

# **RAM NEWSLETTER**

#### **Volume 2 Number 9**

My Rotary Friends and Friends of Rotary

The main reason for getting this Newsletter out is to let everyone know about this year's Rotarians Against Malaria (RAM) Conference.

It will also be my last as, technically, I finish my term in a few days.

The last three years have been quite successful. We've brought Timor Leste into the *Adopt A Village* program and, as will be seen in what follows, seen dramatic changes occurring in Papua New Guinea and the Solomons.

On the down side, we haven't done too well when it comes to World Malaria Day. That might be something my successor can tackle.

I wish PDG Phil Dempster well for his term "in the Chair".

Ian Sayers June 2013

### **WHO and World Malaria**

On World Malaria Day, 25 April, the World Health Organization (WHO) in the Western Pacific urged Member States to remain steadfast in the fight against malaria to preserve the gains made and eliminate malaria as a public health threat.

The following media release was issued on 29 April.

The theme for World Malaria Day this year is "Invest in the future. Defeat malaria." because progress towards malaria control or elimination must be maintained and intensified.

"We have accomplished a tremendous amount in the fight against malaria, but still have much to do," said WHO Regional Director for the Western Pacific, Dr Shin Young-soo. "Not only does the fight against malaria save lives, it promotes progress towards other key development goals, including increasing maternal and child survival, improving the health of people living with HIV and reducing poverty."

Malaria is endemic in 10 out of 37 countries and areas in the Western Pacific Region, including Cambodia, China's Yunnan province, the Lao People's Democratic Republic and Viet Nam in the Greater Mekong Subregion. In the Mekong Subregion, it is concentrated in remote forested areas, and disproportionately affects ethnic minorities and mobile and migrant populations. It is also intense in most of Papua New Guinea, Solomon Islands and Vanuatu.

The Western Pacific Region is making excellent progress against malaria. Overall, the malaria morbidity rate fell by 46% and malaria mortality rate by 73% between 2000 and 2011.

According to The World Malaria Report 2012, the number of microscopically confirmed malaria cases decreased by more than 75% between 2000 and 2011 in six countries: Cambodia, China, the Lao People's Democratic Republic, the Philippines, the Republic of Korea, and Viet Nam. The number of reported malaria-related deaths fell by more than 75% in Cambodia, the Lao People's Democratic Republic, the Philippines and Viet Nam over the same period.

Malaria is a life-threatening disease caused by parasites that are transmitted to people through the bites of infected mosquitoes. In the Western Pacific Region, one of the biggest challenges to malaria control is artemisinin-resistant falciparum malaria.

Artemisinins are the key compounds in artemisinin-based combination therapies (ACTs). ACTs are the first-line treatment for uncomplicated falciparum malaria in most endemic countries, and have been central to the remarkable recent successes in global malaria prevention and control.

While artemisinin resistance containment efforts on the Cambodia–Thailand border have been successful, new foci of resistance are being discovered in other areas of the Greater Mekong Subregion, necessitating a regional containment strategy.

This strategy is enshrined in the "Emergency Response to Artemisinin Resistance in the Greater Mekong Subregion" framework, which will be launched on World Malaria Day 2013 in Cambodia. This framework reiterates the overarching goal of protecting the artemisinin-based combination therapies as effective treatments for falciparum malaria.

Stakeholders are urged to scale up and increase the effectiveness of interventions to address artemisinin resistance. The document draws increased attention to implementing strategies and lessons learnt from the ongoing containment efforts and from conclusions drawn in joint assessments. It outlines existing guidance for artemisinin resistance containment and describes the areas where action is urgently needed in order to improve efforts in containing artemisinin resistance.

At the 7th East Asia Summit held on 20 November 2012 in Cambodia, heads of state from the Association of Southeast Asian Nations, Australia, China, India, Japan, New Zealand, the Republic of Korea, the Russian Federation and the United States of America pledged in the "Declaration of the 7th East Asia Summit on Regional Responses to Malaria Control and Addressing Resistance to Antimalarial Medicines" to strengthen national and regional responses to antimalarial drug resistance. The leaders warned that resistance to artemisinin "threatens the considerable gains made in malaria control in the Region, and its possible spread represents a major threat to national, regional and global malaria control".

Malaria can be controlled through: early diagnosis and prompt and effective treatment with artemisininbased combination therapies, and vector control measures, such as insecticide-treated mosquito nets.

"Defeating malaria will require a high level of political commitment, strengthened regional cooperation and the engagement of a number of sectors outside of health, including finance, education, defence, environment, mining, industry and tourism," said WHO Director-General Dr Margaret Chan. "The fight against this disease needs to be integrated into the overall development agenda in endemic countries."

