



MPs, Join NMCP and COMMIT Project in the Fight against Malaria

In August 2008, the National Malaria Control Programme held a malaria advocacy meeting with Tanzania's Members of Parliament (MPs) from Social Services, HIV/AIDS, and Health committees in Dodoma. The meeting was coordinated by the Communication and Malaria Initiative in Tanzania (COMMIT) Project and it particularly focused on raising the profile of malaria through increasing MPs involvement in the fight against the number one killer disease in the country. The meeting was attended by more than 60 MPs from the three committees and it was chaired by Hon Jenista Mhagama, the overall chairperson for the three committees.

This meeting was also used as a platform for MPs and other stakeholders to share diverse reflections on the disease, indicating local area experiences as well as suggesting specific solutions for their respective constituencies. In his opening speech the Guest of Honor, the Minister for Health and Social Welfare, Prof. David Mwakyausa stressed on the need and importance for MPs to be in the front line in the fight against malaria. Prof. Mwakyausa also urged MPs to take a personal initiative and increase their involvement with partners in the efforts to combat malaria. *(continues on page 4)*

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Mpanda District Launches the Under Five Catch-up Pilot Campaign

The long awaited Under 5 Catch-up Campaign (U5CC) has been launched. The pilot campaign was launched by the Tanzanian Prime Minister, Honourable Mizengo Pinda in Mpanda District, Rukwa Region on 20th September 2008 at the Kashaulili football field. The launch was attended by both the Central and Local Government officials, as well as residents of Mpanda District.

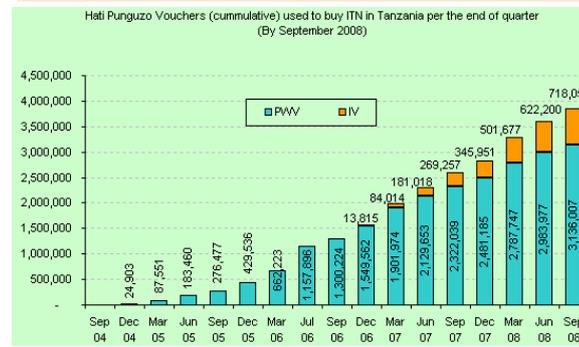
The main activities undertaken during the campaign included free distribution of Long Lasting Insecticide Nets (LLINs) to all under five children and re-treatment of the existing net crops for all community members.

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The Tanzanian Prime Minister, Hon. Mizengo Pinda issuing the first LLIN to a beneficiary during the launch of the Pilot Campaign in Mpanda District

TNVS Completes its Fourth Year of Implementation with a 3.8M Voucher Redemption Mark



As the Tanzania National Voucher Scheme (TNVS) completes its fourth year of implementation; the number of Insecticide Treated Nets (ITNs) issued through the scheme has reached 3,854,064; thus protecting more than 3.8 million women and infants from malaria.

Since its inception, TNVS has contributed towards the reduction of malaria morbidity and mortality among the two most affected groups (pregnant women and infants) through the use of ITNs.

Over the past four years the scheme has stimulated growth in the bed-net distribution network which has greatly increased access to ITNs. Through its social marketing programme the scheme has largely facilitated dissemination of knowledge and raised awareness about malaria, hence creating demand for use of bed-nets among communities.

While entering its fifth year of implementation, the successes of the TNVS can be told through many memorable achievements, most of which reflect its prime objective, "saving lives".

The TNVS is a Public-Private Partnership initiative with the primary objective of enabling pregnant women and infants to access ITNs at a highly subsidised price for protection against malaria. The scheme began its operations in the country in October 2004.



Tanzania National Voucher Scheme



United Republic of Tanzania



National Malaria Control Programme

Editor's Note

As we bring you the ninth issue of *NATnets news*, we celebrate four years of TNVS activities in Tanzania. This achievement comes along with a significant growth of the ITN retail market as indicated by the 2007/08 retail audit report by the Ifakara Health Institute.

In addition to the achievements, we explore the TNVS interventions for malaria prevention that have been initiated to increase accessibility, affordability and coverage of ITNs among the groups most vulnerable to malaria. Here we link the interventions and see how they complement each other towards elimination of malaria as detailed in the Malaria Mid Term Strategic Plan 2008 - 2013.

As Tanzania begins to implement the Catch up Campaign, we are delighted to share with you the successful launch of the pilot campaign in Mpanda District which was presided over by the Prime Minister of the United Republic of Tanzania, Hon. Mizengo Pinda. This month we also look at the efforts of the TNVS through COMMIT and other stakeholders in raising the profile of malaria by increasing the involvement of Members of Parliament (MPs) in the fight against the number one killer disease in the country. Here we see how the MPs from the Social Services, HIV/AIDS, and Health committees join the National Malaria Control Program in strategizing ways of combating malaria in their constituencies.

