INSIDE STORIES:

“Invest in the Future: Defeat Malaria”
World Malaria Day 2013

The 25th of April every year marks the celebration of the World Malaria Day (WMD) in countries around the world. Movement Against Malaria (MAM) joins in the commemoration as it continuously intensifies its efforts to eliminate malaria in the Philippines. Various activities were held in malaria endemic communities for the unified effort to ensure effective malaria control.

WMD 2013 in the country focused on promoting awareness, boosting partnerships with organizations and communities, and intensifying social mobilization.

MAM Hails Another A1 Rating for Period 5

In a management letter dated April 23, 2013 signed by Qi Cui, Fund Portfolio Manager of High Impact Asia Department, the Global Fund in Geneva, Switzerland, she congratulated Pilipinas Shell Foundation, Inc. (PSFI) as the Principal Recipient (PR) of the
World Malaria Day 2013...

(continued from page 1)

Here are some highlights of the WMD celebration in different parts of the country:

Sailing the Seas to Fight Malaria

Pangasinan — In celebration of the World Malaria Day, PSFI MAM staff in Pangasinan joined the province's “Pinta'y Dayat” (sea festival) by participating in the Annual Fluvial Parade, locally known as Banca Parada. Joining the Annual Fluvial Parade was MAM’s way to promote malaria awareness among the community, local, and provincial leaders.

More than a hundred boats sailed the seas of Lingayen beach last May 1, 2013, all of which were made from environment-friendly materials. MAM’s boat was created from haystack, wood sticks and other recyclable materials. Other participants include representatives from non-government organizations and public and private agencies.

Celebrated annually every April and held at Lingayen beach, Pinta’y Dayat is a thanksgiving festival for the abundant harvest from the sea. The events feature mass offering on beaches and the fluvial parade. The festival has been a perfect venue to campaign about malaria awareness and its prevention to the locals and tourists alike. — Carolyn Urbien, PO-Pangasinan and Ronessa Rollarata, PSFI Communications Officer

1) Children watch a puppet show in local dialect (Palaw’an) on malaria prevention, diagnosis and treatment during the WMD in Palawan. Efforts for malaria awareness and behavioural changes against malaria that are tailored for every community and target audience are being provided thru such activities.

2) Recipients of pregnancy packages in Brgy. Libas Sud, San Miguel, Surigao del Sur during their WMD celebration.

3) PSFI MAM Isabela Project Officer Christian Mariano with the IIs in Ilagan, Isabela

4) Residents of Brgy. Dibut, San Luis in Aurora with their new LLINs and Mag-KBT calendars during their celebration of the world Malaria Day

5) Movement Against Malaria’s boat in the Annual Fluvial Parade during the WMD celebration in Pangasinan
Carabao-bait Activity in MOU

Mountain Province — The Municipal Local Government of Paracelis, Mountain Province in collaboration with the Department of Health (DOH) and PSFI-MAM, an activity called “carabao-bait” was conducted as a basic entomology survey in Sitio Cassag of Brgy. Bacarri in the municipality of Paracelis last April 25, 2013 in celebration of the World Malaria Day.

To trap mosquitos inside the mosquito net, a carabao is placed inside the net for 12 hours (from 6 o’clock in the evening to 6 in the morning) and then brought out through a special exit to ensure that the mosquitos are still trapped inside the net. The trained Rural Sanitary Inspectors from the province then collects every single mosquito that has been captured and then classified according to their physical structure. These mosquitos are then forwarded to the Research Institute of Tropical Medicine (RITM) for further classification and research to help identify the malaria vectors still present in the sitio.

This activity enables the Municipal Local Government to plan vector control strategies that will be applied in Sitio Cassag in Paracelis as a move towards eliminating malaria in the province.

The current malaria transmission of Mountain Province is unstable and is under the Control phase. — Jenny Ruth Pangasinan staff making their boat to join in the Annual Fluvial Parade

Border Operations in Bulacan and Nueva Ecija

Bulacan — No better way to celebrate World Malaria Day than to conduct activities that will ensure people’s protection from the risk of malaria. Bulacan has made this happen by conducting border operations together with the province of Nueva EciJa.

Barangay Kalawakan is indeed a vast barangay as its name suggests. It took a couple of days for the malaria team composed of staff from the Municipal Health Office and the Provincial Health Office in the endemic municipality of Dona Remedios Trinidad in Bulacan to completely cover its four sitios bordering the province of Nueva Ecija which are Duplas, Cucong, Talamis I and Talamis II.

From April 22 to 24, 2013, a series of activities aimed to protect the people from malaria was conducted. Residents were informed about the harm the disease can cause and how it can be avoided. Use and maintenance of their insecticide treated nets were also discussed, encouraging everyone to be vigilant against the disease. Also, over 167 houses from the neighboring sitios received indoor residual spraying to make sure that vectors of malaria are

(Continued on page 4)
Border Operations...

(continued from page 3)

controlled in the area.

Through these measures of safeguarding the houses along the border of the two provinces, cases of malaria are expected to be kept at minimum if not at zero, and refrain from spreading from one province to another.

