



STOPPING A KILLER:

PREVENTING MALARIA IN OUR COMMUNITIES

A Guide to Help Faith Leaders
Educate Congregations and
Communities About Malaria

Christian



CENTER FOR
INTERFAITH ACTION
on global poverty



IMA
ADVANCING HEALTH & HEALING
THE WORLD OVER
WORLDHEALTH

ACKNOWLEDGMENTS

Project Managers

Sarah Day, Center for Interfaith Action on Global Poverty
Erika Pearl, IMA World Health

Writer

Kathy Erb

Associate Writer

Sarah Day

Reviewers

Sarla Chand, IMA World Health
Jean Duff, Center for Interfaith Action on Global Poverty

Editors

Erika Pearl
Sarah Day
Randa Kuziez

Designer

Kate Tallent Design
www.katetallentdesign.com

Illustrator

Jim Haynes

CONTACT INFORMATION

Center for Interfaith Action on Global Poverty
c/o Washington National Cathedral
Wisconsin & Massachusetts Aves, NW
Washington, DC 20016
info@cifa.org
www.cifa.org

IMA World Health
PO Box 429, Building Old Main
New Windsor, Maryland 21776
imainfo@imaworldhealth.org
www.imaworldhealth.org

© CIFA / IMA World Health 2010

*Do you not know?
Have you not heard?
The Lord is the everlasting God,
the Creator of the ends of the earth.
He will not grow tired or weary,
and his understanding no one can fathom.

He gives strength to the weary
and increases the power of the weak.

Even youths grow tired and weary,
and young men stumble and fall;

but those who hope in the Lord
will renew their strength.
They will soar on wings like eagles;
they will run and not grow weary,
they will walk and not be faint.*

Isaiah 40:28-31

TABLE OF CONTENTS

| | |
|---|----|
| ACRONYMS AND DEFINITIONS _____ | 2 |
| MALARIA: PROBLEM, PROGRESS, POSSIBILITY _____ | 3 |
| INTRODUCTORY SERMON: “GUARD THE TEMPLE” | |
| Introduction _____ | 8 |
| Suggested Sermon _____ | 10 |
| SERMON 1: “PROTECT ONE ANOTHER” | |
| Introduction _____ | 12 |
| Suggested Sermon _____ | 13 |
| SERMON 2: “PREPARE FOR GOD’S GIFT” | |
| Introduction _____ | 16 |
| Suggested Sermon _____ | 17 |
| SERMON 3: “DEFEAT THE ENEMY” | |
| Introduction _____ | 18 |
| Suggested Sermon _____ | 19 |
| SERMON 4: “SEEK AND YOU WILL FIND” | |
| Introduction _____ | 21 |
| Suggested Sermon _____ | 22 |
| SERMON 5: “GO THE DISTANCE” | |
| Introduction _____ | 24 |
| Suggested Sermon _____ | 25 |
| SERMON 6: “HONOR GOD’S CREATION” | |
| Introduction _____ | 27 |
| Suggested Sermon _____ | 28 |
| SOURCES _____ | 30 |





ACRONYMS & DEFINITIONS

| | |
|------|--------------------------------------|
| ACT | Artemisinin Combined Therapy |
| DALY | Disability Adjusted Life Year |
| IPT | Intermittent Preventive Treatment |
| IRS | Indoor Residual Spraying |
| ITN | Insecticide-Treated Net |
| LLIN | Long-Lasting Insecticide-Treated Net |
| NMCP | National Malaria Control Program |
| RBM | Roll Back Malaria |
| RDT | Rapid Diagnostic Test |
| SP | Sulfadoxine Pyrimethamine |
| WHA | World Health Assembly |
| WHO | World Health Organization |

MALARIA: PROBLEM, PROGRESS, POSSIBILITY

PROBLEM

Malaria is Destructive, but Malaria is Preventable

Malaria is a killer that preys on many of God's children. More than one million people across the globe die each year from malaria and it is the number one killer of children under five years of age in sub-Saharan Africa. The good news is that we have the resources to stop this destructive disease.

