

REPORT OF 2015 WORLD MALARIA DAY EVENTS

ORGANISED BY

AFRIHEALTH OPTONET ASSOCIATION

IN COLLABORATION WITH ACOMIN

Reporting:

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Introduction and Background

Afrihealth Optonet Association is a think-tank, community-focused, national civil society, not-for-profit, non-religious, network/coalition of more than 676 (six hundred and seventy-six) non-governmental organization (NGOs) and community-based organizations (CBOs), groups and stakeholders in the 36 States of Nigeria and the Federal Capital Territory and global south, involved in Health, Community and Development Systems Strengthening, for Primary Health Care (PHC), HIV/AIDS/TB and Malaria, Vaccinations/Immunizations, Preventing/Controlling Poverty-Related Diseases; Nutrition and Food Security; Energy and Environment; and Empowerment, Gender, Good Governance and Human Rights. ACOMIN is the Association of Civil Society Organizations working on Malaria, Immunization and Nutrition - a network of over 700 CSOs supporting the Roll Back Malaria and Immunization Initiatives of the Federal Ministry of Health.

Malaria is a disease caused by a parasite called Plasmodium, transmitted through bites from infected mosquitoes and is an endemic, plaguing more than 20 countries in Africa. Over 627,000 people, especially children died in 2012 in Africa because of malaria. Yet these deaths are completely preventable. The devastating socioeconomic impact of malaria in African nations is tremendous; it is causing poverty because of absenteeism from work and school, but it makes children unequipped for promising careers.

The World Malaria Day (WMD)

World Malaria Day was initiated by the World Health Assembly at its 60th session in May 2007 to recognize the global effort to provide effective malaria control. In 2015, the World Health Organization is calling for a high-level commitment to the vision of a world free of malaria. The theme, set by the Roll Back Malaria Partnership as adapted by Nigeria's national World Malaria Committee, is *Invest in the future: Defeat malaria – your action counts*. This reflects the ambitious goals and targets set out in a draft post-2015 strategy to be presented to the World Health Assembly in May. The new strategy aims to reduce malaria cases and deaths by 90% by 2030 from current levels.



While huge gains in the fight against malaria have been made in recent years, the disease still has a devastating impact on people's health and livelihoods around the world, particularly in Africa, where it kills almost half a million children under 5 each year.

It is in pursuit of this agenda that the Afrihealth Optonet Association and Association of Civil Society Organizations working on Malaria, Immunization and Nutrition (ACOMIN) joined the rest of the world to celebrate the 2015 World Malaria day in the communities.

Planning

Various actions were planned and proposals sent out to seek funding supports. The following actions were designed to be taken out in 3 Local Government Areas, namely; Alimosho, Oshodi/Isolo and Ojo Local Government regions

ACTIVITIES

s/n	Description	Resources
1	Environmental sanitation	Rakes, brooms, shovels, gloves, fliers, T Shirts, transportation
2	Social Mobilization and LLIN distribution	LLIN and personnel, transportation
3	Sensitization of market women and other residents in the LGAs	Venues/accommodation, Canopies, Chairs, Public Address systems, refreshments, IEC materials, transportation

Advocacies were paid to the LGA MOHs to get their buy-in into the program, and letters were also written for the malaria managers and Health Educators to be part of the activities. We visited the heads of major markets in the LGAs to inform market women and other relevant stakeholders to be part of the celebration. The National Youths Service Corps (NYSC) in each of the local government areas was contacted to release some corps members to join in the program

Funding and Supports

The Support to National Malaria Program (SuNMaP) provided funding supports for chairs, tables and canopy rentals. ACOMIN state chairperson and Afrihealth Coordinator provided funds for refreshments, brooms and to settle market and park guards. SuNMaP also provided T-shirts, Information Education and Communication (IEC) materials shared with thousands of people in the markets.



ORIENTATION

The corps members were given an orientation on the basic facts about LLIN and ACTs. The purpose of then orientation was to increase their understanding on basic information of LLIN and ACTs to enable them handle the one-on-one campaign with the market women and other people in the market

DAY 1

VENUE: BRT BUS STOP IKOTUN, ALIMOSHO LOCAL GOVERNMENT

The first activity was carried at Ikotun BRT bus stop on the 7th May, 2015 in Alimosho LGA with over 1500 people were reached with Information Education and Communication materials describing basic facts on LLIN and ACT.



ACOMIN and AFRIHEALTH members took part in the market environmental cleaning while Youth corps members were given the IEC materials to discuss and give out to people. Other facilitators including LGA MoH, Malaria manager, Health Educator, ACOMIN, and AFRIHEALTH several other people seated in the canopies. They were told the only way to prevent mosquito bite at night, especially anopheles that pass on malaria is to sleep inside the LLIN every night. All the same, if any person suspects malaria attack, the person should visit the closest health facility to test for malaria. If positive, the person will be treated with the prescribed dosage of ACT.

After the sensitization, LLIN were distributed to them at a much-reduced price of N100 each. This attracted huge rush, unfortunately, we had only 380 pieces of LLIN.

DAY TWO

VENUE: OSHODI MARKET- OSHODI/ISOLO LOCAL GOVERNMENT

The second activity was carried at Okairo market complex Oshodi, in Oshodi/Isolo LGA on the 14th May, 2015. Over 2500 people were reached with IEC materials directly, and 400 people with LLIN hanging information.

