

COMMUNITY HEALTH INFORMATION CARDS



EDUCATING EACH OTHER ON HEALTHY LIVING

Community Health Information Cards can help Neighborhood Health Committees (NHCs) to:

- Share health information with the community
- Think about and discuss important health issues with the community, why they happen, and what the community can do about them
- Encourage community members to plan, carry out, monitor and evaluate action plans that try to solve health issues using existing resources
- Help refer community members to appropriate resources such as health workers and health care facilities

How to lead successful discussions using Community Health Information Cards:

Before a Discussion

- Read and become familiar with the information on the cards.
- Ask a health worker for help with understanding any difficult or unclear information or to explain difficult topics to the community.

Health Issues:

- **Red: HIV and AIDS**
- **Orange: Reproductive Health**
- **Blue: Child Health**
- **Purple: Community Concerns**
- **Green: Malaria**

Topic: Says what the card is about

Key Words: Discuss meanings in local language

Written Information: Question and answer format (some topics have reference pages for more information)

Activity Box: Designed to help understand, remember and do something about the information on the card

Treating Malaria (Especially in Young Children)

Discuss what the following words or terms mean to you:

Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)
Injecting (to give)

What should you do if you or a family member has a fever?

• A fever is the body's way of telling you there is something wrong. We should listen to our body and go to the clinic or see a health worker to find out what is wrong.

• Children under 5 and pregnant women should be taken immediately to the clinic. All others should seek care within the first 24 hours (day) of having a fever and any one of the other symptoms.

Why is malaria more dangerous for pregnant women and children under 5?

Children under 5 and pregnant women are more likely to die because they are weaker. A pregnant woman who has malaria is not treated quickly.

What will they do at the clinic?

• You get medicine.
• If the one in charge, the health worker will give you medicine and tell you how to take or give the medicine if it is for a child.
• If the test is negative, it may be another illness (fever, cough). The health worker should look for other illness or conditions.

After returning from the clinic, what can you do at home to care for a child with malaria?

• Give the child rest and encourage drinking.
• Keep the child cool by taking off extra clothing and spraying with lukewarm water.
• Continue breastfeeding or feeding as tolerated.
• Give the child cool drinks and encourage drinking.

Does testing positive for malaria mean that you are HIV positive?

NO!

Why do health workers sometimes not give injections?

Injecting is not only for severe malaria when a person cannot swallow or keep the pills down. Pills and syrups can be as effective as injections.

Are there different types of malaria medicines?

Yes. There is Coartem, Lomep, Fansidar and Quinine. Different drugs are needed to treat different kinds of malaria (e.g. pregnant women, children, those with severe malaria, etc.).

What if the fever goes away and the sick person is feeling good before the pills that the health worker gave are finished?

Take all pills the way that the health worker tells you to even if you are feeling better.

What if you do not go to the clinic or see a health worker because you think it is malaria and you have some left-over medicine from the last time?

This is not a good idea because the medicine may be old and weak. The old medicine may not be the right kind or right amount. The person who is sick may not have malaria. Always dispose of them. Every old medicine we have does not get into the hands of children.

ADDITIONAL INFORMATION:

Children 5-10 years old receive their malaria vaccine to protect for the whole year. Give them a few tablets to prevent the malaria and then get them for the next year. Next, discuss the malaria and what should be done.

There are two kinds of malaria. One is called P. falciparum and the other is called P. vivax. P. falciparum is more dangerous because it can be fatal. P. vivax is less dangerous because it can be treated with medicine. A pregnant woman has a high fever every few days. Her children and things to do on the floor get worse. Take her to go to the clinic. A pregnant woman has a high fever every few days. Her children and things to do on the floor get worse. Take her to go to the clinic. A pregnant woman has a high fever every few days. Her children and things to do on the floor get worse. Take her to go to the clinic.

