มูลนิธิ เดอะ บอร์เดอร์แลนด์ เฮลท์
The Borderland Health Foundation

ANNUAL REPORT OF YEAR 2019

MAE SOT, TAK PROVINCE
THAILAND

II. Activities Report

2.1 Project – Expansion of malaria surveillance along eastern, western and southern borders of Thailand

BHF acts as one of sub-grant recipients of this project which Shoklo Malaria Research Unit (SMRU) is the recipient to manage the project implementation. Besides, this is a two-year project funded by Dhanin Tawee Chearavanont Foundation (DTCF), used to be DT Families Foundation (DTFF), through The Global Fund and managed by United Nations Office for Project Services (UNOPS) to comprehensively collaborate with Thai health authorities and community-based organisations to share the work of malaria elimination in high prevalence border area of Thailand.

In this project, BHF is mainly in charge of a few technical supportive trainings for activity partners and collaborates with Tak Provincial Health Office (TPHO) to directly implement malaria case surveillance and reporting work. Besides TPHO, there are three other partners: Young Muslim Association Thailand (YMAT), Phusing Hospital (PUSG), and Mae Tao Clinic (MTC). Moreover, BHF also assists SMRU in progress monitoring and management with all project partners as well as in managing human resource of the project. The following paragraphs give a summary of main achievement of the project year 2019.

2.1.1 BHF and SMRU: Technical support and monitoring

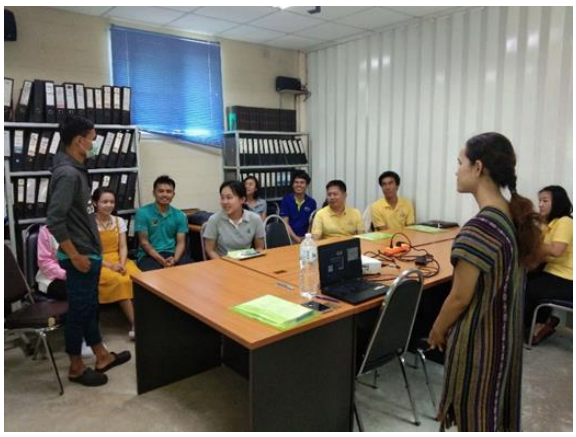
- **Training for partners**

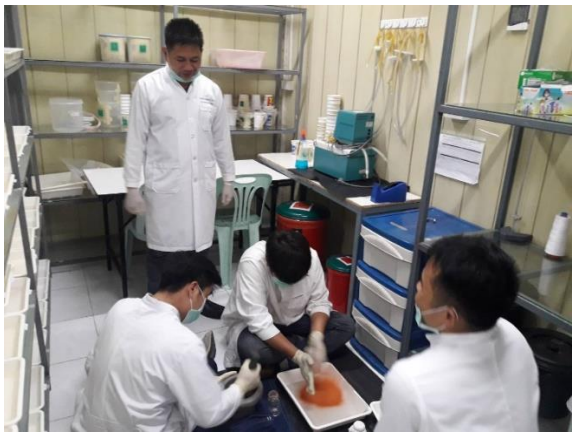
  There were four trainings organised by BHF and SMRU for partner organisations. The 1st training, TOT workshop, was in May 2019. It included a session of malaria-related knowledge especially for the participants who are non-medical background. The strategy and operation experience of SMRU on malaria elimination were shared with participants as a case reference. How to work in communities was also a topic in this training through experience exchanging and academic lecture for all participants to advance their know-how and understanding of community engagement work.


The 2nd one was a 2-day workshop, 4 and 5 September, in order to gather all implementation partners to review the case reporting template and have consistent understanding of the information to be collected. With such opportunity, every partner was also invited to share their progress of the agreed activities, which acted as a platform for experience and idea exchanging. SMRU also showed a data collection mechanism and tool which is adopted by current malaria elimination project inside Karen State, Myanmar.



The 3rd one was Entomology training, which there were two training workshops held during reporting period. One was arranged in October and the other one was held in the last week of November. This training began with a serial lecture of anopheles and insectary followed by life cycle of raising larvae with feeding and cleaning. The laboratory practice included how to raise mosquitos from egg to adult and dissecting mosquito for 2 days.







- **RDT and DBS training for partner in Southern Thailand**
  A 2-day training workshop for about 60 Malaria post workers (MPWs) working in Yala, Songkhla, and Narathiwat provinces and this was organised by YMAT in September. The necessity of this training is based on the observation of field visit in August, which emphasising on strengthening capacity and function of MPWs. By collaborating with 3 SMRU lab technicians, the MPWs participated in this training were able to refresh their skill on using malaria RDT and reading its result more confidently and precisely. Besides, practice of DBS collection was also included in this training as a means to collect samples of malaria positive cases to further identify the classification of the parasite in southern Thailand.




