

NetMark



NetMark 2004 Survey Insecticide Treated Nets (ITNs) in Senegal

NetMark household surveys in Senegal found tremendous improvements in ITN ownership and use. Many more families owned nets and ITNs in 2004 than in 2000, and many more children under five and pregnant women—who are most vulnerable to severe malaria—were sleeping under nets and ITNs. In 2004, over half of the households owned a mosquito net, while four out of ten owned an ITN. One-fourth of all children under five and one-third of pregnant women slept under an ITN the night before the survey, and many others slept under nets that were not ITNs. This was true in urban and rural areas and at all socio-economic levels.

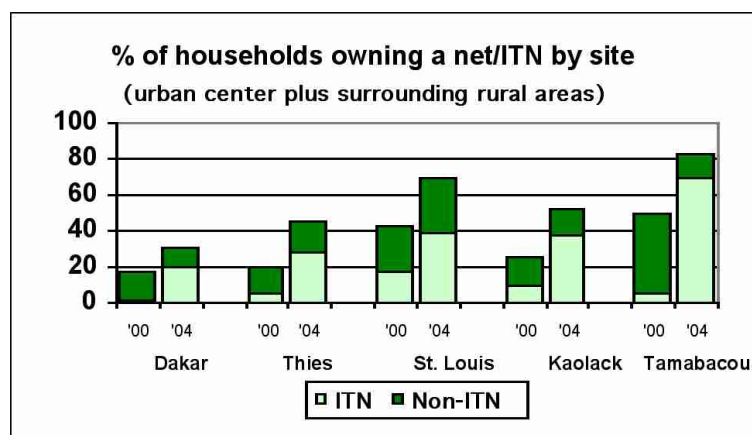
BACKGROUND

Senegal's national ITN program began in 2002, when 350,000 ITNs were distributed in all regions of the country through Regions Medicales and regional pharmacies. Since then, international organizations have focused on expanding coverage of ITNs through the public and commercial sectors, working with health clinics, women's groups and local net distributors and sellers. However, Senegal had a tradition of net use prior to these activities. Untreated nets have long been available from tailors and other commercial sources, and before manufactured pre-treated ITNs were available, the public health sector and non-governmental organizations worked to encourage local tailors to stitch nets and get them treated at treatment centers set up by government district health services before selling them.

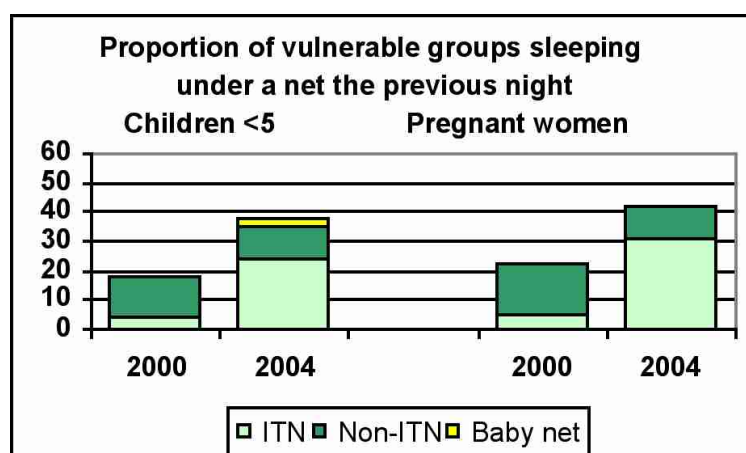
To measure the combined impact of ITN activities to date and to provide a reference point for measuring future progress, NetMark, with funding from the United States Agency for Development (USAID), conducted a household survey in Senegal in 2000 and 2004. Respondents were women aged 15 – 49 who cared for at least one child under five, living in Dakar, Thies, St. Louis, Kaolack, and Tambacounda and in rural areas up to 200km from these cities. The women answered questions about ownership of mosquito nets and ITNs, use of nets by vulnerable groups, net treatment practices and knowledge and beliefs about mosquitoes and malaria.

FINDINGS

• Net ownership increased in all sites and in urban and rural areas, rising from 34% to 56% overall. Even more impressive was the change in ITN ownership: 39% of households owned at least one ITN in 2004, five times the 2000 level of 8%. In Dakar and Tambacounda sites, ITN ownership rose ten-fold, to 20% and 69% respectively. Among households that owned a net, the average number of nets owned was nearly three.