Malaria is a preventable disease that can be managed if we take steps that have proven to cure the disease and control its spread. We know malaria is spread by mosquitoes and we know how to control, treat, and combat this killer. The sample sermons in this guide will help you share this knowledge with your congregation and community to help save lives. The introductions to each sermon will give you more information and help you better understand the disease.

Malaria's Human Toll

Each year, 247 million people are stricken with malaria across the globe, and over 1 million die from this disease annually. Africa is hit especially hard by malaria. Two hundred and twelve (212) million malaria cases and 91% of global deaths from malaria occur in Africa each year. Children are among the most vulnerable, as 85% of malaria deaths each year are among children under five years of age.¹

Pregnant women are also particularly vulnerable to malaria as pregnancy reduces a woman's immunity to the disease, making her more susceptible to malaria infection and increasing the risk of illness, severe anemia, and death. Malaria in the mother increases the risk of miscarriage, stillbirth, and premature delivery and low birth weight for the baby, a leading cause of child mortality.²

Malaria's Economic Burden

Malaria affects more than just the people who are stricken with the disease and their families. It also has a heavy economic toll. Malaria-related illnesses and mortality cost Africa's economy \$12 billion USD each year. Approximately 40% of public health spending in sub-Saharan Africa is spent on malaria and an estimated 20 to 50% of healthcare facility admissions and up to 50% of outpatient visits are related to malaria.³ In addition to these direct costs, malaria has many associated indirect costs for developing countries. For instance, malaria accounts for 3-8% of all-cause absenteeism from school, and up to 50% of preventable absenteeism.⁴ Malaria is also responsible for an incalculable amount of hours, days, years lost during the life of an individual. The World Bank uses a unit of measurement for this called Disability Adjusted Life Years, or DALYs, which is "The sum of years of potential life lost due to premature mortality and the years of productive life lost due to disability."⁵ According to this measurement, malaria is responsible for an annual loss of 42,279,000⁶ DALYs, or lost years of productive, healthy living. Just imagine what could be accomplished if this loss was reduced or diminished all together. Nations could regain lost productivity and harness the positive energies and talents of the people that have been lost to this destructive disease.

MALARIA IS A KILLER ...
BUT WE HAVE THE
POWER TO STOP IT



MALARIA IS PRESENT IN 108 COUNTRIES

Where Does Malaria Strike the Hardest?

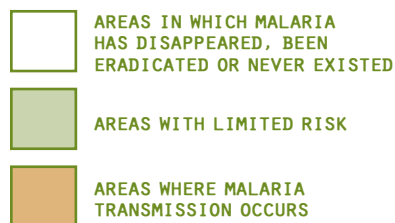
Although malaria has been virtually eradicated in many countries, approximately 3.3 billion people - half the world's population - live in areas where malaria is a constant threat⁷, and those living in lower-income countries are particularly at risk.⁸ The five countries with the most cases of malaria are Nigeria, the Democratic Republic of the Congo, Ethiopia, Tanzania, and Kenya.⁹

What Can We Do?

According to the *World Malaria Report 2009*, malaria is present in 108 countries, with 98% percent of the deaths from malaria occurring in only 35 countries—30 countries in sub-Saharan Africa and five (5) in Asia. This tells us that there are steps we must take in these nations to greatly reduce the number of deaths.¹¹

In 1998, global partners founded the Roll Back Malaria Partnership (RBM) to do just this—to take action to combat malaria by accelerating malaria control efforts towards meeting specific targets. In April 2000, African Heads of State, as part of

FIGURE 1: MALARIA SITUATION¹⁰



98% OF THE DEATHS FROM MALARIA
OCCUR IN ONLY 35 COUNTRIES

the African Summit on Roll Back Malaria, made commitments to an intensive effort to cut malaria mortality in Africa by 50% by 2010.^{12,13} Then in 2005, the World Health Assembly determined to “ensure a reduction in the burden of malaria of at least 50% by 2010 and by 75% by 2015.”¹⁴ It is important to note that this resolution is interpreted to mean a reduction in malaria morbidity (illness from malaria) as well as mortality (deaths from malaria). In an effort to meet these goals, many organizations and governments are engaged in scaled-up prevention & treatment campaigns which have led to success in certain regions, due to improved disease surveillance and use of effective intervention methods.

