

Malaria Prevention and Control strategies in Mobile and Hard to Reach People to Reduce Ongoing Malaria Transmission in Endemic Countries

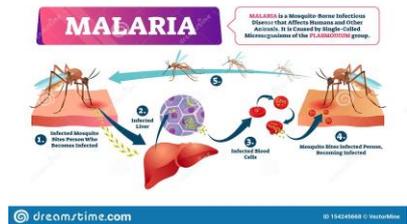


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Many countries have moved from malaria control to malaria elimination with one objective to achieve elimination goal by 2030, despite each country being in a different phase of elimination. However, malaria transmission continues in hard to reach population, this include borders and forest areas. Current preventive measures includes long-lasting insecticidal nets (LLIN`s), prompt diagnosis and the treatment; these measures should be extended to hard to reach people. Innovative ways to reach these groups of people is by mobile clinics, village malaria volunteers and screening posts/stations. High risk areas are mainly in remote parts of endemic countries, mostly in illegal borders with high malaria transmission; high population mobility and poor geographical accessibility as they are inhabited by ethnic groups. Refugees and most people have difficulties in accessing healthcare since they are extremely poor.

Implementation of outreach/mobile clinics in remote areas or targeted population groups as part of routine services by Department of Health include malaria endemic areas.

These groups of people have unofficial status and fewer resources making it difficult to locate them and assess effectiveness of malaria control strategies implementation.

International borders are high transmission and considered "hotspots", Because of the cross-border movements of people.

- Hence, cross boarder sharing of data has been prioritised which include insecticide resistance, drug resistance, blood testing at the border areas and treatment of all asymptomatic and confirmed cases of malaria.
- Logistics challenges make it impossible to administer Indoor Residual Spraying (IRS) and Long Lasting Nets (LLIN`s) in many of hard to reach people.

- Village/community malaria volunteers can be used for early diagnosis and prompt treatment of malaria (RDT`s) by taking blood, identifying malaria symptoms and interpretation of results.
- Screening posts/stations have also been served as an important service point for mobile populations. These services have been at the border crossing and migration portal such as bus and taxi ranks either legally or illegally.
- The screening posts have also been very effective in collecting information on the destinations of the travellers and inform relevant public health officials in the destinations areas for follow up and contact tracing.
- The National frameworks aim to develop integrated approach to reach the hard to reach populations and illegal immigrants to reduce malaria transmission by involving non-health stakeholders from national to provincial and to community level.

Malaria prevention, diagnosis and treatment services should be a priority.

These approaches have potential to optimize the coverage, accessibility and acceptability of the malaria interventions.



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