PRIVATE SECTOR PARTNERSHIP WITH HOST COMMUNITY TO ACHIEVE MALARIA ELIMINATION IN BONNY ISLAND

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NLNG is intentional about building a better Nigeria and supports host communities in capacity building and community development.

The company is currently funding three healthcare corporate social responsibility projects (CSR) on the Island.

- Ibanise Initiative for HIV/Aids prevention and control
- BCHIP to reduce out-of-pocket expenditure for basic healthcare services in Bonny.
- BNYMEP to make Bonny Island Nigeria’s first malaria-free zone

COVID-19 pandemic reminded us that we are all connected and reaching every household in Bonny Island is key to future proofing the company from unexpected events.

Bonny Island is a semi-urban community in Rivers State, Nigeria and host community to Nigeria LNG Ltd. (NLNG) 6 train natural gas liquefaction plant.

The Island is bordered by the Atlantic Ocean on the south end and is approximately 40 kilometers to the south of Port Harcourt, the capital of Rivers State, while the northern end is surrounded by swampy saltwater body.
The Nigeria Liquefied Natural Gas (NLNG) Limited, has a culture of fact-based decision making.

The report of the malaria burden on the healthcare facilities and community led to the decision by the company’s executive management to eliminate malaria from Bonny Island.

In order to commence the Bonny Malaria Elimination Project, the company required more information and the following assessments were considered the irreducible minimum for the project conceptualization:

- Health Systems Assessment
- Bonny Malaria Indicator Survey
- Advocacy Communication and Social Mobilization Mapping/Profiling
Health Systems Assessment
- Adapted the USAID Health Systems Assessment Manual Version 2.0, which was used to assess the four government and three private healthcare facilities on the island
- This covered the six building blocks for HSS

Insecticide Resistance Survey in collaboration with PMI
- Results showed resistance to permethrin, alpha-cypermethrin and deltamethrin

Bonny Malaria Indicator Survey
- Cross-sectional study design
- Samples size calculated with Winpepi version 9.7
- Multi-stage sampling technique
- 5-day training of survey team
- NMIS tool was adapted

ACSM Mapping and Profiling
- 71 focus group discussions
- 15 key informant interviews
KEY BASELINE FINDINGS

Health System Assessment

- Committed/qualified/adequate staff
- Good infrastructure
- Routine monitoring of funding mechanism
- Good utilization of IT
- Poor accountability and transparency

Malaria Prevalence by wards

Malaria prevalence by wealth quintile

Malaria prevalence of >32% in low income settlements

Malaria prevalence by wealth quintile

Hot spots in low income settlements prevalence of >32%

Malaria prevalence of 5.4% recorded but with wide variations across the wards

Hot spots in low income settlements

The poorer communities are most affected

All cases were treated according to National Guidelines
OMC AS VEHICLE FOR COMMUNITY ACTION

Community Action Model
Creating change by building community capacity

Step 1
- Train participants (develop skills, increase knowledge, build capacity)
- Name the Issue
- Choose Area of Focus

An Action:
- Is achievable
- Is long-term or sustainable
- Compels another entity to do something to change the environment (place, people, lives) for the well being of all.

An Activity:
Is an educational interaction that leads up to and support an action

Repeat Process

Step 2
Define, Design & Do Community Diagnosis

Step 3
Define, Design & Do Community Diagnosis

Step 4
Select Action or Activity & Implement

Step 5
Maintain & Enforce Action or Activity
OMC OUTPUT AND LOOK AHEAD

Community Linkage Schema

AT THE WARD/COMMUNITY

- Referred patients visit facility with their referral slips and meet the referral focal person as first point of contact
- CVs carry out demand creation activities + refer & follow-up
- CHWs provide home care services during ICCM
  Provide escort services where necessary during ICCM

AT THE HEALTH FACILITY

- Referral focal person
- Lab officer

Ward Supervisor
Post ITN Campaign SBCC Findings

- Slept Under Nets
- Didn't Sleep Under Nets
- Don't Have Nets

Ward 1: Slept Under Nets 84%, Didn't Sleep Under Nets 91%, Don't Have Nets 8%
Ward 2: Slept Under Nets 8%, Didn't Sleep Under Nets 7%, Don't Have Nets 2%
Ward 3: Slept Under Nets 66%, Didn't Sleep Under Nets 22%, Don't Have Nets 13%
Ward 4: Slept Under Nets 82%, Didn't Sleep Under Nets 8%, Don't Have Nets 2%
Ward 5: Slept Under Nets 75%, Didn't Sleep Under Nets 12%, Don't Have Nets 11%
Ward 6: Slept Under Nets 70%, Didn't Sleep Under Nets 16%, Don't Have Nets 5%
Overall: Slept Under Nets 78%, Didn't Sleep Under Nets 12%, Don't Have Nets 7%
ACKNOWLEDGEMENTS

NATIONAL MALARIA ELIMINATION PROGRAMME
Federal Ministry of Health, Abuja

U.S. President’s Malaria Initiative

Breakthrough ACTION + RESEARCH
FOR SOCIAL & BEHAVIOR CHANGE

USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM
Procurement and Supply Management

Bonny Kingdom

Community Health Workers
… a globally competitive LNG company helping to build a better Nigeria