

PRIMARY SCHOOL DISTRIBUTION OF LONG LASTING INSECTICIDE-TREATED NETS (LLINs) IN GHANA



TRAINING MANUAL

May 2013

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Table 1: Training Content and Agenda

PRIMARY SCHOOL LLIN DISTRIBUTION CAMPAIGN

Training of Trainer's (ToT) workshop content and agenda

Session title	Duration	Time	Facilitators
<u>Participant arrival</u>		8:30-9:00	
Introduction Activities	10 min	9:00-9:10	
Unit 1: Importance of LLINs in Malaria control and prevention	30 min	9:10-9:40	
Unit 2: Continuous distribution of LLINs	30 min	9:40-10:10	
<u>BREAK</u>	15 min	10: 10-10:25	
Unit 3: Communication and social mobilization	30 min	10:25-10:55	
Unit 4: Organizing and managing the Primary School distribution of LLIN campaign	45 min	10:55-11:50	
Discussion	15 min	11:50-12:05	
Unit 5: Micro-planning	30 min	12:05-12:35	
Unit 6: Logistics	30 min	12:35-1:05	
Unit 7: Monitoring and record keeping	30 min	1:05-1:35	
Next Steps	25 min	1.35-2.00	
LUNCH/Departure	1hr	2:00 – 3:00	

TRAINING CONTENT

Activity

UNIT 0: Welcome & Introductions {Introductory Activities}

(Applicable to District Training of Trainers (D/SHEP, Supplies and Logistics Officer, AD Supervision and monitoring) and Circuit Level training of School Head teachers and School based Health Coordinators)

Activity

1. Self-introductions

Ask the group to briefly introduce themselves. Introduce the training team.

Welcome the participants and thank them for their involvement. Explain the importance of the activity at hand and request their full support. Briefly explain the reasons for the meeting / training – however, keep the session brief as many of the points are discussed in details later.

Activity

2. Introduction

Briefly explain why this training is taking place, leaving detailed discussions of the activities planned until Unit 2.

The Ghana Health Service, National Malaria Control Program in collaboration with Ghana Education Service School Health Education Programme and its development partners are working towards reducing malaria related maternal and infant mortality by ensuring that all children under five years, pregnant women, and subsequently everybody own and sleep under an LLIN every night.

1. Ghana has implemented LLIN Door-to-Door Universal Coverage Hang Up Campaigns in all the regions aiming at giving (ONE) LLIN to every (TWO) person in a household and hanging the LLIN on their sleeping places for them. The continuous distribution of LLIN is a complementary strategy to maintain and sustain gains made through the universal coverage campaign.

3. Training overview

This workshop will be held within one day with the aim of training trainers who will, in turn, train school head teachers and School based Health Coordinators. It is expected that at the end of this one-day training program, participants will fully understand the entire continuous distribution strategy.

UNIT 1: The Role of LLINs in Malaria Prevention

(Applicable to District Training of Trainers (D/SHEP, Supplies and Logistics Officer, AD Supervision and monitoring) and Circuit Level training of school head teachers and school based Health Coordinators)

1. Learning objectives

At the end of the session, participants will be able to:

- Describe how malaria is transmitted
- Explain the preventive tools used in malaria control
- See malaria as a dangerous disease and as a major public health problem in Ghana
- Describe the differences between ITNs and LLINs
- Discuss the importance of LLINs in the fight against malaria in Ghana, and hence the reason for the planned activities

2. Questions to be addressed are:

- Why is malaria a deadly disease?
- What causes malaria
- How does malaria spread?
- What are the effects of malaria on the community,
- Who are the groups of people most vulnerable to malaria?
- State the difference between Insecticide Treated Nets (ITNs) and Long-Lasting Insecticidal Nets (LLINs)?
- Why are LLINs effective in preventing malaria?
- Are the LLINs safe for use?

Activity

Please write the objectives and questions to be addressed on a flip chart. Ensure the session addresses them.

*Begin this session by asking questions on what participants know about malaria control: **Cause and prevention.** This will help assess the level of understanding of participants on cause, control and prevention of malaria.*

Explain to the participants that:

Malaria is an acute illness caused by malaria parasites. Acute means that it appears and progresses very fast. Human beings are infected through the bite of an infective female *Anopheles* mosquito, meaning the female *Anopheles* mosquito has previously taken up the parasite from an infected person.

There are many types of mosquitoes; some that bite in the daytime and some in the early evening. The malaria-carrying *Anopheles* mosquito usually bites at night and is the only one that can transmit malaria. You can only get malaria by being bitten by one of these infective mosquitoes.

Some people believe that one can get malaria by eating mangoes or maize, drinking dirty water, or walking in the rain. **This is not true!** Many people believe this because malaria is most common during the rainy season, when mangoes and maize are plentiful. Actually, the reason that there is more malaria when it rains is because there are more breeding sites for the malaria transmitting mosquitoes (mosquitoes lay their eggs in water and the young mosquitoes live in water as larvae before turning into the flying adults).

Emphasize that:

- In Ghana, malaria kills more children than any other disease; most children who die of convulsions and anaemia (lack of blood) have actually died of malaria.
- Cause of children absenteeism to school and affects children IQ
- The commonest cause of convulsions and loss of consciousness among children is malaria and not bad spirits or witchcraft, as some people believe.
- Malaria is a leading cause of abortions and stillbirths in pregnant women
- Families lose a lot of money not only on treatment of the sick but also on transport to health facilities. They also lose a lot of time meant for gainful work.

Pregnant women and children under five years are most vulnerable (malaria is most dangerous in these groups of people and often result in death).

Clarify that:

The environmental conditions in most parts of Ghana favour mosquito breeding all the year round resulting in **transmission of malaria throughout the year**. Fortunately, the mosquitoes transmitting malaria bite mainly during the night. This makes the mosquito net an excellent tool to prevent malaria if it is used properly **every night**.