We also bring you a special feature on behaviour change communication activities of the Communication and Malaria Initiative in Tanzania (COMMIT) Project in addressing cultural barriers which inhibit the use of ITNs/LLINs in communities.

We would like to thank all our readers and partners for constructive comments and contributions to the newsletter. Special thanks go to Population Services International (PSI Tanzania) for sponsoring this edition.

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Mpanda District Launches the Under Five Catch-up Pilot Campaign

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The target of the U5CC is to boost bed net ownership and coverage rates for children under five from the current level of 30% up to 80% or higher. Impressively, more than 113,651 LLINs and more than 60,000 insecticide retreatment kits were distributed to residents of Mpanda during the campaign.

During the launch, the Prime Minister shared with campaign participants the alarming statistics of malaria related deaths and efforts that are being taken by the government and partners to fight malaria. While noting the effectiveness of LLINs in preventing malaria, Hon. Pinda urged Tanzanians to take this campaign as a one-off opportunity to reduce and prevent malaria occurrences especially in children under five years.

The lessons learnt, best practices as well as challenges of this pilot campaign will be used to guide planning and implementation of the campaign in other regions. After the launch of the Catch up Campaign in Mpanda the free LLIN distribution exercise will be rolled out to other districts in Rukwa Region and will continue in all regions of Tanzania mainland from November 2008.

The key partners for the campaign include the National Malaria Control Program, which provides overall program management, Mennonite Economic Development Associates (MEDA), responsible for the distribution and issuing of LLINs, World Vision Tanzania, which is in charge of training U5CC stakeholders, and Population Services International (PSI), which is responsible for Behaviour Change Communication.

TNVS Influences Growth in ITN Retail Markets

The implementation of TNVS phase I and II has supported a rapid expansion of ITN use by both pregnant women and infants in the country. In addition, the scheme has encouraged private sector involvement in the manufacture of ITNs and their delivery to various communities through retail outlets.

The third round of the retail census which is part of Monitoring and Evaluation (M&E) of the TNVS indicates that the number of surveyed outlets has increased from 2,282 in round 1 (2005), to 2,364 in round 2 (2006/7) and has now reached 3,337 in its third round in 2008. This demonstrates an increase of about 973 retail outlets in between 2007 and 2008.

The majority of the surveyed outlets in this third round were general shops (83.7%) followed by drug shops (10.6%) and kiosks (4.7%) and each of the remaining sources (such as supermarkets and other small scale retailers) accounted for less than one percent. Survey findings shows that, general shops are the most likely type of outlet to stock nets and accept vouchers. Thus the proportion of general shops stocking ITNs has

increased across time from 19% in the first round to 23% in the second round and to 32% in the current round.

The growth trend in the retail market for ITNs has been linked to the Public Private Partnership mode of implementation, whereby in each Ward there is at least one antenatal clinic providing discount vouchers to pregnant women and infants. As a result there is demand and presence of at least one retail outlet in that ward stocking ITNs and accepting vouchers. This has largely stimulated the growth of the retail markets for ITNs whereby, over one third of outlets stocking ITNs had come into the market within the last 1-3 years.

The 2007/8 retail audit was conducted by the Ifakara Health Research and Development Centre now known as Ifakara Health Institute. The main objective of the survey was to examine the changes in the retail market for ITNs that occurred across the 2005, 2006/7 and 2007/8 surveys so as to determine the extent to which the TNVS has influenced ITN availability and stimulated the growth of retail markets for ITNs.

Over one third of outlets stocking ITNs had come into the market within the last 1-3 years.

Between 2007 and 2008, the number of retail outlets has increased from 2,364 to 3,337.

Linking the TNVS Interventions for Malaria Prevention

The Tanzania National Voucher Scheme (TNVS) is an initiative of Ministry of Health and Social Welfare and its Partners, committed to the goal of reducing malaria related morbidity and mortality by at least 80% by year 2013. The objective of TNVS is to protect the groups most vulnerable to malaria (pregnant women and under-five children) by increasing their access to insecticide treated bed nets (ITNs) at a highly subsidised price.

This is done using a set of interventions which include the Pregnant Woman Voucher, Infant Voucher, Under-five Catch-up Campaign and the Keep-up Strategy which cuts across all the initiatives. These initiatives primarily focus on increasing access, affordability and use of ITNs among the groups most vulnerable to malaria. These interventions interlink and therefore complement each other towards realization of the overall objective of TNVS. Thus, in this section, we profile the initiatives by highlighting their individual objectives and linkages in addressing the issues of accessibility, affordability and coverage ITN use among the groups most vulnerable to malaria.