- **Field visit in Yala Province**
  A team field visit to our project partner YMAT in Yala province was arranged in August 2019. Sites visiting and meeting with malaria field workers and health authorities' civil servants. Our team and YMAT also discussed a possibility of organising a specific workshop to strengthen capacity and function of MPWs in Yala.


2.1.2 BHF and SMRU: Malaria detection and treatment

This project also co-supported the health work force along this border in order to further detect and treat patients with malaria. According to SMRU's health information system, **9,125** patients were screened through SMRU's four site clinics and **402** patients were detected as malaria positive in year 2019 as well as **399** patients were receiving treatment at SMRU clinics.

Moreover, in terms of case screening with local Thai health authorities in Umphang District, Tak Province. BHF and SMRU were invited to join a few field visits and work with Umphang vector-borne department (VBD), Umphang Hospital, and Umphang local health authority to proceed malaria case screening and material distribution to target remote villages in Mae Jan sub-district, Umphang. Cross-border health care and malaria treatment service are also existed in those area with the support of Thai local health authorities and NGOs both in Myanmar and Thai side. Especially, with this project's support, Thai VBD conducted anti-epidemic malaria knowledge sharing and training as well as the Thai health center acting at the frontline for malaria control hub to the local in some remote villages.


2.1.3 TPHO: Community engagement and malaria monitoring

Under the community engagement approach, TPHO conducted quite many activities on the ground level, including training for community health volunteers at high risk areas, anti-epidemic exhibition, knowledge sharing at migrant learning center, exchange and learning platform for malaria control, active malaria case screening and follow up. Those activities benefited about **8,000** people in target area.




2.1.4 YMAT: Community-based intervention and supervision

The intervention approach is with a few activities directly implemented in YMAT's target area, which YMAT arranged the activities about knowledge sharing workshops, training on malaria screening for MPWs, direct malaria screening with vector borne disease authority, and booth at local schools. In terms of supervision, regular coordination meetings were organised by YMAT with local health authority, CHVs, MPWs, and community leaders. This work approximately benefited **2,500** people in three southern provinces.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ร่วมแรง ร่วมใจ
กำจัดไข้มาลาเรีย
อำเภอยะหาเข้มแข็งขจัดโรคร้าย
-มาตรการพิชิตทิศ
-MP ร่วมกำจัดมาลาเรีย


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2.1.5 PUSG: Malaria awareness curriculum

Development of malaria awareness curriculum was completed around March, which this curriculum with training course for primary school students has reached **38 schools** by Phusing Hospital in Si Sa Ket Province.




2.1.6 MTC: Site-based case detection and treatment

MTC, a community-based organisation (CSO), is one of project partners providing primary health care mainly for migrants and Burmese people along Thailand-Myanmar border. MTC also provides malaria screening by RDT and microscopy, which there were **7,735** people receiving malaria test and **18** positive cases, 17 are Pf and 1 is mix, being found and given necessary treatment during 2019. Besides, MTC also has to entry the data of positive cases via malaria online reporting system established by Ministry of Public Health in order to gather all positive cases reported and centralised. Through technical support of SMRU data team organised by BHF, MTC has updated its data entry program and been reporting the positive cases directly to malaria online reporting system.

2.2 Public Engagement Activities

2.2.1 Twin-Village for Community Health Network along Thailand-Myanmar border

The border length between Mae Ramat District and Myanmar is more than 97 kilometers and there is only Moei River as the natural boundary between two countries. Migration and border crossing are quite easy along this area, especially dry season people can just walk to cross the border. Such convenience also leads a higher prevalence of some communicable diseases, for example, malaria, dengue fever, cholera, TB, and other diseases being able to be prevented by vaccine. Disease outbreak may happen if there is no any active monitoring or prevention work being implemented.

Based on the above, The Borderland Health Foundation directly supports and plans with Mae Ramat Hospital to further expand the training activity to community health volunteers (CHVs) inhabiting in villages in both Thai and Myanmar sides along this border area. Further, this activity is mainly organised by Mae Ramat Hospital based on the local need assessed by public health officers of Mae Ramat Hospital and there will be around 40 CHVs as direct beneficiaries. In year 2019, this activity was held for three times to target a few critical issues in community, such as maternal and child health (MCH), disease prevention and control, and some other health-related and environmental problems inside participants' communities.

- **Maternal and child health**
  This activity was on 28th February at the meeting room of Mae Ramat Hospital, Mae Ramat District, Tak Province. The topics covered a few critical issue and solution for maternal and child health, general knowledge about maternal and child health, and vaccination program for foreign children. The facilitator also assigned a homework to community health volunteers (CHVs) of community survey.