About ITNs and LLINs, explain that:

- Insecticide-Treated Nets (ITNs) are mosquito nets that are treated with a safe insecticide.
- The protection that mosquito nets provide against malaria is doubled when the net is treated with insecticide because the net kills/repels mosquitoes **in addition** to stopping them from reaching and biting the person.
- Conventionally, nets were treated by dipping them in an insecticide solution - and to ensure its continued insecticidal effect, the net had to be re-treated at least once a year because the insecticide washes off quickly.
- In contrast, a Long Lasting Insecticidal Net (LLIN) is a type of ITN that does not need to be re-treated if handled with care. LLINs are factory-treated mosquito nets made with netting material that has insecticide incorporated within or bound around the fibres. The insecticide on the net lasts for the lifetime of the net (usually 3 years or 20 washes). All free net distributions in Ghana should be LLINs.
- All of the nets to be distributed in this campaign are LLINs
- The insecticides used for ITNs and the World Health Organization (WHO) and the Ministry of Health approve LLINs to be safe.

About the beneficiaries, tell the participants that:

Ghana has, in the past, distributed nets to pregnant women and children under five. Currently, Ghana has adopted the universal coverage policy of LLIN distribution. This approach ensures that one (1) LLIN is distributed to every two (2) people in a household. To ensure the maintenance of the universal coverage, other Continuous LLIN distribution channels are being engaged. Among these Continuous LLIN distribution channels is the Primary School Based LLIN distribution.

The shift towards universal coverage is to ensure that all people at risk of malaria are targeted with a cost-effective and proven technology for prevention of the disease by virtue of economies of scale. Secondly, high population coverage achieved through mass LLIN distribution and sustained through Continuous LLIN distribution channels increases the potential to reduce overall disease transmission.

3. Take Home Messages

Communicate these in a participatory manner, ask questions to the participants etc.

- Malaria is the number one killer disease and cause of fever in Ghana.
- The malaria carrying mosquitoes bite mainly at night and indoors.
- The good news is that malaria is preventable by sleeping under a LLIN every night.
- The LLINs do not need retreatment.
- The insecticide in LLINs is safe. The Ministry of Health in Ghana and the World Health Organization has approved this.
- These nets will be distributed **to all persons at risk**, not only to children under 5 years and pregnant women.
- However, children under 5 years and pregnant women are most affected by malaria and, therefore, should be given priority to sleep under the nets.

UNIT 2: Continuous LLIN Distribution

(Applicable to District Level Training of Trainers & Training of Head teachers/ School based Health Coordinators)

1. Learning objectives:

By the end of the session, participants will be able to:

- Explain the continuous distribution LLIN strategy
- Describe the key channels of continuous distribution of LLIN to be engaged
- State the key target beneficiaries of the various channels
- State the main objectives of continuous distribution

2. Questions to be addressed are:

- Why continuous distribution of LLINs?
- What are the objectives of the Continuous distribution strategy
- What are the key selected channels?
- How are these channels to be implemented?
- When is the continuous distribution strategy starting?

12 million LLINs have been distributed to all households through the universal coverage campaigns in Ghana at the end of 2012.

To maintain universal coverage after the campaign is completed, Ghana aims to target a variety of population groups with LLINs using a continuous distribution system, integrating LLIN distribution into ANC, EPI, and through schools, with a complementary retail sector active in urban areas, where nets will be available for sale according to free market principles.

Ghana's Continuous Distribution Strategy is to use the following channels to 'push' nets into households periodically throughout the growth of the household from couple to family and beyond.

- ANC (targeting pregnant women at their first ANC visit)
- EPI (targeting 18 month old children receiving their 2nd measles vaccination)
- **Primary Schools (targeting children in primary 2 and 6)**

Complementing these push strategies, additional 'pull' strategies will provide coverage for the remaining households where nets are needed:

- Sales of LLINs to students in Senior High Schools
- Open retail sales in urban and peri-urban areas
- NGO, CBO and FBO distributions at the community level
- Workplace programs to encourage employer purchase of LLINs for among employees

Using NetCALC[®] to model LLIN coverage, the following steps would have to be taken in LLIN supply to maintain the target of 90% ownership.

- In 2013 approximately 2.9 million LLINs would be needed for distribution through the ANC, EPI and Primary School channels.
- In 2014, when all the channels are activated, about 3.8 million LLIN will be needed for that year, with net needs increasing with population growth in subsequent years.

The success of the continuous LLIN distribution mechanism depends on a well-designed and implemented behaviour change communication strategy. It will also depend on a solid supply chain system supported by accurate data reporting and effective support supervision. Supervision will be integrated into routine support supervision activities and tools.

The continuous distribution strategy is led and overseen by the National Malaria Control Programme (NMCP) with support from a number of donors and implementing partners. The NMCP is responsible for coordination, strategic planning, advocacy, procurement and distribution, data collation and sharing, and quality control

Why Continuous LLIN Distribution

Previous Malaria prevention strategies aimed for high ownership and use of LLINs by the vulnerable groups. More recently the goal has shifted to “Universal Coverage” where every person in a malarious region sleeps under an LLIN.

It is aimed that this UC in addition to providing personal protection to the population covered will lead to a decline in malaria transmission levels.

Operationally, UC= 1LLIN to 2 people in a household

Ghana expects to have delivered 12 million LLINs to households through its Door-to-Door Distribution and Hang UP Universal Coverage campaign.

AFTER UC CAMPAIGNS WHAT NEXT?

- How can populations not reached by campaigns be served?
- What strategies can be used to sustain Universal Coverage?
- How do we maintain gains made?

To maintain universal coverage after the campaign is completed, Ghana aims to target a variety of population groups with LLINs using a continuous distribution system.

Ghana’s Continuous Distribution Strategy is to use different channels to ‘push’ nets into households periodically throughout the growth of the household from couple to family and beyond

What are the objectives of the Continuous LLIN distribution Strategy?

- Provide LLIN for replacement and “add-on” to sustain “universal coverage”
- Avoid oversupply (spill-over) by combining “push” and “pull” systems
- Use the household as entry point for LLIN with intra-family or intra-community redistribution based on need
- Utilize all suitable channels with combinations of free, subsidized and at cost nets where possible

What are the key channels?

