

**Title: Central provincial health Authority Community Malaria Volunteer Resupply report.**

<b>PROVINCE</b>	Central
<b>DISTRICT/ LLG</b>	Rigo, Abau, Kairuku and Hiri Koiari
<b>CATCHMENT</b>	Kwikila, Sogeri, Kuriva and Bereina
<b>SUPERVISION DATES</b>	15.27/05/24-01/06/24
<b>NO.OF PARTICIPANTS (CMV) SUPERVISED</b>	32 CMV visited,
<b>SUPERVISORS NAMES</b>	Salome Yaot
<b>ACCOMPANYING HEALTH STAFF</b>	Mr. Albert Adila, Ms Anna Kaiviti, Mr Henry Aisa and Mr Wafa Miri.
<b>REPORTING HEALTH FACILITY</b>	Kuriva, Sogeri, Kupiano, Bereina and Kwikila.

**Introduction**

‘Central Province in Papua New Guinea covers an area of 29,900 km<sup>2</sup> and has a population of 237,016 people, making it the 13th most populous province in the country. The province’s geography consists of highlands, mountains, lowlands, coastal areas, and islands, each presenting unique development opportunities and challenges’. (*@ 2024 Central, Department of I&T.*) The province comprises five districts and thirteen LLGs. While four districts are accessible by roads, the Goilala district necessitates the expertise of skilled drivers due to the challenging terrain. Accessibility to Goilala is predominantly reliant on air transportation, with limited access by road in certain areas of Hiri Koiari and Rigo district. This limited accessibility poses challenge for our program to effectively reach all LLGs and districts. Nevertheless, our program successfully operates in four districts, allowing for regular monthly and quarterly visits.

During a brief one-week excursion dedicated to delivering two bicycles to our volunteers, gathering May and over reports, and providing them with refresher merchandise items, I successfully reached out to the initial group of active volunteers trained in 2020 and 2021, distributing their supplies accordingly. Additionally, I dedicated time going through the treatment protocols and referral part way.

**Sogeri catchment**

Sogeri catchment area is conveniently located within an hour’s drive from the city. Our team visited the facility on May 27<sup>th</sup>, accompanied by the M&E supervisor, who conducted the Kobo trail using digital forms on her tablet. The supervisor engaged both volunteers and staff members by posing relevant questions. During our visit, we focused on meeting with volunteers who received training in 2021. Out of the 10 volunteers trained that year, 8 remain actively engaged in reporting. We Successfully visited 6 of these active volunteers, as well as others within the catchment area.

### **Bereina catchment**

The Bereina catchment area falls within the Kairuku District and is situated approximately a four-drive from the city to the facility. Travel times to surrounding villagers vary ranging from 1-2 hours for some and less than an hour for others. Within Bereina catchment 13 volunteers were trained in 2020, with an additional 4 volunteers trained in 2021. Out of the total of 17 volunteers schedule for supply replenishment, only 9 are currently active in terms of reporting and will receive their supplies. The remaining volunteers are still active but are not current with their reporting. During our visits, we were able to meet with 5 of the active volunteers and provided them with supplies. One volunteer from Waika village located more than an hour drive from the facility, had her bicycle transported from the facility to her village. This particular visit extended over full day solely for this catchment. Due to time constrains, we were unable to visit all volunteers as planned, and some were advised to expect visits during the first week of July.

### **Kuriva Catchment.**

In the Kuriva catchment area, a total of 24 volunteers received training in 2020, but presently, only 10 of them remain active. The Kuriva facility is situated approximately a 2-hour drive from RAM office, located under Hiri Koiari District, and is easily accessible by car. Notably, this catchment hosts the highest number of Malaria volunteers within the province. During one-day visit, I successfully met with 7 out of 9 currently active volunteers. Additionally, I conducted visits to other volunteers beyond those trained in 2020.

### **Kwikila and Kupiano catchment.**

Kupiano catchment is under Abau district it took us almost 6 hours from the city to reach Kupiano facility. 13 of the volunteers under Kupiano were trained in the 2020 and 6 were trained in 2021. Out of the 19 only 1 been reporting, after a refresher training, there are couple of reports received. Most of their reports were negative cases. All others, no reports received yet from the facility, will do supervisory visits at the first week of July and will seek their reasons of not reporting.

