

**Social Marketing Plus for Diarrheal Disease Control:
Point-of-Use Water Disinfection and Zinc Treatment
Project
(POUZN)**

FINAL

**Annual Report to USAID
October 1, 2008 – September 30, 2009**



In association with:
Population Services International

Abt Associates Inc



USAID
FROM THE AMERICAN PEOPLE

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INTRODUCTION

The POUZN project's objective is to mobilize the private sector for the prevention and treatment of diarrhea through the introduction and scale-up of point-of-use (POU) water disinfection and zinc treatment products.

This Annual Report follows the Workplan format and is organized by the four major Tasks associated with the implementation of the POUZN contract. These include: 1) Work/Business Plan Development, 2) Field Implementation, 3) Global/Technical Leadership and 4) Monitoring and Evaluation. The final section presents a summary budget for the activities described in the workplan. The Annual Report covers the period of October 1, 2008 – September 30, 2009.

Table 1 below provides a summary of the key outputs for the Year Four workplan and their status.

Table 1: Output Summary for Year 4

Task One: Work Plan and Business Plan Development and Reporting	
Workplan Development and Semi-Annual Reporting	
<ul style="list-style-type: none"> • Year 4 workplan finalized and Year 5 workplan developed ▪ Semi-annual and annual reports completed ▪ Prepare second year workplans for Benin and Madagascar 	<ul style="list-style-type: none"> ▪ Year 4 workplan approved and Year 5 workplan submitted ▪ Year 3 Annual Report submitted and approved ▪ Year 4 Semi-Annual Report submitted and approved ▪ Workplans for Benin and Madagascar completed and approved
Task Two: Program Implementation	
POUZN POU Programs	
Introduce HH water treatment product in Benin	
<ul style="list-style-type: none"> • Continue to scale up the distribution and promotion of Aquatabs in seven focus areas throughout Benin 	<ul style="list-style-type: none"> • Distribution systems expanded in all seven target areas, working through both commercial and public sector channels. • Diarrhea prevention radio campaign intensified.
<ul style="list-style-type: none"> • Community level outreach and promotion expanded through work with local NGOs 	<ul style="list-style-type: none"> • Refresher training conducted with all IMPACT partner NGOs to enhance community outreach activities • Collaboration with BASICS, CARE, Peace Corps, and women's groups leads to expanded promotion of Aquatabs in rural areas

	<ul style="list-style-type: none"> • Training of health center staff continues. • PISAF-supported community health workers trained.
Scale-up of PUR program in Democratic Republic of the Congo	
<ul style="list-style-type: none"> ▪ Rural distribution and promotion of PUR use in South Kivu 	<ul style="list-style-type: none"> ▪ IPC activities in health centers, markets and churches conducted by partner NGOs
<ul style="list-style-type: none"> ▪ Assist PSI to identify additional funding to support PUR program 	<ul style="list-style-type: none"> ▪ Funding to continue the program for a year identified by USAID Mission
Scale-up SWS Program in Haiti	
<ul style="list-style-type: none"> ▪ Distribution of SWS through commercial channels scaled-up 	<ul style="list-style-type: none"> ▪ Distribution through commercial outlets improved, leading to the sale of 109,320 bottles of Dlo Lavi. ▪ Outlets more than doubled from 68 to 160.
<ul style="list-style-type: none"> ▪ Community level distribution expanded through work with local NGOs 	<ul style="list-style-type: none"> ▪ From October 2008 to September 2009 a total of 75,813 bottles of Dlo Lavi distributed through NGOs.
<ul style="list-style-type: none"> ▪ Work with PSI to identify funding for program continuation 	<ul style="list-style-type: none"> ▪ New Funding granted under the USAID/PROMARK project in April 2009.
Scale-up SWS Program in Kenya	
<ul style="list-style-type: none"> ▪ Public, NGO and CBO partners engaged in Coast province to increase reach of behavior change messages and sales in target areas 	<ul style="list-style-type: none"> ▪ Three workshops conducted with theatre group leaders, MoH nurses, water vendors and women's group leaders ▪ Red Cross included WaterGuard in Basic Care Package and conducted IPC with CHWs ▪ 144 community outreach events held
<ul style="list-style-type: none"> ▪ Revised communications to focus on behavioral barriers in addition to brand visibility. 	<ul style="list-style-type: none"> ▪ New communication campaign developed
<ul style="list-style-type: none"> ▪ Brand visibility at point of sale improved, particularly in target rural areas 	<ul style="list-style-type: none"> • Distribution systems in rural areas of Coast region expanded and strengthened through NGO partnerships.
Scale-up SWS Program in Malawi	
<ul style="list-style-type: none"> ▪ Continued extension of SWS availability to additional rural areas through local NGO partnerships. 	<ul style="list-style-type: none"> ▪ Activities with nine new and four continuing NGO partners intensified. ▪ 275 NGO field officers and

	NGO/MOH outreach officers trained.
<ul style="list-style-type: none"> Community-level IPC and integrated safe water and hygiene health communication messages expanded through work with local NBO, CBO and MOH partners. 	<ul style="list-style-type: none"> 370 outreach shows conducted in 9 districts Additional promoters deployed to cholera outbreak districts
Scale-up SWS Program in Rwanda	
<ul style="list-style-type: none"> Continued promotion of Sur'Eau working through health centers, health mobilization agents and NGOs 	<ul style="list-style-type: none"> Direct distribution to health facilities, where <i>Sûr'Eau</i> is promoted through routine maternal and child health visits supported. Commercial distribution networks expanded and strengthened Community-level events with women's associations and the National Women's Council increased Key water treatment messages incorporated into community health worker training.
Increasing the access of PLWHA to SWS in Rwanda	
<ul style="list-style-type: none"> Program for promotion, marketing and use of SWS by PLWHA implemented 	<ul style="list-style-type: none"> Staff of 3 Rwandan partner organizations targeting people living with HIV/AIDS trained as trainers. Seed stock provided to local PLWHA associations. Health facilities, including VCT sites and district personnel, provided with IEC materials. <i>Sûr'Eau</i> promoted through VCT sites.
POUZN Zinc Programs	
Scale-up of Zinc Treatment program in Benin	
<ul style="list-style-type: none"> Continue to scale up distribution of diarrhea treatment kit to all seven target areas 	<ul style="list-style-type: none"> Distribution systems strengthened and expanded in all seven sites; 174 commercial outlets and all MOH clinics now sell DTK.
<ul style="list-style-type: none"> Training of private sector pharmacy and public sector clinic personnel in seven urban and peri-urban target areas in Benin completed. 	<ul style="list-style-type: none"> Detailing continues with new promotional materials distributed to pharmacists. 3250 health workers trained.
<ul style="list-style-type: none"> BCC campaign for zinc as diarrhea case management treatment continued on a national scale to increase consumer demand and 	<ul style="list-style-type: none"> Radio spots aired on 27 radio stations nationwide