- Ante Natal Clinic (ANC)
 - Pregnant women attending Ante Natal clinic for the first time
- Child Welfare Clinic (CWC)
 - Children 18 months to 24 months due for measles 2 (Booster dose)
- Primary School Distribution
 - **Pupils in Primary 2 and Primary 6**

UNIT 3: Communication and Social Mobilization

(Applicable to District Level Training of Trainers and Circuit Level Training of Head teachers/ School SHEP coordinator)

1. Learning objectives:

At the end of the session, participants will be able to:

- Explain the benefits of using LLINs
- Describe strategies to promote and influence the correct use of LLINs among beneficiaries
- Explain ways of preventing leakage of nets
- Explain possible ways of communicating malaria information to children
- Explain social mobilization plan - including community/ parents involvement

2. Issues addressed are:

- The role of Head-teachers'/School based Health Coordinators' vigilance to prevent leakage
- The importance of promoting proper use of LLINs
- Frequently asked questions about LLINs that may help provide information to support proper use
- How to integrate or infuse topics on malaria control and prevention in school subjects
- Mobilisation for support from PTA/SMC of beneficiary pupils

Please write the objectives and questions to be addressed on a flip chart. Ensure the session addresses them.

IEC/BCC activities

Daily school assembly as well as Wednesday morning worship will provide a good platform to talk about key issues related to net use and should be linked to the IEC/BCC materials that will be distributed and displayed on school compound. School lessons can be tailored to emphasis malaria issues (e.g. Class six: Integrated science syllabus – topic on the Life cycle of the mosquito etc) to reinforce messages and effect behaviour change.

School Health Club members could discuss malaria control and prevention.

At PTA/SMC meetings, issues on malaria control could be discussed and it should be recorded in the minutes book for ease of reference.

Regarding leakage, stress that:

This school distribution is to support the earlier LLIN campaign and will result in protecting the entire community from malaria only if the LLINs actually reach the people they are intended for, are not sold, and are used by the pupils (and their family members where necessary) who receive them.

Two things are important for this:

- 1) LLINs are not stolen or diverted at any level.

Discuss where possible leakage points might be (transport level, storage level, distribution level, etc.) and how school authorities and others can help to prevent this or identify if it does happen. Adding additional pupils who do not fall into the beneficiary classes is also considered as stealing and will not be tolerated.

- 2) Recipients of the LLINs actually sleep under the LLINs every night.

Discuss the issue of families selling LLINs given to pupils and methods of preventing this. Discuss the importance of correct use of the net for maximum protection against malaria. Emphasis the point that merely having the net in the household does not prevent malaria. It must be hung over the sleeping place and children made to sleep underneath every night.

Key messages for LLIN beneficiaries¹

It is important that the same messages are delivered through multiple channels, this provides reinforcement of the messages in different ways the beneficiaries can relate to: seeing, hearing, doing, repeating the cycle. For example, seeing a poster about how to hang an LLIN properly, hearing a radio spot that talks about the benefits and importance of sleeping under an LLIN, especially among beneficiaries, in an LLIN hanging demonstration. Over and over—the messages echo through word of mouth, throughout the school/ communities, and the cycle repeats itself.

Facts about Malaria:

1. Mosquitoes transmit malaria
2. The malaria-carrying female *Anopheles* mosquito usually bites at night and is the only one that can transmit malaria.
3. Malaria is serious, and it can be fatal
4. Children under 5 and pregnant women are most vulnerable
5. Malaria transmission occurs all year-round
6. You can prevent malaria in your home
7. There is an effective treatment for malaria
8. LLINs are an effective means of malaria prevention and control
9. LLINs are safe for the general population, including children under 5 years and pregnant women
10. LLINs must be used every night

Actions:

1. Acquire an LLIN
2. Sleep under an LLIN every night

Benefits of LLINs:

1. LLINs protect all populations at risk from malaria.
2. LLINs protect the pregnant woman and her unborn baby from malaria
3. LLINs protect the pregnant woman from anemia
4. The child will not be born small or sickly, since the mother's use of an LLIN helps prevent her and her child from contracting malaria
5. It will ensure that the pregnancy goes to full term
6. LLIN prevents school absenteeism due to malaria

¹ Adapted from PMI Communication and Social Mobilization Guidelines and NMCP/NetWorks Ghana materials developed

Below are some frequently asked questions that may be asked by parents of beneficiaries during sensitization meeting before distribution. Ask participant to answer these questions and then go to the right answer with them. Use the information below to discuss the importance of LLINs, their usefulness and to address issues to promote proper use so that everyone involved in supporting the distribution is prepared for any questions. For the sensitization session, this content should be summarized and orientated around key messages – see the Take Home Messages for guidance.

Why is malaria prevention important?

- In Ghana, malaria kills more children than any other disease; most children who die of convulsions and anaemia (lack of blood) have actually died of malaria.
- The commonest cause of convulsions and loss of consciousness among children is malaria and not bad spirits or witchcraft, as some people believe.
- Malaria is a leading cause of abortions and stillbirths in pregnant women.
- Families lose a lot of money not only on treatment of the sick but also on transport to health facilities. They also lose a lot of time meant for gainful work.
- Pregnant women and children under five years are most vulnerable (malaria is most dangerous in these groups of people and often result in death). Even when a pregnant woman feels healthy, malaria infection in the placenta can harm the development of the baby.
- Repeated malaria infections can harm the growth and development of children.
- Malaria causes children to miss days at school.

How does the LLIN work?

- The LLIN works as a physical barrier to some extent, but that is not all it does. Because it has insecticide, it gives double the protection than an ordinary net with no insecticide. The insecticide on the net repels the malaria mosquitoes or kills them when they land on the net while trying to bite the person sleeping inside.
- Since the malaria transmitting mosquitoes bite at night, the net is very useful at protecting people who are usually asleep at this time (underneath the LLIN).

What types of nets are distributed?

- The types of nets going out in this school distribution exercise are Long Lasting Insecticidal Nets (LLINs).
- The insecticide in these nets lasts for the lifetime of the net (usually 3 years or 20 washes, whichever comes first) so they do not need to be retreated.

