



**DEPARTMENT OF HEALTH  
MALARIA DISEASE CONTROL  
PROGRAM**

**QUARTER 1- SUPERVISION & DRUG  
DISTRIBUTION REPORT 17/02/2025 –  
15/03/2025**

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## **Overview:**

This report provides a comprehensive overview of the Malaria Program's activities in Bougainville during the first quarter of 2025. A supervisory visit and drug distribution was conducted to 34 health facilities accessible by road and sea in Bougainville during the implementation of the activity. It details the supervision of health facilities, drug distribution efforts, monitoring of Long-Lasting Insecticidal Nets (LLIN) usage, community engagement strategies and key findings. The report also highlights challenges encountered and provides actionable recommendations for improving service delivery and achieving the program's objectives in combating malaria.

## **Introduction:**

Malaria incidence in Bougainville is relatively low compared to other province in Papua New Guinea which have high incidence and mortality rates. However, the program continues to remain a significant public health challenge particularly among people and pregnant women in the region. We have experienced sudden increases in the number of malaria cases in 2024 and continue to see an ongoing increase compared to 2022-2023. These results could have been caused by certain factors that we assess and consider that they could trigger a sudden increase. However, factors such as LLINs usage and wet seasons which are experience in Bougainville from January to June annually can also contribute. Certain factors could relate to the living environment of other communities in Bougainville which some communities are situated in areas which have swamps. One of the areas lacking in Bougainville that is visible is the attitude of people in Bougainville in terms of health and hygiene whilst failure of staff to emphasize in community engagement activities in their respective health facilities. Although we are seeing this results the Malaria Disease Control Program in Bougainville still remains to reduce the burden of malaria through integral intervention, including;

- Early diagnosis and prompt treatment with antimalarial drugs
- The distribution and promotion of Long-Lasting Insecticidal Nets (LLIN)
- Strengthen our network with Bougainville Healthy Communities Program (BHCP) to ensure that communities adhere to the health regulations provided under the community government arrangement in Bougainville
- Strengthening health systems for malaria control
- Community engagement and behavior change communication through the HMM program and health facility integrated outreach programs

The program's objectives include:

1. Achieving universal access to effective malaria prevention and treatment services
2. Reducing malaria incidence to 1- 5 cases/1000 population 2025 in Bougainville
3. Eliminating malaria-related deaths by reducing malaria morbidity
4. Health System Strengthening to capacitate for malaria control interventions
5. Empowering communities to take ownership of malaria prevention and control

However this report documents the progress made towards these objectives during Quarter (1), focusing on the health facility supervision and drug distribution activities. It provides a baseline assessment and informs future program planning and implementation.

### **Methodology: supervision checklist and data collection**

The supervision of health facilities and drug distribution activities was conducted using a standardized checklist. The checklist covered key aspects of malaria service delivery, including:

- RDT and Microscopy (Microscopy/Functional Laboratory)
- Staffing and training (Malaria Trainings/Onsite refresher trainings/Manpower)
- Drug stock management (Monthly Stock Takes/Use and Maintenance of Stock Cards/Medical Supply Orders)
- Adherence to treatment guidelines (Treatment Compliance and Staff capacity on the malaria standard treatment protocol.)
- Health facility engagement to community behavior change activities

Data was collected through:

1. Direct observation of health facility operations
2. Interviews with health care workers and facility managers
3. Review of health facility records and malaria registers
4. LLINs Usage/ RDT and ACTs consumption per facility
5. Intermittent Preventative Treatment in Pregnancy (IPTP) per facility

The data was analyzed to identify gaps in service delivery, assess the effectiveness of interventions and inform recommendations for improvement. Statistical analysis was performed to determine trends and patterns in malaria indicators. Qualitative data was analyzed to understand community perceptions and experiences related to malaria prevention and treatment.

### **Health Facility Supervision: Assessment of Infrastructure and Staffing**

Health facility supervision revealed significant disparities in stock management and staffing performance across Bougainville. While some facilities were well equipped and adequately staffed, others faced challenges related to:

- Lack of rural laboratory facilities to perform microscopy and Non-availability of reagents for health facilities doing microscopy
- Poor maintenance on stock management and monitoring to malaria low burden health facilities
- Lack of health care workers in health facilities hindering staff performance

Specifically of the 34 reporting health facilities in Bougainville accessible by road and sea

- 86% of the health facilities lacked essential microscopic equipment for malaria diagnosis
- 10% of the health facilities had inadequate drug storage facilities
- 40% of the health facilities reported staffing shortages

- 20% of health facilities continue to report stockouts

These challenges hinder the delivery of quality malaria services and contribute to delays in diagnosis and treatment. Addressing these gaps is crucial for improving health outcomes. Investment in infrastructure upgrades and health care worker training is essential to ensure equitable access to malaria services across Bougainville.

### **Drug Stock Management: Availability and Expiry Tracking**

Effective drug stock management is critical for ensuring the availability of antimalarial drugs and preventing stockouts. Supervision revealed a consistency in drug stock levels and expiry tracking across health facilities. However, only a few facilities during supervision reported stockouts of antimalarial, this were concerning our known hotspot areas in Bougainville. While most of our low burden areas in Bougainville had a few expired drugs in their inventory.

