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**Why it is important to share
and act on information
about**



Malaria

Malaria is a serious disease spread through mosquito bites. Each year, there are 300 million to 500 million cases of malaria throughout the world and about 1 million child deaths. In areas where malaria is common, it can be the leading cause of death and poor growth among young children.

Malaria is also particularly dangerous for pregnant women. It causes severe anaemia, miscarriages, stillbirths, low birthweight and maternal death.

Many lives can be saved by the prevention and early treatment of malaria.



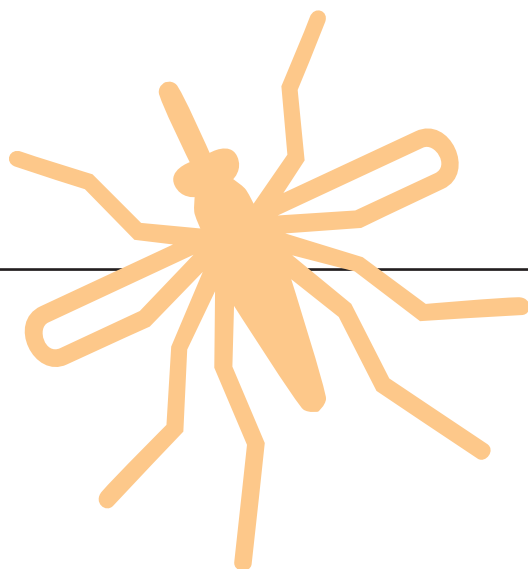
Key Messages:

What every family and community has a right to know about

Malaria

1. Malaria is transmitted through mosquito bites. Sleeping under a mosquito net treated with a recommended insecticide is the best way to prevent mosquito bites.
2. Wherever malaria is common, children are in danger. A child with a fever should be examined immediately by a trained health worker and receive an appropriate anti-malarial treatment as soon as possible.
3. Malaria is very dangerous for pregnant women. Wherever malaria is common, pregnant women should prevent malaria by taking antimalarial tablets recommended by a health worker.





4. A child suffering or recovering from malaria needs plenty of liquids and food.
5. Families and communities can prevent malaria by taking action to stop mosquitoes from breeding.





Supporting Information

Malaria

1. Malaria is transmitted through mosquito bites. Sleeping under a mosquito net treated with a recommended insecticide is the best way to prevent mosquito bites.

All members of the community should be protected against mosquito bites, particularly young children and pregnant women, and especially between sunset and sunrise when mosquitos are most active.

Mosquito nets, curtains or mats that are dipped in a recommended insecticide kill mosquitoes that land on them. Special, permanently treated mats should be used, or nets, curtains or mats that are dipped in insecticide regularly. Usually, the nets need to be re-treated when the rains begin, at least every six months, and after every third wash. Trained health workers can advise on safe insecticides and re-treatment schedules.

Babies and other small children should sleep under a treated mosquito net. If the nets are expensive, the family should buy at least one big net, which the small children can sleep under. Breastfed babies should sleep with their mothers under a net.

Treated mosquito nets should be used throughout the year, even during times when there are fewer mosquitoes.

If mosquito nets cannot be used, other actions can help:

- curtains, cloths or mats impregnated with a recommended insecticide can be hung over doors and windows



- screens can be put on doors and windows
- mosquito coils or other fumigants can be used
- clothing that covers the arms and legs (long sleeves and long pants or skirts) can be worn as soon as it begins to get dark. This is especially important for children and pregnant women.

2. Wherever malaria is common, children are in danger. A child with a fever should be examined immediately by a trained health worker and receive an appropriate antimalarial treatment as soon as possible.

Malaria should be suspected if anyone in the family has a fever, or if young children refuse to eat or have vomiting, drowsiness or fits.

A child with a fever believed to be caused by malaria needs to be given immediate antimalarial treatment as recommended by a health worker. If children with a malarial fever are not treated within a day, they might die. A health worker can advise on what type of treatment is best and how long it should continue.

A child with malaria needs to take the full course of treatment, even if the fever disappears rapidly. If the treatment is not completed, the malaria could become more severe and difficult to cure.

If the malaria symptoms continue after treatment, the child should be taken to a health centre or hospital for help. The problem may be:

- the child is not receiving enough medicine
- the child has an illness other than malaria
- the malaria is resistant to the medicine, and another medicine is needed.



Children with a fever should be kept cool for as long as the fever persists by:

- sponging or bathing with cool (not cold) water
- covering the child with only a few clothes or one blanket.

3. Malaria is very dangerous for pregnant women. Wherever malaria is common, pregnant women should prevent malaria by taking antimalarial tablets recommended by a health worker.

Pregnant women are more likely to suffer from malaria than other women. The disease is more dangerous during pregnancy, especially during the first pregnancy. It can cause severe anaemia ('thin blood'), miscarriage, premature birth or stillbirth. Babies born to mothers who have had malaria during pregnancy will probably be underweight and therefore more vulnerable to infection or death during their first year.

Pregnant women should take antimalarial tablets during pregnancy where recommended.

Not all antimalarial tablets are safe to take during pregnancy. The health worker will know which antimalarial tablets are best.

Pregnant women need to sleep under mosquito nets that are regularly treated with insecticide to prevent mosquito bites.

Pregnant women with signs and symptoms of malaria must be treated adequately and immediately to prevent death.

Pregnant women who become ill with malaria should ask a health worker about iron and vitamin A supplements.



4. A child suffering or recovering from malaria needs plenty of liquids and food.

Malaria burns up energy, and the child loses a lot of body fluids through sweating. The child should be offered food and drink frequently to help prevent malnutrition and dehydration.

Frequent breastfeeding prevents dehydration and helps the child fight infections, including malaria. Children with malaria should be breastfed as often as possible.

Frequent malarial infection can slow children's growth and brain development and is likely to cause anaemia. A child who has had several bouts of malaria should be checked for anaemia.

5. Families and communities can prevent malaria by taking action to stop mosquitoes from breeding.

Mosquitoes breed wherever there is still water – for example, in ponds, swamps, puddles, pits, drains and in the moisture on long grass and bushes. They can also breed along the edges of streams and in water containers, tanks and rice fields.

The number of mosquitoes can be reduced by:

- filling in or draining places where water collects
- covering water containers or tanks
- clearing bushes around houses.

Malaria affects the whole community. Everyone can work together to reduce the breeding places for mosquitoes and to organize regular treatment of mosquito nets with insecticide. Communities should ask all health workers and political leaders in their regions to help them prevent and control malaria.

