MALARIA CONSORTIUM **PROJECT BRIEF**

Mobile malaria services for hard-to-reach communities in northeast Cambodia

Accelerating malaria elimination by targeting mobile and migrant populations in remote and forested areas

Background

Artemisinin-based combination therapies are the recommended treatment for *Plasmodium falciparum* malaria and are one of the most effective antimalarials at our disposal. However, resistance to artemisinin has been confirmed in malaria parasites in countries of the Greater Mekong Subregion. This has rendered treatment of the disease increasingly challenging and threatens malaria control achievements made in the subregion thus far.

To avoid further emergence of artemisinin-resistant mutations, we need to take the final steps towards eliminating *P. falciparum* in Cambodia altogether. This requires a particular focus on preventing malaria among vulnerable groups.

Country Cambodia

Donor

The Global Fund to Fight AIDS, Tuberculosis and Malaria

Length of project

December 2015 – December 2020

Partners

National Center for Parasitology, Entomology and Malaria Control Preah Vihear, Ratanakiri and Stung Treng's provincial health departments

Project outline and objectives

In Cambodia, those most vulnerable to malaria infection are forest goers who live and work in remote areas that lack access to community or facility-based healthcare services.

Therefore, since December 2015 Malaria Consortium has been working with mobile malaria workers (MMWs) to pilot different methods in various locations for the early diagnosis and treatment of malaria among this high-risk group. MMWs are respected and trusted members of the target population and are able to communicate in local languages. They have knowledge of the forest and regional topography and conduct frequent and intensive outreach activities in difficult terrain. Moreover, they are able to coordinate with the national surveillance and reporting systems at the local level.

Through the Regional Artemisinin Initiative 2 Elimination (RAI2E) project we have:

- strategically placed 11 mobile malaria posts (MMPs) at unofficial border crossings, forest entry points and other meeting points frequented by forest goers — such as stores and cross roads — to provide timely treatment to those diagnosed with malaria
- worked with 55 MMWs to provide outreach malaria services in forests, including proactive and reactive case detection and treatment.

Preliminary findings from our work indicate that MMPs are the most efficient means of identifying and treating large numbers of malaria cases among forest goers. Reactive and proactive case detection in forests is, nevertheless, necessary to increase the reach of diagnosis and treatment services.

Since September 2018, we have expanded the network of MMWs and established a 'protective ring' of MMWs and MMPs around the main forests of northeast Cambodia. This expansion aims to ensure that all forest goers living along the northeastern border have timely access to preventive tools — such as insecticide treated hammock nets and long lasting insecticidal nets — as well as testing and treatment services.

Overall, this project aims to:

- provide testing to forest goers
- distribute long lasting insecticidal nets and impregnated hammock nets to all forest goers

- treat all confirmed malaria cases and refer severe cases to the nearest health centre
- strengthen the local public health system by linking the MMWs with the national surveillance system.

Activities

Building on the efforts of the project's predecessor RAI, we tested over 50,119 forest goers and treated more than 6,152 confirmed malaria cases between April 2016 and June 2019. We will continue our efforts to target this key population, in collaboration with the National Malaria Control Programme and provincial health authorities, by:

- training and supporting a well-established MMW network
- operating outreach services, either in the forest or in strategically selected areas, to ensure their accessibility and that the maximum number of forest goers is reached
- providing appropriate vector control measures to all who access our services.



Figure 1: Locations of RAI2E projects in northeast Cambodia

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Contact: info@malariaconsortium.org

Cover image: MMW returning home from a meeting at the Nhang Health Clinic led by members of Malaria Consortium. Credit: Luke Duggleby

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