



MASS ACTION FOR A MALARIA FREE UGANDA

HANDBOOK FOR LEADERS

Message: Malaria is a killer disease, prevent it, and when malaria is suspected, an urgent action - testing and treatment and follow up is required.

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WHY THE HANDBOOK FOR LEADERS?

This handbook is meant for leaders including; the president, parliamentarians, government civil servants, religious and cultural leaders, media personnel, private sector, district, health facility, schoolteachers (teaching and non-teaching staff), community leaders and households.

It is developed to guide you on your role in the fight against malaria for a healthy and productive nation

It is developed in reference to the Mass Action Against Malaria (MAAM), a multisectoral implementation approach of bringing everyone on board in the fight against malaria.

MAAM aims to attain Uganda's vision of a malaria free Uganda with a slogan – "Am I malaria free today?"

MAAM aims to reach every household with malaria interventions where malaria is everyone's business requiring mass action by all to mitigate against the severe effects of malaria including rampant sickness, death, high health expenditure and poverty

Before you mobilize the community to prevent and control malaria, ensure that you are already protected because a malaria free Uganda starts with you.

Go for Antenatal care and take appropriate medicine to prevent malaria in pregnancy.

WHAT IS THE MALARIA BURDEN?



In 2018, Uganda had the 3rd Malaria cases and is 7th highest in malaria deaths in the world









15%

of those admitted in health centers are due to malaria.

20%

of the deaths that occur in health centers are due to malaria.

WHAT ARE THE EFFECTS OF MALARIA?



Malaria is the leading cause of sickness and death in Uganda.



In schools, malaria contributes to absenteeism and poor academic performance.



Malaria in pregnancy leads to miscarriage, anemia, low birth weight of newborn babies, mental and physical disabilities



Malaria poses a heavy economic burden costing a family on average of 30,000 shillings per episode.



Go to a health centre for testing and treatment if you feel unwell.

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WHAT IS THE MINISTRY OF HEALTH DOING TO PREVENT AND CONTROL MALARIA?





Malaria integrated vector control using LLINs, IRS, Larviciding and environment management e.g. draining breeding areas.



Malaria testing and treatment.



Chemoprevention in high risk population groups.



Surveillance, Monitoring, Evaluation and Operational Research.



Program Management to improve services



Epidemic Prevention, Preparedness and Response.



Advocacy, Social Mobilization and Behavior Change Communication

Please ensure that your house and surrounding structures are sprayed with insecticide to prevent malaria.

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WHY ARE WE CONSIDERING MASS ACTION AGAINST MALARIA?



Over the last decade, malaria has reduced from 42% (2009) to 19% (2014) and 9% (2018). 03





9%

2018

We therefore need concerted effort against malaria by all to realize our vision 2040 of **a transformed Uganda** society to a prosperous middleincome country. We need to start asking ourselves, Am I malaria free today? and to know that **a Malaria free Uganda is our collective responsibility.**







Commitment and

accountability



Multi-sectoral

approach



Sense of urgency

WHAT ACTIONS DO WE DESIRE FOR ALL STAKEHOLDERS AT ALL LEVELS?

To achieve a malaria free country, it is critical for everyone;

- To have a re-orientation of his/her own values to think about malaria prevention as a public health action since life is involved.
- To acknowledge that your actions or inaction affects others.
- To have full commitment and accountability.
- To scale up action against malaria.
- To have a sense of urgency, acknowledging that each minute delayed or wasted cost lives with negative consequences on the economy.



WHAT'S MY ROLE IN CHASING MY MALARIA TO ZERO?

Chasing malaria to zero is our collective responsibility. In order to be effective, leaders at all levels have a role to play in fight against malaria.

1.The Cabinet

• The role of the cabinet led by the president is to provide national leadership in all efforts to ensure a malaria free Uganda.



2. Parliamentarians

Fnact and

promote

Reduce

malaria deaths

- Galvanize political will at national and sub-national levels to reduce malaria deaths, including advocating and translating commitments to increase domestic funding for malaria response and strengthening the health sector.
- Enact and promote malaria and health related legislations and ensure mechanisms for compliance are put in place at constituency and community levels.
- Advocate for increased funding for malaria response and universal health coverage through multi-sectoral actions as well as ensuring accountability (fiscal and programmatic) at all levels.
- Mobilize constituents to embrace malaria prevention and control.



3. Government ministries, parastatals and departments

- Guide malaria policy and priorities.
- Strengthen capacity of districts in planning and supervision for malaria services delivery.
- Endorse recruitment of dedicated staff for approved NMCD organizational structure.
- Coordinate stakeholders including the Roll Back malaria partners, CSOs and private sector.
- Mobilize and allocate resources for malaria prevention and control.







4. National leaders (Religious and cultural)

• Promote awareness and influencing positive behavior change using your platforms for malaria prevention and control.

5. Media personnel

• Promote awareness and influence positive behavioral change using your media spaces for malaria prevention and control.