Why can I still see mosquitoes around my LLIN?

- A common complaint is that people still see mosquitoes, even when they are using a net treated with insecticide. It is very important to understand that even if you see mosquitoes you are still being protected from malaria.
- Even if you still see mosquitoes in the house and you even see some resting on the net and not being killed, you may be seeing a type of mosquito called *Culex* mosquitoes that DO NOT carry or transmit the malaria parasite. The insecticide will still be keeping away and killing the *Anopheles* mosquitoes that do carry malaria.

How do I hang the LLIN?

- For rectangular nets, use the four loops on the net to tie the net up. You can hang it in many different ways, whatever works well for your sleeping place. You might use sticks attached to the bed at each corner and hang the net from these. Or, you might hang it from the wall or ceiling – you could hang it from nails sunk in the walls, on strings or poles that you can run across your room. Or you might find another solution for hanging it that works better for your space.
- For conical nets, hang the net to the roof directly above the centre of the bed.
- Lower it to cover the users every night and tuck the edges of net under the mattress or sleeping mat so no mosquitoes can sneak in.
- Lifting up the net in the daytime can help prevent it from being ripped and/or torn (if a net is accidentally torn, it can easily be repaired by sewing up the hole – and the net will work effectively, just as before).

Who should sleep under this net?

- Ideally, everyone in the family should sleep under an LLIN every night. More than one person can share the net. If for some reason there are not enough nets in the house to cover everyone, then you should at least make sure that the beneficiary and younger sibling sleep under a treated net, every night.

When should the LLINs be used?

- The LLIN should be slept under every night, all year round.
- There are times when you might see fewer mosquitoes around but they never disappear completely so it is important to still use the nets even at these times. It only takes one female Anopheles mosquito to catch malaria!

Are young children safe under an LLIN?

- Yes. Young children are very safe under a treated net. The amount of insecticide used to treat a net is so little that it cannot harm people sleeping under the net, including babies.

Are pregnant woman and unborn babies safe under a LLIN?

- Yes. The insecticide is not at all dangerous for pregnant women or to the unborn babies.
- In fact, they will be extra safe under the net. The net will protect the mother throughout the pregnancy from getting a malaria infection that could hide in the placenta and stop the baby from growing properly or even cause a miscarriage.
- It is important that a pregnant woman sleeps under the net throughout the pregnancy and does not save the net until the baby is born.

What about the side-effects people get from new unopened LLINs?

- Side effects from LLINs are rare and not serious. They will only last for a short while if they do occur.
- This effect may be (sneezing, sore eyes, itching skin, and burning sensation) and may come from freshly opened net packages. New nets should therefore be aired for a day or two to avoid these side effects. These nets are LLINs and so do not need retreating.
- To be sure to avoid any side effects, the new nets that are handed out **should be aired for a day before use**; this will allow any excess build-up of insecticide to disperse. It should be stressed that this is only for one or two days after which the LLIN should be hung over the sleeping place and used.

How should I care for my LLIN?

- The net fabric can get dirty, tear or burn like any cloth. Avoid closeness to open fires such as candles.
- If you would like to wash it when it gets dirty then do so. Do not use strong detergents or bleach, as this will cause some of the insecticide to come off.
- The insecticide in the LLIN only lasts for 20 washes.
- Dry the nets in the shade (out of direct sun-light) after washing.
- If holes appear in the net due to wear and tear, just sew the holes up, as you would do for any other fabric. This will ensure that the net lasts up to the intended lifetime.

Aren't LLINs a fire risk?

- LLINs give no more risk of fire than any other cloth hanging in your house.
- The chemical does not make the net any more flammable than any other fabric.
- In fact, the nets are treated so that if they do catch fire the flames quickly die out.
- Of course, it is important to be careful with open flames near the nets - just as you would with open flames near any other things hanging in your house. Keep the hanging net well away from open flames.

Are there any other benefits of the LLINs apart from protection against malaria?

- Yes, insecticide treated nets can sometimes kill other domestic pests (fleas, lice, bedbugs, cockroaches) that come in contact with the net.
- Yellow fever is also another serious disease that is transmitted by mosquitoes. LLINs can therefore help protect you from other mosquito-borne illnesses.

Explain that all this information can be used before and after the distribution by Head-teachers/ School based Health Coordinator and all implementing staff to spread the message about the importance and usefulness of the LLINs.

3. Take-home messages

What to do to ensure LLINs are taken up and used by the targeted group?

- Every pupil in classes 2 and 6 will receive 1 LLIN.
- Ensure that pupils whose name appear in the targeted classes register are those who will benefit from the LLIN school distribution
- School authorities should not take money from pupils or parents during the school distribution
- Hold Parent – Teacher meetings to discuss benefits of LLINs:
 - Correct use of LLINs all year round reduces frequency of malaria illness in the household.
 - As a result, expenditure on malaria treatment and travel to seek treatment, and general workdays lost is reduced.
 - The above savings can be put to better use such as used for family development resulting in better living standards.
 - Children can attend school regularly and not miss lessons
- The importance of being responsible with the LLINs and not selling them on.
- If additional pupils who are not in the targeted classes or do not exist are included in the distribution this will be considered stealing and will not be tolerated.

UNIT 4: Organizing and Managing the School Based LLIN Distribution Activities

(Applicable to District Training of Trainer)

1. Learning objectives:

By the end of the session, participants will be able to:

- Describe the School Based LLIN Distribution process and the stepwise implementation of planned activities.

2. Questions addressed are:

- How will the trainings be conducted?
- Roles and Responsibilities for distribution of LLINs
- How, when, and where will the School Based distribution exercises take place?
- What other IEC/BCC activities (information, education, communication/behaviour change communication) are planned?

Please write the objectives and questions to be addressed on a flip chart. Ensure the session addresses them.

For transparency, the following information should be discussed up to the community level.

Inform the participants that the School Based distribution is one of the channels of continuous distribution of LLINs. Many activities, including procurement and transportation of the LLINs, have been done and the nets are already in the country.