Key findings included:

- 20% of health facilities experienced stockouts of ACTs especially the hotspot areas in Bougainville
- <5% of health facilities had expired drugs in their inventory especially in low burden areas
- 40 % of health facilities had inadequate record-keeping and reporting on drug stock levels

This findings highlight the need for a robust drug stock management system with real-time tracking of drug availability and expiry date following the use of stock cards at the health facilities. Regular monitoring and supervision are essential to prevent stockouts and ensure that patients receive appropriate treatment. Training health care workers on proper drug storage and inventory management is also crucial.

### **Long-Lasting Insecticidal Nets: Distribution and Usage Monitoring**

LLINs are a cornerstone of malaria prevention efforts. The Malaria Disease Control Program through our key development partner Rotarians Against Malaria (RAM) distribute LLINs through various channels, including:

- Mass distribution Campaigns (Bi-annual)
- Routine distribution through antenatal care clinics via health facilities
- Targeted distribution to vulnerable populations such boarding high schools, CIS and other tertiary institutions in Bougainville

Monitoring of LLINs usage revealed suboptimal usage despite distribution efforts. Factors contributing to low usage include:

- Lack of awareness about the benefits of LLINs by health facility staff
- Inconvenience and discomfort associated with sleeping under nets
- Misuse of LLINs for other associated uses

These findings underscore the need for intensified community education on the importance of LLINs usage. Community Engagement through the support of the Bougainville Healthy

Communities Program (BHCP) utilizes the need to address and maximize the usage of LLINs in Bougainville.

### **Community Engagement: Awareness Campaigns and Education**

Community engagement is essential for promoting behavior change and empowering communities to take ownership of the malaria prevention and control. The Malaria Disease Control Program in Bougainville implemented various community engagement activities, including the engagement of CMVs through the Home Base Malaria Program (HMM) and also the engagement of VHV across Bougainville through the BHCP to facilitate prevention strategies on communicable diseases through integrated health facility outreach awareness programs. The activities focused on raising awareness about malaria prevention and treatment, promoting the use of LLINs and encouraging early diagnosis and treatment.

The current evaluation of community engagement activities revealed that they were effective in increasing knowledge and awareness about malaria. However, the reach of these activities was limited, particularly in the malaria high burden areas in Bougainville which continue to report increase number of malaria cases despite awareness through community engagement is being implemented. Expanding the reach of community engagement activities through partnership with local leaders and community based organization is crucial for achieving universal coverage.

### **Challenges and Recommendations: Addressing Gaps in Service Delivery**

The Malaria Disease Control Program in Bougainville faced several challenges, during Quarter 1, including:

- Limited resources and funding received by health facilities through the HF
- Geographical barriers and transportation difficulties
- Insecurity and conflict in some areas
- Staffing shortage and high turnover
- Weak health systems

To address these challenges the following recommendations are made:

1. Advocate for increased resources and funding for the malaria program
2. Improve transportation and logistics to ensure timely delivery of supplies
3. Strengthen security measures to protect health care workers and families
4. Recruit, Equip and retain qualified health care workers in their respective health facilities
5. Invest in health system strengthening

Addressing these challenges is essential for achieving the program's objectives and reducing the burden of malaria in Bougainville. A multi-faceted approach that addresses resource constraints, logistical challenges, security concerns, staffing issues and health system weaknesses is required

### **Conclusion: Progress, Lessons Learned and Future Directions**

The Malaria Disease Control Program in Bougainville made significant progress in Quarter1, but several challenges remain. Health facility supervision revealed infrastructure gaps and staffing

shortages. Drug stock management showed inconsistencies in availability and tracking. LLINs distribution progressed, but usage indicate a need for enhanced community awareness. Community engagement activities were effective but require broader reach.

Lesson learned include:

- The importance of a comprehensive approach to malaria control by Malaria Disease Control Program Officer and the Homebase Malaria Management Officer in Bougainville
- The need for building strong health systems
- The critical role of community engagement
- The importance of data driven decision-making

Future direction for the malaria program include:

1. Prioritizing infrastructure upgrades in under-resourced health facilities
2. Recruiting and training additional health care staff specialized in malaria management
3. Implementing a robust drug stock management system with real-time tracking
4. Intensify community education on proper LLINs usage
5. Expanding the reach of community engagement activities through partnership with local leaders

By addressing these challenges and building on the progress made, the malaria program can continue to reduce the burden of malaria in Bougainville and improve the health and well-being of its people.

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**Pictures of the Quarter (1) health facility visit and drug distribution displayed below**

**Wakunai Health Centre, SIC signing off on the delivery of RDTs and ACTs**



**PMS & Pharmacist at ADH Pharmacy**



**At Koromira HC with Staff**



**Kodora CHP with staff**





Nursing Officer at Sovele receiving malaria supplies



Moratana NO on receiving ANC nets



PMS doing stock count at Monoitu HC



PMS at Lemmanmanu HC with staff