Picture: Designed to capture attention and encourage thought and discussion

During a Discussion

- Remind everyone to listen quietly and respectfully, give everyone a chance to speak, and avoid interrupting others.
- Make all participants feel comfortable to express their opinions and ask questions.
- Help participants understand that the goal is not to be right but to try to understand the topic and one another's views on it.
- Remain neutral and help keep the discussion going without forcing your own views on others.
- Try to ensure that everyone has a chance to be heard and that no one dominates. Encourage quieter people to contribute, but do not force them.
- Explain the health issue and get community members interested in and excited about doing something individually and together that helps solve the problem.
- Ask the community questions based on the information in the cards. Correct any misinformation gently without embarrassing the person who has answered incorrectly.
- Keep track of important points and summarize from time to time.
- Bring the group back to the key topic if discussion goes off course.
- If someone asks a question you cannot answer, tell them you will ask a health worker and get back to them or invite a health worker to discuss the topic.
- Do not use too many cards or provide too much information at one time as this can make it hard for community members to understand and remember the information.

At the End of a Discussion

- Ask participants to summarize key information and discussion points. Add any information they missed.
- Refer participants to health workers or health care facilities for more information, assistance and services.
- Thank participants for coming, listening carefully, and being willing to share their views.

Key Words

Discuss what the following words or terms mean in your language:

Malaria

Germ

Mosquito

Dusk

Dawn

Shivering (chills)

Body hotness

(fever)

Testing

Medication

Treating

Pregnant women

HIV positive

Every night

**Insecticide-Treated
Net (ITN)**

What is Malaria?

Malaria is a sickness caused by a **germ** (plasmodium parasite).
Mosquitoes pass the **germ** from person to person when they bite.

How can you get **malaria**?

Only from a **mosquito** bite.

Do all **mosquito** bites cause **malaria**?

- No! There are many different kinds of **mosquitoes** and only a certain kind called the anopheles **mosquito** carries the **malaria** infection from person to person.
- The anopheles **mosquitoes** only bite at night from **dusk** to **dawn**.

Where do **malaria mosquitoes** come from?

Mosquitoes lay their eggs in water. They prefer still or slow moving water of any size from a small puddle to a big lake or river.

Have you ever had **malaria**?

How do you feel when you have **malaria**?

- Headaches
- **Shivering (chills)**
- **Body hotness (fever)**
- Feeling cold
- Sweating
- Tiredness
- Joints ache
- Confusion
- Sometimes diarrhoea
- No hunger
- Nausea and vomiting
- Body pains

Do you feel this way immediately after being bitten by a **mosquito**?

No! It takes 9-14 days after being bitten by an infected **mosquito** to start feeling sick.

When do you go to the health facility?

Immediately! If you or a family member have a **fever (body hotness)** and any of the other feelings that you get with **malaria**, go immediately to the health facility for **testing** and **medication**.

Why?

Treating malaria quickly helps keep the person from getting sicker or possibly dying.

Who is most at risk from **malaria** and should be the first to be protected against **mosquitoes**?

- Children under 5 years
- **Pregnant women**
- People who are **HIV positive**

How can you keep from getting malaria?

