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We consider in this issue why malaria is increasing and what we are doing and can do to reduce the incidence of this disease.

Covid pandemic

Because of the Covid pandemic, medical aid has been diverted to fighting the pandemic by inoculating all people above 10 years of age with a vaccine. However, as the virus continues to mutate, vaccines have been modified and further injections have been necessary. So with fewer resources to fight malaria, it is not surprising that the number of people catching malaria has increased.

Climate change and weather extremes

Even more worrying, perhaps, is our changing climate and while the average global temperature has only risen 1.2 C over the long term average, the incidence of extreme weather events is increasing. In the past month, gale force winds and rains in the form of hurricanes have battered Cuba, South Eastern USA, Philippines and Japan causing great damage and suffering.

But from a malaria viewpoint, the flooding in Pakistan due to the monsoon has been very severe with 1/3 of the country being affected and that some areas may not drain for up to 6 months. The outcome has been that mosquitos have flourished, not only in spreading malaria, but also other mosquito borne diseases like Dengue Fever. This has affected some 33 million people.

As all climate models predict increasing intensity of severe weather events, each of us needs to do something to limit our impact on the changing climate. This is possible by using energy more efficiently, using less energy and switching to renewable energy sources where ever possible.

Sustainable development goals and KIJ

Improving global health is one of the 17 Sustainable Development Goals (SDGs) agreed by the United Nations in 2015. At the Kent International Jamboree (KIJ) held at the end of July, there was a walk through hands on exhibition of all these goals and Scouts against Malaria was used as an example of how Scouts could make a difference in countries within the Tropics where malaria was endemic.

As vaccine trials have only just begun, the safest way of avoiding being infected is to sleep under an Insecticide Treated Net (ITN), as the anopheles mosquito, the carrier of the malaria parasite, is only active from dusk onwards. The exhibition explained not only why malaria was still one of the major causes of illnesses and deaths, but how Scouts could help by fund raising and sending these funds to Scouts to various Africa countries who could then purchase these nets and distribute them to vulnerable families and discuss how to avoid catching malaria.

We can only hope that some of the 4000 Scouts who attended the Jamboree, will learn more about malaria and be willing fund raise at least £5 to enable one net to be purchased and possibly save a life.

Recent distribution campaigns

Tamale, Ghana Michael Bowen reports

Hertfordshire Scouts raised over £3,600 this year, which we were able to send over to Inzaghi (Akela, Anbariya Cubs) which enabled him to purchase 1,000 double sized ITN treated mosquito



nets to help protect families from malaria.

On Saturday the Anbariya Cub Scouts were joined by the Ghana Health Service who taught them how to use the nets correctly, how to hang them properly, and educated them on the dangers and causes of Malaria, and how to prevent it so they could pass this knowledge on to the rural communities they planned to visit.

The following day they visited three communities; Mwodwa, Kpilo and Na-PagYili and "the chiefs and people in these communities welcomed us very

well and they were so happy that we choose their communities to benefit from the Scout Against Malaria project".

As has been common in all our distribution campaigns to date, the demand for the nets far outweighed supply and so vulnerable families like pregnant women, nursing mothers and the elderly were prioritised. Many of the people had never owned or slept under a mosquito net. In total, 700 nets were distributed across these three communities and the following weekend, another 300 nets were distributed across three further communities.

Accra, Ghana Louis Okyere reports

On 18 August, the Ghana Scout Association together with the Maristar Scout Group and a group of Scouts from Kent distributed one hundred mosquito nets to the people of Manhean community in the Greater Accra Region to help prevent mosquito bites and malaria attacks.

The Scouts started the distribution after a visit to the Chief's house to inform him about the service the

Scouts were about to render to the Manhean community. The Scouts did a house-to-house distribution of the mosquito nets with the beneficiaries of the mosquito nets being aged women in the community, pregnant women, and newborn mothers.





Dowa district, Malawi Howie Maujo reports

Malaria still possesses danger in Southern Africa including Malawi. Malaria is one of the diseases the Malawi government and other international organization are trying to mitigate and prevent its devastating impact on adults [elderly] as well as newly born babies and pregnant women.