disseminate knowledge on correct practices.	
<ul style="list-style-type: none"> Community level IPC and promotion expanded through work with local NGOs 	<ul style="list-style-type: none"> 120,000 people educated on prevention and treatment of diarrhea. New collaboration with PISAF, BASICS, CARE and MCDI to train community-based health agents commenced
Introduction of Zinc Treatment program in Madagascar	
<ul style="list-style-type: none"> Subsidized diarrhea treatment kit launched into informal private sector markets 	<ul style="list-style-type: none"> Subsidized diarrhea treatment kit, ViaSur, launched in April. Currently being sold through 423 community-based sales agents in 12 districts.
<ul style="list-style-type: none"> Distribution and sale of full-price diarrhea treatment kit through private sector pharmaceutical system established 	<ul style="list-style-type: none"> Full price DTK launched in June. Available in 22 regions.
<ul style="list-style-type: none"> Training of private sector pharmacy personnel completed 	<ul style="list-style-type: none"> Detailing sessions with 1872 pharmacists and doctors held. Three sensitization meetings with medical associations held reaching 205 doctors
<ul style="list-style-type: none"> BCC campaign for zinc as diarrhea case management treatment launched on a national scale to increase consumer demand and disseminate knowledge on correct practices. 	<ul style="list-style-type: none"> Two radio spots and two educational videos developed and ready to disseminate. IEC materials, flipcharts and brochures for point-of-sale use developed and ready to disseminate.
<ul style="list-style-type: none"> Community level IPC and sales of subsidized DTK through work with local NGO partners commenced 	<ul style="list-style-type: none"> 423 NGO personnel trained in 12 districts. Product distributed to trained CBDs. CBD training in additional districts underway. MOUs with 6 NGOs finalized. IPC materials printed and distributed.
<ul style="list-style-type: none"> Operations research study to determine the effectiveness and efficiency of various models for encouraging use and improving access to zinc completed 	<ul style="list-style-type: none"> Operations research delayed to January/February 2010 due to civil unrest in Madagascar and need to conduct survey during diarrhea season
Technical Assistance	
<ul style="list-style-type: none"> Technical assistance provided to new and ongoing POU and zinc programs on an add-needed basis. 	<ul style="list-style-type: none"> Technical assistance provided in two new countries: Pakistan, and Senegal, and two on-going programs: Malawi and Rwanda.
Task Three: Global Leadership and Dissemination	

Documentation and Dissemination of Reports	
<ul style="list-style-type: none"> Case study on lessons learned through the implementation of zinc programs prepared 	<ul style="list-style-type: none"> Brief on results and lessons learned in Nepal completed. A multi-country case study on zinc delayed to year 5 to allow for collection and inclusion of data from Benin and Madagascar.
<ul style="list-style-type: none"> Case study on lessons learned through the implementation of community-based promotion and distribution of POU programs prepared. 	<ul style="list-style-type: none"> Case study on efforts to reach base-of-the-pyramid consumers in process
<ul style="list-style-type: none"> At least three country briefs completed 	<ul style="list-style-type: none"> Nepal country brief complete. Rwanda and Malawi briefs in preparation.
<ul style="list-style-type: none"> Final report on strategy and results of zinc program in Nepal completed 	<ul style="list-style-type: none"> Final report on results of program completed. Research report completed.
<ul style="list-style-type: none"> Madagascar Operations Research study report completed and disseminated 	<ul style="list-style-type: none"> OR study delayed into Year 5 due to civil unrest in Madagascar.
<ul style="list-style-type: none"> Report on promotion of POU through mutuelles completed and disseminated 	<ul style="list-style-type: none"> Household survey completed in July 2009. Data currently being analyzed.
Increase Visibility of POUZN among USAID and International Audiences	
<ul style="list-style-type: none"> Participation at key conferences (GHC, Micronutrient Forum, World Water Week, etc.) 	<ul style="list-style-type: none"> POUZN team members participated in WEF conference in March, Micronutrient Forum and GHC May 2009, HWTS Network conference in September 2009.
<ul style="list-style-type: none"> At least one paper on POU and/or zinc presented at international meeting 	<ul style="list-style-type: none"> Nepal results presented at Micronutrient Forum
<ul style="list-style-type: none"> On-line resource library expanded and maintained 	<ul style="list-style-type: none"> New articles continue to be posted.
Task Four: Monitoring and Evaluation	
<ul style="list-style-type: none"> Pre-test and finalize POU and zinc-focused M&E "Toolkits" and disseminate to international community 	<ul style="list-style-type: none"> POU toolkit pretested and used in household survey in Malawi Zinc toolkit pretested and used in household surveys in Nepal Revisions based on results completed. Toolkits revised and ready for publication.
<ul style="list-style-type: none"> Finalization of research plans for POU and zinc 	<ul style="list-style-type: none"> Research plans finalized.
<ul style="list-style-type: none"> Results to date documented and disseminated 	<ul style="list-style-type: none"> Nepal results documented and disseminated
<ul style="list-style-type: none"> Data collected and final report on results and 	<ul style="list-style-type: none"> Research conducted July 2009. Data

cost-benefit of promotion of POU through mutuelles completed	currently being analyzed.
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TASK ONE: WORKPLAN/BUSINESS PLAN DEVELOPMENT

Objectives:

- Finalize the Year Four Work Plan
- Submit an Annual Report for Year Three activities
- Complete the Year Four Semi-Annual Report
- Prepare and submit a work plan for Year Five
- Complete country continuation workplans for Benin and Madagascar

Status Report on Key Activities and Outputs:

Activity A: Workplan Development and Reporting

Year Four Workplan

The POUZN team developed and submitted a draft workplan for Year Four activities on October 11, 2008. Subsequent discussions were held with USAID/W and a final workplan was submitted November 12, 2008.

Semi-Annual and Annual Reports

The Year Three Annual Report, covering the period October 2007-September 2008, was completed and submitted to the CTO on November 14, 2008. The Year Four Semi-Annual Report, covering the period October 2008-March 2009, was submitted April 15, 2009 and subsequently accepted.

Year Five Workplan

The POUZN team developed and submitted a draft workplan for Year Five activities on August 31, 2009. Subsequent discussions were held with USAID/W and the Year Five Workplan was approved on October 23, 2009.

Country-Specific Workplans

As part of technical assistance visits, POUZN's Zinc Technical Advisor worked with PSI field implementation teams to complete workplans in Benin (Year 3 of the Benin Program) and Madagascar (Phase II for the Madagascar Program) to carry their programs into POUZN Year Five.

TASK TWO: FIELD IMPLEMENTATION

Objectives:

- **Benin:** Support the introduction of Aquatabs and Zinc together with ORS
- **DRCongo:** Support the expansion of the existing PUR program
- **Haiti:** Support the expansion of the SWS (Dlo Lavi) program
- **Kenya:** Continue to support the scale-up of SWS (WaterGuard) and PuR
- **Madagascar:** Support the introduction of two diarrhea treatment kits
- **Malawi:** Continue to support the scale-up of SWS (WaterGuard) and PuR
- **Rwanda:** Continue to support the scale-up of SWS (Sûr'Eau)
- **Rwanda:** Complete and evaluate program to expand access to SWS in Rwanda through Mutuelles de Santé
- **Rwanda:** Support an SWS program targeting PLWHA
- Provide technical assistance to support the introduction and/or continuation of zinc and/or POU programs

Status Report on Key Activities and Outputs:

A. Support the introduction of a household water treatment product and diarrhea treatment kit containing zinc in Benin

Background: In September 2007, USAID/Benin approved the POUZN workplan to implement a program promoting Aquatabs for the disinfection of household drinking water and a diarrhea treatment kit containing ORS and zinc (branded OraselZinc) for the treatment of childhood diarrhea. This workplan outlined a program which links with other key USAID bilateral health programs and operates in the seven target areas of USAID's Integrated Support for Family Planning and AIDS Prevention (IMPACT) Project and surrounding rural areas. During the first year of the program, the POUZN team successfully developed marketing plans for the two products, placed an expatriate advisor to guide the program and in June 2008 launched a national program to promote the diarrhea treatment kit. In September 2008, POUZN launched Aquatabs on a national scale.