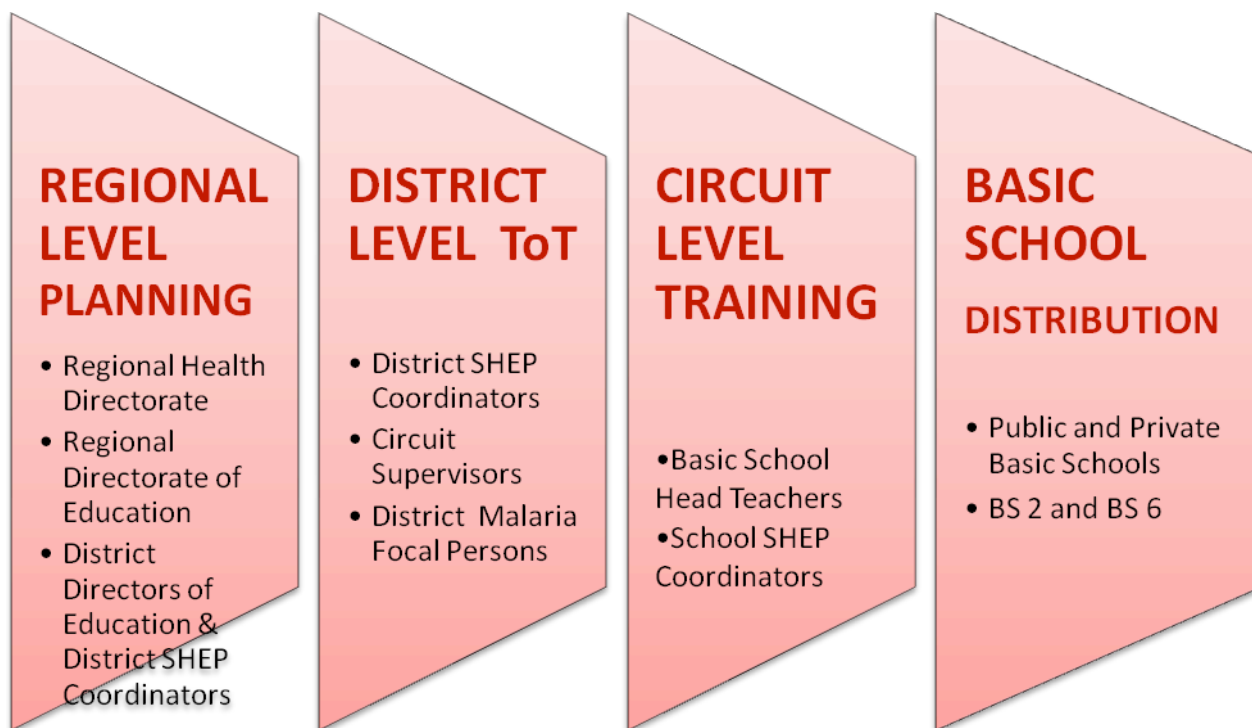
How will the trainings be conducted?

A team of National facilitators will conduct the district Level Training of Trainers meeting to train the District SHEP Coordinators and Circuit Supervisors on the implementation of the school based distribution.

At Circuit Level, the Circuit supervisors (CS) will train school head-teachers and or school SHEP coordinators in their districts in a 2-3 hour orientation session, covering logistics and record keeping for school based LLIN distribution, the malaria educational session that the head teacher and school SHEP will give to each class, and reporting forms

The Primary School Based LLIN distribution will be done as follows:

1. Regional Level Planning Meeting
2. Training of trainers at district level
3. Allocation process
4. Micro-planning and pre-positioning of LLINs for distribution
5. Orientation of Primary School head teachers and or school SHEP coordinators
6. Pre-distribution social mobilization and communication
7. Primary School distribution activity including recording and reporting



How were the beneficiary regions chosen?

LLINs are a major intervention in the Ghana Health Services strategy. Consultative meetings involving the GHS, GES/SHEP, NMCP, and implementing partners have been held and a national roll out plan has been agreed upon.

When will the School Based LLIN distribution take place?

- Specific dates will be set for the School Based LLIN distribution exercise. The dates will be determined and communicated to Regional Education Service directorate and subsequently primary schools. This will help mobilize schools to participate in the School Based LLIN distribution.

How is the School Based LLIN distribution exercise organized?

- Class 2 and Class 6 teachers will distribute LLIN allocated to the class based on the number of pupils on the class roll. School head teachers will monitor the school distribution and the circuit supervisor will supervise the distribution. The distribution will be supported by health education on control and prevention of malaria

Roles and Responsibilities for distribution of LLINs

SCHOOL LEVEL	
Headmaster/ Class Teacher/ School based Health Coordinator	<ul style="list-style-type: none"> • Distribution of nets to school children with guidelines on how to wash and air the LLIN • Education of pupils on malaria transmission and the prevention of malaria • Registration of recipients and collection of other data
CIRCUIT LEVEL	
Circuit Supervisor	<ul style="list-style-type: none"> • Distribute individual school's allocations to head teachers at the circuit level • Supervise net distribution to school children • Support the training of headmaster, class teachers and school-based Health coordinators on malaria transmission and prevention • Review, collate and approve registration data for submission to district
DISTRICT LEVEL	
District Storekeeper, GES	<ul style="list-style-type: none"> • In charge of storage and security of net stocks at district level • Issues stock to circuit supervisors
District SHEP Coordinator	<ul style="list-style-type: none"> • Reports to regional level on net stocks received at district level • Receives and review school distribution data and forwards to Regional SHEP Coordinator • Trainer of Circuit Supervisors at district level • Monitor and supervise distribution in district
District Director of Education & District Disease Control Officer	<ul style="list-style-type: none"> • Custodian of nets for district • Endorses net stock received at district level • Reviews and endorse school distribution data before forwarding to Regional SHEP Coordinator • Monitor and supervise distribution in district