Appropriate malaria control interventions include:

- use of long-lasting insecticide-treated nets (LLINs) while sleeping,
- use of intermittent preventive treatment (IPT) among pregnant women,
- indoor residual spraying (IRS) of insecticide in households,
- use of rapid diagnostic tests (RDT) to test for malaria
- use of Artemisinin Combined Therapy (ACT) for treatment of malaria.

The *World Malaria Report 2009* highlights progress made in meeting these World Health Assembly (WHA) targets for malaria, reporting that in the past year, “more than one-third of the 108 malarious countries (9 African countries and 29 outside of Africa) documented reductions of malaria cases of > 50% in 2008 compared to 2000.”

This proves that there are specific things we can and must do to successfully reduce the malaria burden, globally and in our communities.¹⁵

PROGRESS

Examples of Success

In settings where there are high levels of use of the effective

MUCH MORE PROGRESS REMAINS TO BE MADE

interventions listed above, dramatic reductions in the numbers of childhood deaths from malaria have been reported.

Examples of nations that have had success in reducing the burden of malaria include Eritrea, Rwanda, and the island nation of Sao Tome and Principe. These nations reduced the number of cases and deaths from malaria by 50% or more between the years 2000 and 2008 by increasing malaria control activities.¹⁶ On the island of Zanzibar, malaria cases have dropped from 60% to almost zero in just a few years; similarly, malaria cases have fallen by around 60% and 40% in certain districts in Uganda and Tanzania, respectively.¹⁷ In Rwanda, malaria cases declined 64% and child deaths from malaria dropped 66%. These lower malaria incidence rates are attributed to a few targeted interventions, including: increased use of LLINs while sleeping (31% increase in high-burden countries by the end of 2008), increased use of IPT by pregnant women, and increased availability and use of RDTs and ACTs for testing and treatment of malaria.¹⁸

In Sao Tome and Principe and Zanzibar, reductions in the number of malaria cases and deaths were found within two to three years of aggressive malaria control, including widespread use of IRS, LLINs and ACTs. Specifically, a significant 30% increase over the past six to seven years in the number of children under five years sleeping under an LLIN is attributed as the reasons for the dramatic decrease in the malaria incidence rate in Sao Tome and Principe. Looking at Rwanda as an

example, there is evidence that the combination of long-lasting insecticide-treated nets (LLINs) and drug therapy (ACT) to treat the disease was responsible for a substantial reduction of cases in that country.¹⁹ Evidence from Sao Tome and Principe, Zanzibar and Zambia reveals that large decreases in malaria cases and deaths have been mirrored by steep declines in overall deaths among children less than five (5) years of age.