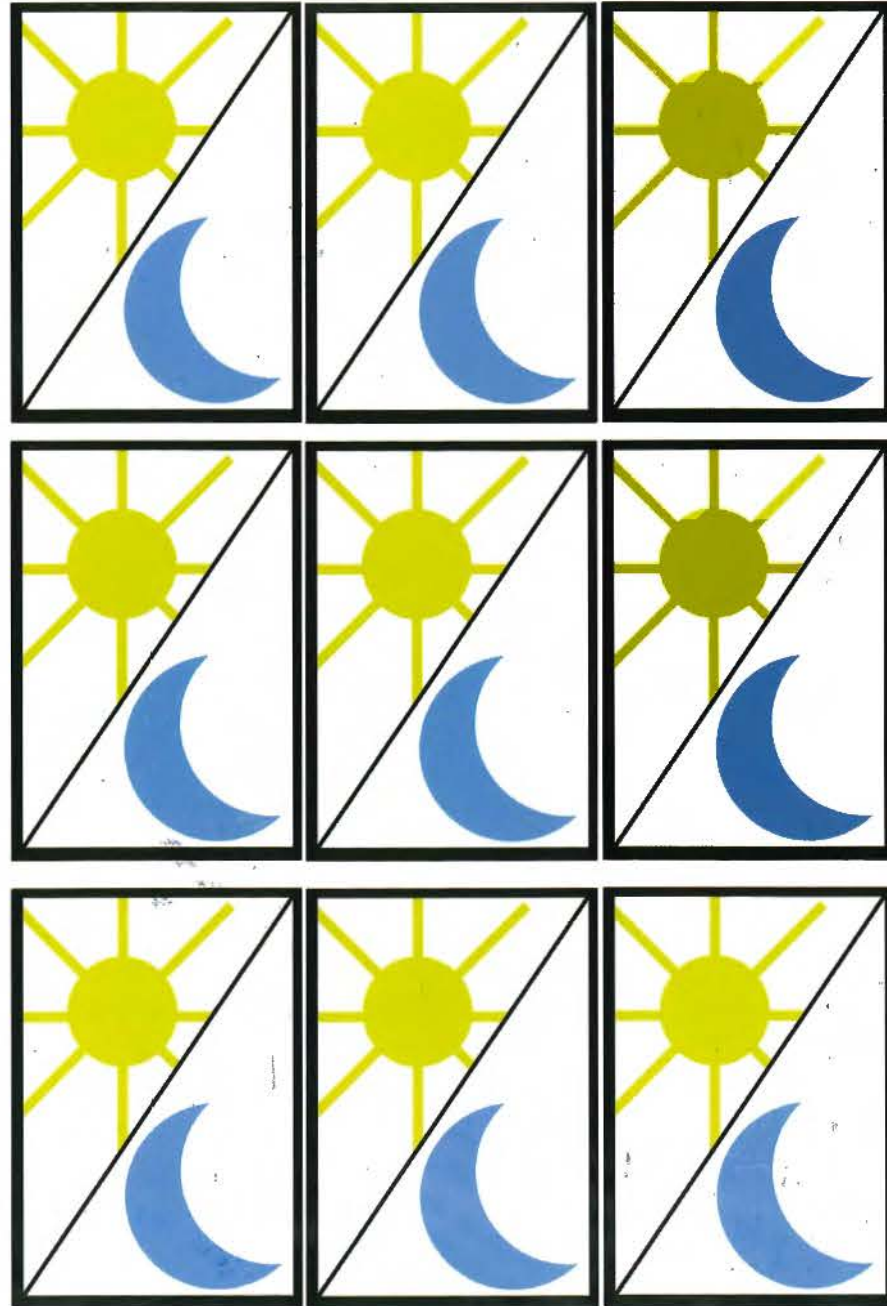
- Sleep **every night** under an **Insecticide-Treated Net (ITN)**
- Have your home included in Indoor Residual Spraying (IRS) if this is offered where you live
- Cover yourself in the evening so **mosquitoes** cannot bite you
- Screen windows
- Rub **mosquito** cream or oil that keeps **mosquitoes** from sitting on you
- Burn **mosquito** coils, mealie meal, mango leaves or bush basil leaves to keep **mosquitoes** away
- **Pregnant women** should go to a health facility to take Fansidar 3 times at least 1 month apart after “quickenning” (when child starts to move)
- Get rid of places where **mosquitoes** can breed

ACTIVITY

Ask the group to answer the following questions:

- Is malaria common here?
- What time of day do malaria mosquitos bite?
- What can we do as a community to prevent malaria?

9 days



Bite



Sickness

Treating Malaria (Especially in Young Children)

Key Words

Discuss what the following words or terms mean in your language:

Shivering (chills)

Body hotness (fever)

Experiencing Pregnant women Symptoms

Malaria

Complications

Test is positive

Test is negative

Medicine

Breastfeeding

HIV positive

Finished

Dispose

A person experiencing any of the following should be taken to a health facility or see a health worker immediately:

Headaches, **shivering (chills)**, **body hotness (fever)**, feeling cold, sweating, tiredness, aching joints, confusion, diarrhoea, no hunger, nausea and vomiting, and body pains.

What should you do if you or a family member has a fever?