6. Private Sector leaders

- Comply with Public Health Act in Farms, Plantations, Quarries, Construction sites, Dams maintain Quality of Care in health care institutions.
- Engage actively in planning, review, and implementation of malaria interventions such as in distribution, promotion and consistent use of long lasting insecticide treated nets (LLIN).



epidemic

Establish and

sustain an

7. District leaders

- Establish and sustain an epidemic management task force and fund.
- Establish and sustain a technical rapid response team (RRT).

Monitor district

data to detect

any upsurges

- Assign a malaria epidemic focal person.
- Ensure that epidemic preparedness plans are in existence and they address malaria.
- Monitor district data to detect any upsurges using the district normal channel.
- Report any upsurges to higher authorities within 48 hours.
- Explore and utilize available and potential resources from partners and stakeholders, and be accountable.

Participate in

post-epidemic

evaluation

- Disseminate SBCC materials and organize public awareness campaigns.
- Engage partners and key stakeholders to invest in malaria reduction.
- Strengthen the malaria surveillance and monitoring systems.
- Participate in post-epidemic evaluation to inform future interventions in your district.





8. Regional Hospital Directors and Administrators

- Build capacity and supervise district and Health sub-district planning and delivery of malaria services.
- Support district level responses to epidemics.
- Support surveillance activities at district level to inform malaria response.
- Support regional performance monitoring, reporting and facilitate program.



9. Health care facility leaders

- Provide quality malaria treatment services (following the test, treat and track policy).
- Maintain adequate stock of malaria supplies including RDTs and ACTs.
- Ensure continuous client education on malaria prevention and control.
- Support mosquito net distribution (UCC and routine distribution).
- Integrate malaria into other healthcare services including outreaches.
- Take lead in responding to malaria outbreaks in your community.





10. Community Leaders

- Mobilize the community during mosquito net distribution and ensure utilization among households.
- In Indoor Residual Spraying (IRS) supported communities, take lead in planning and implementation of spray activities.
- Take lead in environmental control activities such as draining breeding sites
- Support VHT activities and provide regular performance feedback.
- Liaise with health facilities to ensure quality healthcare services particularly for children and pregnant women.
- Provide referral support to the sick and family including transport, financial and moral support.





Ensure children sleep under treated mosquito nets Set-up sick bays

Ensure auick

response to refer

children with fever

11. School administrators (Teaching and non-teaching staff)

- Ensure children in boarding section, are sleeping under treated mosquito nets every night.
- Set-up sick bays and ensure they provide malaria treatment services.
- Ensure quick response to refer children with fever to the nearby health centers for care.
- Build capacity of teaching and non-teaching staff in malaria prevention and response.
- Use all available opportunities to implement social behavioral change activities for malaria prevention and control.



12. Households

- Sleep under treated mosquito nets every night throughout the year.
- Keep households clean and clear mosquito breeding areas.
- Check for fever on every family member every day.
- If fever is observed, report to VHT or health facility for testing, treatment, guidance and follow up.
- Seek treatment immediately on onset of fever or any malaria symptom.
- Take your malaria treatment as advised by the healthcare workers.
- Ask for correct information on malaria prevention and management.
- Attend antenatal care regularly and take at least 3 doses of appropriate medicine.

UNIVERSAL COVERAGE CAMPAIGN FOR THE DISTRIBUTION OF LONG LASTING INSECTICIDE TREATED MOSQUITO NETS

What is this mosquito nets distribution Campaign?

- This is a government initiative being undertaken to reduce the prevalence of Malaria through sleeping under a mosquito net every night.
- This is the third mosquito nets distribution campaign. The first one was in 2013/2014 while the second was undertaken in 2016/2017
- Under this campaign, the Government will distribute 27 million nets throughout the country.
- The campaign is supported with funds from the Government of Uganda, the Global Fund, Against Malaria Foundation and USAID/ Presidential Malaria Initiative.

• The campaign is be phased in six waves across the country starting March up to December

What is the role of local governments in this campaign?

- Local governments will mobilize local resources needed and additionally mobilize the communities to participate actively in the campaign.
- They participate in the radio programs to mobilize and educate the beneficiaries about the importance of the registration exercise and the need to sleep under mosquito nets every night.
- They also monitor the distribution exercise to ensure peace and maintain order.
- They will also recruit data collectors who will be supported

by VHTs during registration at the village level

What type of nets is being distributed?

- They are "Long Lasting Insecticide treated Net" (LLINs). Additional nets are the PBO nets and the new generation nets which mean they are impregnated with a safe insecticide during manufacture.
- Long Lasting Insecticide treated Nets (LLINs) don't need to be retreated because the insecticide is long-lasting – and so are the preferred net.

How many nets will each homestead get?

• The number of people in the household will determine the number of nets to be given out.

One net will be distributed per two people as defined by the World Health Organization universal coverage.

What do I have to do to get LLIN?

