

Mekong RBM IEC Project News

May 2004

The Rainy season has started in most countries in the Greater Mekong Sub-region. With the rain comes the mosquitos. From our field research to assess people's knowledge and practices related to malaria prevention we have found varying levels of knowledge. Field research with the Raglai ethnic group in Khanh Hoa Province in Central Vietnam found that 80% of respondents said mosquitos are the only source of malaria transmission and 73% said the best way to prevent malaria is sleeping under a bednet. Bednet usage rate is very high amongst the respondents in that area, at 99%. Most of the bednets were supplied by the National Malaria Control Programme.

On the other hand, field research conducted with the Wa ethnic group in Ximeng County, in Yunnan Province, found that only 32% of respondents said mosquito is the cause of malaria, 47% gave unclear answers about the cause of malaria and 11% did not mention that mosquitos transmit malaria. A high percentage, 76% of respondents, said they use bednets to prevent mosquito nausea.

Field research from other countries also shows varying results on knowledge of malaria transmission, prevention and seeking treatment. Many of the research teams found that bednets are not a priority item in the home even though they know that bednets can prevent malaria. People are willing to use bednets and impregnate bednets if national malaria control programmes provide them free of charge.

National malaria control programmes need to put emphasis on how to provide bednets and insecticide for bednet impregnation to people in malaria endemic area. For the long-tem effort national malaria control programmes will need to educate, encourage and empower communities for self-reliance for malaria prevention and control through different means. Malaria education through appropriate communication channels and community mobilization will help to sustain the impact of malaria prevention and control and empower communities to take action.

All country teams have been busy working with target populations to produce IEC materials and guidelines. The Cambodia IEC team has made good progress with their project implementation with the production of a video story, flipchart, and other materials.

The Cambodian IEC team is continuing to work with the target groups to get more details on the local situation in order to develop IEC materials,

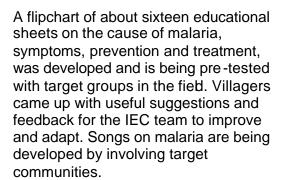
especially the video story, that suits the needs and situation of the local communities.

The Health Education Unit in CNM has met with several partners regarding the development of IEC materials, specifically the development of video story. Provincial Department of Culture has been consulted regarding actors/actress for the video story. The Director of the Department of Culture has also agreed to assist in selecting the actor and actress and review the storyline for cultural appropriateness. The team also consulted with the Director of the Information department for support with broadcasting of the video story through the Provincial TV station. It is noted that the TV broadcasting in Ratanakiri Province can cover only around ten kilometers around Banlung town, but it is still an important means to get coverage as much as possible in that area.

The Provincial Health Department has a strong commitment to promote this information through the health staff. Collaboration with Health Unlimited (HU) and International Cooperation Cambodia (ICC), main local partners



for malaria prevention and control programme in Rattanakiri, in the development and dissemination of malaria information, and the utilization of malaria video, is important.





Guidelines (manual) for the use of the flipchart are also in the process of development. The guidelines will be finalized after the flipchart prototype is developed. To build the capacity of health staff and health focal points at community level, a draft manual on communication skill training was also written.



Shooting of the video story will take place before June and the guidelines for the use of the flipchart and the manual

for communication training skills will be completed in July.

The Myanmar IEC team organized a few different workshops to advocate and mobilize different partners on malaria prevention and control during 4–8 May 2004 at Tachileik Township, Shan State. Local Pharmacies informed the team that many people who come to buy anti-malaria drug do not go for blood tests, and some of them, including village drug sellers, do not really have a good understanding of what causes malaria and how to prevent it. Therefore, a leaflet on malaria transmission, prevention and appropriate treatment, would be a good material to use to increase knowledge of villagers and people who sell anti-malaria medicine.



Basic health staff and teachers are discussing how to work together in malaria prevention and control in their communities.