### Bicycle distribution update.

- Kubuna HSC- 2 bicycle were distributed on the 15<sup>th</sup> of May 2024.
- One bicycle from Bereina that were left with the district health coordinator at her residence was distributed to the CMV on the 28<sup>th</sup> of May.
- Kupiano- 1 bicycle was distributed on the 30<sup>th</sup> of May 2024.
- Total number of bicycle distribution to Central since the month of April is 44.
- The remaining Bicycle yet to be distributed are 6.
- One is quite damaged, needed to be fixed before issue. The Derailleur with the Jockey wheel were dislocated and broken.



*CMV test ride her bicycle @ Kubuna upon distribution*

### Feedback for Bicycle distribution.

- CMV said makes their moving around much easier.
- Can make 3 or 4 trips to the facility in a week
- Riding out to the main road/facility to see us, for their road leading to their village is bad, vehicle cannot go through.
- Thankful to RAM for continuous support, part of their issue of transportation is being solved.

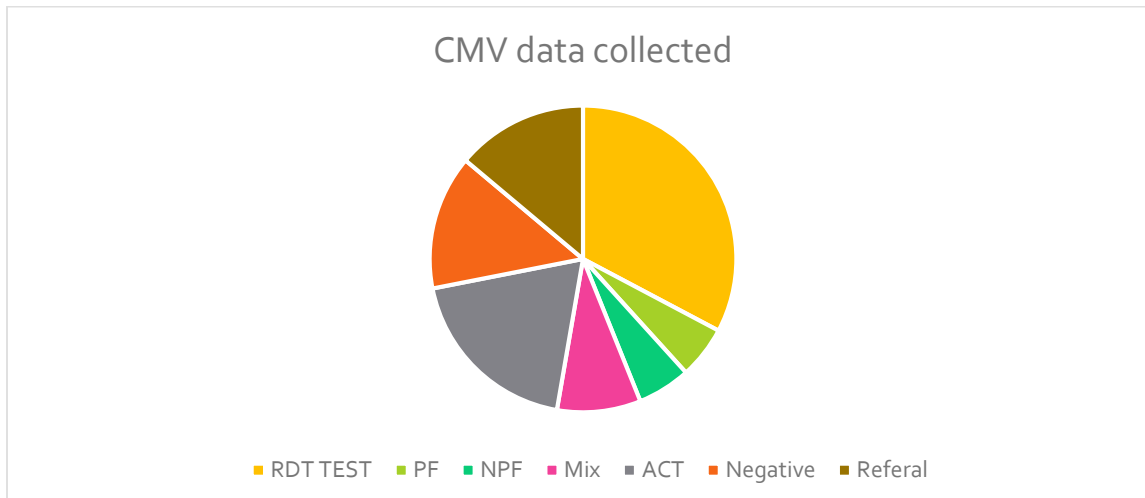
### General update on stock supplied

Items	Sogeri	Kuriva	Bereina	Kwikila	Kupiano	Total
Bag pack	6	7	5	5	1	24
Caps	6	7	5	4	1	23
T-shirt	12	14	10	8	2	46
Solar light	6	7	5	5	1	24
Phones	5	1	4	2	0	12
Sim card	5	1	4	2	0	12
Thermometers	2	6	2	0	0	10
<b>Total Items issued=</b>						<b>151</b>

## General Stock Update

I haven't asked for stock update from volunteers, however I just asked generally if they have enough stock on hand and it seems that almost every volunteer in the Kuriva catchment mentioned that they have ran of stock. This shortage is attributed to Kuriva facility being closed for almost a week, as the only person attending to the CMVs was on an immunization patrol. Nonetheless, I managed to provide malaria commodities that I brought with me to some of the volunteers. The situation with malaria commodities at the volunteer level in other catchments seems to be fine.