REGIONAL LEVEL	
Regional Education Service Supply Officer	<ul style="list-style-type: none"> Review reports from districts on net stocks received and forward to Regional SHEP Coordinator
Regional Chairman of Association of Private Schools	<ul style="list-style-type: none"> Coordinate and supervise net distribution activities in private schools in region Member of regional CD steering committee
Regional SHEP Coordinator	<ul style="list-style-type: none"> Prepare regional enrolment data and net stocks needed for distribution Review and endorse district allocations received Monitor and supervise net distribution in region Trainer of District SHEP Coordinators Coordinate all school distribution activities at regional level Review and endorse school distribution data before forwarding to National SHEP Coordinator Member of regional CD steering committee
Regional Director of Education Service/ Deputy regional Director of Education Service	<ul style="list-style-type: none"> Custodian of nets at regional level Review and approve regional enrolment data and net stocks needed for distribution Review and endorse district allocations received Monitor and supervise net distribution in region Review and endorse school distribution data before forwarding to National level

NATIONAL LEVEL	
National SHEP Coordinator, Director Supplies and Logistics, Director Inspectorate and Secondary Education	<ul style="list-style-type: none"> • Coordinate school net distribution activities at national level • Monitor and supervise school net distribution implementation nationwide • Review and approve school enrolment data for net stocks to be distributed to regions • Coordinate secondary school level net distribution with NMCP and commercial sector at national level • Coordinate the distribution of nets by commercial partners to secondary schools • Educate headmasters, teachers and students on malaria prevention and net use • Report to GES Management
NMCP	<ul style="list-style-type: none"> • Facilitate the link between GES, Secondary level institutions and commercial partners • Review and approve school enrolment data for net stocks to be distributed to regions
CMS	<ul style="list-style-type: none"> • Review requests for distribution of nets to individual districts for school distribution • Ensure supply of net stocks to individual districts
Director General, Ghana Education Service	<ul style="list-style-type: none"> • Communication of school-based net distribution strategy to all regions

What IEC/BCC activities are planned?

- The IEC/BCC (**information, education, communication/behaviour change communication**) proposed for the School Based LLIN distribution includes radio announcements, community van announcements, town criers (gong-gong), and LLIN leaflets. The school head teachers, school SHEP coordinators, and class teachers will be provided with integrated malaria job aides to guide their discussions with the beneficiaries. Radio spots and talk shows will take place to ensure people know about the distribution plans and to disseminate some of the key messages.
- Activities will focus on the key issues related to net use, and are linked to the IEC/BCC materials. To reinforce messages and effect behaviour change, non-governmental organizations (NGOs) and faith-based organizations (FBOs) will undertake social mobilization activities including durbars, mobile van messaging, and net hanging demonstrations

Take Home Messages

Communicate these in a participatory manner, posing questions to the audience etc.

- Local and religious leaders will participate in mobilizing and encouraging every household in their localities for cooperation in the efficient implementation of the School Based LLIN distribution exercise
- The net allocation will be based on the number of pupil on the class roll or class register
- Every class 2 and class 6 pupil will receive 1 LLIN

UNIT 5: Micro-planning

(Applicable to District Level Training of Trainers for district SHEP coordinators and circuit supervisors)

1. Learning objectives

At the end of this unit, district trainers/supervisors shall leave with:

- A detailed plan and timeline for the head teacher/school SHEP coordinator trainings
- A transportation plan for the LLINs, from the district to the schools. The transport plan will take into account the quantity of LLINs per school based on enrolment figures for target classes (P2 & P6)

ACTIVITY U9a: Circuit Level Training Planning

2. Activity U9a objectives

At the end of this activity, each district trainer/supervisor will be able to:

- Estimate the number of training sessions to be organized in each identified venue within each circuit
- Create/have a planning table for the trainings at all circuit level in their districts

How to plan for the circuit level trainings

Use the form below:

- Fill in the district and circuit name and number of schools in each circuit
- Estimate the required number of participants for each training session
- Training location: Identify the best location for the training taking into account the number of implementing staff and that one training session should have maximum 60 people (this will depend also on the budget allocated to each district).
- Include training dates when decided and identify the trainer for each training programme.

Table 7: Circuit level training planning template

Region:.....			District:.....			
District	Circuit	Total number of schools	Total number of training sessions	Training location	Training date	Trainers
A	A	400	7			
A	B	340	6			
A	C	320	5			
A	D	100	2			
A	E	220	4			
A	F	322	5			

ACTIVITY U9b: Pre-Position Sites (PPS)

(Applicable to District Training of Trainers)

3. Activity U9b objectives

At the end of this activity:

- Each district and circuit will be listed with their **primary schools**
- Each hard-to-reach community will be identified
- Available modes of transport will be identified
-

Points to consider:

- Terrain of the circuits
- Size, in terms of number of schools
- Ease of communication
- Presence of hard-to-reach communities
- Transport possibility

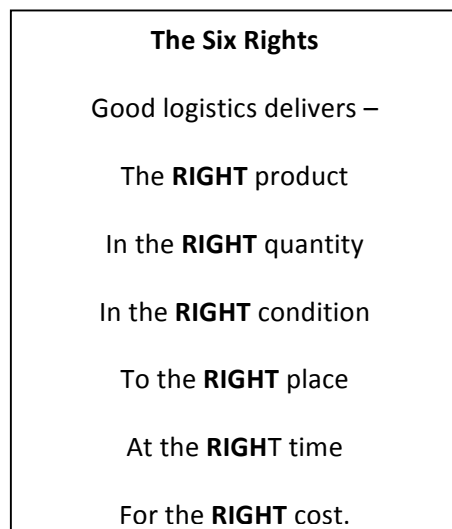
Region:.....		District/Circuit:.....				
District	Name of school	Location of prepositioning sites	Distance from the districts education office	Hard to reach areas (y/n)	Transport possibility / access	Name of recipient

UNIT 6: LOGISTICS

(Applicable to District Training of Trainers; Training of head teachers/School SHEP coordinators)

Purpose of the Logistics System:

The purpose of logistics management for the continuous LLIN distribution is to ensure the “six (6) rights” are achieved:

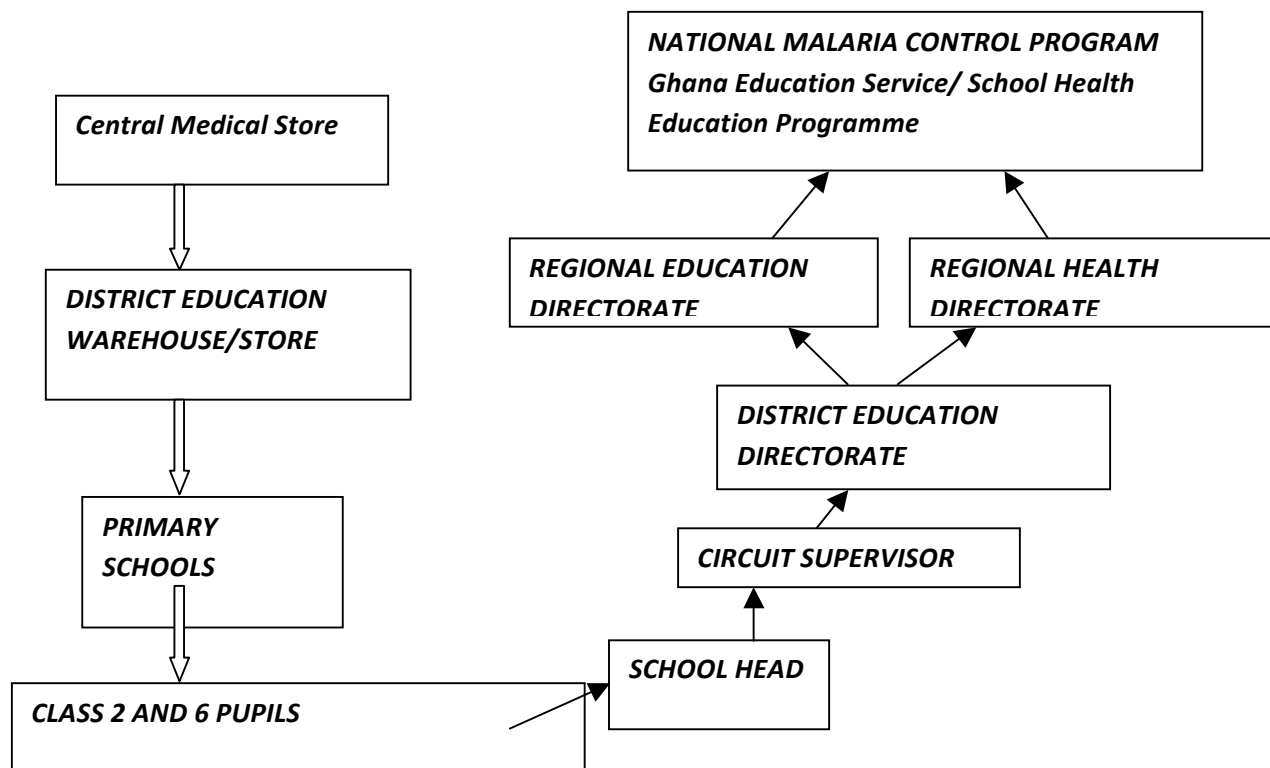


- **The Right Goods:** This implies that we are able to identify the type of products or commodities required for the continuous distribution to be successful. This will therefore include the LLINs and any associated tools for tracking, record keeping and reporting.
- **The Right Quantity:** This implies that having identified the right goods or products, we are able to estimate the right quantity of the products or goods. This will largely be based on the right data on schools population for the targeted classes.
- **The Right Condition:** The right products in the right quantity are maintained, stored appropriately and delivered in the right condition.
- **The Right Place:** The right quantities of the right products must be delivered to the right place to ensure to ensure a successful distribution exercise. The respective schools’ allocation will therefore have to be delivered according to the allocation to ensure the right quantities are delivered at the right places.
- **The Right Time:** All products needed for the distribution exercise must be allocated and distributed in a timely manner for the exercise to be completed successfully. This implies that LLINs must be available at the district stores at the right time to be able to distribute to the schools in time for distribution to the pupils when school reopens.
- **The Right Cost:** All the activities in the other “Rights” must be done in a cost effective manner to ensure effective use of resources.

For the logistics system for the distribution exercise to be effective, all the 6 rights must be achieved

Flow of LLINs and Information

This refers to how LLINs will be moved from the central level down to the level of schools where they are distributed to beneficiary class pupils. The flow of the LLINs will be as follows:



School population for the pupils in classes 2 and 6 will be collated and submitted through the circuit supervisor to the district education office. The totals for the district are collated and submitted to the regional directorates of education and health for onward submission to the NMCP. Reports of LLINs distributed will also be submitted through the same channels after the distribution exercise.

LLINs based on submitted district data will be transported from the Central Medical Store directly to the district education warehouse. Schools will then collect their allocation for district store to the schools for distribution to the targeted pupils in the various schools.

UNIT 7: Daily Monitoring and Record-Keeping

(Applicable to District Training of Trainers; Training of head teachers/School SHEP coordinators)

1. Learning objectives:

At the end of the session, participants will be able to:

- Fill the school, circuit and district forms
- Fill the circuit officers' form to monitor the campaign activities
- Appreciate the need for reliable data collection on the distribution exercise

2. Issues to be addressed

- Why supervision is important
- Why record keeping is important
- The different forms to be completed during the distribution process
- The process for submitting forms

Please write the objectives to be addressed on a flip chart. Ensure the session addresses them.

Why supervision?

Supervision is an important part in the implementation of the school based LLIN distribution and has been built into all stages. All supervisors should use the monitoring and supervision form (Form D) provided to monitor the school based LLIN distribution and to ensure quality at each stage. All data recorded should be handed to the district SHEP coordinator, who will give the data to the district director of Education, and finally the region that must maintain an overall the school based LLIN distribution record.

Supervision of the school distributions is carried out by the CS (at each school in their circuit). District Director of Education and District Disease Control Officer will also conduct supervision visits during the distribution period, as will the Regional Director of Education and Regional Malaria Focal Person

How to fill Form D

The **checklist** is for monitoring the quality of services provided during the distribution of the nets at the various stages of the process.