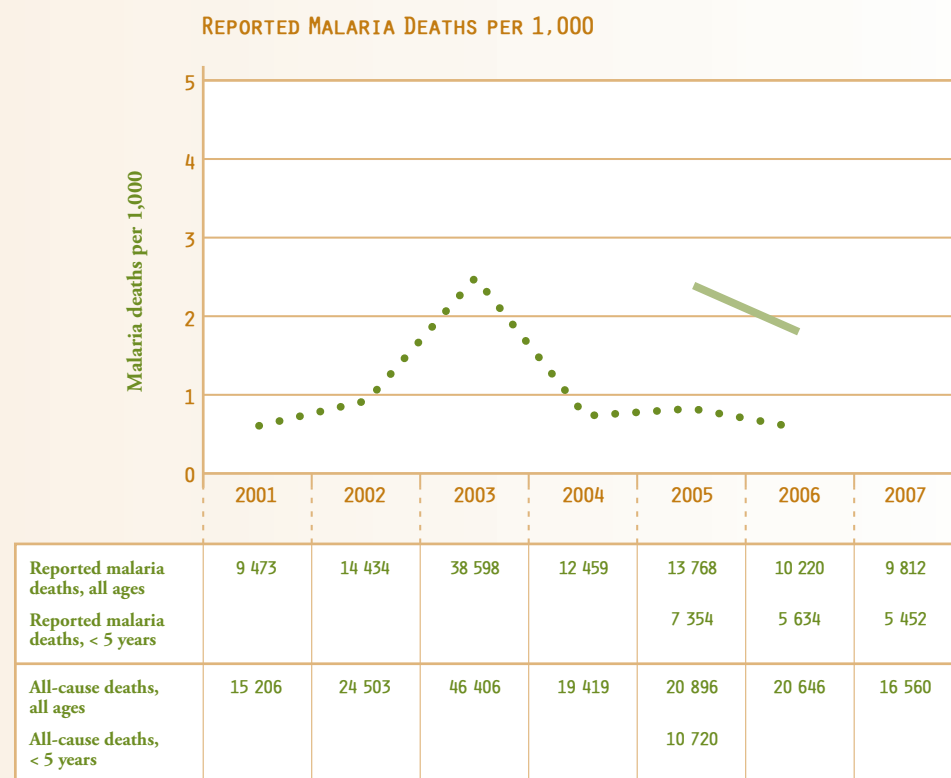
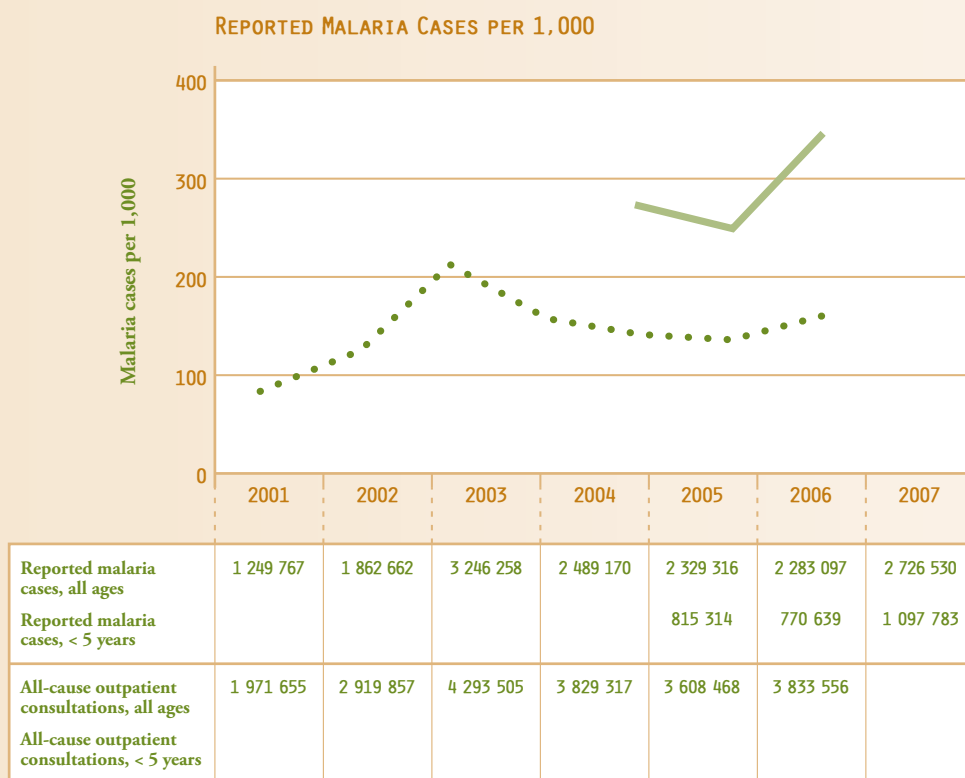
Although malaria-related illness (morbidity) and death (mortality) has improved in recent years, as the figure below shows, much more progress remains to be made.

What Should We Do?

The successes reported by the World Health Organization (WHO) in the *World Malaria Report 2009* demonstrate that increased funding for malaria “has resulted in steady increases in the coverage with malaria control interventions, especially insecticide-treated mosquito nets. It also shows that where these interventions have been fully scaled up, the malaria burden falls dramatically.”