## Supervised CMVs Raw Data in Summary



<i>RDT</i>	<i>PF</i>	<i>NPF</i>	<i>Mix</i>	<i>ACT</i>	<i>Negative</i>	<i>Invalid</i>	<i>refer</i>
816	138	140	220	478	354	1	346

## Findings

MAJOR FINDINGS	ACTIONS TAKEN TO ADDRESS THEM
1.1x bicycle that is issued to the CMV is being sold out for K100 to the village people.	CMV was not home upon our arrival, I have advice the community leaders that he won't be doing any more tests and treatment. For the bicycle the road leading to the community is bad our car cannot go through and we were not able to visit the person who bought the bicycle. I have advise them that I will visit on my next trip and picked up the bicycle.

2. Child Fund volunteers doing RDT test and ACT treatment	Inform the facility staff Mr. Henry Aisa to do follow up and confirm. Due to time and road condition, we did not visit in person. But we will pay visit on our next trip.
3. Medical Officer from POM Gen doing RDT test and ACT treatment to the community and charge for fees.	Unable to get the person name, will do follow up and find out.
4. CMVs report that, patients being sent to the Aid post are charge fees for Primaquin.	Brown River Aid post has charge fees for Primaquin, I was not able to see the staff, the Aid post was closed. Advice CMVs at Brown River to refer the patients to Gordons town clinic for Primaquin until we solve the issues.
5. Aid post staff giving stat dose of ACT and charge K10 fee.	- Reporting the issue to the RMC and PMS.

### Challenges

- Some CMVs still not reporting even after refresher training. Even after every effort we put to reactivate them to work again.
- CMVs complaining of other established Non-government organization are paying their volunteers accept RAM, after bicycle distribution there a less comments raised on this issues.
- CMVs request to have a bicycle like others that received. It was a great challenge for me to make them understand the criteria that we used to select the CMVs as well by keep encouraging them to continue working at their community.
- CMVs expecting ACTS and RDTs to be distribute to them by HHM, and not making their way to the facility to collect their supplies, it's a challenge to explain to them and made them understand that I won't be seeing them every week for I have 4 districts to supervise, and now with the bicycle I am looking forward to CMV taking responsibility to for getting their own supplies from the facility.

### Recommendations

- Health facility to do a proper entry of CMV malaria register to the ENHIS by capturing all cmv data.
- From the OIC down to all the general staff in the facility should understand the HMM program so they will be in the better positions to assist the CMVs with their supplies when CMV supervisor are not present at the facility.

## Acknowledgement

1. Word of thankyou to RAM Fleet team to arrange vehicle and driver in time for the trip.
2. Appreciate the CMV supervisor at the facility level who continue to support the program and assisting our volunteers
3. Thank you to the Our RAM volunteers who keeps on serving their people in the community.

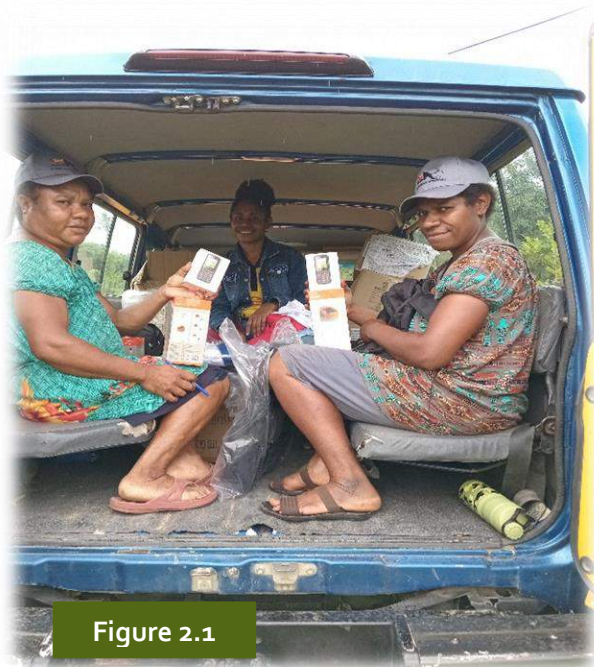
## Annex: 1.