- **Disease prevention and control**
  As usual, this activity was organised to be at Mae Ramat Hospital on 11th September as one-day activity. It started with a background introduction in terms of what Mae Ramat Hospital has been supporting Burmese migrants, such as disease control and community sanitation, which it costs around 10 million THB per year. Besides, Mae Ramat Hospital also acts as a focal point in order to coordinate with other government agencies and organisations to share this work as well as financial burden afforded by Mae Ramat Hospital. BHF and SMRU are the strong partners and supporters of Mae Ramat Hospital with their long-term commitment to health collaboration along Thai-Myanmar border.

  The following sessions covered preventable diseases through vaccination, control of vector borne diseases, and fundamental knowledge about Tuberculosis (TB). It is highlighted that stigma of some diseases was mentioned and discussed during Q&A with participants, for example, TB is one of them because most TB patients have to receive isolated treatment for a few months and continue intake of anti-TB drug at home as well as patient may also feel embarrassed and community members see it's a dangerous disease. Another good example to reflect is HIV. It's widely recognised that people can live, drink, and eat with HIV patients. However, for being with TB patients, it's a totally different recognition by the public.






- **Health and environment issues in community and potential solution**
  A retreat for twin-village activity was planned and held in Khun Pawor National Park, Mae Ramat District, Tak Province on 13th and 14th November. This two-day retreat with training for CHVs is to expect participants will be able to spread such the knowledge and information gained through these two days to other community members and villages afterwards.

  During this workshop-based training, the CHVs identified a few critical health and environment issues in their communities, such as water shortage, garbage management, insect pesticide unsafe usage and self-protection, and toilet management and shortage. It is found that most issues are quite similar between Thai and Myanmar side at this border area. There were some possible solutions brainstormed by participants to tackle some of the issues

they are facing in their living area. A good example is CHVs proposed awareness raising and environment education for garbage management with three activities: 1) Pointing a pilot location for garbage gathering, 2) disobeyed persons will be fined, and 3) recycle for selling. Another one is self-protection while using pesticide indicating: 1) Wear glasses, mask, groove, long shirt and pants, and 2) wash hands before eating/touching food after using pesticide.

Besides, BHF was invited to lead one of sessions and an independent production TB movie shoot at SMRU's TB clinic was broadcasted to the participants. This movie brought a few cases to show the auditors how people ignore the possibility of TB infection, how people being infected, and how this disease being treated at SMRU TB clinic. On the other hand, this movie also includes health education element related to TB.






2.2.2 Health Care Promotion and Coordination

Community Health Promotion

In this service, there are two components: Health promotion and direct health care. Firstly, development of health education toolkit through inclusion of local partners and community members in Maw Ker Thai area, Phop Phra District, Tak Province in order to bring health promotion activities of vector borne diseases prevention into local community. Secondly, provision of antenatal care to migrant pregnant women in Maw Ker Thai through clinic-based health care on daily basis. Counselling for healthy food, nutrition, additional supplies to avoid the pregnancy complications was part of health care service. Therefore, to equip clinic staff with capacity of counselling, a counselling training was also organised, which this training combined of lecture and practice through a various types of participatory activities. In terms of advancing the skill of frontline health workers, an Advanced Life Support in Obstetrics (ALSO) training was also arranged for maternal and child health workers at the clinic.

TB Training and Screening for Health Workers and Community Members

BHF and SMRU organised a 2-day training of TB screening and referral for clinical staff. This training included sessions of basic knowledge HIV and AIDS plus skill on TB screening by questionnaire. Besides training, TB screening for community health workers, including SMRU clinic-based staff, and migrants was organised during October. There were around 320 people benefited by this event. In addition, community members also participated alongside health education with quizzes and gifts provided by BHF and SMRU staff.

Thai National Social Welfare Day

Tak provincial office of Ministry of social development and human security (MOSDHS) organised an event of Thai National Social Welfare Day and Tak Provincial Volunteer Day on 26th November. This event provided local charities and organisations closely working with MOSDHS to introduce their work to participants through booth display. The governor of Tak Province, Red Cross Tak Office, community volunteers also joined this event to share their experiences. BHF was one of invited agencies to show our unique work to the participants, which is regarded our work was affirmed by the government.

Coordination Meeting for Chronic Diseases in Tak Province

BHF was invited to attend a coordination meeting of chronic diseases organised by area disease control authority and Tak provincial office of Ministry of social development and human security on 4th December. There were a few chronic diseases being mentioned and discussed during the meeting. However, for example TB treatment, the authority mentioned that 1) the first 2 weeks of anti-TB drug treatment is crucial to initial syndrome control, 2) high protein intake is necessary for the first 6 months will help patients in a healthier condition to continue taking anti-TB drug, and 3) medical treatment demands relevant social issues to lead drug resistance. Besides, for non-Thai people, Tak provincial office of Ministry of social development and human security is the main focal point to contact and coordinate with local NGOs and local charities.

III. Audited Financial Statement