



Mekong RBM IEC Project News

April 2004



It is already one year since the establishment of the Mekong Roll Back Malaria IEC Project News in April 2003. We would like to thank you for your interest and support. Many of you have been providing information, feedback and suggestions related to malaria prevention and control programmes. This has helped us to improve the project newsletter.

From the Technical Consultation Meeting in February, the IEC country teams have gained a better understanding of how to design informative and attractive visual materials. Following the meeting, each team has concentrated on producing and revising draft IEC materials with target populations. The Vietnam IEC team organized a workshop with target populations in Khanh Vinh District, Khanh Hoa Province to develop storylines for audio materials and flipcharts, posters and leaflets to encourage forest-goers and their families to protect themselves from malaria. They are also producing a question and answer booklet to help health workers and village volunteers to provide better answers to the community.

Mr. Nguen Ngoc Thuy, the national IEC specialist for Vietnam reported from the field:

“We believe that the project will be in a position to produce better and more culturally appropriate malaria IEC materials for the Raglai”, says Dr. Le Phan, Director of the Khanh Vinh District Health Center, concluding the participatory workshop jointly conducted by staff from the National Institute of Malaria, Parasitology and Entomology (NIMPE) and the RBM IEC Project.

The workshop was another important activity for the bottom-up approach in an effort to produce good IEC materials for ethnic groups in Vietnam, where forest-goers and migrants are particularly exposed to the danger of malaria. The participants included hamlet health workers (most of them Raglais), public loudspeaker announcers, commune health station staff from the Khanh Phu and Khanh Trung communes, district mobile team and the provincial malaria staff.



The workshop participants are working in groups to come up with IEC materials.



During the two-day workshop, starting on March 29, participants spent most of their time working in groups, discussing new ideas for posters and storylines for flip charts and audio materials. It is interesting to note that the different cultural background of the participants made for lively discussions. For most of the participants, this was their first opportunity to contribute ideas for the development of IEC materials. As well as discussions, participants had also an opportunity to comment on samples of interesting IEC materials from Vietnam and other Mekong countries. Participants did role-plays, using their creativity to produce themes for new posters.



Participants are role-playing of a wife encouraging her husband to take bednet with him when going into the forest.

The national malaria control meeting was organized in early March in Tay Ninh Province to review the malaria control programme in 2003 and to plan for the control programme in 2004. There were representatives from almost all 64 provinces and cities attending the annual meeting. During the meeting, Professor Le Khanh Thuan, Director of NIMPE remarked that the control programme needed to pay more attention to the IEC component to reach some of target populations: “Big

population movements were beyond government control during the year 2003. This led to an increase in malaria cases in twelve provinces. In many localities health workers cannot communicate with people properly due to a lack of communication skills, inability to speak local languages, and insufficient knowledge of good methods to convey messages. Channels to disseminate malaria information in IEC materials are not always appropriate to these mobile populations. We need to put more emphasis on improving this situation.”



There were 50 malaria deaths during 2003 and most of them occurred among migrants in the Central Highlands, where population mobility is high. Dr. Tran Chi Liem, Vice Minister of MOH, also stated during the meeting that: “It is very difficult to reach to these populations but we should make the effort.”

Professor Le Khanh Thuan hinted that the Global Fund for malaria in Vietnam might be launched in May this year. He called on the WHO and other international organizations to continue providing assistance to Vietnam in roll back malaria efforts. He also pointed out the intention of the National Malaria Control Programme to prioritize areas for reduction in the use of insecticides for house spraying and impregnation of bednets, due to environmental and budget constraints.