As Margaret Chan, Director-General of WHO, said: “We can save millions of lives over the coming years by scaling up the

FIGURE 2: TRENDS IN MALARIA MORBIDITY AND MORTALITY²⁰



LEGEND

- • • Reported malaria cases/1,000, all ages
- Reported malaria cases/1,000, < 5

malaria control tools that we already have available.”²¹ If we use the same proven strategies as those used by the countries described above, we too can beat malaria where we live. We know what to do to fight malaria; now we must motivate our communities to take the actions that will save lives, protect our societies and avoid catastrophic burdens on our economies.

POSSIBILITY

How Faith Leaders Can Help

As a faith leader, you have great influence among your congregation and in your community. You also have the great privilege and responsibility to protect the most vulnerable of God’s children. Jesus tells us with the Parable of the Lost Sheep that each life is precious. Like the shepherd who searches high and low for that one lost sheep, God holds each of His children as dear – each one’s life is precious to Him.

Like the good shepherd, you too can play a role in protecting your congregation. You can help families protect their health by giving them information to make the right choices. Information is a powerful weapon in the fight against malaria. Knowing how to protect against mosquito bites that transmit malaria, how to recognize the symptoms of malaria, and how to treat the disease can make the difference between life and death. Use the sample sermons in this guide to share this powerful information with your congregation and read the introductions to each sermon to help you better understand the disease.

Six Messages to Fight Malaria and Save Lives

Malaria is a dangerous disease for many people, and it is caused by infected mosquitoes. We should take all possible precautions to prevent and control malaria. We can do this by practicing important healthy behaviors.

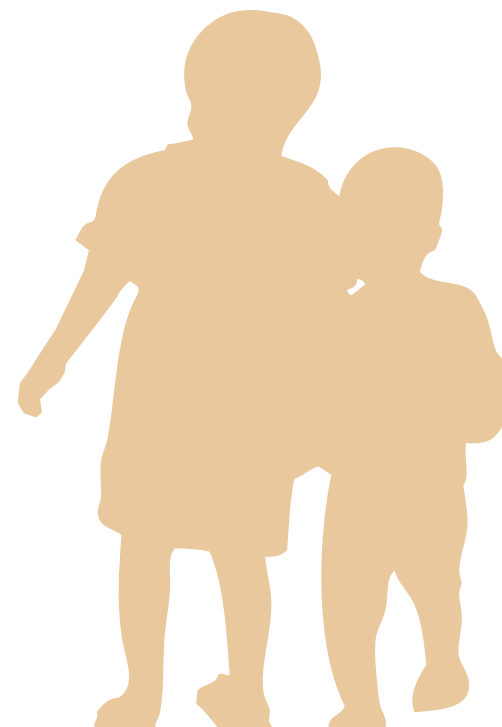
Health experts have developed six (6) critical strategies to prevent malaria and to control its spread. Each of the six (6) sample sermons in this guide corresponds to one of these key messages.

1. All people in a household should sleep under a long-lasting insecticide-treated net, especially pregnant women and children under five years, since they are the most vulnerable to malaria.
2. Pregnant women must take two doses of anti-malarial medicine as prescribed by a healthcare provider.
3. Be receptive to local initiatives to spray the inside or outside of homes, as this also prevents malaria.
4. It is important to recognize the symptoms of malaria and to seek treatment as soon as possible at a health facility.
5. Follow treatment guidelines as directed by health facility staff and complete the full course of treatment to ensure malaria is cured and does not become resistant to medication.
6. Keep a clean environment, so mosquitoes cannot breed – Clear standing water and clean up trash around your property.

The following chapters will provide more information about these messages, including how these strategies protect against malaria and what can happen if the recommendations are not followed. Use the sample sermon accompanying each chapter as a model for how you can use Biblical principles to teach these life-saving messages about malaria control to your congregations and communities.

“WE CAN SAVE
MILLIONS
OF LIVES OVER THE
COMING YEARS BY
SCALING UP THE
MALARIA CONTROL
TOOLS THAT WE
ALREADY
HAVE AVAILABLE.”²²

– MARGARET CHAN
DIRECTOR-GENERAL, WHO



MESSAGE:

MALARIA IS A DANGEROUS DISEASE FOR MANY PEOPLE, AND IT IS CAUSED BY INFECTED MOSQUITOES. WE SHOULD TAKE ALL POSSIBLE PRECAUTIONS TO PREVENT AND CONTROL MALARIA.