- Registration of beneficiaries will take place at the village level. The LC 1 Chairperson and the VHT member of the village will visit each household during a specific period which will be announced to register all the members of the household.
- Persons who will not be around during the registration should either leave the information with a neighbor or got to the chairperson and get their household members registered.
- Anyone who does get registered will NOT receive the nets when the distribution starts
- Distribution will take place immediately after the registration

- All you have to do is register for the net once the community resource person VHT/CMD comes to your homestead to register you.
- All members of the household should be registered including the elderly and those with any form of disabilities.
- Visitors will be registered in their permanent homes of residence.
- School going children in boarding schools, the sick in hospitals and others not in the household during the registration exercise should be registered since they are part of the household.

Where do I pick my net from?

After registration, the VHT and the LC1 or his representative will deliver the net to your household

How long does the net last?

The life time of the mosquito net is three years or 20 washes. However

even after the life time, a net can act as a physical barrier against mosquitoes.

How do I hang the net?

- The net is rectangular, like the shape of your sleeping places or beds. Use the four loops on the net to tie the net up.
- Lower it to cover the users every night and tuck the edges under the mattress or sleeping mat so no mosquitoes can sneak in.
- Lifting up the net in the day time can help to prevent it from being snagged and torn
- If the mosquito net gets tone, you can sew it with threads.
- It is very possible to use the mosquito net even if you sleep on the floor provided it is hang appropriately to prevent mosquito bites.



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Why do mosquitoes still move/ rest around my net?

- Not all types of mosquitoes transmit malaria. There are types of mosquitoes that are not affected by the insecticide in the net, BUT the ones that carry malaria ARE repelled and/or killed by the insecticide in the LLIN.
- The mosquitoes you see in the house and you even see resting on the net appearing not being killed are mostly the types of mosquitoes that DO NOT carry malaria. The insecticide will still be keeping away and killing the mosquitoes that do carry malaria. Secondly, mosquitoes do not die immediately if they come into contact with the insecticide; they usually get irritated, fly away, and starve to death. BUT new mosquitoes will continue to enter your house.

When should the LLINs be used?

· Everyone should sleep under a

mosquito net every night, all year round.There are malaria-carrying mosquitoes all the year round.

• There may be times when you might see fewer mosquitoes around but they never disappear completely so it is important to still use the nets even during such times. It only takes one mosquito to spread malaria among the household members!

What do I do when I get a new net?

Spread or hang your new net(s) in a shade for fresh air to pass through for 24 hours (day and night) before use. The net should not be hung under direct sunlight.

How should I care for my LLIN?

 The net fabric can get dirty, tear or burn like other clothes you have.
If you would like to wash it when it gets dirty, then do so. Don't use detergents or bleach as this will wash off the insecticide.

- To hang the net to dry, dry it in the shade, not in direct sunlight.
- If holes appear in the net, you can easily repair these just as you would for your clothes. Just sew the holes up as you would do for any other fabric. This will help the nets work to the maximum!

What is the relationship between Mosquito nets and bed burgs?

Insecticide in the mosquito net does not kill bed bugs but irritates them to come out of their hiding places. Make sure that you kill the bed bugs using other options.

Are there any other benefits of the LLINs apart from protection against malaria?

Yes, insecticide treated nets can also help kill other domestic pests for example fleas and cockroaches that come in contact with the net.

In case my net gets old, what can I use it for?

- The Ministry of health recommends that the nets may be used; as curtains, for stuffing of eaves, and constructing window or door screening
- Ministry of Health does not recommend use of old news for food or anything edible

What is the relationship between Malaria and COVID-19?

• Malaria spread is not in any way related to COVID. However one of the major signs of COVID 19, which is fever, is also a major sign of malaria. It is therefore important even in this era to get tested for any of the 2 diseases to confirm that you have any of them. But there is a risk of people getting COVID-19 now. The signs and symptoms of COVID-19 and Malaria could be similar. Everyone is at risk of getting COVID-19. • COVID is spread from personto-person through sneezing, or coughing (droplets infection), human-to-human contact and contact with contaminated surfaces

SIGNS AND SYMPTOMS OF COVID-19

- Fever
- Cough
- Sore throat
- Difficulty in breathing
- Other flu like symptoms like running nose, sneezing and body weakness

It is pertinent that the population remains on high alert and diligently exercise preventive measures to avoid contracting the disease.

WHAT MUST BE DONE TO PROTECT ONE'S SELF (THINGS TO DO)

• Regularly and thoroughly clean your hands with an alcohol-based

hand rub or wash them with soap and water

- Cover your mouth and nose with tissue or a handkerchief when coughing and sneezing.
- Maintain reasonable distance between yourself and someone who is coughing, sneezing (at least 2 meters apart)
- Avoid touching your eyes, nose and mouth. Hands touch many surfaces which can be contaminated with the virus and you can transfer the virus from the surface to yourself.

FOR FURTHER INFORMATION CONTACT YOUR NEAREST HEALTH WORKER OR DISTRICT HEALTH OFFICER OR CALL THE MINISTRY OF HEALTH TOLL FREE LINE 0800 100066 OR 919





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