With the continuing efforts from the local government units and assistance from the Department of Health and non-government organizations, malaria incidence in the province of Bulacan continues to decrease. The municipality of Dona Remedios Trinidad currently has an unstable malaria transmission and is under the pre-elimination phase. — Romie Tambalo, PO-BUL and Ayen Escalante, PSFI-MAM Partnerships & Advocacy Officer

Focusing More on the IPs

Isabela — World Malaria Day was celebrated simultaneously at Bintacan and Cabiseria, Ilagan, Isabela last April 25, 2013. A total of 2,400 LLINs were given to most of the indigenous peoples (IPs) of the Dumagat tribes. IEC on Malaria and on the proper use of the LLINS were done prior to distribution. ACD was also conducted in the area during the celebration. — Christian Mariano, PO-Isabela and Ronessa Rollorata, PSFI Communications Officer

Pregnancy packages were also distributed to 36 pregnant women who were also given free check-up and dental services.

Mass blood smear was done to 80% of the population and no malaria parasite was seen.— Jenessa Vicente, PO-SDS and Ronessa Rollorata, PSFI Communications Officer

Women’s Health and WMD

Surigao del Sur — A hundred residents of Brgy. Libas Sud, San Miguel, Surigao del Sur benefitted from the Active Case Detection and mass education campaigns done last April 25, 2013 in celebration of the World Malaria Day.

Lectures on malaria awareness, dental health and women’s health were conducted to the residents of Purok Angel, Brgy. Libas Sud, San Miguel.
Concerted Efforts to Fight Malaria

Among the eight endemic municipalities in the province of Aurora, this year’s celebration of World Malaria Day was held at Brgy. Dibut, San Luis, Aurora on April 25, 2013. With a total population of 904, the coastal barangay of Dibut, where the only malaria death in 2010 came from, was the perfect setting for the said event.

The journey started at the port of Sabang, Baler with a two hour scenic boat ride. Welcoming us at Barangay Dibut were the big smiles of excited barangay officials and residents at the barangay health station.

Aimed at promoting malaria awareness among the residents, a lecture and discussion on the disease and its preventions has been conducted where the residents freely raised their queries. False beliefs have been clarified and good practices that will help prevent malaria infection have been discussed. Calendars bearing basic information on malaria were also distributed to the residents so they can always be reminded of the precautions they can take.

To scale up vector control to reach at least 80% of the population in malaria endemic areas, Long Lasting Insecticide-treated Nets and Pregnancy Packages were distributed while Indoor Residual Spraying was done in the houses. Active Case Detection was also conducted to ascertain that the Barangay has no current cases of malaria.

By the end of the celebration, 8 pregnant women received pregnancy packages and 14 LLINs were received by the mobile population of the barangay. A total of 186 houses have been sprayed with insecticide through the IRS while of the 36 malarial smears done, not a single positive case was detected.

The celebration was made possible through the concerted efforts of the Provincial Health Office led by Provincial Health Officer II Dr. Luisito Teh and Provincial Malaria Coordinator Engr. Danilo P. Marquez, Provincial Health Team Office led by Provincial Health Team Leader Dr. Lilia Pascua, Municipal Health Officer of San Luis Dr. Rosalitla Tangson and the barangay local government unit. With the active participation and commitment of the community to the program, this year was a heads up for the municipality of San Luis for leading the fight against Malaria. — Kristian Soliven, PO-AUR

Buntis Congress in Aeta Community

In celebration of World Malaria Day 2013, a Buntis Congress was held in Brgy. Sta. Juliana, Capas, Tarlac last May 3, 2013 catering to the predominantly Aeta residents of the area.

The activity was headed by the Provincial Health Office led by Ms. Cecille Lopez-Zuasula and Ms. Joanne Taluyo along with (Continued on page 6)
**Buntis Congress...**

(continued from page 5)

along with representatives from Provincial Health Team Office, Rural Health Unit, PSFI MAM, and barangay health workers and spraymen from Brgy. Sta. Juliana.

Sixty-eight Pregnancy Packages containing an LLIN, a mother and child booklet to record the progress of their pregnancy and their child, a de-worming tablet and Ferrous Sulfate supplement which are all meant to promote safe motherhood, were distributed to the pregnant residents of Sta. Juliana that are 90% composed of Aetas. IEC was also given not only to the expectant mothers but also to their husbands, school children and other community members.

The Aeta community has been the perfect recipients of the WMD celebration because they usually report a significant number of malaria cases and lack information about malaria. - Dave Wales, PO-TAR and Ronessa Rollorata, PSFI Communications Officer

**Moving Forward in Palawan**

Palawan — WMD in Palawan was once again held at the Municipality of Rizal in collaboration of Government and non-Government agencies such as Kilusan Ligtas Malaria (KLM), Pilipinas Shell Foundation Inc. (PSFI) Center for Health Development (CHD), Municipal Health Office of Rizal and Municipal Local Government of Rizal (MLGU-Rizal).

More than a thousand people from different barangays in Rizal attended the program. The Indigenous group in Rizal such as Tao’t Bato and Palawan who mostly live in the upper grounds also came in the celebration of WMD and availed of the services provided that day for everyone.

