



มูลนิธิ เดอะ บอร์เดอร์แลนด์ เฮลท์
The Borderland Health Foundation

ANNUAL REPORT OF YEAR 2020

**MAE SOT, TAK PROVINCE
THAILAND**

I. Board Member and Foundation Objectives

1.1 List of board committee member of Year 2020

Prof. Francois Nosten	Chairperson
Mr. Tip Ruchaitrakul	Vice Chairperson and Secretary
Ms. Wannee Ritwongsakul	Treasurer
Dr. Chirapong Uthaisin	Board member
Ms. Ladda Kajeechiwa	Board member
Prof. Nick Day	Board member

1.2 Objectives of foundation

- Objective 1 Promotion of public health service work and health at the border.
- Objective 2 Support and coordination for study and research, professional development of the public health work and health at the border.
- Objective 3 Development of personnel for public health and health at the border in cooperation with related working units.
- Objective 4 Support for disadvantaged people so that they acquire knowledge on public health and care for their health in the sustainable way.
- Objective 5 No activities related to politics.

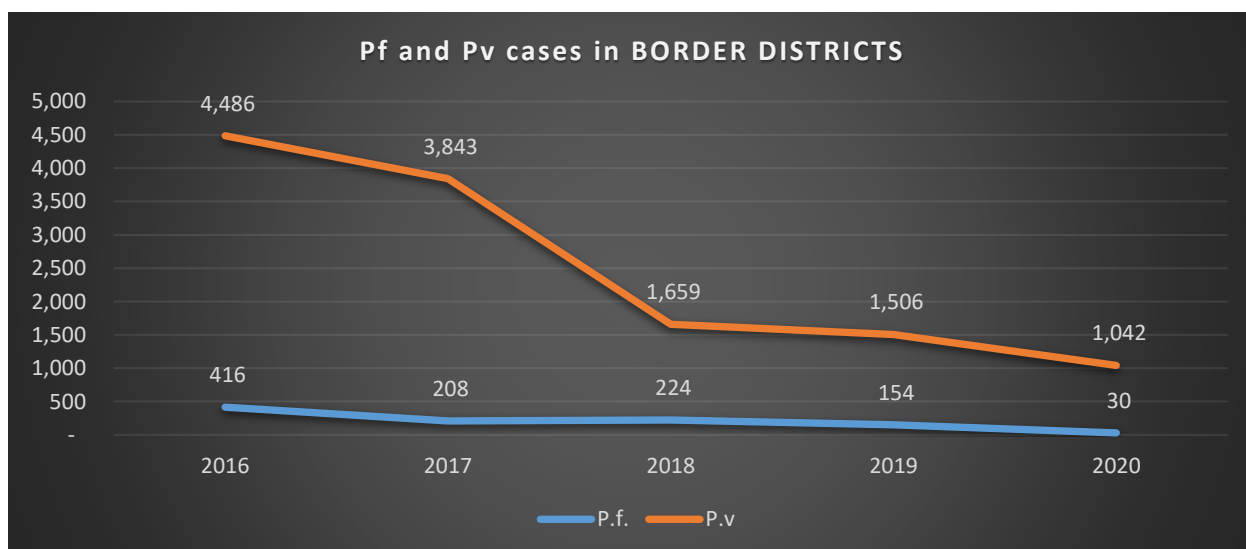
II. Activities Report

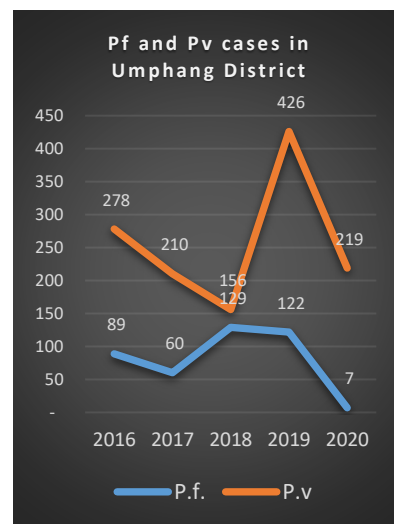
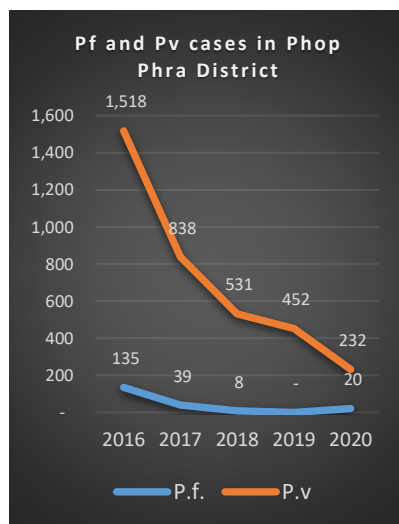
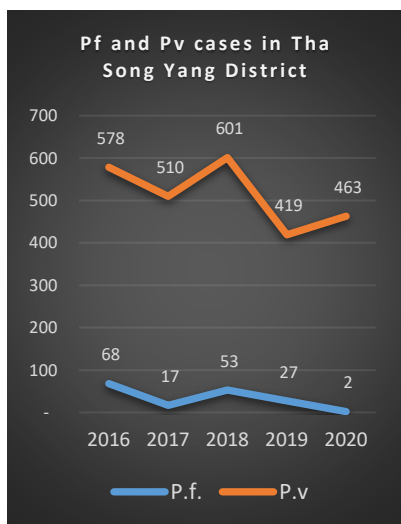
2.1 PROJECT – Expansion of malaria surveillance along eastern, western and southern borders of Thailand

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 Tawe 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 2020.

Besides, the trend of overall case number of Malaria Pv and Pf in five border districts of Tak Province during 2016 to 2020 is shown as below to illustrate an ongoing achievement toward Malaria elimination.





(Source: Malaria Online, MOPH; Jan 2016 – Dec 2020)

2.1.1 BHF and SMRU: Technical support and monitoring

- **Collaboration meeting**

Two project collaboration and review meetings were organised in February and August. Such meeting acted as regular coordination and problem shooting between BHF/SMRU and project partners working in northern, northeastern, and southern provinces. Furthermore, gathering partners to share various experience and case study was an additional benefit of this meeting, which allows every participant has a comprehensive understanding of overall progress of malaria elimination across CSOs and local health authorities in Thailand.



- **Technical training**