Source: http://www.wpro.who.int/mediacentre/releases/2013/20130424/en/index.html

## **2013 RAM Conference**

### The Conference will be held on weekend 24-25 August 2013

Venue: St Columban's Catholic Secondary College

100 McKean Street CABOOLTURE. QLD

Time: From 1.00 pm Sat 24 Aug

ends by lunch Sunday – a box lunch will be provided

for those who want it on Sunday.

Dinner: Venue As above

Date Saturday 24 August 2013

Time 6.15 pm for 7.00 pm

Cost will be \$80 for the full Conference, slightly more than last year, and \$40 for those attending the dinner only. We want to make sure you have really good morning/afternoon teas and lunches both days.

Accommodation has been block booked at the Gateway Motel, 64-66 Lower King Street, Caboolture. A special rate of \$99 per room has been negotiated.

The program is being finalised but will include updates from each of our target countries and an update by AusAID, either personally or provided, on the outcomes, to date, from decisions made at *Malaria 2012*.

Our speaker on Saturday night will be Roshni Thattengat who went to Timor Leste with the 2012 distribution team.

# **Papua New Guinea Update**

The following update information is in "dot point" form but illustrates just how much work is being done in Papua New Guinea. It has been drawn from a report prepared by Tim Freeman of RAM Port Moresby. Thanks Tim.

- In the last three and a half years a total of 3,581,497 LLINs have been distributed (3,123,236 LLINs to Household Level and 458,261 LLINs to Vulnerable Groups).
- These have been distributed to 72 out of 90 districts in eighteen provinces.
- This is 45 nets for every 100 people in the country
- Impact on malaria has been massive.
- Clinical malaria incidence has fallen by as much as 70% following a distribution by nets in a
  district.
- Prevalence of malaria has fallen by 75% in some regions.
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LLIN distribution at the household level is shown in the following table -

#### **Distribution of LLINs To Household Level**

Period	Dates	District	Province	Nets Delivered
Phase Two	Nov 09 – Oct 11	50 Districts	18 Provinces	1,890,448
Year 3	Nov 11 – Sep 12	27 Districts	10 Provinces	832, 671
Q13	Oct-Dec 12	North Fly	Western	34,692
Q13	Oct- Dec 12	Telefomin	Sandaun	22,832
Q13	Oct-Dec 12	Ambunti Drekkier and Wosera Gawi	East Sepik	73,660
Q13	Oct-Dec 12	Goilala	Central	32,100
Q14	Jan-Mar 13	Rigo. Kairuku Hiri, Abau	Central	96,727
Q14	Jan-Mar 13	NCD	NCD	140,096
Total Year 4 To date				400,117
Overall Total Phase One and Phase Two				3,123,236

#### **Distribution of LLINs to Vulnerable Groups**

Totals	Antenatal	Schools	Prisons	Others	Totals
Phase One	208,602	43,242	4,656	5,158	261,658
Nov-Dec 2010(Q9)	15,089	4,740	0	507	20,336
Jan-Mar 2012 (Q10)	11,697	0	0	1,821	13,518
Apr-Jun 2012 (Q11)	68,542	0	0	168	68,710
Jul-Sep 12 (Q12)	66,664	2,290	0	1,041	69,995
Oct-Dec 12 (Q13)	8,312	0	0	3	8,315
Jan-Mar 13	7,399	0	0	8,330	15,729
Total Phase 2	177,703	7,030	0	11,870	196,603
Total Program	386,305	50,272	4,656	17,028	458,261

Tim concludes his report by raising a few questions. Time will tell what the answers are.

- Funding finishes in September 2014.
- Should PNG government still employ another organisation to coordinate LLIN distribution in the country? RAM, other organisation or small unit with Ministry of Health or return to provincial controlled implementation.
- Return to mass distribution one time campaigns?
- Who will pay?
  - Global Fund.
  - · PNG Government,
  - AUSAID or other donor.
- Should we adopt another strategy?
  - Should commercial sector be asked to step in to fill gaps? Social marketing?
  - Should nets be given to positive cases?

# **Update – Solomon Islands**

#### **UPDATE OF MALARIA PROGRAM IN SOLOMON ISLANDS MAY 2013**

Rotary's involvement in the Solomon Islands malaria program for 2013 will mainly be limited to the AAV tools program. The program is being run in conjunction with the Healthy Community program by the Ministry of Health and Medical Services.31 communities have applied and been accepted for the program so far in 2013.