MHO of Rizal Rural Health Office Dr. Lazir P. Penit encouraged every participant to be an agent of change and influence other people to fight Malaria. He also called on the attention of the MLGU of Rizal thru Municipal Administrator Jimmy Donon to continuously support the program in eradicating malaria in Rizal. He said, “kalusugan ng mga katutubo dangal at kalusugan ng mga pinuno.”(Health of the indigenous people, pride and honor of the leaders)

Representative from PSFI Ms. Ynna Lauron-Doblado pointed out that the malaria situation now is far better than before. From 55,000 cases down to 4,200 cases in year 2012. This milestone is credited not only to KLM and PSFI but to the leaders of the community.

Chief Head of Field Health Technical Services-Provincial Health Office Dra. Crisostomo emphasized that there should be no more deaths due to malaria since a lot of free services are provided in the community. Malaria can be cured and we can fight it.

DOH-CHD Representative Mr. Tacs Cascara, in behalf of Dr. Peter Hew Curameng, shares their support to WMD by conducting IRS and LLIN distribution in Rizal.

Contests and games based on this year’s WMD theme were conducted after the program. — Blessel Jaranilla, PO-Palawan

**Vector Surveillance in Davao del Sur**

Malita, Davao del Sur — In December 2012, a re-emergence of malaria cases startled the residents of Brgy. Kidalapong in the municipality of Malita, Davao del Sur when a farmer and another local were diagnosed with malaria.

This situation propelled the health warriors in the province to distribute LLINs, conduct Passive Case Detection and Vector Surveillance in Brgy. Kidalapong last March 5, 2013 to control malaria transmission and eliminate new possible foci of infection. Organizers of the event were Movement Against Malaria, Center for Health Development, Provincial Health Office, Provincial Health Team Office, Rural Health Unit (RHU) and the Barangay Local Government Unit of Kidalapong.

A total of 855 Long Lasting Insecticide-treated Nets were distributed. Blood smears were taken from 34 symptomatic patients and after being examined by the CHD, turned out to be negative from malaria.

Brgy. Kidalapong has a population of 2,385 which is mostly composed of Indigenous Peoples (IPs) from Kaulo, Manobo, Tagaculo and B’laan tribes. — Desire Secuya, PO-DDS
Malaria cases in Agusan del Norte decreases, says PHO
From Philippine Information Agency
Thursday, 25th of April

BUTUAN CITY, April 25 (PIA) -- Malaria cases in the province is on a downtrend, the Agusan del Norte Provincial Health Office said.

In a press briefing held in celebration of the World Malaria Day, Agusan del Norte Provincial Health Officer Dr. Elizabeth Campado bared that based on statistics, in 2010, there is 42 cases of Malaria in the province; 19 cases in 2011; 4 in 2012; and 2 cases recorded in the 1st quarter this year which shows a decreasing trend. These cases are mostly recorded in some barangays of Cabadbaran City and municipality of Santiago.

“Malaria cases in the province have been decreasing and hopefully, in the coming years, we will be declared as a ‘Malaria-free province’,” stressed Campado.

Campado added that since 2007 up to the present, there was no death recorded in the province caused by Malaria. “This is because of the unified efforts and cooperation of the barangay health workers, barangay officials, and residents in the communities. The provincial government with the Department of Health has been very supportive to the Malaria Control Program,” she said.

Campado also said that the provincial government has been doing effective strategies to prevent Malaria, and among these are: 1) Case detection and treatment; 2) Vector control (controlling the vector-breeding sites where the ‘Anopheles’ mosquitoes are carrying the disease); 3) Canal/stream clearing; 4) Provision of insecticide bednets to the barangays; and 5) Inter-sectoral coordination (coordination with the local government units, barangay officials, government agencies, and partner stakeholders to gain support and funds for the different activities related to the campaign).

“With active participation of the people in the communities, we find it easy for us to sustain this program and keep our families away from this disease. We also thanked our partner-agencies and the Global Fund (funding organization) for their continuous support in this program,” Campado emphasized.

Agusan del Norte Conducts Community-based and Sustainability Planning

Learning from the experience of Brgy. Simbalan in Buenavista, Agusan del Norte, Barangay Local Government Units (BLGUs) of endemic barangays in the municipality of Las Nieves saw the advantages of taking ownership of the Malaria Control Program (MCP) in the local level.

In the recently conducted Community-based and Sustainability Planning (CBSP) in fifteen barangays in Las Nieves from May 16 to June 6, 2013, barangay officials together with key sectors involved in the MCP implementation assessed the program implementation in their barangay.

Key areas such as organizational support, vector control, legislative and fiscal support, advocacy, surveillance, and monitoring were assessed, as well as activities done, status and gaps in the MCP implementation.

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Malaria cases in Agusan del Norte decreases...

(continued from page 7)

the Anti-Malaria Action Committees in the municipal and barangay levels. They serve as the team in the respective barangays who will monitor and lead the implementation of the program. They can also assist the residents in referring them what agencies to approach for certain services and programs that they need.

“We are also requesting the Sangguniang Panlalawigan to prepare an ordinance requiring fixed budget for malaria Control Program in the province of Agusan del Norte; to provide support to the Anti-Malaria Action Committees under this program in the barangays; and to provide insecticide bednets to the communities here, so as not to hinder the sustainability of said program whenever the Global Fund’s support will end in 2014,” Egay highlighted.