The 3rd one was Entomology training, which there were two training workshops held during reporting period. One was arranged in March 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 special training workshop was held on **21 August for 58 MPWs and CHVs** working in Yala province. By strengthening the case reporting and follow-up, YMAT developed a tool by Google to share with local MPWs and CHVs to proceed reporting online in a more efficient and in-time channel, so this training aims on allowing participant be familiar with this tool and setting up the reporting rules and timeline. This tool also includes a tracking monitoring on anti-malaria drug intake by patient.



2.1.2 BHF and SMRU: Malaria detection and treatment

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 Unit (VBDU), 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 **9,200** 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 **3,080** people in three southern provinces.





2.1.5 PUSG: Malaria awareness curriculum

The developed malaria awareness curriculum was launched to teach in 38 target primary and secondary schools leading by Phusing Hospital in Si Sa Ket Province. The public health nurse who manages this activity also conducted evaluation workshops and meetings with local authorities as well as with students directly taught with the content of this curriculum. The evaluation workshop and meetings with school teachers were organised, but a few events were suspended due to COVID-19 pandemic.



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 **6,169** people receiving malaria test and **16** positive cases, 2 are Pf and 14 are Pv, being found and given necessary treatment during 2020. Besides, MTC also has to entry the data of positive cases via malaria online reporting system established by Ministry of Public Health (MOPH) 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 PROJECT – Health Systems Strengthening for marginalized and undocumented migrants in Tak Province, Thailand: a focus on sexual and reproductive health needs

This project has the following specific objectives: (1) support networking and coordination of sexual and reproductive health (SRH) stakeholders in Phop Phra and Mae Ra Mat districts of Tak Province, Thailand; (2) strengthen capacity of rural community health workers (CHWs) and scale up outreach in SRH activities; and (3) establish a surveillance system for SRH activities including SRH emergencies.



