



Some important facts relating to the distribution of Insecticide Treated Nets (LLITNs/ITNs) in RC/RC operations.

Notes for Head of Delegations, Regional Relief and Health Co-ordinators and Delegates.

Background

Malaria is killing approximately one million people every year and affects 3.2 billion annually. It particularly affects pregnant women and children under 5 years of age who are at high risk of death. Since January 2005, the Federation has a written malaria policy (see FedNet), which should be helpful to Delegates. Malaria can be prevented by sleeping under an Insecticide Treated Net (ITN) or by sleeping under a Long Lasting Insecticide Treated Net (LLITN). The Federation recommends distribution of LLITNs which are effective for 3-5 years while regular ITNs require insecticide re-treatment every 6 months to give full protection and costs more in the long run. ITNs and LLITNs protect those sleeping under them as well as those sleeping in the same room.

The Federation is part of a global malaria network, with weekly conference calls which ensure that all information is shared and the Federation is an active partner in the Roll Back Malaria (RBM) Partnership. Likewise, National Societies are encouraged to be members of their own national malaria committees. Field personnel are asked to share info on malaria activities and to ask questions on malaria issues.

RBM Target population

- Children under the age of 5 years
- Pregnant women

General Guidance Notes

- Ensure that NSs are planning and informing MoHs on proposed LLITN/INT distribution activities.
- Use national plans as basis for RC involvement and planning for community based interventions.
- Collect data on usage and country coverage as well as availability of ITNs/LLITNs on the market.
- Identify and register all beneficiaries receiving LLITN/ITNs. Ensure co-ordination with other planned distributions to avoid duplication.
- Promote and distribute LLITNs. Try to avoid ITNs since they require re-treatment every 6 months.
- Calculate one ITN/LLITN per household, unless there are extraordinary circumstances. It is assumed that the mother sleeps together with the newborn.
- If feasible, integrate the distribution with other health interventions like vaccination campaigns, routine maternity and vaccination activities etc.
- Federation distribution of ITNs/LLITNs is always free of charge to the beneficiaries.
- Distribution of ITN should always include a follow-up "re-treatment" packet 6 months later.
- Previous net use in an area does not guarantee that the people know how to use them.
- ITN/LLITN deliveries should be followed-up with house-to-house visits to ensure proper hanging and usage. This activity can be integrated into ongoing community health programs of a NS which include health prevention/ education activities.

Relief Specific Considerations

- Do not distribute nets without health co-ordinator or health delegate's approval.
- Co-ordinate RC/RC distribution efforts with other partners like MoH/WHO/RBM/UNICEF and other operating NGOs in terms of mapping needs, identification and registration of target population.
- Due to limited availability of nets, the Federation Secretariat is currently co-ordinating distribution globally, targeting carefully. There is currently a 6-12 month delay from ordering to delivery of nets.
- In special and urgent situations, indoor residual or outdoor spraying is supported, but use of LLITN's is the preferred option.
- The Federation has a framework agreement for purchasing LLITN at a very favourable price.

For More Info

http://www.ifrc.org/cgi/pdf_appeals.pl?annual05/PI/malaria1.pdf
<http://www.ifrc.org/docs/news/pr05/3305.asp>