

EPIDEMIC CONTROL FOR RESPONSE MANAGERS

DISEASE: MALARIA - RP1

Role profile 1	Competencies	Gaps in competencies	Gaps in information they need
National Society emergency response staff	Deployment of volunteers, activation of existing NS emergency response systems, tools and programmes	Specific adaptations needed for health emergencies, exposure to response approaches, tools, needs outside of sudden-onset natural disasters	Understanding of health impacts of natural disasters and understanding of how/ when/ why to engage health colleagues in emergency response

Disease Tool 9.7 Malaria

Fact Sheet	Importance	<p>In 2016, 91 countries and areas had ongoing malaria transmission. The WHO estimates there were 216 million cases of malaria in 2016 and 445 000 deaths. Countries in Africa reported 90% of cases and 92% of deaths of malaria globally. Malaria epidemics do not generally occur in high-transmission areas (other than when there is migration of non-immune persons into these areas). This is because the population has developed partial immunity to the disease. Continuous exposure to malaria infection provides immunity in people after a certain age but this immunity is transient. People who remain uninfected over a short period (less than one year) become newly susceptible to the disease. Therefore, those living in areas of seasonal or low transmission do not develop adequate immunity and can be vulnerable to the disease every season.</p> <p>Since epidemics occur in areas where populations have inadequate immunity, malaria cases can be high, with very high rates of morbidity and mortality.</p>
	Risk assessment	<p>Event description: type of disaster, characteristics of displacement
Host: community practices, cultural practices, chemoprophylaxis coverage
Agent: endemicity, recent epidemics, ongoing prevention and control interventions, disease incidence, mortality, seasonality
Environment: presence of vectors, shelter, availability and access to health and social care</p>
	Vulnerable people	<ul style="list-style-type: none"> • Infants, children under five years of age • Pregnant women • People living with HIV • Non-immune migrants, mobile populations and travellers
	How disease is spread (modes of transmission)	<p>Vector-borne</p> <ul style="list-style-type: none"> • <i>Anopheles</i> mosquito bite • The mosquitoes usually bite between sunset and sunrise during the night.
	Community case definition	<p>A fever that goes up and down, with spells of extreme heat and shivering</p> <p>Any person with fever in a malaria-endemic area</p> <p>Any under-five child who has an illness with high fever and a danger sign</p> <p>Danger signs include lethargy, unconsciousness, vomiting everything, convulsions, and in children less than five years, inability to drink or breastfeed)</p>
	Community-level disease tools	<ul style="list-style-type: none"> • CBHFA module • ECV disease tools (all relating to malaria)



Which interventions are most effective for prevention and control of malaria?

Activity	Evidence of effectiveness			
	High	Moderate	Low	No evidence
(Referral for) Early and effective treatment (aligned with national anti-malarial drug policy)	✓			
(Referral to) Intermittent prevention therapy (IPT) – infants and pregnant women	✓			

Indicators and targets

The indicators and targets below can be adapted to specific contexts and should be used for monitoring and evaluation of: i) progress of the epidemic and characteristics, and ii) measuring Red Cross/Crescent activities.

Indicator	Target
Epidemic characteristics and progression	
Malaria cases per week (population and children < 5 years)	#
Malaria deaths per week (population and children < 5 years)	#
Case-fatality rate in all malaria cases	%
Case-fatality rate in severe malaria cases	< 5%
Malaria parasite prevalence: children six months to five years with malaria infection	%
Red Cross/Crescent activities	
Number of volunteers trained	#
Suspected cases detected by volunteers and referred to health facility	#
Children < 5 years of age presenting with malaria receiving effective anti-malarial treatment within 24 hours of symptom onset	100%

Impact on other sectors and programme areas

Sector	High Impact	Medium impact	Low impact
WASH	✓		
Food security			✓
Nutrition			✓
Shelter and settlements (including household items)	✓		
Psychosocial support and mental health			✓
Restoring family links			✓
Education			✓
Livelihoods			✓