As part of the effort to strengthen malaria control programmes in the Mekong Region, the WHO in the Western and Pacific Region Office has funded three small projects to study the difficulties in reaching certain groups. One of them is a study on "Gender, Poverty and Malaria". The study took place in Kaleum and Lamam Districts of Xekong Province, Lao PDR, where most of the people are Mon-Khmer. Dr Rita Gebert conducted the study in collaboration with the Centre of Malariology, Entomology and Parasitology and provincial and district malaria staff. Preliminary findings from the study are:

- Men have a higher tendency to sleep in the forest without bednets.
- Women get up very early in the morning (3 to 4 am), when mosquitos may still be biting.
- From observation, women and men are equally likely to get malaria, but statistics show that women seek treatment less frequently than men.
- Both men and women normally answer that there is no way to prevent malaria if you do not have money.
- Women's knowledge and understanding of malaria prevention is less than men's.
- There is a high incidence of bednet use among both women and men, even though they don't have a clear understanding of malaria transmission.
- Bednet coverage is high in some villages but most bednets are in poor condition.
- Medicines are often sold according to amount of money the buyer has rather than according to proper treatment course.
- People stop taking medicines as soon as they feel better.
- Both health staff and villagers have little awareness of the dangers of malaria to pregnant women and unborn children.
- Women tend to wait longer than men before seeking treatment.

The full presentation is available. Please contact Dr. Eva Christophel for more detail or a copy of presentation at christophele@wpro.who.int The complete findings are being analyzed. We will inform you when the report of the study is available.

We have received information of a malaria control programme from Cecil Hugo, Executive Coordinator of ACTMalaria. The malaria control programme in the Philippines, under Global Fund support, puts a strong focus on indigenous people, most of whom live in remote areas, who are difficult to reach using the mainstream control approach. An IEC campaign will be developed based on their own culture and customs. Existing structures will be used as communication channels to reach these groups.

Here is some information on the malaria control programme for indigenous peoples:

Scaling up of malaria control to the Philippines' indigenous people (IPs)

Indigenous peoples (IPs) is estimated to be about 90% of the 10.5M malaria endemic population in the Philippines. Like in other countries in the region where they are present, they are considered an especially underserved subgroup among the poor resulting from difficulties in geographic access, cultural biases, and low socio-economic development opportunities available in the areas where they are located. It was for this reason that they were selected to be the primary beneficiaries of the Global Fund for Malaria Project in the Philippines.

One of the broad activities to support the 2 major control strategies of the project, i.e. Early Diagnosis and Prompt Treatment and Vector Control using Impregnated Mosquito Nets, is the development and implementation of an IEC campaign that will take into account the cultural differences of the IP communities in the 25 target provinces in the Philippines. In the planning for the campaign, the National Malaria Control Programme and the Bureau of Health Promotion of Dept. of Health, the Phil. Rural Reconstruction Movement (the NGO GF sub-recipient for malaria) and the KLM (Movement against Malaria - Private-Public Mix) has decidedly worked hand-in-hand with the Local Government Units of the Provinces, the representatives from the Regional/Provincial Offices of the National Commission of Indigenous Peoples (NCIP) and the target cultural communities. The NCIP, an organization under the office of the President mandated to protect the rights of the IPs, has been included in the Project Management Team in every target province--such that they will help the programme in ensuring that the purposes of the project is made clear and actually gets to the intended recipients.

In the identification of IEC materials for the campaign, the provinces are espoused to make use of already available materials, channels and media as well as initiatives implemented through other projects, i.e popular art, tribal music and dances, puppetry and other printed campaign materials, etc. The KAP surveys, researches conducted and other documents already published about these groups of people will be used as the basis

for the development or improvement of the materials. Unlike in other campaigns for other control programmes, there was no prescribed communication plan for all provinces. Instead, all the IEC and MCP staff prepared their respective provincial plans while the rural health unit (RHU) staff prepared the municipal social mobilization plans. After training the RHU staff on malaria control program management and advocacy, the orientation for NCIP staff and tribal leaders on malaria control will ensue. Depending on the timelines of each of the provinces, the identification of IPs who can be trained as volunteers in the expansion of diagnostic and treatment services to the tribal communities will be the activity to follow along with the awareness campaign that will be launched province-wide. The objective of the whole IEC campaign is to increase the utilization of all the malaria control services that will be made available and accessible through the GF support.

This month, Cambodian, Lao, Myanmar, Thai and ethnic Tai people in southern Yunnan will celebrate their traditional New Year. We hope you enjoy the celebrations. "Happy New Year!"

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