Areas of Focus/Strategies for Year Four: POUZN strategy focused on scaling up the distribution and promotion of Aquatabs and the diarrhea treatment kit (DTK) in and beyond the IMPACT target areas by expanding points of sales into new areas; intensifying Aquatabs and OraselZinc communication utilizing national radio networks and local community radio partners; conducting refresher training with public sector personnel, health center staff, partner NGOs and local community radio personnel; expanding training to include the Direction de l'Hygiène et de l'Assainissement de Base's (DHAB) community-based hygiene agents; and escalating community level interpersonal communication (IPC) and promotion through work with new partners.

Activities during Year Four: The POUZN project in Benin has achieved a number of successes since the launch of the two products. From December 2008 through September 2009 more than 3.3 million tablets (330,000 strips) of Aquatabs and 424,000 diarrhea treatment kits were distributed nationwide. Partnerships with key community based organizations/projects such as

BASICS and CARE have been established to reach additional rural communities. POUZN partner NGOs in the seven target program areas conducted 18,000 educational sessions with more than 120,000 people, primarily caregivers of children under five, between October 2008 and September 2009.

Aquatabs Distribution: The POUZN team launched Aquatabs at the end of September 2008 and worked to rapidly scale up the distribution. Aquatabs are now available through two of the three existing private sector pharmacy wholesalers and 16 commercial wholesalers. As of September 2009 the tablets are available in approximately 1000 pharmacies and local shops throughout Benin. According to the findings of the December 2008 retail survey (only two months after sales began) coverage results for Aquatabs ranged between 20-40% in the targeted outlets which indicated a need to continue to focus on expanding distribution points. Feedback from wholesalers in both commercial and pharmaceutical sectors indicated that better price margins for Aquatabs needed to be established if greater distribution and promotion by retailers was to be achieved. While increasing the consumer price would be another vehicle for increasing margins, to date, the PSI/Benin team has been reluctant to do so. Reducing cost-of-goods by reducing the cost of packaging is another option being explored. New Medentech packaging for the Aquatabs strips includes pictorial instructions and therefore eliminates the need for the strips to be over-packaged in Benin. This would allow for a reduction in cost-of-goods, an increase in profits and, as a result, increased distribution margins. PSI has agreed to make this change in 2010.

PSI is also working with Peace Corps volunteers throughout the country to market mosquito nets and Aquatabs. Peace Corps volunteers act as intermediaries between PSI and local NGOs and local communities, arrange for product distribution, and conduct sensitization sessions within the rural communities where they work. They have already purchased 5300 strips of Aquatabs which are being sold by community-based sales agents.

Aquatabs Communications: Two safe water radio spots (one branded and one generic) were developed to promote diarrhea prevention and POU water treatment. Moreover, partner radio stations in the seven target sites have translated and aired these spots in local languages and have aired 30 programs concerning diarrhea prevention and treatment. World Water Day events in March focused on promotion of Aquatabs and the importance of both handwashing and treating household drinking water during special events with school children and sellers in secondary markets (arranged through partner NGOs). The product launches and the World Water Day events were both televised on national TV stations. During the summer months, PSI employed university-level students to “blitz” markets and health centers in Atacora and Donga departments with promotional materials on both Aquatabs and OraselZinc. More than 200 new sales points were established and promotional materials displayed to ensure the visibility of Aquatabs in both public and private sector outlets. Medical delegates have intensified their efforts to promote Aquatabs to health center staff and pharmacies nationwide.

Working in collaboration with the PISAF project, the POUZN team has now trained 150 community health workers (*relais communautaire*) in the Zou and Collines departments on the use of Aquatabs as well as 3000 women from approximately 100 *Groupements des Femmes* on both mosquito net and Aquatabs use. A number of these women are now serving as community-based sales agents, connected to the commercial sales points in their village.

In response to a flood emergency in Oueme and Plateau, CARE purchased 120,000 tablets of Aquatabs for free distribution to those most vulnerable to diarrheal diseases. PSI trained CARE community-based educators on proper product use as well as corresponding key messages for diarrhea prevention and shared communications materials including posters, flyers and radio spots. CARE and PSI are now working together to create sustained demand for Aquatabs in Oueme and Plateau.

POUZN also worked with the Ministry of Health and NGOs partners to respond to cholera outbreaks in late 2008. PSI provided Aquatabs and OraselZinc to cholera treatment centers along with promotional and educational materials. PSI also worked with partners to coordinate community based educational activities in those neighborhoods hardest hit by the outbreak. POUZN's mass media campaign was instrumental to the cholera response and the number of radio spots concerning diarrhea prevention and treatment aired by POUZN doubled during this period.

Diarrhea Treatment Kit Distribution: All three private sector pharmacy wholesalers and the public sector pharmacy wholesaler, CAMÉ, are currently distributing the OraselZinc DTK. The kit is available in the 174 private pharmacies that these wholesalers service. OraselZinc is also available through other retail sales points including market stalls. In all departments OraselZinc is for sale in both public and private sector pharmacies at the full cost recovery price.

Widespread coverage of OraselZinc has been achieved in the departments of Zou and Collines in six targeted health zones and 60 rural village sites. Information, Education and Communication (IEC) agents assigned to each of the six health zones have assured that all health centers have supplies of both OraselZinc and Aquatabs and that there is a point of sale in each village, resulting in about 300 rural sales points in these two departments. The December 2008 retail survey indicated that coverage for OraselZinc in targeted outlets in departments of Collines, Oueme and Alibori was 80% or higher. In the remaining six provinces coverage was lower, but still promising, ranging from 35 – 50 %.

Diarrhea Treatment Kit Communications: Two diarrhea treatment radio spots (one branded and one generic) were developed to promote the correct use of ORS and zinc for the treatment of all childhood diarrheas. To date, more than 10,000 diarrhea treatment-focused radio spots have been aired on 27 radio stations nationwide.

Results:

- 424,000 diarrhea treatment kits were sold through commercial distribution channels.
- 330,000 blisters of Aquatabs were sold (3,300,000 tablets).
- Aquatabs are available in more than 1000 outlets; the OraselZinc DTK is available in 174 pharmacies as well as other commercial outlets.
- Radio spots to promote Aquatabs and POU water treatment have been aired on 27 radio stations nationwide.
- 3250 individuals from partner NGOs, partner radio stations, Peace Corps, and women's groups were trained.

- POUZN partner NGOs in the seven target program areas conducted 18,000 educational sessions with more than 120,000 people.

B. Continue to support the introduction of the PUR program in DR Congo

Background: The POUZN-support program in DR Congo focused on deepening the reach of PUR in the South Kivu region, working closely with USAID/DRC's bilateral AXxes project and its stakeholders (InterChurch Medical Assistance, Catholic Service Relief, World Vision and MoH) to implement the program.