- A **fever** is the body's way of telling us there is something wrong. We should listen to our body and go to a health facility or see a health worker to find out what is wrong.
- Children under 5 years and **pregnant women** should be taken immediately to a health facility. All others should seek care within the first 24 hours (day) of having a **fever** and any one of the other **symptoms**.

Why is malaria more dangerous for pregnant women and children under 5 years?

Children under 5 years can die or have serious **complications** from **malaria** because they are not yet as strong as adults. A **pregnant woman** can also become very ill. She or the baby she is carrying could die if the **malaria** is not treated quickly.

What will they do at the health facility?

- **Test** for **malaria**
- If the **test is positive**, the health worker will give you **medicine** and tell you how to take it (or give it, if it is for a child)
- If the **test is negative**, it may be another illness (not **malaria**) and the health worker should look for and treat the other illness

After returning from the health facility, what can you do at home to care for a child with malaria or other infection?

- Make sure the child takes **ALL** the **medicine** on time
- Keep the child cool by taking off extra clothing and sponging with lukewarm water
- Continue **breastfeeding** or feeding as tolerated
- Give the child cool drinks and encourage drinking

Does **testing positive** for malaria mean that you are also **HIV positive**?

No!

Why do health workers sometimes not give injections?

Injections are only for severe **malaria** when a person cannot swallow or keep the pills down. Pills and syrups can be just as effective as injections.

Are there different types of malaria medicine?

Yes! There is Coartem, Fansidar and Quinine. Different drugs are needed to treat different kinds of patients (e.g. **pregnant women**, children, those with severe **malaria**, etc.).

What if the fever goes away and the sick person is feeling good before the pills that the health worker gave are finished?

Take **ALL** pills the way that the health worker tells you to even if you are feeling better.

What if you do not go to a health facility or see a health worker because you think it is malaria and you have some left-over medicine from the last time?

This is not a good idea because the **medicine** may be old and weak. The old **medicine** may not be the right kind or right amount. The person who is sick may not have **malaria**. Always **dispose** of/throw away old medicine so that it does not get into the hands of children.

ACTIVITY

Select people to act out the following scenarios then have the group discuss what should be done in each case:

Scenario ideas: 1. A child has a hot body and fits. 2. Someone who had malaria is feeling better and does not want to finish the malaria medicine 3. A pregnant woman has a high fever (very hot body) but has other children and things to do so she does not want to take time to go to the health facility. 4. A person has been to the health facility and received pills and does not want to take them because they think an injection will work better.

1



2



3



4



Insecticide-Treated Nets (ITN)

Key Words

Discuss what the following words or terms mean in your language:

Insecticide-Treated Net (ITN)

Pregnant woman

Mosquitoes

Malaria

Effective

Repel

Kill

Barrier

Re-treat

Dusk

Dawn

Every night

What are the important things that you notice in this picture?

- **Insecticide-Treated Net (ITN)**
- Child under 5 years old
- **Pregnant woman**

Why are the people under the **ITN**?

So that they will not get bitten by **mosquitoes**, and to help keep them from getting **malaria**.

Are some **mosquito nets** better than others?

Yes! Any **mosquito net** that is **treated** with **insecticide** is more **effective** than a **net** that is not **treated**.

Why?

- ITNs **repel** and **kill malaria** carrying **mosquitoes**, creating a **barrier** between you and the **mosquitoes**
- Untreated **mosquito nets** also form a **barrier** between you and the **malaria mosquitoes**, but they do not **kill** or **repel** the **mosquitoes**

Are there any dangers with using an **ITN**?

No! There are many stories about **ITNs** that are not true. Know that **ITNs DO NOT** suffocate people, cause respiratory tract infections, lead to premature births (they actually prevent them), **kill** people, cause bad dreams, cause infertility and impotence, or poison children.

How do you use an **ITN**?

1. Hang the **ITN** over where you sleep
2. Tuck the **ITN** around the mat or mattress that you or your children are sleeping on
3. Make sure that it is closed when you are inside
4. Do not stick your head, feet or arms outside of the **ITN**
5. Make sure to repair or replace an **ITN** with holes

How often do you have to **re-treat** the **ITN** with **insecticide**?

