North Western Province, Zambia

Post-Distribution Monitoring (PDM)
At July 2019
10th July- 31st July 2019

REPORT

Prepared by: [Marlon Banda]

1 EXECUTIVE SUMMARY

Between January and May 2018, the National Malaria Elimination Centre (NMEC) undertook a mass coverage campaign to distribute Long-Lasting Insecticide treated Nets (LLINs) to all households in the country. The Against Malaria Foundation (AMF), was one of the funders and contributed 3,023,550 nets (LLIN) to the campaign. The AMF funded nets were distributed in the Central, Eastern, Western and North Western Provinces. Following the campaign, AMF planned to undertake Post Distribution Monitoring (PDM) surveys at 9 month intervals for a period of two and half years to gather net coverage data, in these provinces.

AMF contracted Churches Health Association of Zambia (CHAZ) to implement the PDM surveys. Overall, the surveys targeted an estimated 1,100,000 households in the AMF provinces, out of which 5% were to be randomly sampled and visited to gather net utilization data. This is a report presenting the findings and experiences on the second PDM survey activity in the North Western Province of the country.

OBJECTIVES
This PDM was conducted in June 2019, with the objectives to;

- To verify the number of nets received by the household in comparison with the household registration need.
- To determine acceptability and appropriate net usage
- To evaluate the net presence and condition in households

[AMF comment: financial information will be added when the actual costs of the PDM have been reported and reviewed].

2 RESULTS

Out of the provided 3,180 households to be visited, 2,607 households were visited and 6,391 nets surveyed.

2.1 Hang up rate / Coverage

The recorded hung up rate was 97 percent with the coverage of 73 percent. [AMF comment: CHAZ have incorrectly quoted the "Nets used correctly" percentage, rather than the hang up rate. The correct hang up rate is 85%.]

2.2 Net Presence

In the 2,607 households visited, a total of 14,590 people were recorded. These represented a total of 7,920 sleeping spaces in the region. The total number of nets received was recorded to be 6,391 nets. And out of these nets, 5,432 (85%) nets were found to be correctly hung, 311 nets were present but not hung, representing 5%, and 236 nets (4%) were recorded to

be missing. There was also 321 nets recorded to have been completely worn out and not usable. The other nets representing 10% were recorded to have been worn out and missing.

2.3 Net Condition

A total of 6,078 nets were surveyed in this region. The condition of these nets was found to be good. According to the AMF net condition rating (which is how well the nets are lasting), the nets were rated to be of acceptable condition. This was represented by AMF calculated rate of 55. About 7 percent of the nets were recorded to be worn out and none were viable.

2.4 Data Quality Results

Data entry accuracy was recorded as 92% highly accurate, 7% medium accurate and 1% lowly accurate.

3 OPERATIONS

The PDM commenced with a training of the District Malaria Focal persons as supervisors, followed by another training of Community health Workers as data collectors. These were drawn from the district health offices in North Western Province. The training was held in the provincial capital, Solwezi and was for two days.

It involved orientation of the project staff on data collection tools and a practical session to assess their competences. After the training, the project field staff were sent back to their respective districts to conduct household visits for data collection. The data collection was paper based and each supervisor was tasked to double-checking of records after each day's work. The checks made were for accuracy and completeness of the forms. The paper records were kept in the districts until the last day of data collection when they were taken to the Data Entry Center (DEC) in Lusaka at CHAZ office.

The PDM team engaged to conduct the survey comprised of one project lead, eleven field supervisors, eleven local guides and nineteen data collectors. On average, each data collector visited and collected data from 20 households per day. After five days of the Main PDM data collection, supervisors revisited 5% of the Households visited in the main PDM to assess the work of each data collector. Each supervisor had a sampled village list of households for the 5% revisit. Each supervisor was tasked to revisit two sets of twelve households sampled by AMF, except for Zambezi which only had a set of twelve households. However, not all districts managed to achieve this target due to some of the challenges to be addressed in section 3.2 below. The 5% revisits were done in two days. During data collection, each district was allocated a vehicle to transport field staff from the district medical office to the targeted villages on a daily basis.

Immediately after data collection completed, data entry commenced. All paper based records were transferred into electronic form direct in to the AMF Data Entry system (DES). Seven data entry clerks and one data officer were engaged for this task. After completion of entering

the main PDM paper records into electronic form, 6% randomly selected records were re-entered as a mechanism to achieve data accuracy.

After data entry and verification, all paper records were sorted, organized, packed at CHAZ office where they will be securely stored and later archived.

3.1 What Went Well

- The PDM training of field staff was successfully conducted with field team expressing competence in filling in the PDM data collection tool
- Most sampled Villages were visited by the field teams
- The survey was well received by the local people in the province including local leaders
- The DES was readily available and accessible for data entry
- Data entry was done in time, as planned

3.2 What Didn't Go Well

1. Data Collection

The Provincial target for the survey could not be met due to the following:

- In Kalumbila District, 231 households captured were not on the provided household. Data was collected from other households whenever a listed household head was found to be unavailable.
- Some of the households were found to have relocated, and details of their new locations could not be found
- In Solwezi district, the sampled list of villages provided consisted three villages (namely, Chimwasu, Kamakonga and Kamwambu) that were originally in Zambezi district and so these were not captured.
- Some household heads were found to have died and remaining household members relocated to unknown places
- Long distances and poor road networks resulting in long travelling hours and less time to conduct data collection
- A lot of households were missed because at the time of the visits, people were ever in the fields as this was harvesting period for the region. Others shift to farming camps during this period.
- Some households provided in the sample list could not be identified eg Lwalaba community in Kasempa
- Some villages could not be accessed due to poor road network, that is some areas can only be accessed using a motorbike and not the vehicles that were provided in this exercise. For example, Kampingo community in Mufumbwe could not be reached because a bridge was found to have been damaged.
- Local guides allowances not sufficient in all the districts. This is so because on paper, only one local guide is allocated for the survey and yet in practice, each village visited requires a local person to guide the field team as they are the ones that are familiar with the villages and also locations of households sampled.
- Districts with more than two data collectors had transport issues, as one car proved to be insufficient

2. Data Entry

- Some paper forms were not entered into electronic form, at the time of data entry by data clerks. This resulted into lower records for achieved target in the region.

3.3 Lessons Learned

- PDM activities should be communicated early enough to the provinces to allow for ample time for sensitization if household members are to be found at the time of the visits
- Back up plans for transportation to be provided in areas where vehicles cannot reach, preferably fuel for Motorbikes. Also for districts with more than two data collectors
- Local guide allowances should be budgeted for each village and each data collector should be assigned a local guide if targets are to be met
- Duration of data collection should be revised in the next PDMs to avoid extra expenses.

3.4 Schedule

The data collection commenced on the 21st June 2019, and was completed on 30th June 2019. Immediately after, data entry started on the 1st July 2019 and ran up to 5th July 2019.

4 FINANCIAL INFORMATION

[AMF comment: this information will be added when the actual costs of the PDM have been reported and reviewed].

5 ACTIONS BASED ON DATA

All paper based data left out in data entry were entered and verified.