The Pregnant Woman and Infant Vouchers

In October 2004 the TNVS officially launched the Pregnant Woman Voucher (PWV), commonly known by its Kiswahili translation as *Hati Punguzo ya Wajawazito*. The objective of the initiative is to protect pregnant women and their infants from malaria by increasing their access to ITNs at a subsidized price. Under this scheme every pregnant woman is eligible to receive a voucher at her first antenatal care visit. The voucher is valued at TSH 3,250 which can be used by women as part-payment for an ITN from any retailer who is participating in the scheme.

The PWV was assumed to directly cover the pregnant woman and indirectly cover the infant. However, different studies indicated that most women do not sleep with their children especially after one year, thus these children still remained vulnerable due to exposure to malaria transmitting mosquitoes.

Due to this reason a second voucher was introduced in response to the alarming heavy burden of malaria among infants. Thus the Infant Voucher (IV) initiative began in 2006 as a complementary intervention.

The main objective of the initiative is to protect infants from malaria by directly increasing their access to ITNs. Through this scheme, every child aged 9 months is eligible to receive a voucher for purchase of an ITN upon their measles vaccination.

Since its inception, the scheme has managed to protect more than 770,000 infants from malaria but has also left those children who are older than 1 year more vulnerable to the disease. Thus the Under 5 Catch up Campaign was introduced so bridge the gap and cater for a larger age group.

The Under Five Catch up Campaign

In Tanzania, malaria accounts for 43% of all under 5 outpatient attendances, 35% of under 5 hospital admissions and 37% of under 5 deaths. In its efforts to cut malaria deaths and ensure that large margins of the vulnerable groups are protected, the NMCP in collaboration with stakeholders introduced the Under 5 Catch up Campaign (U5CC) in 2008. This campaign is an expansion to the existing voucher subsidies i.e. the Pregnant Woman and Infant Vouchers (IV), and it aims to cover those children who are not eligible for the IV to be able to receive Long Lasting Insecticide-treated Nets (LLINs).

The Catch-Up Campaign is a one-time effort by the Tanzanian government to distribute more than seven million free LLINs to all children under the age of five in mainland Tanzania. The goal of this campaign is to rapidly increase bed net ownership and coverage rates for this key vulnerable group (i.e. all children under five years) from the current level of 30% up to 80% or higher.

The U5CC supports the current voucher scheme by covering those children that are not qualified for the Infant Voucher. The campaign also introduces for the first time in Tanzania the Long Lasting Insecticide-treated Nets which can last up to five without being re-treated thus protecting the target groups for a longer time due to its extended protection



potential. The U5CC is combined with bed-net re-treatment exercise using insecticide with a binder (*NGAO iliyoboreshwa*). This exercise aims at extending protection to the whole community by increasing the ability of the existing nets to repel mosquitoes through re-treatment.

The Catch up Campaign was officially piloted in Mpanda District in September/October 2008 and is now in the process of being rolled over throughout the country over the course of 9 months starting from November 2008. Together with this campaign it is anticipated that from early 2009 the voucher scheme will change and address issues of affordability through the Keep up Strategy, whereby target groups will benefit from a new voucher that will purchase LLINs at a fixed top up price of only TSH 500/-.

The Keep up Strategy

This strategy focuses on promoting the constant use of LLINs through the voucher system. The strategy aims at addressing the challenge of unaffordable top-up prices which has been indicated as a major barrier to accessing insecticide treated nets. This strategy will upgrade the Pregnant Woman and Infant Voucher schemes, by reducing the top-up price for purchasing LLINs to a fixed amount of only TSH 500/- throughout the country. Voucher distribution to the eligible groups will be conducted using the same system through RCH clinics.

This strategy will be implemented in early 2009 and will continue for the next two years. The system will allow pregnant women and infants to access Long Lasting Insecticide Nets at a very affordable price for protection against malaria.

All of these schemes and the campaign are planned and implemented by the Ministry of Health and Social Welfare through the National Malaria Control Programme in collaboration with district health offices and partners. The schemes are collectively funded by the Global Fund to Fight HIV/AIDS, Tuberculosis, and Malaria, the World Bank, and US President's Malaria Initiative.