A workshop with basic health staff and primary school teachers has provided a good platform for health staff and teachers working together on malaria prevention in their villages. Malaria school education has been identified as a suitable channel to use to encourage schoolchildren to pass on their knowledge and encourage the community on malaria prevention. A Child-to-Child approach will be adopted in developing malaria school education. Malaria school activities will be linked between knowledge children gain in school and practical malaria prevention in their villages.

During the workshop, teachers and basic health workers have drafted few malaria related activities that children can do over a weekend. These activities will allow children to have a better understanding and put what have learned into practices. Teachers and basic health staff also developed

short songs and poems that can be used in classrooms and in communities. Children have developed stories on malaria issue. They also drew pictures to express their experience and knowledge on malaria to go with stories. Teachers will take their stories and develop further to be cartoon books to use in classrooms and communities. More workshops with basic health staff, teachers, and villagers will be organized to produce appropriate educational materials for their communities.



A girl is drawing a picture on how to prevent malaria to go with her story.

In 2001, there was evidence that silkworms in a few villages of Houaphan Province in Northeastern of Lao PDR died after bednets were impregnated with insecticide. The national malaria control programme sent technical staff to investigate and found that people had used the bowl used for bednet treatment to also collect mulberry leaves to feed the silkworms. Silkworms are very sensitive. They can die if the weather is too hot, too damp or they have been handled incorrectly. Small flies can also kill silkworms. In 2002-2003 the Consortium, an international non government organization, working in those villages to increase silk production, supported further studies on the effect of insecticide treated nets and silkworms The studies showed that ITN has no any negative effect on silkworms if the bednet is impregnated properly according to national guidelines. People should wash their hands thoroughly before handling silkworms.

Similar studies on the effect of ITN and silkworms will be conducted again this year. For more information on the study, please contact Martin Dunn, Project manager of Lao Economic Acceleration Programme for Silk Sector, the Consortium Lao PDR. E-mail martin@consolao.laopdr.com

There was similar study on the effect of ITN and silkworms in My Duc District of Hatay province, and four districts of Lamdong Province, Vietnam, from 1998 to 2000. The study showed that:

- There is no significant difference between households with silkworms and without silkworms in mosquito density.
- Bed net impregnated with Imperator, Vectron and Fendona did not kill silkworms, but bed net impregnated with Icon killed 78-100% of silkworms.
- Residual spraying with Icon, Fendona and Vectron are very toxic for silkworms. Death rate is 58-100%. If silkworms are moved before spraying and bought back an hour after spraying, the death rate is 1-27% only.
- Burning mosquito coil is toxic for silkworms. If distance is less than 3 metres 100% of silkworms are killed. If distance is 5 meters 25-75 % killed.

For more information of the study, please contact National Institute of Malarilogy, Parasitology and Entomology (NIMPE), Hanoi or through Dr. Dai, National Malaria officer, WHO Hanoi, e-mail dait@vtn.wpro.who.int

The Mekong RBM IEC Project News, December 2003, mentioned the preliminary findings of the efficacy study of insect repellents for malaria prevention conducted by the Medical Committee for Netherlands and Vietnam (CNV). The study now is completed and findings were presented

at the Asian Congress of Parasitology and Tropical Medicine in Kuala Lumpur. Here are conclusions of the study:

- DEET repellents should be more highly valued as a means to protect people against malaria infection. Up until now they seem not to be taken seriously enough by malaria control programmes.
- A large and increasing amount of evidence shows DEET to be safe as a topical repellent, for children also, and 30% formulations should be fully allowable for public and personal health purposes in high-risk areas.

Please contact Ron Marchand, Director of the MCNV for more information, e-mail ron.marchand@mcnv.nl and mcnv@netnam.org.vn

On behalf of the Mekong Roll Back Malaria IEC Project team, I would like to take this opportunity to thank friends and colleagues for their contributions to the News. Without their contributions we would not be able to share and learn from each other. There is a lot of knowledge and experience across our region and it is valuable to have people contribute to a forum where we can all benefit from that diverse knowledge and experience.