The Scout Association of Malawi in partnership with UK Scout Groups embarked on a joint venture to reach out to vulnerable group of people in Malawi's under- privileged communities, especially rural and hard top reach areas where people with physical challenges, orphans, widows and elderly are identified as beneficiaries of this distribution of impregnated mosquito nets. In this intervention the refugees that form part of the community in the Dowa District of Malawi and having engaged with them for Scouting activities, some 200 households were identified within the refugee camp to access the insecticide Impregnated mosquito nets

Dzalea refugee camp, Dowa Distrci

As crises become protracted, refugees residing in cities often face asset depletion and rising debt levels. Opportunities for income generation are typically unstable and unpredictable, with families facing indebtedness to cover the cost of shelter and other basic needs. While receiving credit is not uncommon for many urban dwellers, the relative vulnerability of the displaced puts them at risk of debt bondage. Such profound economic insecurity can compel some families to make perilous choices, including child marriage, human trafficking, commercial sexual exploitation, begging, and street vending.

Livelihood interventions have the potential to reduce such risks by restoring economic independence, dignity and self-reliance. This intervention typically involves integrating beneficiaries into part of the community inhibiting the cases of discrimination, harassment, and marginalisation. However Dzaleka refugee camp population continues to grow and recently it tripled due to government policy for all refugees to return to the camp where it is secluded from viable economic activities. Many sold their property in fear of locals confiscating it.

Dzaleka refugee camp which is located outside Lilongwe, currently holds close to 80,000 people instead of 25,000 due to Malawi government policy for all refugees who have integrated into the society to return to Dzaleka resulting in the overcrowded camp holding a youth population of 65% and most of the adolescent being out of school.

Hygiene and sanitation around the camp provide an environment for disease and sickness such as malaria and cholera while the drainage systems encourage the breeding of mosquitos and other sicknesses. It is also highly polluted with bad odour from stagnant water and poor drainage system. and poor waste management which needs improvement in order to mitigate other sickness emanating from poor drainage systems and sanitation. Despite all these difficulties, Dzaleka is rich is

human resource which are being utilised in the implementation of Scout activities.

Intervention goal

Reduce incidence of malaria cases among vulnerable groups of Dzaleka Refugee Camp in order to

- Encourage vulnerable families to use impregnated mosquito nets more frequently
- Have a healthy and energetic community that works together on hygiene and sanitation to prevent mosquitoes that spread malaria



• Mainstream scout values to mitigate spread of malaria.

The strategy was to identify and distribute impregnated mosquito nets to vulnerable groups and to undertake civic education on the proper use of these nets.

Issues that were addressed

The intervention has been conducted without difficulties, though demand looks to be increasing each time nets are distributed especially among the vulnerable, like elderly people as the population of the refugee camp is enormously increasing every day.

This intervention has given the Scout Association of Malawi another dimension to consider in giving service to community. Scouts are able to help civic educate communities the dangers of mosquitos and how they can keep their surroundings clean to prevent further bleed of mosquitoes that transmit malaria. Communities served are aware of importance of ITN nets and their proper usage and malaria is being mainstreamed into youth forum activities to enhance continuity of relevant information. Above all, the project strengthens Scout structures to effectively engage communities in preventing malaria with Scouts being proactive in terms of knowledge dissemination.



A healthy Surveillance Assistant doing the eneficiary assessment exercise within the refugee camp



Even female headed households were identified



The identification reached to less privileged households



Some of the beneficiary houses

Joining the global partnership

We have developed a wide range of activities which are suitable for activities for all sections from Beavers through to Explorers. These explain not only why malaria is such a scourge in tropical areas of the world, but also what we can do limit its incidence.

If you or your Section/Group is willing to join the global partnership to fight malaria, visit our website <u>www.scoutsagainstmalaria.org.uk</u> or email us at <u>info@scoutsagainstmalaria.org.uk</u> Activities, including videos of current campaigns, are available on the SAM website, which can be downloaded and are suitable for on-line learning for both individual Scouts and for sectional meetings.

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