Activities during Year Four: POUZN funding for DR Congo ended in October 2008. Through other funding sources, PSI is continuing to air limited branded and generic safe water spots via community radio and television channels in endemic cholera areas. A new radio spot, a teledrama in Swahili, and other promotional/IEC materials were produced. Through support from UNICEF, PSI launched Aquatabs for use across Congo, with a focus on regions with endemic cholera. The USAID Mission agreed to continue to fund PSI PUR marketing efforts in Sud Kivu through the Maternal Child Health Improvement Project (MCHIP).

Results:

- 2.9 million sachets of PUR were sold in the South Kivu region, treating nearly 30 million liters of drinking water

C. Continue to support the expansion of the SWS (Dlo Lavi) program in Haiti

Background: POUZN began working in Haiti in October 2007. The *Dlo Lavi* program had a two-pronged distribution strategy: 1) national commercial sector distribution through shops, pharmacies, kiosks and 2) community-based distribution through local and international NGOs for people living with HIV/AIDS and emergency relief including certain sites associated with USAID's bilateral SDSH Pwoje Djam child health program.

Areas of Focus/Strategies for Year Four: The strategy for Year Four focused on commercial and NGO distribution, supported by a targeted communications campaign, and the dissemination of branded promotional materials to create demand for Dlo Lavi. A mass media campaign focused on radio and TV spots, supported by point-of-sale and other merchandising materials with a focus on Port-au-Prince and key SDSH Pwoje Djam communes. PSI also worked with NGOs to execute community mobilization activities in Port-au-Prince to encourage appropriate and consistent use of Dlo Lavi.

Activities during Year Four: During the period October and December 2008, three TV documentaries and radio spots were broadcast and monitored. Media placements were focused on the five geographic departments where diarrhea prevalence is very high (North, North-West, Center, Artibonite and West).

In response to Hurricane Hanna, PSI partnered with Rotary Club, American Red Cross, and AGERCA to distribute Dlo Lavi. However, the hurricane prevented PSI from implementing a

set of awareness raising activities in three rural regions including Center, Artibonite, Northwest department. After the hurricane, with the increased awareness of need for water treatment and decrease access to clean water, Dlo Lavi sales increased dramatically leading to a stock out in late 2008.

In March 2009, this was rectified and reinforced with a set of education sessions with the target audience of women of children under five. One such session sensitized over 200 women on diarrhea prevention and treatment and culminated with the distribution of one Dlo Lavi bottle, one sachet of the oral rehydration salt, *Sel Lavi*, and one impregnated mosquito net to each participant. During the remainder of Year Four, the POUZN team organized 11 educational activities targeting 963 caregivers of children less than five years of age.

In January 2009, PSI executed a household survey with 987 women and caregivers of children under the age of five. While the survey found that 52% of households surveyed had ever treated their drinking water and 22% were currently their drinking water, use of Dlo Lavi as a treatment option was extremely low with ever use at only 3.6%. Haitians are very aware of the dangers of drinking unsafe water with seven out of ten declaring that clear water is not always safe water. Over 90% of the women surveyed indicated that they intend to buy Dlo Lavi and are willing to pay an average of 27 Gourdes for the product. (Current price is 25 Gourdes or US\$0.63). As POUZN wraps up its activities in Haiti the project will work to better understand the overall situation, what other treatment options are being utilized by consumers, and why Dlo Lavi did not succeed in making a larger impact.

Results:

- 109,320 bottles of *Dlo Lavi* were sold;
- Through six NGO's working with PLWHA, PSI distributed an additional 75,813 bottles of Dlo Lavi.
- 17,000 bottles of Dlo Lavi were distributed as part of hurricane relief efforts.
- 148,985,000 liters of drinking water were treated.
- 963 individuals were reached through sensitization sessions and 90 through training.

D. Continue to support the scale-up of the existing Safe Water Solution (WaterGuard) and PUR programs in Kenya

Background: Since March 2007, POUZN has supported the scale up of the safe water program in Kenya with a focus on increasing accessibility to and demand for POU products in poor, rural regions of Coast province. This province has the second highest diarrheal prevalence and is among the fastest growing provinces of Kenya. POUZN is coordinating its activities with PSI's other POU activities being implemented under the USAID Mission's bilateral social marketing agreement with PSI.

Areas of Focus/Strategies for Year Four: Specific activities in Year Four included: expanding distribution channels into rural, high risk regions within Coast province; developing and disseminating a radio campaign to educate rural Kenyans on the risk of water-borne diseases and the effectiveness of water treatment using WaterGuard and PUR; training community-based

organizations, social health educators and public health workers from rural antenatal clinics on the risks of diarrheal disease; and developing communications materials and outreach activities through trained partners based on identified barriers to POU uptake in Coast province.

Activities during Year Four: The POUZN program in Kenya continued to scale-up WaterGuard promotion and distribution in the Coast province through training and collaborative outreach events with partner organizations as well as increased partnership and involvement with district and province-level planning forums. The project has trained representatives of 57 community-based organizations. Utilizing the new ‘Education through Listening’ community dialogue approach. 144 community outreach events reached over 11,000 women, 10,000 children and 7,000 men.

The 2008 retail audit survey indicated that WaterGuard was available in 45% of rural outlets and PUR was available in 30% of rural outlets in the Coast region indicating a need to continue to invigorate product distribution.

Media Communications: The POUZN program revised its media campaign to address findings of a recent household survey that indicated a decrease in risk perception with regard to water and related illnesses. The campaign, *Linda kila tone*, ran during the last quarter of 2008 to address the belief that clear water is safe to drink, a key barrier to POU water treatment use, encouraging consumers to “Guard Every Drop.” In 2009, the program aired diarrheal disease prevention campaign radio spots as part of a broader Child Health campaign in Kenya, *Malezi Bora* Child Health Weeks, led by the Ministry of Health and UNICEF. Integrating messages on POU water treatment as part of a more holistic campaign ensured the incorporation of water treatment as a key child health message and practice.

Distribution: Collaboration with NGO and CBO partners was expanded and a new cadre of community-based sales agents were trained and provisioned.

Strengthen linkages with Ministries of Health and Water activities: The POUZN team actively participated in stakeholder forums in Kilifi, Malindi, Kwale and Kilindini districts to strengthen linkages to the MoH’s strategy on the Governments Annual Operation Plan that calls for the provision of safe drinking water for all within Coast Province. The program has been actively involved in implementing MOH-led activities, such as:

- *Malezi Bora* child health weeks in May and the first 2 weeks of November 2009;
- Coordination of clinic outreach activities with POUZN theatrical groups in three districts in Coast province;
- Placement of radio spots within the two weeks of *Malezi Bora* messaging on one national station and 9 regional stations; and
- Global Handwashing Day celebrated on the 15th October 2009 in Kilifi district in Coast. POUZN supported the event by supplying safe drinking water to the 10,000 participants.

Results:

- 219,732 bottles of WaterGuard and 49,308 sachets of PUR were sold in the Coast region resulting in 220,225,000 liters of water treated

- WaterGuard was available in 45% of rural outlets and PUR was available in 30% of rural outlets in the Coast region¹
- 160 new community-based partners were identified
- PSI Kenya conducted 144 community outreach events, reaching over 11,000 women, 10,000 children and 7,000 men.
- 121 personnel from partner organizations were trained

E. Support the introduction of two diarrhea treatment kits in Madagascar

Background: The POUZN initiative focuses on marketing two diarrhea treatment kits containing zinc and two sachets of a flavored ORS: a full cost recovery kit (HydraZinc) through Madagascar’s network of pharmacies and *depot de medicament* (drug counters) nation-wide and a subsidized kit (ViaSûr) through community-based sales in partnership with a number of international NGOs. Late arrival of DTK component products and packaging led to important delays in launching the product. Commodities arrived in country at the same time as the socio-political crisis that began late January 2009, which made it difficult to clear customs promptly and further delayed program implementation.