Meanwhile, Movement Against Malaria in Agusan del Norte Project Officer Marisol Tuso reiterated that World Malaria Day is commemorated every April 25 of the year.

"It recognizes global efforts to control Malaria. Globally, 3.3 billion people in 106 countries are at risk of Malaria. In 2009, 781,000 people died from Malaria, mainly women and children in Africa," she said.

World Malaria Day was established in May 2007 by the 60th session of the World Health Assembly, the decision-making body of the World Health Organization. The day was established to provide "education and understanding of malaria" and spread information on "year-long intensified implementation of national malaria-control strategies, including community-based activities for malaria prevention and treatment in endemic areas."

(JPG/PIA-Caraga)

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With the inputs shared by Barangay Simbalan Punong Barangay Hon. Nicholas Logronio, together with their Rural Health Midwife and Barangay Malaria Microscopist (BMM) Ms. Jaqueline Omac, they were able to identify action points to address the gaps in the MCP assessment and replicate effective strategies from barangay Simbalan.

Brgy. Simbalan has been reporting a number of malaria cases for the past years constituting more than 70% of the total cases in the province.

With strong leadership and support from BLGU headed by Hon. Logronio and assistance from various stakeholders including the Rural Health Unit, the Provincial Health Office, the Community-based Malaria Brigade, the Center for Health Development, the Research Institute for Tropical Medicine through its Therapeutic Efficacy Surveillance, and the Global Fund through Pilipinas Shell Foundation, Inc., Brgy. Simbalan consistently reported zero case in the past three (3) years now from more than 500 cases in 2005.

Logronio cited leadership of the barangay officials as an important tool in reducing the number of malaria cases. He pointed out that the barangay should at all times support the

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health programs and lead activities to gain support from the constituents.

BMM Omac also stressed out the importance of unified intervention that is centered on source reduction of malaria vectors, networking of all stakeholders in the barangay, periodic assessment of the malaria control program among health workers and community-based groups, and the periodic mass blood survey to all constituents in the barangay.

During the CBSP, barangay officials in the barangays of Lawan-lawan, Casiklan, Durian, Ibuon, Lingayao, Balungagan, Durian, Rosario, San Roque, Marcos Calo, Bonifacio, Katipunan, Mat-I, Mallicato, and Consorcia drafted a one year MCP plan at the barangay level.

The plan showed more fiscal support from the BLGU including the legislation of allocating MCP budget at the barangay level, organizing a Barangay Malaria Brigade, mobilizing residents for environmental cleaning such as stream clearing, and mandatory blood smearing to residents coming in and out of the barangay.

As of writing time, Buenavista and Las Nieves maintained zero cases. Both municipalities are maintained zero cases. Both municipalities are strengthening its surveillance measures to prevent reintroduction of cases and immediate control when outbreak occurs.

The CBSP will continue in Cabadbaran and Santiago in June, while other endemic municipalities will follow in July and August.

Provincial Malaria Coordinator Jimmy Egay said that the CBSP will not just end in planning. It will be monitored during the Municipal Action Committee meetings in every municipality to follow-up on the progress of the implementation of the plans.

Egay believes that once the Barangay LGU takes ownership of the Malaria Control Program, it will be easier for the whole province to act on outbreaks and strengthen malaria surveillance. — Marisol Tuso, PO -AGN

IRS Done in North Cotabato

Indoor residual spraying (IRS) is one of the primary vector control interventions for reducing malaria transmission.

North Cotabato — IRS was conducted last April 16, 2013 to May 2, 2013 in 17 puroks and sitios of Barangay Kiaring, Banisilan, North Cotabato, starting in Sitio Tenampayer, Kiaring. The activity was conducted by 4 locally-trained spray men supervised by a team leader.

The Department of Health-Center for Health Development Region 12 allocated 1,236 sachets of IRS insecticides while spray cans and Personal Protective Equipment (PPE) were provided by Pilipinas Shell Foundation, Inc. (PSFI). Food and transportation were shouldered by the Municipal Local Government Unit of Banisilan, while Barangay
Kiaring offered lodging for the spray team.

Residents were thankful and very willing to have their houses sprayed. During the exit meeting, Barangay Captain Renante Gonzaga thanked the partners who facilitated the spraying and Banisilan Municipal Health Officer expressed their commitment to support the malaria control program until such time that the disease has been eliminated in the province.

In 2009, Barangay Kiaring of Banisilan municipality reported 31 malaria cases, amounting to 14% of the total cases in the province of North Cotabato. In 2010, Barangay Kiaring was stratified as stable but was classified as unstable in 2013. — Gladys Amita, PO-NCOT and Ronessa Rollorata, PSFI Communications Officer

LLIN Distribution and IRS in Isabela

Isabela— Last May 7 to May 9, 2013, Indoor Residual Spraying (IRS) was conducted at Dibuluan, San Mariano, Isabela as part of the interventions done to address the increasing number of malaria cases in the area. Residents were also given new LLINs to replace their worn out ones. With the support from the Center for Health Development Region II (CHD II), IRS will be conducted in the community every three months, with insecticides to be provided by CHD II.