After the sensitization, LLINs were distributed to them at a much-reduced price of N100 each. This attracted huge rush, unfortunately, we had only 400 pieces of LLIN

Afrihealth and ACOMIN took part in the market environmental cleaning while Youth corps members were given the IEC materials to discuss and give out to people. Other facilitators (The LGA MoH, Malaria manager, Health Educator, ACOMIN, and Afrihealth) several other people seated in the canopies. They were told the only way to prevent mosquito bite at night, especially anopheles that pass on malaria is to sleep inside the LLIN every night. However, if any person suspects malaria attack, the person should visit the nearest health facility to test for malaria. If positive, the person will be treated with the prescribed dosage of ACT.



DAY 3

VENUE: IYANOBA MARKET- OJO LOCAL GOVERNMENT

The third activity was at Iyanoba market, in Ojo LGA on the 21th May, 2015. Over 3500 people were reached with IEC materials directly, and 400 people with LLIN hanging information



The program was well attended by major stakeholders in the malaria elimination program in Nigeria. Present were representatives from the World Health Organization (WHO), FHI 360, DfID Supported program of Support to National Malaria Program (SuNMaP), Ojo Local Government Malaria Manger and health educator. Pharmaceutical companies, AFRIHEALTH's National Coordinator, Patron of AFRIHEALTH Lagos and ACOMIN Lagos State Chairperson **Nduka Ozor**, AFRIHEALTH's Lagos State Coordinator **Apollonia Ekeh** and State Secretary **Ewa Ekpeyong**, Ojo market leader, and several other participants from the community.

Members of the Networks took part in the market environmental cleaning while Youth corps members were given the IEC materials to distribute to people in the market. Other facilitators ; The LGA Malaria manager, Health Educator, ACOMIN, and AFRIHEALTH told the crowd that the only way to prevent mosquito bite at night, especially anopheles that pass on malaria is to sleep inside the LLIN every night. However, if any person suspects malaria attack, the person should visit the nearest health facility to test for malaria. If positive, the person will be treated with the prescribed dosage of ACT.

The National Coordinator of AFRIHEALTH **Dr. Uzodinma Adirieje** presented his welcome speech, followed by goodwill messages from the representatives of the World Health Organization (WHO), SuNMaP, FHI360, SMOH, Tyonex and the LGA teams.

Participants asked several questions relating to LLIN, Malaria treatment, environmental management and others

After the sensitization, LLINs were distributed to them at a-reduced price of N100 each. This attracted huge rush, unfortunately, we do not have enough LLIN to meet the demand.

OBSERVATIONS

Long Lasting Insecticidal Nets (LLIN)

Although the events were not on research, but the interactions with the communities provided us an opportunity to collect some information regarding to perception of people on LLIN usage as well as malaria treatment. The number of families that own at least one LLIN in the communities may have increased, but the utilization is still a major challenge to malaria elimination plan.

The proportion of the population which accessed the LLIN actually increased during the LLIN Campaign with the support of the Global Fund for universal coverage program in Lagos. But the proportion of the people sleeping under it – which represents the people directly protected – is still very poor.

What we are able to gather from the people during the interactive sessions suggests that a high percentage of the people with access to LLIN are not using it due to what they refer to as “*heat generation*”. Dr. O.S. Abidoye of the World Health Organization who responded to one of the concerns said that the designing of structures in most cities contributes to the ‘*heat generation*’. Unfortunately, that, he said is one area that has not had meaningful intervention.



Members of Afrihealth Optonet Association

THEME: Invest in the future, Defeat malaria – YOUR ACTION COUNTS



Malaria Treatment

Malaria treatment continues to be a problem in our communities. Children under 5 and pregnant women remain most vulnerable groups. Access to the treatment and other malaria commodities also remain a challenge to them. It is still disturbing that some mothers are still relying on *Chloroquine* as a first choice drug for malaria treatment. A woman during the program asked what could have been done after she gave her sick child chloroquine. According to her, she administered chloroquine to the baby when she noticed that the baby's temperature was above normal; unfortunately the baby did not get better.

Dr. Idayat Uthman of FHI 360 Lagos office who represented her Country Director wondered how the woman used chloroquine in the first instance. She said that chloroquine is no more effective for the treatment of malaria and, she advised the huge crowd of women that gathered for the event to always refer their children and wards for proper malaria treatment by first conducting a malaria test in the health facility or any other approved outlet, and if positive take the correct dose of ACT (which is the WHO recommended medicine for malaria treatment)



Community Mobilization

Community mobilization activities for malaria uptake seem to be on a very low side. Prejudice and myths as a result of low level sensitization still paved the communities. There is no doubting the fact that Community mobilization strategies improve health outcomes even at the primary and secondary health care systems, and the civil society organization have become popular in this process. Unfortunately, some of the prejudice and myths continue to persist because of the poor utilization of the civil society organization. The **AFRIHEALTH/ACOMIN** collaboration in the 2015 world malaria day celebration remains the only community targeted malaria program to mark the event in Lagos state.

Civil Society organizations like the AFRIHEALTH Network and ACOMIN can correct these misconceptions and myths at the community level through community storm programs, market women sensitization, rallies, folktales, dramas, community dialogues, door-to-door education, school health programs as well as training of other community stakeholders



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