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MALARIA MAPPING TOOL

Private Health Sector Project



Purpose of the tool:

To generate information on the following points:

1. Identify the woreda/s and kebeles with the high influx of MMWs for private farming
2. Identify the practice and challenges with the case management of malaria and the prevention methods at the woreda level.
3. Number and size of private farms (area of farms and number of workers) in the woreda
4. The commonest type of crop the farms cultivate and during which time of the day the MMWs are mostly engaged
5. The number of permanent and temporary residents each farm working at each farm, and also living at each farm, and average number of workers living in each lodging structure
6. The availability of farm based clinics in each farm and which are providing care for patients with malaria.
7. The access to any type of health facility (distance and time to the nearby health facility)
8. Farm policy on what to do/where to seek treatment when a worker becomes ill or has fever
9. The period when the MMWs come to the farms and duration of stay in the farms
10. From which region and woreda most of the MMWs are coming to the farms

Responsible: Woreda malaria focal person and regional health bureau staff

How to operate:

1. The woreda and regional staff will collect general information from the respective Regional Health Bureau.
2. Based on the identified woreda in the region, information will be collected from the woreda.
3. The woreda malaria focal person in collaboration with farm owners/staff will collect information from identified kebeles using the tool.

No.	Information to gather	
I- Regional Health Bureau		
1.	Which woredas are identified with influx of MMWs for farming (The number & name of woredas)	
II-Woreda Health Office		
2.	Total number of urban and rural Kebeles	
3.	Which kebeles are identified with influx of MMWs for farming (Number & name)	
4.	Estimated number of total Woreda's population	
5.	Estimated number of MMWs in the woreda	
6.	Do you consider the MMWs burden during your planning and quantification processes?	
7.	Do you get the supply of the commodities for malaria management that you request, if no why?	
8.	Do you supply the commodities to the HCs and HPs as per their request, if no why?	
9.	Do you get reports from the HCs & HPs using the HMIS and PHEM tools, if no why?	
10.	Do you get reports from the private health facilities using the HMIS & PHEM tools, if no why?	
11.	Does the woreda provide mass test and treat (MTAT) approach when the MMWs return to their permanent residence? If not why?	
12.	Can you estimate how many migrant workers seek treatment from woreda public facilities each year? Do you have any way to disaggregate your cases data to determine how many malaria cases are reported by migrant workers?	
13.	Does your district provide any LLINs, RDTs, or antimalarial drugs directly to farms for malaria prevention or treatment of workers? If yes, please describe:	
14.	Does your district currently conduct any mobile clinics or other approaches to directly treat migrant worker populations? (Yes/No). If yes, please explain:	
15.	Do all the health facilities in your district treat mobile populations, refugees, or	

	migrant worker populations if they arrive at public health facilities?	
16.	Do you provide any malaria treatment or prevention support for refugee camps or internally displaced populations? If yes, please describe:	
17.	Do you have any additional thoughts about how best to improve malaria care and treatment for migrant worker populations? If yes, please explain:	
18.	Information about health facilities in the Woreda	
	Facility type	Y/N
	Hospital	
	Health Center	
	Health Post	
	Medium clinics	
	Primary clinics	
	Farm clinics	
	Mobile Clinics	
	Which of the prevention modalities are implemented in the woreda for the MMWs	
	Provision of LLINs,	
	Provision of repellants,	
	Provision of health education,	
	Mobilization of the MMWs for environmental control	
	Provision of IEC/SBC materials	
	IRS	
	If LLIN is given to the MMWs, do the woreda collect the LLINs when they return home	
	If yes, do you properly store it and use for the next round	
	If no, do you give new LLIN every year to the MMWs	
	Does the farm provide long sleeve clothing and other personal protective equipments (PPE) to prevent mosquito biting	
	If no, do the MMWs use their own PPE to prevent mosquito biting	
	What is the environmental condition where the MMWs live (Forests, breeding sites	
	At what time do most of the MMW frequently go to the farms for work	
	Do the farm owners mobilize the workers for environmental vector control interventions	