Most new **ITNs** do not need to be **retreated** – the **insecticide** lasts as long as the **net**.

Who should sleep under an **ITN**?

Everyone, but especially **pregnant women** and children under 5 years.

Should you just use the **ITNs** during the rainy season?

- No!
- Rainy season is a good time to use them
- **Malaria mosquitoes** bite all year round, especially from **dusk** till **dawn**, so it is important to use the **ITNs** all year round

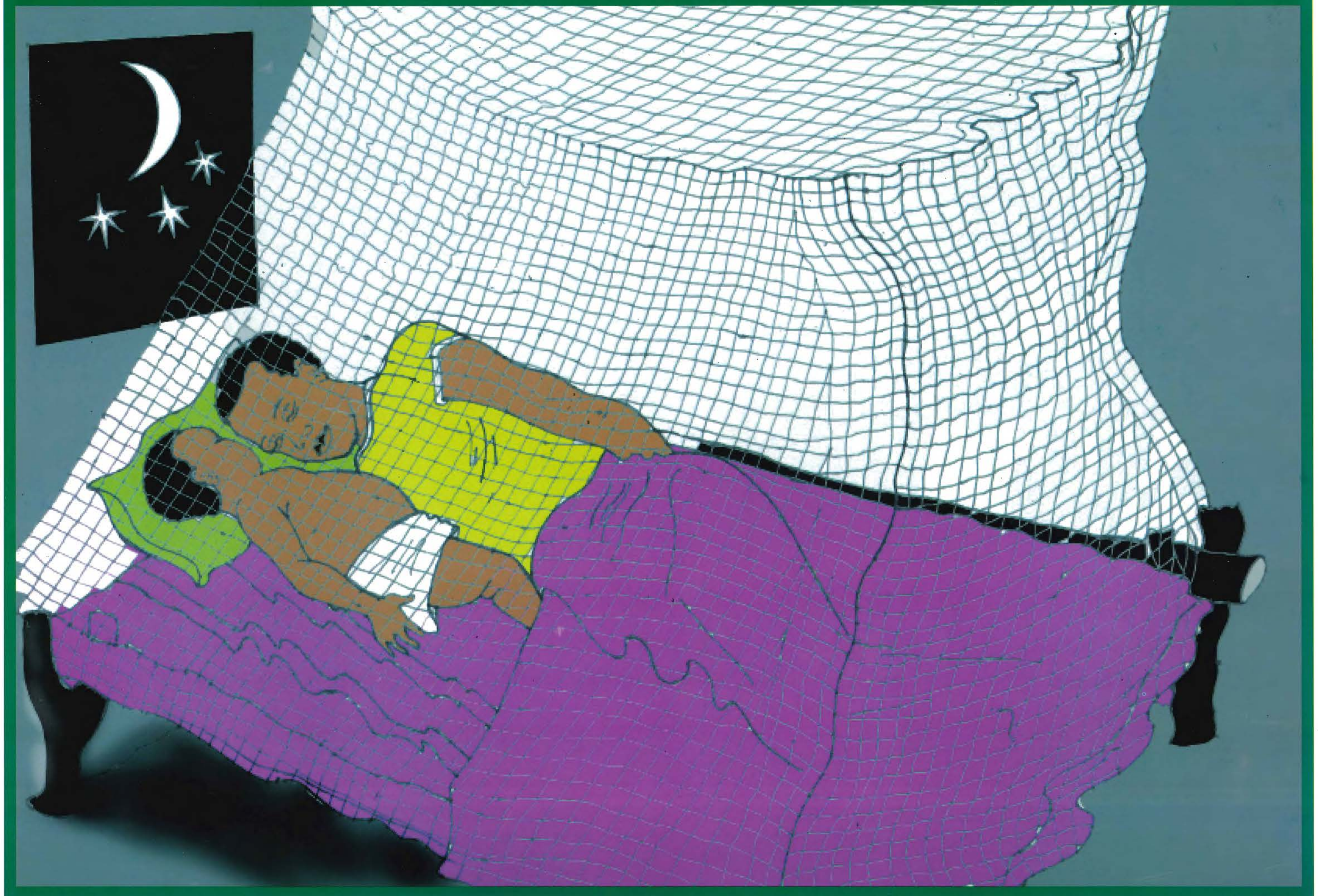
When should you use the **ITNs**?

