# MYANMAR (2015)







IOM Myanmar has supported the National Malaria Control Programme since 2006. It now implements malaria activities in 9 migration-affected townships in Mon and Kayin States, all of which are high priority areas for Artemisinin-resistance containment within Myanmar.



# MYANMAR (2015)



IOM provided malaria services through:

- Rapid Diagnostic Test (RDT) volunteers based at work sites and migrant clusters;
- Microscopy units;
- Mobile teams;
- Screening sites.

RDT volunteers and mobile teams also conduct active case finding in hard-to-reach areas and provide health education, diagnosis and treatment at transit points.





#### VIETNAM (2014- 2015)





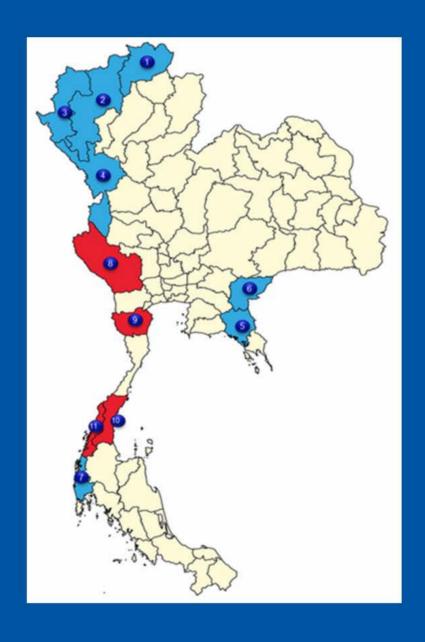
The research team is visiting a temporary migrant settlement in a forest area of Binh Phuoc province to conduct the Knowledge, Attitude and Practice (KAP) survey, Vietnam, 2014

In close collaboration with the Institute of Malariology, Parasitology and Entomology in HCMC, IOM and WHO conducted the joint study on malaria vulnerability and the mobile and migrant population (MMP) in the border province of Binh Phuoc in Vietnam. A Knowledge, Attitude and Practice survey methodology was used, and GPS technology was employed for tracking mobility patterns. This study highlighted significant gaps between the different groups of MMP, as well as between the MMP and the local population, in terms of knowledge, exposure and access to malaria service.



### THAILAND (2011- 2015)





- 1. Chiang Rai (IOM)
- 2. Chiang Mai (IOM)
- 3. Mae Hong Son (IOM)
- 4. Tak (IOM)
- 5. Chantaburi (IOM)
- 6. Srakaew (IOM)
- 7. Phang Nga (IOM)
- Karnchanaburi (ARC)
- Petchaburi (ARC)
- Chumphon (ARC)
- Ranong (ARC)

In Thailand, with support from the Global Fund, IOM provided malaria services to migrant populations and host communities along the border provinces of Chiang Mai, Chiang Rai, Mae Hong Son, Tak, Kanchanaburi, Phetchaburi, Chumphon, Ranong, Phang Nga, Chantaburi and Sa Kaeo since 2011.



### THAILAND (2011- 2015)



During the period October 2011 – October 2015 (4 years), in association with Global Fund Sub-Sub-Recipient, American Refugee Committee, IOM implemented the following activities in 11 provinces:

- Distributed 70,236 Long Lasting Insecticide Nets to migrant populations and ethnic minorities in 1000+ villages;
- Annually provided Behavior Change Communication (BCC) capacity development for 34 field staff and 56 Migrant Health Workers;
- Conducted the BCC activities through:
  - Radio broadcasts that covered 77 districts;
  - BCC activities that reached a total of 356,429 migrants in communities, households and workplaces;
  - Peer visits to 291 diagnosed Plasmodium falciparum positive cases; and
  - Joint "World Malaria Day" yearly campaigns conducted in hotspots, which were identified in 11 provinces.



# PARAGUAY (2016-2018)





Minister of Health, Dr. Antonio Barrios; the representative of the Pan American Health Organization (PAHO), Dr. Carlos Castillo; and the head of the Office of IOM in Paraguay, Richard Velázquez, at the project launch

On 22 February 2016 in the facilities of the MSPyBS (Ministry of Public Health and Social Welfare), the project "Strengthening the National Strategy to prevent Malaria Reintroduction in Paraguay" was launched, which aims to strengthen the epidemiological surveillance integrated into the health services, in order to avoid the reintroduction of the disease within the country.