There is a possibility of Rotary assisting with renovations of clinics and malaria staff houses, this will depend on funding by AusAID.

The malaria program is currently being constrained by the lack of funds being released due to the Ministry not finalising its plans for 2013 until recently. Although funding has been approved in the 2013 budget, the details of expenditure were not completed; unfortunately this is an ongoing problem with lack of proper planning and finalisation of plans prior to the year end for the following year. The program has also been affected by the outbreak of Dengue in March with the Malaria Division responsible for containing the outbreak, this is putting a significant strain on the resources available.

The Malaria Division plans to distribute 417,000 bed nets during 2013, the bed nets are due to arrive in May 2013 and are funded by the Global Fund. The Division also plans to spray 36,000 households during 2013.

#### **SPECIFIC OBJECTIVES OF THE MAP 2013**

As a result of a multi-faceted interventions approach, there will be:

• A reduction in the national annual parasite incidence rate (API) in Solomon Islands from 46/1,000 population in 2011 to 40/1,000 population by 2013.

- A reduction of the API in the highest transmission rate provinces (Honiara City Council to less than 80/1000 population, Guadalcanal less than 50/1,000 population and Malaita Province to less than 30/1,000 population).
- To maintain the current gains in reducing annual malaria-related deaths in Solomon Islands at less than 1/100,000 population by 2013

The above targets will be achieved through the following **programmatic objectives**:

- To achieve/maintain high coverage (>80%) of the population at risk of malaria with appropriate vector control measures (LLINs and/or IRS) and maintain coverage throughout the year
- To ensure universal access to early and quality assured malaria diagnosis, effective treatment and prevention for populations living in malaria endemic areas by end of 2013
- To maximize utilization of malaria control services through strengthening of community mobilization efforts/BCC
- To strengthen routine malaria surveillance, monitoring and evaluation, as well as operational research to inform programme management and implementation strategies
- To accelerate malaria elimination efforts in the two targeted provinces (Temotu and Isabel) through intensive surveillance, active response to foci and adherence to treatment therapies for radical cure
- To improve programme management through strengthened national leadership and governance, decentralized implementation and strong partnerships

#### STOP PRESS.

The following item appeared in Solomons press on Tuesday 11 June

#### **Big Decline in Malaria Cases**

Due to the untiring efforts of the National Vector Borne Disease Control Programme started by the Ministry of Health, a significant decline in the malaria cases of Solomon Islands has been witnessed.

It was in 2008 that the programme was initiated. Since then a lot of difference has been witnessed in the malaria cases as a decline from 132 per 1000 people in 2007 to 44 people per 1000 in 2012 has been witnessed.

A review was carried out in which the World Health Organisation was also involved. They have concluded that a massive decline in malaria cases has been witnessed in more than past five years.

Dr Lester Ross, from the Ministry of Health, said that maximum progress has been witnessed in Isabel. It has been said so as just one case per 1,000 people has been registered in 2012. The province is of the determination that by 2014, they have to eliminate malaria.

During the assessment period, weak points have been noticed and authorities concerned will be coming up with new strategies to curb malaria. Campaigns will be organized to raise awareness about the disease as well as ways to prevent the same will also be mentioned.

# **Timor-Leste**

In November/December last year a number of Australian Rotarians and Rotaractors assisted in the distribution of LLINs in the Manatuto and Bobonaro Districts in Timor Leste. Everyone will recall that we had been building up to this for almost a year, aiming to fill gaps left by the Global Fund distribution. A few statistics on that distribution. Nets were distributed to –

- A total of 18,635 LLINs were handed to
- 20,397 family members in 7,633 households, within 16 villages.

A really great effort!

We need to keep this going and ensure that next dry season we can again be involved in the distribution. We need funds for Timor Leste.

# **Late News**

I'm sure everyone will be as delighted as I was to learn yesterday that PDG Richmond Manyweathers has been recognised with the award of the Medal of the Order of Australia (OAM). A thoroughly deserved award. Congratulations Richmond.

# **Bill Gates in Australia**

Have you had an opportunity to hear Bill Gates' talk at The National Press Club this week? The first 12 minutes is a fascinating update on his knowledge of, and assistance to research for Malaria and Dengue mosquitoes and the way ahead to combat them. The rest is good to hear too.

http://www.abc.net.au/news/2013-05-28/national-press-club-bill-gates/4718244

## Did you know:

Washington, DC used to be riddled with malaria and well into the 20th Century all those who could afford to leave Washington, DC in the summer did so, to avoid malaria as well as the heat.

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Contributions and comments are welcome.