INTRODUCTORY SERMON: GUARD THE TEMPLE

INTRODUCTION

As Christians, we know that the Bible says the body is the temple of the Holy Spirit. Since God's Spirit lives in us, we should honor God with our bodies. As the Apostle Paul wrote, *"Do you not know that your body is a temple of the Holy Spirit, who is in you, who you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body."* (I Cor. 6:19-20). Therefore, we must take all the necessary precautions to protect our health and to honor God by caring for our bodies, especially by preventing diseases like malaria. ***Malaria is a dangerous disease for many people, and it is caused by infected mosquitoes. We should take all possible precautions to prevent and control malaria.***

In order to help families protect their health, health experts have identified six critical strategies to prevent malaria and to control its spread. In places where malaria is a danger, it is a threat to all people, of all ages, even if it is particularly dangerous for small children, pregnant women, and elderly people. As a religious leader, it is important to use your influence to inform and educate your entire community about how to protect against mosquito bites that transmit malaria, how to recognize the symptoms of malaria, and how to treat the disease. Use the sample sermons in this guide to share this life-saving information with your congregation during worship services and teaching times. Read the introductions to each sermon to help you better understand the background to this disease and the suggested interventions. Each of the six sample sermons in this guide correspond with one of the following key messages ...



IN PLACES
WHERE **MALARIA** IS
A DANGER, IT IS A THREAT
TO **ALL** PEOPLE, OF
ALL AGES

1. Everyone who lives in an area where malaria is present should sleep under a long-lasting insecticide-treated net, but this is absolutely necessary for pregnant women and children under five years of age. Young children and pregnant women are especially vulnerable to malaria. Eighty-five percent (85%) of malaria deaths each year are among children under five years of age.²² **For this reason, it is recommended that all people in a household should sleep under a long-lasting insecticide-treated net, especially pregnant women and children under five years, since they are the most vulnerable to malaria.**
2. Malaria is especially dangerous for pregnant women and the babies they carry. It increases the risk of miscarriage, stillbirth, premature delivery, and low birth weight for the baby—a leading cause of child mortality. Malaria in the mother can also result in parasites in the placenta. The placenta is needed to deliver food to the baby and parasites hinder the child from receiving proper nutrition. The undernourished newborn suffers from low birth weight, making it more vulnerable to death and developmental problems. **To help prevent any of these types of complications, pregnant women must take two doses of anti-malarial medicine as prescribed by a healthcare provider.**
3. To reduce or eliminate mosquitoes in the home, the WHO recommends spraying the inside or outside walls of a home with a long-lasting insecticide, known as indoor residual spraying, or IRS. The most effective insecticide to kill mosquitoes and fight the spread of malaria is DDT. Governments are implementing indoor residual spraying programs in many locations and residents should participate in the program, if available. **You should encourage your community to be receptive to local initiatives to spray homes, as this also prevents malaria.**
4. **It is important to recognize the symptoms of malaria and to seek treatment as soon as possible at a health facility.** Educating your community about recognizing the symptoms of this killer disease and seeking prompt treatment will save lives. Malaria can strike anyone at any time. Symptoms of malaria include: fever, shaking chills, headache, muscle

aches, and fatigue. The infected person may also experience nausea, vomiting and diarrhea. Malaria can cause anemia and jaundice (yellow coloring in the eyes) due to the loss of red blood cells. A simple blood test done at the local healthcare facility can tell if a person is infected with malaria, and then doctors can prescribe the proper medicine.