Meals and transportation during the activity were provided by the local government unit of San Mariano. Both Provincial Malaria Coordinators (PMCs) of the province, Mr. Leoncio Pagaduan and Ms. Dolores Lorenzo, were present during the activity to monitor the IRS and LLIN distribution. IEC was given by San Mariano Municipal Health Officer Dr. Almira Reyes prior to the spraying and distribution. — Christian Mariano, PO-Isabela and Ronessa Rollorata, PSFI Communications Officer

ZSI Distributes LLINs

Zamboanga Sibugay — Four hundred Long Lasting Insecticide-treated Nets (LLINs) were distributed in three barangays in Zamboanga Sibugay on April 17-18, 2013. In Barangay Samonte in the municipality of Talusan, a total of 110 residents received LLINs last April 17. An advocacy campaign about malaria prevention was given by Provincial Malaria Coordinator (PMC) Mr. Robin B. Pagarugan prior to the LLIN distribution.

Also in April 17, 120 LLINs were distributed in Barangay Bualan, Talusan. In conducting the IEC campaign, Provincial Malaria Coordinator (PMC) Mr. Robin B. Pagarugan emphasized the use and proper care of mosquito nets. Words of gratitude were expressed by Barangay Captain Sahadi Sakiral and reminded his constituents, “so that we can avoid Malaria, let us practice the habit of using our nets and maintain the cleanliness of our surroundings.”

In Barangay Baganipay, 170 residents received their LLINs last April 18, 2013. Their barangay captain thanked Pilipinas Shell Foundation, Inc. (PSFI) for their continuing support in their barangay and the whole province. “As a counterpart of their malaria control program, we must be vigilant all the time,” he adds. — Garcia Tahamid, PO-ZSI and Ronessa Rollorata, PSFI Communications Officer

Representatives from the Provincial Health Office, Municipal Health Office and MAM Isabela with the residents of Dibuluan, San Mariano, Isabela during the LLIN distribution
MAM Hails another A1...

Consolidated Malaria Grant in the Philippines for its excellent program achievement in the implementation of activities, completion of conditions and management actions, as well as program management in period 5 (July to December 2012). She also confirmed an A1 rating in its Progress Review.

Cui recognized that the grant continues to perform well in that period with 5 out of 7 reportable indicators exceeding targets. Among its top achievements included the continuing decline in that malaria morbidity rate in 2012 (8.24 per 100,000 populations vs. target of 13.25). Most importantly, malaria mortality also remained low (0.012 per 100,000 populations vs. 0.015 target). She continued that the PR exhibited prudence in spending as it continuously looks for opportunities to improve cost efficiencies. The PR, however, needs to further strengthen the training, supervision and coordination activities to improve treatment compliance.

The grant has been rated A1 since it started in 2010. This rating translates into uninterrupted disbursement of 100% of the fund requested for the next period (January to June 2013). In turn, this means more productive man-hours and more lives will be saved against the debilitating effects of the disease in the communities living in high-risk areas. Also, this is yet another milestone towards helping the country in achieving its malaria-free status by 2020. — Darius dela Cruz, PSFI-MAM DMU Officer

Treatment of Conventional Nets in Zamboanga Sibugay

A total of 211 conventional nets were treated last April 16, 2013 and April 25, 2013 at Brgy. Datu Panas, Buug, Zamboanga Sibugay. Mosquito-borne diseases such as malaria, dengue and filariasis are very prevalent in Zamboanga Sibugay so treatment of conventional nets is important to prevent the diseases from spreading.

The barangay captain of Brgy. Datu Panas expressed their gratitude to Pilipinas Shell Foundation, Inc. (PSFI) and the Regional Health Unit for such an endeavor.

Provincial Malaria Coordinator (PMC) Mr. Robin B. Pagarugan with PSFI MAM Project Officer Garcio Tahamid encouraged the residents to use their treated nets every night to prevent mosquito bites.

Net treatment is done twice a year to ensure the effectivity of conventional nets.— Garcio Tahamid, PO-ZSI and Ronessa Rollorata, PSFI Communications Officer

An expectant Palaw’an mother receives her pregnancy package during the WMD celebration in Rizal, Palawan.
Would you like to ...

feature an outstanding health worker, a remarkable health facility or a commendable community?

You may send an article to the Project Management Office. We welcome articles to feature our unsung heroes and heroines and be able to showcase best practices in community-based malaria control.

You may submit a handwritten article but we will appreciate if articles are in MS Word format. Please attach pictures with caption. Article may be written in English or Filipino.

Send the electronic files to any of the following email addresses:

- movementagainstmalaria@gmail.com

You may also mail a printout in our mailing address.

A gift awaits the contributors whose articles are published.

