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August 2010

Kala-azar elimination in Bangladesh, India and Nepal





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August 2010

In collaboration with:

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Bangladesh: Directorate General of Health Services (DGHS), Ministry of Health & Family Welfare; National Institute of Preventive and Social Medicine (NIPSOM); International Centre for Diarrhoeal Research, Bangladesh (ICDDR,B)

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Preface

Integrated vector management is one of the key elements of the kala-azar (KA)/ visceral leishmaniasis (VL) elimination strategy in the three target countries – Bangladesh, India and Nepal. A research programme coordinated by the Special Programme for Research and Training in Tropical Diseases (TDR) and the World Health Organization (WHO)/WHO Regional Office for South-East Asia (SEARO) has shown that indoor residual spraying (IRS) in particular – but also long-lasting insecticide treated nets (LNs) and environmental management – are efficacious in reducing sandfly densities (Joshi et al. 2009; Das et al. 2010). However, in spite of enormous efforts, research has also shown that national vector control programmes need to be strengthened in order to achieve the goal of reducing vector densities to the low level required to interrupt KA transmission (Chowdhury et al. 2010).

This monitoring and evaluation (M&E) tool kit has been developed as an interagency effort involving both public health and academic institutions. Its main purpose is to support IRS programmes through systematic M&E of processes and outcomes, allowing timely detection of gaps and constraints and so ensuring that adequate responses are triggered.

The tool kit is designed not only to assist vector control managers in their daily practice but also as a background document for training and capacity building at all levels of the vector control programme.

This is a working document which will be adapted every two to four years according to experiences gained in field applications and feedback received from those who have applied it in their environments.

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Abbreviations

AHI assistant health inspector

BE budget estimate

CDC Centers for Disease Control and Prevention

DDT dichlorodiphenyltrichloroethane

DGHS Directorate General of Health Services, Bangladesh

DMO district malaria officer **DPHO** district public health officer

EDCD Epidemiology and Disease Control Division, Nepal

FCHV female community health volunteer

HH household health inspector HP health post

ID number identification number

IEC information, education and communication

IRS indoor residual spraying

KA kala-azar

LN long-lasting insecticide treated net

(also abbreviated as LIN or LLIN)

M&E monitoring and evaluation

MI malaria inspector
MO medical officer

MODC medical officer of disease control MPHW multipurpose health worker

NVBDCP National Vector Borne Disease Control Programme, India

PHC primary health centre

PPE personal protective equipment probability proportionate to size

SI sanitary inspector

SOE statement of expenditure
UC utilization certificate
UHC upazila health centre

UHFPO upazila health and family planning officer

VCA vector control assistant VCO vector control officer

VDC village development committee
WHOPES WHO Pesticides Evaluation Scheme

CHAPTER 1. INTRODUCTION AND JUSTIFICATION

1.1 General features of organizing an IRS programme

Vector control is an essential element of the KA (or VL) elimination strategy in the Indian subcontinent. Of the various options for vector control, IRS with appropriate insecticides is a key intervention which can be used both to reduce the vector population in a given area and to interrupt transmission of disease-causing parasites.

The successful implementation of any IRS programme depends on wellorganized planning, implementation that follows a strict timeline, and proper monitoring and supervision on all levels; timely feedback through monitoring allows appropriate corrective measures.

Technical guidelines on vector control and specifically for IRS are available in the three countries concerned – Bangladesh, India and Nepal. As well as providing technical guidance, central governments provide logistical support and financial assistance for IRS activities in the KA-endemic areas. States or districts¹ submit macro action plans detailing their requirements for insecticides; spray persons' wages; capacity building; mobility support; and information, education and communication (IEC) activities. Budgetary provisions for insecticide procurement are made in current-year budgets for use the following year. However, the cash grants are released from the national level to the districts for undertaking activities during the current year. Release of funds to the respective states or districts is dependent on the submission of utilization certificates (UCs) and statements of expenditure (SOEs). The process to supply the required insecticide is done one year in advance, depending on the spray cycles to be carried out.

State and/or district action plans need to be formulated well in advance, indicating the target population for IRS (based on the official criteria) and projecting the requirements for insecticides, funds, spray persons, spray pumps and other logistics. Training and IEC activities need to be planned in well-framed timelines so that proper training skills are developed to ensure good quality spraying and effective coverage. The advocacy of community leaders and sensitization (awareness raising) of the community plays an important role in achieving the goal for IRS activities. Adherence to the spray

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