In FY2008, POUZN received funds from USAID/Madagascar to procure Nutriset ZincFant for Madagascar’s public and private sector programs. Due to the change in government, USAID requested POUZN to reprogram these funds to procure additional zinc for the private sector and to expand community based distribution and related private sector zinc promotion activities to reach a greater number of caregivers in rural areas through community channels. A Phase II workplan reflecting these priorities was developed in August 2009 and approved by USAID in October 2009. It outlines the plans for partnering with additional NGOs, both local and international, and extending community outreach and sales of the subsidized DTK to all of the 225 communes, located in 48 districts, currently active in USAID’s bilateral SantéNet2 “Champion Community” program. Phase II will operate in all of the 22 regions of Madagascar.

Areas of Focus/Strategies for Year Four: The team’s focus for Year Four has been to launch and distribute the two diarrhea treatment kits; train pharmacy personnel as part of a combined malaria (ACT) and DTK training; improve the counseling skills of pharmacists and franchised private providers through PSI’s cadre of medical detailers; and, through the partner NGOs, upgrade the skills of already functioning community-based sales agents to include appropriate diarrhea case management counseling and treatment protocols.

Activities during Year Four: In April 2009, POUZN introduced a subsidized DTK (ViaSûr) that contains zinc, orange-flavored ORS packets and pictorial instructions for low literacy target populations using the proven PSI network of community-based distributors (CBDs) associated with partner NGOs at the subsidized price of 500 Ariary (\$0.26). To date, 11, 668 kits have been distributed in 12 districts through five partner NGOs (MCDI, CRS, PENSER, *Association des Jeunes Travailleurs de Vatondry (AJTV)* and *Association de Developpement (AD) de Fortdauphin*) In June 2009, POUZN introduced a cost recoverable, “premium” DTK (HydraZinc) containing zinc, strawberry-flavored ORS and pictorial instructions. This premium

¹ Baseline data not available from PSI.

product is being distributed through the private pharmaceutical distribution system and is for sale in pharmacies and drug counters for 2,000 Ariary (US\$1.00). To date, 14,616 HydraZinc kits have been distributed in 22 regions.

Training of the first community sales agents took place in April 2009. TOT training took place in Toliara in late June 2009. Forty six trainers have now been trained in these sessions. Since that date, 423 community agents from six NGOs (MCDI, PENSER, CRS, ZETRA, AJTV, AD), located in 12 districts, have been trained. Trained community agents receive a startup kit that includes 10 packages of ViaSûr (2 displays). These are already being sold at a rate of about 5-7 boxes/month/agent (non-diarrhea season). Partner NGO trainers and PSI supervisors are in the process of training additional community agents, following up their work and restocking them as needed. Training of community health agents in new districts began in August in partnership with SantéNet2. The PSI POUZN team has been very proactive in seeking additional local NGO partners, working outside of the SantéNet2 target districts, to extend the community-based distribution to as many districts as possible throughout the country. The team has prioritized the northern and western regions of the country and has identified and begun training new partners working in these areas. These regions have some of the highest diarrhea prevalence rates but are areas least touched by the SanteNet2 Project.

Point-of-sale materials have been produced and initial contacts have been made with a number of regional medical association units, the *Conseil Regional de l'Ordre des Medecins* (CROM). The first meeting with the CROM in Bongolava district took place on August 5, 2009. Since that date, presentations have been made at CROM meetings in Diana and Tamatave regions, reaching a total of 205 doctors. In addition, the POUZN team entered into a Memorandum of Understanding with the National Federation of Birth Attendants (*Federation Nationale de Sages Femmes – FNSF*) and then organized and delivered diarrhea management training to 187 midwives in Diego Suarez during their annual meeting. On-going training and sensitization activities with health care workers and pharmacists address the finding of PSI's 2008 household research that revealed that more than 60% of providers continue to recommend antibiotics for the treatment of childhood diarrheas.

The majority of BCC and IEC materials have been prepared. A pictorial users guide is included in each kit, with accompanying written instructions in Malagache (ViaSur) or French (HydraZinc). An instructional counseling card has been produced for community agents and a brochure has been produced for pharmacy personnel. These were pretested with TOT trainees (supervisory level personnel) during the first TOT training and revised accordingly. Two radio spots have been developed as well as two instructional videos—one featuring HydraZinc and the other featuring ViaSur—for use by Mobile Video Unit Teams and partner NGOs. Following USAID recommendations after the political crisis, airing of radio and TV spots have been postponed. It is hoped that nationwide dissemination of these spots will be allowed during the approaching diarrhea season.

Results:

- 11, 668 ViaSur kits have been distributed in 12 districts through five community-focused partner NGOs

- 14,616 HydraZinc kits have been distributed through pharmaceutical channels in 22 regions
- 46 trainers have been trained; 423 community-based sales agents from six NGOs, located in 12 districts, have been trained.
- Presentations have been made at CROM meetings in three regions, reaching a total of 205 doctors.
- Detailing of providers has reached 72 pharmacists/staff in six regions and 1800 doctors nationwide
- Two radio spots have been developed as have two instructional videos for use by Mobile Video Unit Teams and partner NGOs.

F. Continue to support the scale-up of the existing SWS (WaterGuard) and PuR programs in Malawi

Background: In 2006, PSI/Malawi received funding through USAID's Child Survival and Health Grants Program (CSHGP), POUZN and Procter & Gamble to support its safe water program. Through the integration of these sources of support, PSI/Malawi has continued to scale-up the safe water program to increase its reach into rural areas through community-based and NGO partners and to enhance communications and IPC activities related to diarrheal disease prevention.

Areas of Focus/Strategies for Year Four: Implement community based distribution and promotional efforts with the IPC partners. Continue rural distribution and communications efforts, coordinating closely with PSI's CSHGP of which the POUZN program is an integral part.

Activities during Year Four: PSI continued to work with community-based distribution partners to extend availability of POU water treatment among rural communities as well as target communications activities to focus on factors that influence water treatment. Community outreach events, through partners as well as PSI's demonstrators and community educator teams, address key determinants of water treatment: building confidence among caregivers on water treatment and handwashing; addressing perceived barriers such as taste and improving social support by working with influential leaders and role models in the community.

Integrated Diarrhea Prevention (IDP) through community-based initiatives: Collaboration with community-based partners as well as with Ministry of Health Health Surveillance Assistants (HSAs) has become a stronger component of the program than initially envisioned. With the addition of Work for Rural Health as a partner, PSI/Malawi has completed the training of six NGO Field Officers (FOs), 15 HSAs and seven traditional leaders from Salima District this year as well as 88 other HSAs, 14 nurses and 65 caregivers of orphans and vulnerable children. PSI also responded to the demand from Fresh Water Project and World Vision to add more promoters into their areas to improve coverage: 25 additional promoters and two FOs were trained. Refresher trainings among 53 promoters were conducted to ensure quality of health messages as well as address poor performing promoters.