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(Clockwise): Bongao Rural Health Midwife and Rapid Diagnostic Test-trained Health Worker Annie Uddin tries sending a report to the Malaria Text Report System. Malaria Test Report System Developer Emmanuel Pelayo supervises the process. RHU Uddin is assigned in Tongsinah, one of the farthest barangay of Bongao which can only be reached by a boat; A health worker sending a report to the Malaria Text Report System using the data from the Malaria Patient Registry Form of PhilMIS; Tawi-Tawi Project Officer Madzni Sarahadil discussed the process of sending Malaria Text Report System to Bongao Rural Health Midwife and Luuk Pandan Rapid Diagnostic Test -trained Health Worker Siti Radzma Yacob. For better understanding, Sarahadil translates the instruction in Tausog, the commonly used dialect in the province; Adaptiv Sys, Inc. staff and System Developer Sancho Aristorenos shows to the participants of the field testing the real-time SMS reports received by Malaria Text Report System.
Subic Wins Best in Program Sustainability Award

Towards the attainment of Kalusugan Pangkalahatan or the Universal Health Care, the Department of Health – Center for Health Development 3 (DOH-CHD 3) recognizes the indispensable role that health partners, co-implementors and stakeholders play toward the deliverance of efficient, effective and quality health care delivery system the people of Central Luzon.

The Central Luzon Excellence Awards for Health 2012 (CLExAH Recognition Day) was coined to give credit to whom it is rightly due and to strengthen the bonds of camaraderie and partnership between the DOH, the shareholders, and other champions for health.

In January 29, 2013, Subic bagged the Best in Program Sustainability Awardee in the CLExAH Recognition Day for the continual efforts in sustaining a reduction in malaria morbidity and mortality in the past 3 consecutive years through integrated approach, multisectoral involvement and community empowerment.

Malaria cases in Zamboles went down from 2000 in 2010 to only 50 in 2012. The province is in stable transmission.

Huddle Up and Join Hands
By Aireen Escalante

Our hands are designed to accomplish tasks that will enable us to do great things and be productive. Our two hands are our tools to carry out jobs and responsibilities to live satisfactorily. But what if we try to do all these undertakings using only one hand? Things will be a bit more challenging. It will take a little longer to complete a single task. If in the first place we were given two hands to utilize to its full potential, why settle for just using one if we are sure that we can do more by using two?

With a single hand...

Back then, people got sick of malaria and die from it. People were scared of the fatal disease but it wasn’t easy to fight back. Cases kept increasing and people kept dying. Something had to be done.

To bring an end to such an unfortunate episode, the Department of Health (DOH) established the National Malaria Program that identified interventions and measures aimed at controlling the further spread of the disease. With such a wide-scale project, coordination and sectoral support were necessary in carrying out the tasks laid out by the DOH. “Iba kasi kapag may additional na tulong sa implementation since we are also handling other health programs. But with help, we’ll be able to work together efficiently”, says Regional Malaria Coordinator of the DOH-Center for Health Development Region XII Engr. Antonietta Ebol as she described the significance of having partners in pursuing the malaria program.

Hand-in-hand...

Answering the call for support were the Local Government Units (LGUs) from the provincial, municipal and barangay levels to the health workers and volunteers. Not only did they see it as part of

O N E  S C O U R G E  O N E  F I G H T  O N E  M O V E M E N T

Subic Wins Best in Program Sustainability Award

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Huddle Up and Join Hands
By Aireen Escalante

Our hands are designed to accomplish tasks that will enable us to do great things and be productive. Our two hands are our tools to carry out jobs and responsibilities to live satisfactorily. But what if we try to do all these undertakings using only one hand? Things will be a bit more challenging. It will take a little longer to complete a single task. If in the first place we were given two hands to utilize to its full potential, why settle for just using one if we are sure that we can do more by using two?

With a single hand...

Back then, people got sick of malaria and die from it. People were scared of the fatal disease but it wasn’t easy to fight back. Cases kept increasing and people kept dying. Something had to be done.

To bring an end to such an unfortunate episode, the Department of Health (DOH) established the National Malaria Program that identified interventions and measures aimed at controlling the further spread of the disease. With such a wide-scale project, coordination and sectoral support were necessary in carrying out the tasks laid out by the DOH. “Iba kasi kapag may additional na tulong sa implementation since we are also handling other health programs. But with help, we’ll be able to work together efficiently”, says Regional Malaria Coordinator of the DOH-Center for Health Development Region XII Engr. Antonietta Ebol as she described the significance of having partners in pursuing the malaria program.

Hand-in-hand...

Answering the call for support were the Local Government Units (LGUs) from the provincial, municipal and barangay levels to the health workers and volunteers. Not only did they see it as part of

O N E  S C O U R G E  O N E  F I G H T  O N E  M O V E M E N T
their duty but they also wanted to extend a hand to those who have suffered from the disease. “With the help of the local government units, we were able to gather the warring tribes in the endemic areas into a common area where we were able to educate them,” says Davao del Norte Provincial Health Officer Dr. Agapito Hornido as he recounted their ups and downs in working with local government units.

Other than the LGUs, there were volunteer health workers who willingly offered their services for the program. They have undergone trainings for malaria diagnosis to become health service providers at health centers and stations. “Isa rin ako sa mga nabiktima ng malaria, nais kong malunasan kung ano ang pinagdaanan ko. Napagal- ing ako noon, ngayon nais ko naman makatulong sa iba,” says Deborah Arros, a barangay malaria microscopist from Palawan when asked why she volunteered for the program. “Masaya po ako dahil natutulungan ko ang mga ka-barangay at kapit-barangay ko. Kahit pagod ako basta may dumating sa bahay namin, kahit dis-oras ng gabi para lang magpa-blood smear, okay lang sa akin. Minsan nga, meron pa dahil sa sobrang sakit niya, nagsuka na siya sa aming bahay,” says Noralyn Luna of Palawan as she recounts her encounters in her ten years of being a barangay malaria microscopist. Deborah and Noralyn are just two of the many volunteers who continue to dedicate their time and effort for the hope that one day, no one will get sick of malaria anymore.

