possible, particularly to the left side of the tree. However, **don't let data gaps stall progress on thinking through the tree** - estimates could still be useful, and working to improve understanding of those data gaps can be an objective for routine system strengthening
- ▶ **Iterate!** Monitor the impact of improvements to the system, and see how much further access results

Thank you for your attention

Ideas and feedback welcome! Please reach out to: skaufman@clintonhealthaccess.org