Form D: Monitoring during campaign (to be filled by district SHEP coordinators and circuit supervisors). *One form should be filled for each circuit/school.*

With the supervisors, go through each form and see if the required information is understood.

Why record-keeping?

Knowing when and where nets were given out helps plan for net replacements at a later date. In order to know exactly how many nets have been given out, good record keeping is vital. This is also important so that it is possible to keep track of the number of nets at different points in the distribution process, as these are valuable items and need to be accounted for.

Records and Reporting

Primary School Level

- Classroom teacher records the names of the children receiving LLINs in the class reporting form, including the tallies of nets received and nets distributed and forward to the head teacher. The Head teacher and the School based Health Coordinator sign off on the form for each class and the form is sent to the Circuit Supervisor for compilation at Circuit level.

Circuit Level

- The Circuit Supervisor compiles the schools' class reports and sends to District SHEP, cc'ing District Disease Control Coordinator

District Level

- The District SHEP coordinator compiles the Circuit reports and the District Director of Education signs off and sends to the Regional Education office, copying the Regional Disease Control Officer, and with the DHMT.

Regional Level

- The Regional SHEP coordinator compiles the District LLIN reports and shares them with the Regional Health directorate through the Regional Malaria focal person
- The Regional SHEP coordinator also shares the districts' reports' with the GES National and the NMCP LLIN

National Level

The NMCP LLIN focal point compiles and shares the regional reports with the national stakeholders.

Table 6: Type of forms used in this campaign

Form	Filled by	Filled when	Collection
Form A: Class teacher LLIN distribution record form	Class teacher (P2&P6)	Filled during the distribution period in accordance with class enrolment/register	Collected by the circuit supervisor. A copy of this form is kept at the school
Form B: Circuit summary form	Circuit Supervisors	Compiled after distribution is completed and signed by class and head teacher	Submitted to the district SHEP coordinator who will send it to the district after checking for accuracy
Form C: District summary form	District	Completed at district level after distribution and submission of summary forms by circuit supervisors	Used during district report writing and submitted to Region
Form D: Supervision Form	Circuit supervisors	Filled during distribution at schools	Used during report writing

Note: All forms should be returned to the central level, not just the district summaries.

PRIMARY SCHOOL LLIN DISTRIBUTION

FORM A

To be completed by **class teacher** during the distribution campaign.

(A copy of this form should be kept at the school and another submitted to the circuit supervisor)

Name of school:		Public:		Class:	
Circuit:		Private:		District:	
Period of distribution (Date): From:		To:			
Name of pupil as written in class register		Sex (tick)		Received (tick)	
		Boy	Girl	Yes	No
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
Total					

Summary

Number of pupils on roll	
LLINs received for class	
Number of pupils supplied with LLINs	

I hereby certify that the above information is correct

Name of class teacher..... Signature:..... Contact tel.....

Name of Head teacher Signature:..... Contact tel.....

NB: IF CLASS ENROLMENT IS MORE THAN SPACES PROVIDED PLEASE CONTINUE ON ANOTHER FORM A

PRIMARY SCHOOL LLIN DISTRIBUTION

FORM B

To be completed by **circuit supervisor** after the distribution campaign.

(A copy of this form should be kept at the circuit and another submitted to the D/SHEP)

		Region:				District:				
		Circuit:				Date:				
Name of School		Indicate PB=Public PV=Private	LLINs Received	No. on Roll		LLINs distributed to				Total LLINs distrib uted
				P2	P6	P2 (Boys)	P2 (Girls)	P6 (Boys)	P6 (Girls)	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
Total										

Summary

Number of LLINs received for circuit campaign	
Number of pupils supplied with LLINs	
Number of LLINs Remaining in the Circuit	

I hereby certify that the above information is correct

Name of circuit supervisor..... Signature:.....Contact tel:.....

Name of D-SHEP Coordinator..... Signature:.....Contact tel:.....

PRIMARY SCHOOL LLIN DISTRIBUTION

FORM C

To be completed by **District SHEP Coordinator** after the distribution campaign

(A copy of this form should be kept at district and another submitted to the Reg. SHEP Coordinator.)

		Region:				District:					
Name of Circuit		Total Number of Schools PB PV		LLINs Received	No. on Roll		LLINs distributed to				Total LLINs distrib uted
					P2	P6	P2 (Boys)	P2 (Girls)	P6 (Boys)	P6 (Girls)	
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
Total											

Summary

Number of LLINs Received by Circuits in District	
Number of LLINs Remained in Circuits in District	

I hereby certify that the above information is correct

Name of District SHEP coordinator..... Signature:..... Tel:.....

Name of District Director of Education..... Signature:..... Tel:.....

PRIMARY SCHOOL LLIN DISTRIBUTION

FORM D

To be completed by **Regional SHEP Coordinator** after the distribution campaign

(A copy of this form should be kept at Region and another submitted to the National SHEP Coordinator)

		Region:					District:				
Name of District		Total Number of Schools PB PV		LLINs Received	No. on Roll		LLINs distributed to				Total LLINs distrib uted
					P2	P6	P2 (Boys)	P2 (Girls)	P6 (Boys)	P6 (Girls)	
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
Total											

Summary

Number of LLINs Received by Circuits in District	
Number of LLINs Remained in Circuits in District	

I hereby certify that the above information is correct

Name of R-SHEP coordinator..... Signature:..... Tel:.....

Name of Regional Director of Education..... Signature:..... Tel:.....

MONITORING PRIMARY SCHOOL LLIN DISTRIBUTION

To be completed by circuit supervisor during distribution campaign.

(Circuit supervisor to complete this form for at least 10 schools during distribution and submit findings to District SHEP coordinator before the end of the distribution)

Circuit:	District:
Region:	Date:

Name of School	School received required number of LLINs		All eligible pupils received their LLINs		All pupils received messages/materials on proper LLINs Usage	
	Yes	No	Yes	No	Yes	No
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Summary

Number of Schools without adequate LLINs for the campaign	
Number of pupils eligible but did not receive LLINs	
Number of classes that did not receive LLINs messages	

I hereby certify that the above information is correct

Name of Circuit Supervisor.....Signature Contact Tel