“Asana masuportahan pa kami ng Department of Health, sa mga supplies at kagamitan para tuluyan nang mawala ang malaria sa komunidad”, says Beverly Doroteo, a trained RDT volunteer from Puerto Princesa City, Palawan.

But even with the Department of Health, the Local Government Units, health workers and volunteers working altogether, they admit that they are still struggling. There are enough people on the field to carry out the tasks but there are still some gaps that need to be addressed. The resources are not enough to sustain the whole program. Additional help and assistance is crucial.

As Zambales Provincial Malaria Coordinator Maria Victoria Figuerres said, “ang kailangan, hindi lang isa ang gumagalaw dito. Dapat multi-sectoral ang approach dito”.

Even Provincial Health Officer of Davao del Norte Dr. Agapito Hornido has the same
and Malaria (GFATM) through Pilipinas Shell Foundation Inc. (PSFI), Alcantara Group Foundation, Mahintana Foundation, Inc., Simbalan Drivers’ Association, and a few others have been exerting efforts hand in hand to halt the malaria incidence in the country.

Alcantara Group Foundation Executive Director Lyndon Magtulis shares that they have supported the malaria program because they couldn’t bear the thought of their fellowmen dying from the disease. They wanted to help bring down malaria cases in their province of Saranggani so they provided mosquito nets. Up to this day, they continue to join activities regarding malaria control. He says, “Kung titingnan ninyo, ang aming kontribusyon sa malaria ay maliit lang. Ngunit naniniwala kami na kung ‘yung maliliit na tulong ay iipon-ipunin, malaki ang ating magagawa upang sugpuin ang problema ng malaria sa bansa”.

Another foundation in Saranggani that helps in combatting malaria is the Mahintana Foundation, Inc. Their Provincial Health Officer once appealed to them for assistance and upon witnessing the high incidence of malaria in their province, the Foundation decided to support the program. They adopted barangays in several communities to ensure that they do not contribute to the number of malaria cases in the province.

They also tapped various development players to donate funds for the procurement of bed nets that they provide in their adopted barangays. Mahintana Foundation Program Coordinator for Basic Social Services Liza Ora firmly believes that if other organizations will help in sustaining program gains, achieving the country’s goal of eliminating the scourge is definite. She notes, “Kung kaya namin dito sa Saranggani, kaya natin sa ibang probinsya, kaya natin sa buong bansa.”
organizations will help in sustaining program gains, achieving the country’s goal of eliminating the scourge is definite. She notes, “Kung kaya namin dito sa Saranggani, kaya natin sa ibang probinsya, kaya natin sa buong bansa.”

Currently, we are able to achieve the lowest number of cases ever recorded in 42 years. Deaths due to malaria are kept at a minimum number. The population at risk are kept protected with the LLINs. Spraying of houses and availability of free anti-malaria drugs are maintained and case detection activities are constantly conducted. These gains could not have been possibly attained if not for the hands that altogether carried the burden of the disease and worked together to fight it.

We were once at the Control phase. But with the implementation of the interventions and measures by the pioneer program implementers, we were able to get past the Control Phase and reach the Pre-elimination phase. As more support came in, we were able to advance to another phase and have now reached the Elimination status. Given this accomplishment, it doesn’t mean that we can now relax and be complacent. We shall maintain the interventions and continue running the program. We shall continue working together. We still have one more phase to get to, the ultimate and final one – the Malaria-free phase.

Let us all join hands as we strive to reach the next phase. With all the help and support we can get, we can guarantee that soon enough, we will be able to lift this scourge upon us and be liberated from the adversity it brings. Let us not falter now, but instead strive harder and take part in this endeavour.

Two hands can do great things. More so, a number of hands can do a whole lot better.
<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target for January to June 2013</th>
<th>Accomplishment January to May 2013 (UNVALIDATED)</th>
<th>% accomp</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Number of health service providers trained</td>
<td>Y - cumulative annually</td>
<td>57</td>
<td>57</td>
<td>100.0% Other training batches set in the following months of the Period.</td>
</tr>
<tr>
<td>2. Number and % of confirmed malaria patients (confirmed either by microscopy or RDTs) receiving anti-malarial drugs among the total number of confirmed malaria patients (as per treatment guidelines)</td>
<td>Y - cumulative annually</td>
<td>99%</td>
<td>90%</td>
<td>90.9%</td>
</tr>
<tr>
<td>3. Number and % of suspected malaria patients diagnosed within 48 hours of consultation in a facility (Indicator 1.1 of the national M&amp;E Plan)</td>
<td>Y - cumulative annually</td>
<td>not due</td>
<td></td>
<td>Not due for reporting. To be reported on Feb 2014</td>
</tr>
<tr>
<td>4. Number and % of health facilities with no stock-outs of nationally-prescribed program drugs lasting more than 2 weeks of nationally recommended anti-malarial drugs during the past 3 months</td>
<td>N - not cumulative</td>
<td>not due</td>
<td></td>
<td>Not due for reporting. To be reported on Feb 2014</td>
</tr>
<tr>
<td>5. Number of LLINs distributed to people in endemic areas</td>
<td>Y - cumulative annually</td>
<td>270,424</td>
<td>183,698</td>
<td>67.9% Awaiting reports from field.</td>
</tr>
</tbody>
</table>
**Pilipinas Shell Foundation, Inc.**  
**PHL-202-G09-M Consolidated Malaria Grant - Phase 2**  
**Progress Update Report**  
As of June 25, 2013