In order to expand its community-based product distribution and further integrate POU water treatment, handwashing and ORS promotion into other health programs in Malawi, PSI/Malawi collaborated with NGO projects outside of the key partnerships, such as with the USAID-funded BASICS and ACCESS projects, the Clinton Hunter HIV/AIDS Initiative, Catholic Relief Services, Save the Children, other community-based organizations, and the US Peace Corps. PSI/Malawi has provided technical support to these collaborating partners in the form of training and joint development of IEC materials to be used in their programs. This adoption by other projects ensures that POU water and diarrhea treatment practices are promoted by a range of health projects in Malawi that do not rely on ongoing PSI Malawi resources.

Communications campaigns and targeted outreach activities:

Community mobilization: PSI in collaboration with Integrated Diarrhea Prevention Program (IDP) partners like Fresh Water Project, World Vision, Blantyre Synod, Work for Rural Health, and government HSAs organized learning forums and “open days” to raise awareness about activities of the Safe Water & Hygiene Promoters in the community and to learn from positive experiences among other households and schools. The events were well-attended by influential members of the community. Events included:

- Product and handwashing demonstrations by promoters and HSAs;
- Demonstrations of existing, community handwashing facilities;
- Visits to promoters’ households which serve as village role models;
- Visits to households that have adopted the promoted behaviors; and
- School visits to see how the pupils have adopted water treatment and handwashing.

Community Education: PSI/Malawi’s team of 15 community educators went to clubs, schools and churches to demonstrate use of IDP products, conduct handwashing demonstrations and help the community to construct simple handwashing facilities for their latrines. Community educators worked with local drama groups and promoters, covering the entire country in a year. Most, if not all community activities, were conducted jointly with HSAs that reside within the communities.

Cholera response: This past year Malawi experienced a cholera outbreak which led to over 5,000 cases with 114 deaths nationwide. Cholera outbreaks lead to heightened perception of risk among caregivers, community members and health officials, providing an important opportunity for behavior change. Through the project’s active participation in cholera response, relationships with the District Health Officers were strengthened.

Monitoring and evaluation: During the fourth quarter of 2008, PSI/Malawi conducted a national household survey to analyze program progress. The 2008 survey results showed that 23.8% of households surveyed treated their drinking water in the last week, a significant decrease from 35.6% in 2005. Use of WaterGuard or PuR also decreased from 14.2% in 2005 to 11.2% in 2008. Interestingly among those who did treat their water during the past week, use of other chlorine products increased significantly (see Table 2, below).

Table 2. Method of treating water among those who reported treating their drinking water in the last week

	2005	2008
WaterGuard Liquid	40.8	38.5
Other chlorine product	30.6	39.6
Boiling	28.8	15.3
PuR		1.7

The program is working to better understand why the decrease in WaterGuard use and what else is happening in the marketplace. Several environmental factors should be considered. 1. The 2005 survey was conducted in the diarrhea season and the 2008 survey was not. Therefore, risk perception and use are not surprisingly lower. 2. There were product stock outs during the transition from the old to the new bottle in May 2008. 31% of those surveyed indicated that the reason for not using the product was “the place where they buy it is out of stock.” 3. Price was also a factor in non-use. The price was 25 Malawi Kwacha (MK) for most of 2005-2008, and was increased to MK35 prior to data collection.

Results:

- 285,776 bottles of WaterGuard and 1,713,030 sachets of PUR were sold representing 302,906,300 liters of drinking water treated
- 275 NGO field officers and outreach personnel were trained.
- A total of 370 drama and targeted outreach shows were conducted in cholera prone districts reaching an estimated audience of over 140,000 people with cholera prevention, water treatment and good hygiene messages.
- Community promoters conducted 1,600 sessions, reaching an estimated audience of 52,000.

G. Continue to support the scale-up of existing SWS (Sûr'Eau) program in Rwanda

Background: In March 2007, PSI/Rwanda relaunched the household water treatment product, Sûr'Eau with financial support from USAID through POUZN. POUZN is supporting distribution of Sûr'Eau through sales to private sector outlets, including pharmacies and private sector providers, and through public sector health centers. The program established and continues to strengthen partnerships with local leaders, businesses, community-based and faith-based organizations, to further build social support for Sûr'Eau.

Areas of Focus/Strategies for Year Four: Year Four focused on consolidating the program and scaling up distribution. Using the materials developed in Year Three, the POUZN team continued to air the “Good Life” TV and radio spots combined with periodic community level MVU presentations and community health work discussions with caregivers on a village level.

Activities during Year Four:

Household Research: In October 2007, PSI executed a household survey with 4029 women and caregivers of children under the age of five. This survey showed that 32% of Rwandans in urban areas treat their drinking water with a chemical product, while 42% of rural Rwandans do the

same. However, Sûr'Eau use is greater in urban areas compared to rural areas; 27% and 11%, respectively. On the other hand, only 6% of urban Rwandans had used Sûr'Eau in the past month, and this was even lower in rural areas (4%). Despite this, 98% of Rwandans know that dirty water is a cause of diarrhea.

The survey illustrated that the project still needs to raise awareness of Sûr'Eau, particularly in rural areas where only 55% of people have heard of the product. Demonstrations on how to use the product also needed to increase. Social norms and availability were other factors that needed to be addressed in messaging in order to increase consistent Sûr'Eau use. Many people wanted to use Sûr'Eau. Urban Rwandans were willing to pay up to 392 Rwandan francs for a bottle, while rural Rwandas were willing to pay up to 365 Rwandan francs. (The current price is 300 Rwandan francs).

Commercial Sector Activities: The POUZN team focused efforts on expanding and strengthening its commercial distribution and on raising awareness of the product in the private sector through a mass media campaign. In early 2009, the team developed a mass media campaign designed to: 1) rapidly build awareness and knowledge among the target group; 2) promote availability at wholesalers and semi wholesalers; and 3) improve point of sale presence and visibility. The campaign, targeting caregivers of children under 5, was launched in June 2009. It positioned *Sûr'Eau* as a water treatment product that offers a mother the comfort of being a good mother who ensures the wellbeing of her children. The campaign included a mass media component which focused on national and community radio (Radio 10, Contact FM, Radio Rwanda, and Radio Rubavu) and included radio spots and shows on safe water and hygiene practices. A 60 second radio spot was aired twice a day on 9 radio stations over 3 months. The spot was designed to increase awareness and knowledge about the product. The spot was aired nationally more than 10,000 times on all major and community radio stations. The team also participated in various weekly radio programs to educate people on household water treatment and hygiene.

To complement the mass media, the POUZN team conducted a variety of community level events including interpersonal communication at clinics and over 50 mobile video shows. The shows featured product demonstration. The POUZN field team produced and disseminated communication materials and developed interpersonal communication tools including 5000 brochures and 300 flipcharts, and trained private sector sales agents (including pharmacists), local authorities, schools representatives, health facilities staff and community health agents. The team also worked with women's associations and the National Women's Council to educate and inform target audiences about safe water and hygiene. In addition, PSI supported the efforts of the Government of Rwanda and UNICEF to highlight Global Handwashing Day in November 2008 and World Water Day in March 2009.