2.2.1 In-depth interviews with stakeholders

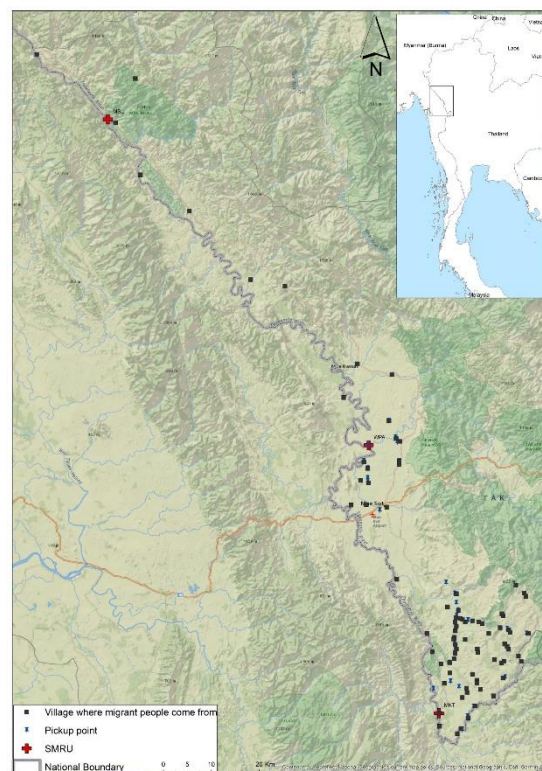
Developed interview guides and facility assessment guides. Facility assessments were adapted from Demographic and Health Surveys Service Provisions Assessment (DHS SPA) (Service Provisions Assessments) and piloted at SMRU clinics. Interview guides were semi-structured questionnaires, with specific probes for service delivery aligned with DHS SPA, sexual/gender-based violence (SGBV), and assessing organizations' geographic reach. All tools were piloted—facility assessments piloted at SMRU/BHF clinics, and structured guides reviewed and piloted by trained staff at BHF with interview/qualitative expertise. Specifically, for Thai government facilities and health providers, permission with provincial and border district health authorities were sought before undertaking interviews with local stakeholders.

BHF staff were trained by project leads in the use and implementation of the tools developed for facility assessments and interviews. Facility assessments have been postponed due to the COVID-19 pandemic, and upon fact finding from interviews, only SMRU and Mae Tao Clinic are providing facility-level services outside the Thai governmental system, but are still subject to regulatory procedures and oversight. 27 interviews were conducted, and given the structure of the form and the data collected, we were able to summarize the clinical services and geographic reach of secondary and tertiary care facilities (hospitals) well known to SMRU/BHF. Interviews were conducted from May to August 2020.

2.2.2 Mapping of sites of office and services of SRH stakeholders

Mapping of services and providers performed as part of interview process. Mapping of SMRU/BHF services, and the communities where migrants referring for ANC, were mapped by a small team led by 5% project staff. Phop Phra and Mae Ramat districts (from SMRU/BHF clinics in the north and south of Tak Province) were explored and mapped. Maps also include pick up points and routes of migrant women in accessing clinic services.

A draft map is included for reference. It provides an overview of the final piece, includes key migrant communities, as well as the providers/stakeholders interviewed (some, especially those providing SGBV services, requested to not have their location soon). Technical lead and mapping teams are discussing how to make an interactive map available on and off-line for stakeholders with a brief description of the different providers and the services they provide.



2.2.3 Forum of SRH stakeholders

Coordinating with SMRU/BHF annual meeting—which also has been postponed—and leveraged resources to span a two-day event, that includes one full day for the stakeholder forum. The event will featured TB and malaria research and health activities along the border. Partners/stakeholders attended the forum as a “special session”. Meeting and forum held within the Ministry of Public Health facilities in Mae Ramat, Tak province. MCH forum included Thai and NGO partners (appendix of forum agenda).