CMV Names	CMV Village	Catchment	Supervised Date	Comments
Leontine Kea	Adio	Kubuna	15/05/24	
Rose Koeba	Adio	Kubuna	15/05/24	
Rei Weina	Kailaki	Sogeri	27/05/24	
Paula Rei	Kailaki	Sogeri	27/05/24	
Oga Gairo	Doe	Sogeri	27/05/24	
Walter Moi	Doe	Sogeri	27/05/24	
Namah Mugi	Edevu	Sogeri	27/05/24	
Thomas Moge	Ilolo	Sogeri	27/05/24	
Elma Teke	Beasatabu	Sogeri	27/05/24	
Erick Uwea	Yarawai HS	Sogeri	27/05/24	
Linda Aiya	Wiaka	Bereina	28/05/24	
Allan Gabriel	Babangogo	Bereina	28/05/24	
Rose Aume	Abia Oreke	Bereina	28/05/24	
Simon Beata	Abia Oreke	Bereina	28/05/24	
Mark Oa	Biotou	Bereina	28/05/24	
Francis Sauba	Akuku	Kuriva	29/05/24	
Joseph Esepa	Akuku	Kuriva	29/05/24	
Raymond Dick	Vanapa	Kuriva	29/05/24	
Arron Maskin	Iomare	Kuriva	29/05/24	
Wendy Makin	Iomare	Kuriva	29/05/24	
Brendah Sheryl	Kuni Block	Kuriva	29/05/24	
Vavine Fabula	Berere	Kuriva	29/05/24	
Marytheresa Apini	Veikabu	Kuriva	29/05/24	
Evarista Maiyabau	Veikabu	Kuriva	29/05/24	
Vagi Eric	Meitha	Kupiano	30/05/24	
Joyce Tau	Niuruka	Kwikila	31/05/24	
Raymond Ahi	Niuruka	Kwikila	31/05/24	
Hannah Kumo	Bore	Kwikila	31/05/24	
Nido Vaname	Bore	Kwikila	31/05/24	
Nemo Tuo	Poligolo	Kwikila	31/05/24	
Muksy Malo	Daroakomana	Kwikila	31/05/24	

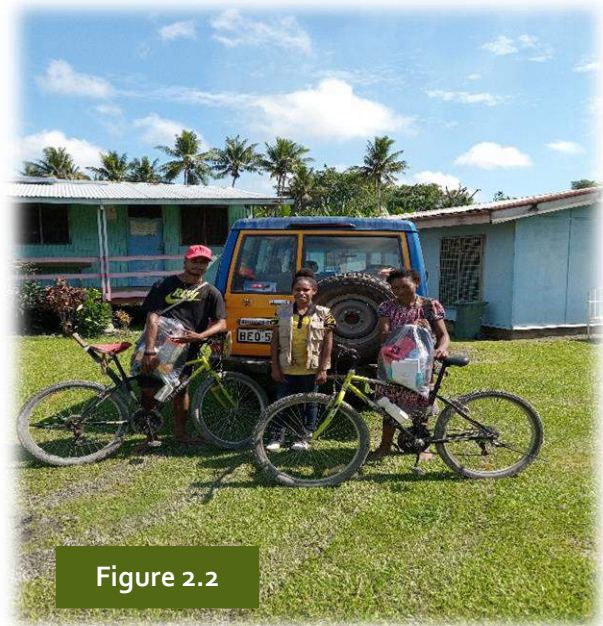
**Photos**



*Figure 1.1: presenting Bicycle to the CMV. Picture CMVs and CMV supervisor at Kubuna HF*



**Figure 2.1**



**Figure 2.2**

*Fig 2.1. CMV @ Sogeri were given supply of new merchandise item. Fig 2.2. CMV ride their bicycle to the facility to collect their new supplies of merchandise items-Bereina*



*Fig 1.2 Bicycle distribution to Waika Village CMV*



*Fig 2.3: CMV comes to the road side on his bicycle to collect his supplies*



*Fig2.4: Iomare village CMV received their Supplies*



*Fig 1.3: CMV in Kupiano receiving bicycle and supplies with the CMV supervisor.*



*Fig2.5. CMV from Kwikila catchment receiving their supplies*