Through the Keep up Strategy LLINs will be available at a top up price of only 500TSH country wide

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Also in support of the meeting agenda, Dr. Renata Mandike of NMCP gave an insightful presentation on the NMCP Strategic Plan 2008-2013, highlighting the new developments, upcoming events, and most importantly the importance for NMCP and malaria partners to increase collaboration with MPs. Commenting on the strategy as well as collaboration, Hon. Prof. Idris Mtulia stressed the need for mainstreaming malaria control efforts within broader poverty alleviation efforts as he argued that "... if we are to alleviate poverty and don't control malaria, we won't get very far in reaching our poverty alleviation and development goals, as

the disease is largely contributing to mortality rates, reducing Man power and affecting the general quality of life for Tanzanians. Also speaking on behalf of the MPs' network against malaria when closing the meeting, Hon. Paul Kimiti urged partners and MPs to find ways in which they can collaborate more closely and ensure that the lives of children and other Tanzanians are saved.

The Communication and Malaria Initiative in Tanzania (COMMIT) is a malaria behavior change project led by Johns Hopkins University's Center for Communication Programs and funded by the US President's Malaria Initiative (PMI) through support from USAID.

Overcoming the Barriers to ITN Use

Over the past four years Tanzania has witnessed substantial investments in delivering malaria control intervention such as Insecticide Treated Nets (ITNs) to the communities. Although there have been outstanding achievements in accessibility, affordability and coverage of ITNs, there are still barriers and challenges in using ITNs/LLINs. These barriers are manifested in varied issues from color and shape preferences, to cultural and religious beliefs, perceptions and practices, whereby bed nets have often been compared to burial cloths or graves. While these preferences and perceptions may not pose such a big threat, they largely influence bed net use among households. This, to an extent, undermines the disease prevention efforts by leaving some of the target groups still exposed to the risk of getting malaria.

In addressing these barriers, the Communication and Malaria Initiative in Tanzania (COMMIT) is implementing culturally relevant Behavior Change Communication campaigns, which are being disseminated using interpersonal communication (IPC) channels so as to provide appropriate knowledge and promote the use of ITNs/LLINs in communities where cultural and religious perceptions affect the use. Community based IPC is mainly carried out by trained community change agents through activities such as discussion groups, one-on-one outreach, small group workshops, as well as individual, group or community dialogues. Through these medium, targeted messages which are designed to influence change of specific behaviors are discussed and several myths as well as perceptions are confronted by comparing them to facts and by communicating the economic and health benefits of using ITNs/LLINs.

The Communication and Malaria Initiative in Tanzania (COMMIT) is a malaria behavior change project with the objective of building the ongoing malaria control initiatives by ensuring that Tanzanian communities, households and individuals are equipped with relevant knowledge and skills about the malaria disease so that they can take advantage of the available life saving measures.

Mpanda DMO Shares the Campaign Successes



Dr. Yahaya Husein

Mpanda District has successfully piloted the Under 5 Catch up Campaign in September 2008. The three day exercise involved distribution of LLINs and re-treatment of old nets. Dr. Yahaya Husein the District's Medical Officer shares with NATnets news factors that led to the successful implementation of the campaign.

What were the major challenges?

Mpanda is the largest and most sparsely populated District, and it has poor infrastructure hence some areas were very hard to reach. As a result there are some wards where children were not registered on time. Also due to movement in pastoralist communities, some children missed either the registration or distribution process. Other Wards were affected by mild political issues, lack of information, and ignorance which contributed to under registration, hence receipt of smaller quantities of nets than the actual number of children.

What strategy has the District put in place to reach children who did not receive LLINs?

Extra nets remaining in the ongoing distribution in other districts in Rukwa region will be given to those children who missed the distribution in Mpanda. If this will not accommodate all eligible children who didn't receive nets, then their statistics will be taken and forwarded to the DMO for further coordination with the NMCP.

What are your comments on the campaign?

The campaign is an effective way to increase access and coverage of LLINs for protection against malaria transmitting mosquitoes. Also the collaboration has proven to be an effective way of implementing such a diverse activity as it increases efficiency and timely delivery of needed goods and services. I urge parents and caretakers to use this one time chance to obtain LLINs and get their old nets re-treated free of charge.

Considering that Mpanda is among the biggest districts in Tanzania; how did you prepare for the campaign?

We had 1 month of preparations whereby, the District Council with support from the NMCP and partners came up with an action plan which defined roles for each partner and guided the entire implementation. Throughout the pre-campaign period we monitored the activities to ensure that all key implementers were in line with their respective roles, and gaps which appeared were dealt with immediately at both the District and national levels.

Training on registration, re-treatment, distribution of nets, and reporting was provided to Regional and Council Health Management Teams, Ward and Village Executive Officers, and volunteers so as to facilitate smooth running during the campaign. Pre-registration was conducted for all children under 5 as well as nets that required re-treatment. This was accompanied by community mobilization and sensitization exercises.

Q&A

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