2.2.4 Working group for curriculum development

A curriculum working group has been set up across departments at BHF and in consultation with project partners. Topics have been selected, with experts in a given field developing learning activities for the mobile outreach teams.

2.2.5 Establish an SRH Surveillance database to share with stakeholders (mortality surveillance)

A working group has been established to determine the best way to integrate this as a routine activity especially to capture death at home – the most likely unreported cases; BHF and SMRU were working with Tak PHO to release data that differentiates migrant, hill tribe and Thai. This is very sensitive culturally for communities so engagement towards sensitization is required; trained teams are required for any investigations and near miss mortality a way to manage cultural barriers.

2.3 GRASSROOTS ACTIVITY - Public Engagement

2.3.1 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 2020, 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.

The first twin-village activity was on 12th March, training about COVID-19 awareness and prevention and sharing knowledge about other disease, which can happened in summer season to cross border health volunteers and local health workers in the Thai-Myanmar border. At Mae Ramat Hospital. The second one was on 9th September to focus again on the ongoing COVID-19 disease in Thailand, which Mae Ramat hospital requested all the community health volunteers acting as screening net for Mae Ramat district if there is any stranger appearing in living community. The communication and reporting line was also set up during the meeting. The last one, annual retreat, was on 26th and 27 December. An overall review on border health issues, including outbreak of COVID-19 pandemic along Thai-Myanmar border, was one of activities. Group work for identifying other health issues inside migrant communities in Mae Ramat district aimed on bringing more discussion with possible solution at community level by participants, including how Mae Ramat hospital or District Public Health Office could support and involve in.





2.3.2 Health Care Promotion and Coordination

The 30th SMRU Border Health Meeting, jointed by BHF's project partners. The annual 2-day Border Health Meeting was primarily organised by SMRU and supported by BHF and its local partners along the border, on 1 and 2 October 2020. The topic covers not only malaria, but also public engagement for health promotion, TB in Thai society and migrant communities, TB mortality, TB outreach screening, and health insurance for migrants. Participants were from Thai health authorities, CSOs/NGOs health workers, and researchers.



2.3.3 Urgent Response to COVID-19 Pandemic

BHF was in response to COVID-19 pandemic in line with Thai health authority's demand. First, on 2nd March, BHF supported the activity that TPhO and Mae Sot Hospital providing the training about COVID-19 awareness and prevention also teach how to make cloth mask and alcohol hand-cleaning gel by to Sub-district Health Volunteers of 5 districts (Mae Sot, Phop Phra, Umphang, Mae Ramat and Tha Song Yang) in Tak province, at Mae Sot Hospital.

Second, an additional funding was provided to support sewing cost of 500 pieces of cloth mask by collaboration with Provincial Office of Ministry of Social Development and Human Security (MOSDHS) in Tak Province. Also dried food donation to the vulnerable Thai and migrant population was another further support through collaboration with MOSDHS.



Third, essential hygiene material support, e.g. soap and mask, and health education poster in ethnic languages to local villages, including Thai Karen villages in remote area, health facilities along Thai-Myanmar border. This included:

Area	Items
Umphang hospital and high-risky communities in Umphang area.	2,400 soaps and 14 sets of poster for communities; 10 sets of poster
12 Remote Thai Karen villages through missionary foundation, named Friends of Paris Foreign Mission Foundation	1,500 soaps, 36 sets of poster and 500 pieces of cloth mask produced by SMRU clinical staff
Burmese migrant communities and schools through Tak Border Child Assistance Foundation (TBCAF)	handwashing posters for migrant schools
Burmese migrants in Phop Phra area and orphanage for Burmese migrant children (40 migrant families and 60 migrant children benefited from this donation for 2-month food ratio)	BHF received an donation from Taiwanese Business Association in Thailand for COVID-19 prevention, which included 1) surgical mask 8,000 pcs, 2) PPE suits 200 sets, 3) PPE shoe cover 200 pairs, 4) rice 1,500 kgs, 5) instant noodles 1,200 packs, and 6) cooking oil 200 liters



III. Audited Financial Statement

Please see the annex.