5. Over the years, malaria has become resistant to medications that were highly effective in treating the disease in the past. ‘Resistant’ means the malaria parasites are not eliminated by the medicines and the drug can no longer cure the disease. When a drug is not powerful enough to kill all the malaria parasites infecting a person, it can allow the stronger ones to survive. These stronger malaria parasites can multiply, and the resulting infection will be resistant to the medication. A disease can become resistant to a medicine if patients do not take the drugs exactly as they are instructed by a healthcare provider. Therefore, **it is very important to inform your community to follow treatment guidelines as directed by health facility staff and to complete the full course of treatment to ensure malaria is cured, and does not become resistant to medication.**
6. Diseases like malaria can spread rapidly in unclean environments. You should encourage your community to reduce the spread of disease by motivating people to keep their homes and the areas around their homes clean and free of trash. Controlling the mosquito population is crucial in reducing the spread of malaria, and mosquitoes, which can carry and spread malaria, breed in stagnant pools of water. Mosquito larvae live in water while they develop into adults. Therefore, **a very effective way to reduce the spread of malaria is to keep a clean environment, so mosquitoes cannot breed—especially by clearing standing water and cleaning up trash around your property.**

The sermons you will deliver in the following weeks will provide your congregations with more information about these interventions, including how these recommended actions will protect them against malaria and the biblical basis for putting them into practice.

“Do you not know that your body is a temple of the Holy Spirit, who is in you, who you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.”

(I Cor. 6:19-20)

SUGGESTED INTRODUCTORY SERMON: “GUARD THE TEMPLE”

SCRIPTURE

“Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.”
(I Corinthians 6:19-20)

“Therefore, I urge you, brothers, in view of God’s mercy, to offer your bodies as living sacrifices, holy and pleasing to God—this is your spiritual act of worship” (Romans 12:1)

SERMON

The Bible says the body is the temple of the Holy Spirit. Since God’s spirit lives in us, we should honor God with our bodies. As the apostle Paul wrote to the Corinthians, *“Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.”* (I Corinthians 6:19-20) We must take all the necessary precautions to protect our health and to honor God by caring for our bodies, especially by preventing dangerous diseases like malaria.

Paul also urges us, *“in view of God’s mercy, to offer your bodies as living sacrifices, holy and pleasing to God—this is your spiritual act of worship.”* (Romans 12:1) It is worshipful to God to care for our bodies, so that we may be healthy, pleasing living sacrifices to him. Therefore caring for and guarding our bodies – the temples of God’s Spirit here on earth – is a responsibility we cannot ignore. Preventing malaria is one critical way we can and must “guard the temple,” but it is important to know what a powerful but preventable threat malaria is in order to understand why this is so.

Malaria is a deadly disease which kills more than one million people across the world each year, and it sickens 212 million people each year in Africa alone. However, it does not have to be this way; we have proven methods to avoid mosquito bites, and instructions about what to do if we think we have malaria.

In places where malaria is a danger (like sub-Saharan Africa, Southeast Asia, and parts of South America), it is a threat to all people, of all ages. Even though it is particularly dangerous for small children, pregnant women, and elderly people, ***malaria is a danger to many people, and it is caused by something as small as bites from infected mosquitoes. Thus everyone must take all possible precautions to prevent and control this deadly disease,*** in order to eliminate it from our communities forever. Scientists, medical professionals, and government officials are working to fight this disease and to stay ahead of it as it changes. Following the recommendations of these experts will help our congregation fight this killer. Therefore, during the following weeks, we will learn together about some of these specific interventions we can use to prevent malaria and to control its spread in our community.



These actions include:

1. Sleeping under a long-lasting insecticide-treated net, especially pregnant women and children under five years, since they are the most vulnerable to malaria.
2. Pregnant women taking two doses of anti-malarial medicine as prescribed by a healthcare provider.
3. Being receptive to local initiatives to spray the inside or outside of homes, as this also prevents malaria.
4. Recognizing the symptoms of malaria and seeking treatment as soon as possible at a health facility.
5. Following treatment guidelines as directed by health facility staff and completing the full course of treatment to ensure malaria is cured and does not become resistant to medication.
6. Keeping a clean environment, so mosquitoes cannot breed—by clearing standing water and cleaning up trash around your property.

The sermons you will hear in the following weeks will provide more information about these interventions, including how these strategies protect against malaria and what can happen if the recommendations are not followed. Together, let us commit to honoring God by guarding our bodies from malaria, so that we may be living sacrifices, holy and pleasing to God!

WE MUST TAKE
ALL NECESSARY
PRECAUTIONS
TO PROTECT OUR HEALTH
AND TO HONOR **GOD**