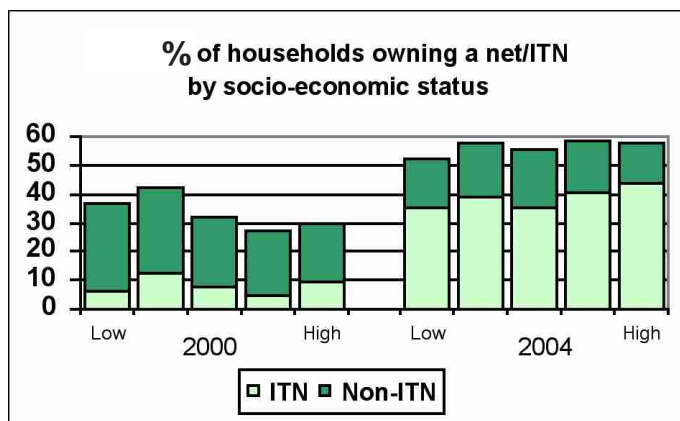


• In 2004, 24% of children slept under an ITN the night before the survey, a five-fold increase from 2000. The proportion of children sleeping under any hanging net (treated or untreated) doubled to 35% in 2004, and a smaller number of children (2%) slept under a baby net with a built-in frame. Nearly half of all infants (48%) slept under a hanging or baby net.



- ITN use by pregnant women increased equally dramatically—from 5% in 2000 to 31% in 2004—while use of any net doubled, to 42%.

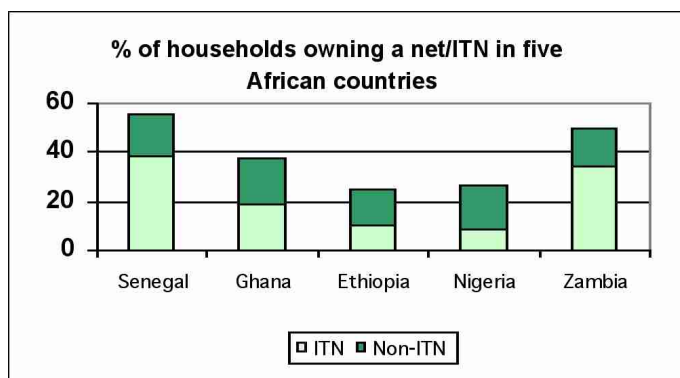
- All of these accomplishments were made across all socio-economic groups and in urban and rural areas.



- In 2000, less than one-third of nets had ever been treated and less than one-quarter had been treated in the previous 12 months. In 2004, three-quarters of nets had ever been treated and two-thirds were currently-treated ITNs. Most of this change was the result of newly-acquired pretreated nets, but more people were also treating their nets later. Of those nets that were “post-treated,” most were treated by a health facility or worker rather than at home by a family member.

- Awareness of ITNs was nearly universal, and women had much more favorable attitudes toward ITNs than in 2000. Nine out of ten women said they had heard a message about ITNs in the past year, primarily from TV, radio, health staff and family, friends or neighbors.

- Compared to four other sub-Saharan African countries that NetMark also surveyed in 2004, Senegal had the highest levels of net and ITN ownership, as well as the highest use by children and pregnant women. More than nine out of ten nets were used the night before the survey.



PROGRAM & POLICY RECOMMENDATIONS

Access and affordability

- The equity seen in ownership and use suggests that a mixture of public and private sector initiatives can make nets accessible and affordable to all socio-economic groups and in rural as well as urban areas. However, the rich were just as likely as the poor to have obtained a free or highly subsidized net, suggesting that targeting has not been as effective as it could be. Nets could be made more affordable by better targeting subsidies to those most in need, while promoting sustainable commercial markets for those who can afford to pay.

Net treatment and use

- Senegal has made great strides in the proportion of nets owned that are ITNs, but only one-fourth of nets had been post-treated. Mass treatment campaigns—which have been successful in Tambacounda—and community dipping services should be expanded, particularly given the high proportion of tailor-made nets (over one in five). Making treatment kits more widely available in the commercial sector will enable people to re-treat their own nets. Marketing long-lasting ITNs and treatments will help to overcome the challenge of getting people to re-treat nets.

- As net ownership and use continue to rise, Senegal may face new challenges. One obstacle to ownership is the idea that nets are not needed, which was prevalent in Dakar and St. Louis and among urban and higher SES households, where use of aerosols and window screens was common. Since urban and wealthier families are often emulated, communication messages tailored to these groups should emphasize the importance of using ITNs as a core malaria prevention measure and not as an alternative to other measures such as screens, coils or spraying.