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Target for January to June 2013</th>
<th>Accomplishment January to May 2013 (UNVALIDATED)</th>
<th>% accomp</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Number of houses in malaria-endemic areas sprayed by IRS</td>
<td>Y - cumulative annually 100,000</td>
<td>81,448</td>
<td>81.4%</td>
<td>Awaiting reports from field.</td>
</tr>
<tr>
<td>7. Number of pregnant women receiving the malaria pregnancy package</td>
<td>Y - cumulative annually 20,000</td>
<td>10,047</td>
<td>50.2%</td>
<td>Awaiting reports from field.</td>
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<tr>
<td>8. Number of health personnel trained on malaria outbreak detection and management</td>
<td>Y - cumulative annually 60</td>
<td>62</td>
<td>103.3%</td>
<td></td>
</tr>
<tr>
<td>9. Number and % of municipalities with Annual Operational Plans that include costed malaria control activities</td>
<td>N - not cumulative not due</td>
<td></td>
<td></td>
<td>Not due for reporting. To be reported on Feb 2014</td>
</tr>
<tr>
<td>10. Number and % of municipalities submitting PIDSR reports at least once a month</td>
<td>N - not cumulative not due</td>
<td></td>
<td></td>
<td>Not due for reporting. To be reported on Feb 2014</td>
</tr>
</tbody>
</table>
Pilipinas Shell Foundation, Inc.  
PHL-202-G09-M Consolidated Malaria Grant - Phase 2  
Financial Report  
Budget vs Actual  
As of May 31, 2013

<table>
<thead>
<tr>
<th>Expenditure Category</th>
<th>Total Budget (Jan 2010 to June 2013)</th>
<th>Audited Actual Expense (Jan 2010 to Dec 2012)</th>
<th>Unaudited Actual Expense (Jan 2013 to May 2013)</th>
<th>Total Actual Expense (Jan 2010 to May 2013)</th>
<th>Variance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources</td>
<td>3,216,674</td>
<td>2,607,282</td>
<td>411,893</td>
<td>3,019,175</td>
<td>197,499</td>
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<tr>
<td>Technical Assistance</td>
<td>754,862</td>
<td>470,358</td>
<td>247,194</td>
<td>717,552</td>
<td>37,310</td>
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<tr>
<td>Training</td>
<td>2,922,806</td>
<td>2,742,223</td>
<td>77,078</td>
<td>2,819,302</td>
<td>103,505</td>
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<tr>
<td>Health Products and</td>
<td>16,930,324</td>
<td>14,531,138</td>
<td>37,108</td>
<td>14,568,246</td>
<td>2,362,078</td>
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<tr>
<td>Health Equipment</td>
<td>6,855,324</td>
<td>5,425,913</td>
<td>1,060,606</td>
<td>5,586,519</td>
<td>268,805</td>
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<tr>
<td>Medicines and</td>
<td>266,265</td>
<td>143,424</td>
<td>75,592</td>
<td>219,016</td>
<td>47,249</td>
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<td>Pharmaceutical Products</td>
<td>935,614</td>
<td>809,953</td>
<td>44,119</td>
<td>854,072</td>
<td>81,542</td>
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<tr>
<td>Procurement and Supply Management Costs</td>
<td>1,589,079</td>
<td>1,080,007</td>
<td>178,897</td>
<td>1,258,904</td>
<td>330,175</td>
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<tr>
<td>Communication Materials</td>
<td>398,364</td>
<td>264,170</td>
<td>80,195</td>
<td>344,365</td>
<td>53,999</td>
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<tr>
<td>Monitoring and Evaluation</td>
<td>2,975,202</td>
<td>1,956,428</td>
<td>257,172</td>
<td>2,213,600</td>
<td>761,602</td>
</tr>
<tr>
<td>Living Support to Clients/ Target Population</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Planning and Administration</td>
<td>2,394,216</td>
<td>1,896,978</td>
<td>290,363</td>
<td>2,187,340</td>
<td>206,876</td>
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<tr>
<td>Overheads</td>
<td>638,542</td>
<td>549,486</td>
<td>39,625</td>
<td>589,111</td>
<td>49,431</td>
</tr>
<tr>
<td>Other</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total</td>
<td>33,021,948</td>
<td>27,051,447</td>
<td>1,739,236</td>
<td>28,790,683</td>
<td>4,231,266</td>
</tr>
</tbody>
</table>

Percentage of Utilization as at May 31, 2013  
87%