

Myanmar

# Emphasis on Control Measures in Remote Communities



Malaria had been claiming more lives in Myanmar than in any other country in Southeast Asia when JICA began its malaria control and prevention activities in Myanmar's Bago Region in 2005. With JICA's technical cooperation, the region saw a dramatic decrease in the number of malaria patients and mortalities in the subsequent 10 years, and these figures have now declined to insignificant levels throughout the country as a whole.

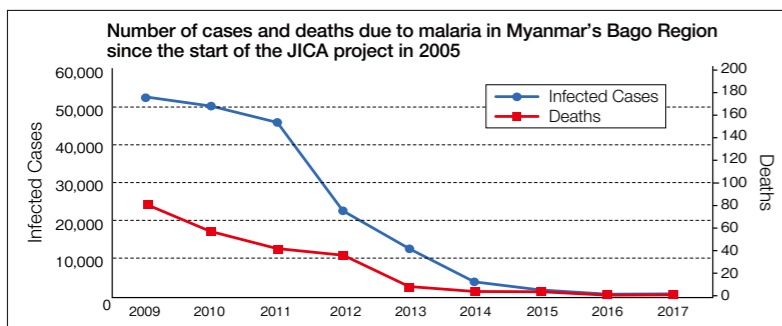
In recent years, however, drug-resistant malaria appeared and began to spread in the Mekong region. This has become a problem of global concern, and in 2014 the East Asia Summit adopted a resolution to eliminate malaria from Asia and Oceania by 2030. Myanmar is committed to eliminating malaria, and is taking its first step toward this goal.

We asked JICA expert Masatoshi Nakamura, who has worked on malaria control in Myanmar for many years, to give us a picture of the situation. "Malaria is as common as ever in areas near the western border, and the number of cases hasn't lowered since 2015. Evidently, current public health initiatives for dealing with malaria are inadequate. The disease also needs to be eliminated in remote communities, and in settlements where people depend on forest-related work such as slash-and-burn cultivation."

Falciparum malaria, which is prevalent in Myanmar, is a serious disease that occurs suddenly, and is fatal unless diagnosed rapidly and treated successfully. Nakamura elaborates, "Volunteer community health workers (CHWs) chosen from remote communities play an important role in places where there are no medical services." After attending trainings, CHWs use rapid diagnostic tests for malaria to provide appropriate diagnoses and treatments. "We have now trained over 600 workers, and we still check up on them periodically to give them instruction and encouragement," he continues.

In cooperation with the Myanmar Ministry of Health and the Myanmar Forest Department, Nakamura is currently working toward the elimination of malaria in Myanmar and is focused on investigating the prevalence and risk of the disease in remote communities.

"We've entered the second half of the project. The CHWs are keeping the number of malaria cases low by intensifying their efforts and focusing on endemic areas. However, the malaria-transmitting Anopheles mosquitoes are still there, and the disease is still endemic in border areas. We are now designing a malaria early-warning system and working on a way to detect cases as soon as they appear."



Malaria testing at a local health center

Examining children in a village. "The project also aims to protect these children living in remote areas," says Nakamura.



Traveling to remote areas by elephant

Accessing remote areas, sometimes by elephant, in collaboration with the Forest Department

Benin



# An Engaging Way to Teach Public Health

Yuma Matsuoka has been a JICA overseas cooperation volunteer in the West African country of Benin (population: approx. 10 million) since 2017. Here she has worked with local NGOs at regional health bureaus to teach healthy lifestyles to rural communities. An important part of her work is teaching people how to prevent malaria and infectious diarrheal diseases.

Matsuoka uses quizzes and picture-card storytelling to teach about medical treatment and hygiene, as many people in Benin still rely on traditional medicine and have insufficient medical knowledge. "Picture cards make it easy to explain how infectious bacteria are transferred from flies to food to people, and how proper handwashing and toilet habits can prevent diarrhea and improve environmental hygiene. Handwashing is particularly important, so we always provide a demonstration and do it with them." She and her colleagues hold events where people can enjoy themselves and learn about health at the same time; these include inter-village health quiz competitions and shows where children perform songs, plays, and poetry about disease prevention and health.

However, there are problems that education alone cannot

solve. Relatively clean water can be had in city centers, but in areas where there is no electricity or water supply system, there is no clean water that can be used for handwashing. "It hurts to admit it, but no matter how much effort we put into education, putting the things they learn into practice is still an entirely different matter," said Matsuoka.

Matsuoka learned, however, that a young woman from the village, a winner in one of the inter-village health quiz competitions, would regularly visit each family and teach people about hygiene.

Matsuoka recounts, "She told me that in her village, which is a long way from the health center, many people who get sick die without receiving proper treatment. She thought that if a small amount of habitual caution would reduce the number of deaths then it would be worth it. I was so happy to know that, through our efforts, there was someone who got inspired enough to try and improve her own village." Matsuoka continues to work in Benin in the hope that her efforts will somehow help people to lead healthier lives.

This is how you wash your hands!



Matsuoka demonstrates how to properly wash hands at a primary school



Teaching villagers about water and hygiene



A typical water source for people from villages without a well