In order to move to a more demand-led distribution strategy, this campaign was also targeted at increasing awareness by the wholesalers that stock *Sûr'Eau*. To achieve this, an announcement promoting the *Sur'Eau* to wholesalers was aired twice a day on all radio stations in June 2009. The POUZN team sought to strengthen the link between the retailer, semi-wholesaler and the wholesaler. Building on this, PSI implemented a rapid outlet creation strategy, in which communication materials were displayed at newly created or existing outlets to increase brand visibility and promotional events were held adjacent to the new outlets. While the long term

impact of this communication campaign remains to be evaluated, an improvement in commercial sector sales was immediately observed.

Public Sector: The POUZN team has effectively scaled up distribution of *Sûr'Eau* through health clinics. During 2009, more than 120,000 bottles of *Sûr'Eau* were distributed to over 300 of Rwanda's health centers. The team is supporting the government pharmaceutical distributor, CAMERWA, in distributing the product from its warehouse to district pharmacies, and from there to health facilities. PSI has also been working with national and district authorities to contribute to the training of the 60,000 Rwandan community health workers. Key water disinfection and hygiene messages have now been incorporated into the community health worker training curriculum developed by the MoH.

Following the outbreaks of cholera in Musanze and Rubavu districts in March 2009, the POUZN team, in close collaboration with MoH and district authorities, worked to help stop the epidemic from further spreading. This joint effort was achieved through prevention oriented activities including *Sûr'Eau* distribution and behavior change communication activities. Over 1500 bottles of *Sûr'Eau* were distributed, and 30 IPC sessions were conducted. Key messages delivered to the hardest hit areas included:

- “Learn from this experience and prevent problems in the future.”
- “ You need to understand year-round use of *Sûr'Eau*, not just use during the time of outbreaks.”

H. Targeting people living with AIDS (PLWHAs) in Rwanda

Background: As part of the Government of Rwanda's National HIV/AIDS Plan 2005-2009 and US President's Emergency Plan for AIDS Relief (PEPFAR), USAID determined that support for the provision of POU to PLWHA, in addition to prevention and treatment activities, was an essential element of the provision of care to PLWHA. In 2008, the USG obligated funds to POUZN to implement a program that focuses on training public sector, VCT and palliative care personnel to provide correct information about SWS, strengthening partner associations, and increasing knowledge about SWS through various communication media.

Areas of Focus/Strategies for Year Four: The project team focused on training public sector, VCT, and palliative care partners to provide correct information about POU in preventing diarrheal disease among PLWHA, strengthening PLWHA umbrella associations to promote *Sûr'Eau* through their partner community-based organizations (CBOs), and increasing knowledge about the need for safe water to generate demand for *Sûr'Eau*.

Activities during Year Four: PSI completed the training of trainers targeting district partners. The objective of the training was to provide correct information about *Sûr'Eau* in preventing diarrheal disease among PLWHA and build their capacity to conduct training and deliver communication messages. The training covered water treatment techniques and hygiene information such as handwashing, household treatment and storage of water, and sanitation. Each district was provided with communication and training materials including flipcharts and manuals to conduct training on their own. PSI supported the districts to conduct training of health center staff including VCT providers. The aim of the training was to relay correct information about *Sûr'Eau* in prevention diarrheal disease among PLWHA and deliver

communication messages. VCT service providers were taught to incorporate hygiene messages into pre- and post-test counseling.

Three hundred and seventy health center staff attended the training sessions. In addition, each HC and VCT site was provided with communication materials including flipcharts and brochures to enable them to better communicate with the target audience. Reports from the field show clearly that promoting *Sûr'Eau* through VCT sites increased awareness among this target group.

PSI identified, selected and trained three Rwandan partner organizations (RPOs) who then trained local community organizations that provide palliative care to PLWHA to implement outreach programs and to integrate safe water and *Sûr'Eau* information into palliative care materials in collaboration with the Ministry of Health, USG clinical partners, and the Community HIV/AIDS Mobilization Program (CHAMP). PSI finalized agreements with partner NGOs-- RRP+ (*Réseau Rwandais des Personnes Vivant avec le VIH/SIDA*), ASOFERWA (*Association des Femmes Rwandaises*) and SWAA (Society for Women and AIDS in Africa). These organizations executed 22 trainings and supervised more than 50 awareness raising sessions with PLWHA. After the training, the PLWHA are given the opportunity to generate income through the sale of *Sûr'Eau*. One of the biggest challenges faced by the RPOs has been the logistics involved with transporting the starter stocks of Sur Eau to the local PLWHA associations.

Results for above programs in Rwanda:

- 280,681 bottles of SurEau were sold resulting in 280,681,000 liters of water treated.
- 1516 individuals were trained including health center staff, rural health and sanitation agents.
- 44 drama shows were conducted attracting more than 15,000 people. These shows featured product demonstrations where the demonstrator concluded by drinking the water that had been treated
- Over 100 mobile video shows and interpersonal communication sessions about handwashing, point of use water treatment and improved hygiene were conducted. These activities were conducted to increase knowledge of waterborne disease and methods of prevention and to increase informed demand for a safe water system, such as *Sûr'Eau*. Around 20,000 people were reached with these messages.
- Mass media campaign to promote water treatment aired on 4 radio stations with nationwide reach. The campaign intends to increase knowledge and awareness of *Sur'Eau*, and to address key barriers to product purchase and use.
- 100 members of PLWHA associations and CHWs were trained by RPOs to disseminate SWS information through home-based care of AIDS patients.
- More than 1000 PLWHA, their families and caregivers were reached with safe water messages through IPC sessions conducted by trained members of PLWHA associations

I. Expand access to SWS in Rwanda through Mutuelles de Santé

In collaboration with USAID's Health Systems 20/20 Project, the project team implemented a pilot program to distribute and promote Sûr'Eau, through community-based health insurance schemes (mutuelles). Almost 5000 mutuelle members were reached during IPC sessions in the two intervention districts of Nyagatare and Rubavu. To date, 35,500 bottles of Sûr'Eau have been sold through mutuelle committees. A workshop with 50 mutuelle section managers was conducted to empower them with information and messages for use while following up on pilot activities. Two radio shows were aired on a Rubavu-based radio station.

J. Provide technical assistance to support the introduction and/or maintenance of zinc and/or POU programs

Pakistan is a country with extremely high diarrhea prevalence (22%), a vibrant private sector and an interest in and commitment to the introduction of zinc for the treatment of diarrhea. For this reason POUZN conducted an assessment of the various options for promoting zinc through both public and private sectors in Pakistan. This report was well received by the USAID Mission who invited POUZN to return and prepare a workplan for supporting demand creation for zinc in the private sector. This workplan has been submitted to USAID/Pakistan and USAID/W for final review.

In February 2009, POUZN team members traveled to Senegal to conduct an assessment of the feasibility of launching a POU product through a local social marketing organization, ADEMAs. The assessment report was well received by the USAID Mission who has amended their cooperative agreement with ADEMAs to provide funding to establish the partnership between ADEMAs and Medentech, manufacturer of Aquatabs, as suggested by the assessment report. With the approval of USAID/W CTO, POUZN purchased the first shipment of Aquatabs for this program.

POUZN technical assistance to PSI Madagascar to develop a Phase II workplan for zinc was undertaken in August. This workplan was approved by the USAID Mission in October. POUZN planned technical assistance to USAID/Madagascar to determine commodity requirements (public and private sector) for the pending purchase of zinc, planned for February-March 2009, was postponed due to the civil unrest in Madagascar.

POUZN team members assisted the PSI field team in Benin to prepare their workplan for the third year of program activities. This workplan was completed in September and has now been approved by USAID/Benin.

POUZN team members visited Rwanda and Malawi to monitor program progress and document program status and results.

TASK THREE: TECHNICAL/GLOBAL LEADERSHIP

Objectives:

- Prepare and disseminate a case study on POU strategies;
- Prepare and disseminate lessons learned in the implementation of zinc programs;
- Finalize country briefs on at least three POUZN country programs;
- Attend key conferences (Global Health Conference, Micronutrient Forum, Household Water Network Meeting, World Water Week, etc.);
- Present at least one paper on POU and/or zinc;
- Disseminate research reports;
- Attend POU and Zinc partner meetings; and
- Continue dissemination of information on POUZN activities through electronic media.

Status Report on Key Activities and Outputs:

A. Publish a case study on lessons learned through the implementation of POU programs

A case study is in preparation which will examine the model being used by Medentech who is taking a "base of the pyramid" approach in its marketing strategy. This technical assessment will analyze information provided by Medentech (such as sales, product availability and reported use), describe accomplishments and challenges, address the sustainability potential of the model, and offer recommendations for improving market-building approaches for household water treatment products.

B. Prepare and disseminate lessons learned in the implementation of zinc programs

Given civil unrest in Madagascar, POUZN was not able to conduct the planned operations research. This paper has been delayed to Year Five and will cover the results and lessons learned from all three zinc countries—Nepal, Madagascar and Benin.

C. Develop country briefs on at least three POUZN country programs

A country brief on Nepal that highlighted results and lessons learned was completed and disseminated in May. Country briefs highlighting progress to date in social marketing POU products in Malawi and Rwanda are in preparation.

D. Participate in key conferences and present at least one paper on POU/zinc

POUZN staff participated in the Water Environment Federation Conference in April, the Micronutrient Forum in China in May and the Household Water Treatment and Storage (HWTS) Network meeting in Dublin, Ireland. POUZN HQ staff presented the findings of the Nepal research on zinc program at the Micronutrient Forum.

E. Attend POU and Zinc partner meetings

POUZN staff have actively participated in all POU partner meetings and are now regularly included in the teleconferences of the Zinc Task Force.

F. Continue dissemination of information on POUZN activities through electronic media

The Nepal Country Brief was completed in April and disseminated at the Micronutrient Forum in May and made available on the POUZN website at that time. POUZN staff continue to monitor new research and publications and post them on PSP website.

TASK FOUR: MONITORING AND EVALUATION

Objectives:

- Pre-test and finalize POU and zinc-focused M&E “Toolkits” and disseminate to international community
- Complete field evaluation of Nepal zinc program, conduct additional data analyses, and disseminate a final report of results and lessons learned.
- Complete field evaluation of pilot program to promote use of POU through mutuelles in Rwanda and disseminate findings
- Design and implement an operations research study in Madagascar to determine the most efficient and cost-effective methods of improving access and encouraging use of zinc and ORS in the treatment of diarrhea
- Finalize research plans for both POU and zinc

Status Report on Key Activities and Outputs:

A. Pre-test and finalize POU and zinc-focused M&E “Toolkits” and disseminate to international community

Both sets of questionnaires have been pretested and used to gather program results data in the field. The new POU questionnaire was used to obtain information during the household surveys in Malawi and Haiti and has been revised in preparation for fielding household surveys in Kenya and Rwanda. The zinc questionnaire was pretested and used to gather information during household surveys in Nepal (endline) and Madagascar (baseline). Based on the findings of the Nepal zinc research, the POUZN team has revised the zinc questionnaire in preparation for the household surveys scheduled for November 2009 in Benin (final survey) and in January 2010 in Madagascar (operations research survey). The Zinc Toolkit has been finalized and is currently being formatted in preparation for posting on both the PSP and USAID websites.

B. Complete field evaluation of Nepal zinc program, conduct additional data analyses, and disseminate a final report of results and lessons learned.

The summary evaluation and final household survey to assess results of the Nepal program were conducted in August/September 2008. POUZN’s research analyst, Dr. Wenjuan Wang, analyzed the household survey data set and prepared a report of the research findings. This report has been formatted and is ready for posting on the PSP website. Pertinent results were included in the Nepal Country Brief and Micronutrient Forum presentation.

C. Complete field evaluation of pilot program to promote use of POU through mutuelles in Rwanda and disseminate findings

An evaluation of the pilot program to promote POU through mutuelles in Rwanda was completed in July. This evaluation included both a household survey to determine target consumers’ knowledge and use as well as an analysis of the cost–benefit of the program for the mutuelles themselves. The evaluation focused on measuring the impact of the pilot on

knowledge and use of Sur Eau, using baseline and endline households survey data, covering nearly 2,500 households in the two pilot districts and a comparable control district. The results indicated that this approach to promoting and distributing Sur Eau was very effective in improving knowledge and use of the product:

- ever use of Sur Eau reached 59-61% of target households in the pilot areas (from baseline of 18-19%), but remained at 11% in the control area
- current use of Sur Eau (self-report) reached 11-12% in the pilot areas, and remained at 1% in the control area
- knowledge of Sur Eau and its correct use at endline was significantly higher in the pilot districts

Interviews with pilot stakeholders were conducted to supplement the quantitative results. Limitation of the study design and timing did not allow for reliable measurement of the impact of the pilot on diarrhea prevalence.

D. Design and implement an operations research study in Madagascar to determine the most efficient and cost-effective methods of improving access and encouraging use of zinc and ORS in the treatment of diarrhea

The planned operations research study was postponed for a year due to civil unrest in Madagascar, during which PSI expatriate staff were evacuated. This research is now planned for the 2010 diarrhea season, with field research in January 2010.

E. Finalize research plans for both POU and zinc

Several meetings were held with both Abt and PSI research staff to finalize a research plan and agree on roles and responsibilities. This plan will be monitored closely in Year Five to ensure data is collected and analyzed on a timely basis for final project reporting.

Results:

Table 3		LITERS OF DRINKING WATER TREATED WITH POU PRODUCTS*				OUTLETS		
Country	Product	FY2007	FY2008	FY2009	% change	2008	2009	%change
Benin	Aquatabs		300,000	66,000,000	21900%	800	1000	25%
DRCongo	PUR		2,400,000	29,882,800	1145%	114		
Haiti	DloLavi (SWS)		63,996,000	148,985,000	133%	68	160	135%
Kenya (coast)	WaterGuard	230,540,000	190,968,000	219,732,000	15%			
	PUR	293,740	307,200	493,080	61%			
Malawi	WaterGuard	397,287,000	110,413,100	285,776,000	159%	492		
	PUR	537,977	2,338,720	17,130,300	632%			
Rwanda	SurEau (SWS)	22,952,000	224,200,000	280,681,000	25%	1241	3711	
TOTAL		651,610,717	594,923,020	1,048,680,180	76%			

Table 4		DIARRHEA TREATMENTS KITS SOLD (2 ORS + 1 zinc)						
Country	Product	FY2007	FY2008	FY2009				
Benin	OraselZinc		200,616	424,000	111%	131	174	33%
Madagascar	Hydrazinc**		0	14,616			893	
	ViaSur***		0	11,668			423	
TOTAL			200,616	450,284	124%			

*Derived from sales

** Launched in June 2009

***Launched in April 2009