Every night all year round.



ACTIVITY

Have a discussion around concerns about the nets or the insecticide in the nets.



Key Words

Discuss what the following words or terms mean in your language:

Pregnant
Pills

Cure

Prevent

Malaria

HIV positive

Signs or symptoms

Germ

Placenta

Body hotness

(fever)

Shivering (chills)

Protect

Complications

Weak blood

Miscarriage

Early birth

Low birth weight

Insecticide-Treated

Net (ITN)

Quickening

Mosquito

Repellents

Malaria in Pregnancy

What is happening in these two pictures?

1. The **pregnant** woman is taking care of herself and her baby by taking **pills** at the health facility to **cure** or **prevent malaria** just in case she has it while she is **pregnant**
2. She is being asked why she went to the health facility by friends and family

Is she **HIV positive**?

We cannot tell from this picture. The **pills** are for malaria, not HIV.

The **pregnant** woman does not appear to be sick. Why is she taking **pills** to **cure** or **prevent malaria**?

- **Pregnant** women may be infected with **malaria** but not have any **signs** or **symptoms**
- **Malaria** causing **germs** can infect the **placenta** of women who are **pregnant**, causing them to have **body hotness (fever)**, nausea, **shivering (chills)**, diarrhoea, body pains, etc.
- By taking Fansidar after the first 4 months of **pregnancy** (after “**quickening**,” or when the baby starts to move) 3 times at least 1 month apart, **pregnant** women can help **protect** themselves and their babies from serious **complications**. This is called Intermittent Presumptive Treatment (IPT).

Is **malaria** more dangerous when you are **pregnant**?

- Yes! Both for the mother and the baby
- When a woman is **pregnant**, her body is working hard to grow a baby, this makes it harder for her body to fight **malaria** and easier for her to get **malaria** than other adults

What happens when a **pregnant woman** gets **malaria**?

- **Malaria** causes up to 20 percent of maternal deaths in Zambia
- **Weak blood**
- **Miscarriages**
- **Early birth**
- **Low birth weight**
- Giving birth to a baby that has **malaria**
- Giving birth to a baby that has already died

What are the best ways to not get **malaria** when you are **pregnant**?

- Use an **Insecticide-Treated Net (ITN)** every night
- Go to the health facility for IPT after the first 4 months of **pregnancy** (after **quickening**) 3 times at least 1 month apart
- If you are living in a place where Indoor Residual Spraying (IRS) is offered, have your house sprayed with **insecticide**
- Cover arms and legs with clothing in the evening, night and morning if you are not under an **ITN**
- Use **mosquito repellents** like sprays, coils, burning mango leaves etc. to chase away **mosquitoes**

Does taking Fansidar while you are **pregnant** cause you or your baby to get sick?

No!

ACTIVITY

Ask the group to answer the following questions:

- Has anyone taken Fansidar while they were pregnant?
- Has anyone ever heard about IPT? Are there any concerns that people have about it?
- Do you know anyone who is pregnant?
- Would you advise them to go to the health facility and ask about taking Fansidar?
- Has anyone who is pregnant been offered or told about IPT or Fansidar during antenatal care?
- Are traditional midwives aware of IPT and, if so, can they give it too?
- Are people interested in forming a pregnancy support group? If so, talk about how it would work. Have someone from a health facility or an experienced mother talk to the group.



1

I am not sick. I am taking medication to protect my baby from malaria.

Why are you getting pills from the clinic?
Are you sick?



2

Key Words

Discuss what the following words or terms mean in your language:

Mosquitoes
Insecticide
Repels
Prevent
Malaria
Urban
Peri-urban
Pregnant
Professional

Indoor Residual Spraying (IRS)

What is happening in these two pictures?

- A family is having their home sprayed for **mosquitoes** with liquid **insecticide**
- This is also called Indoor Residual Spraying (IRS)

What is going to be sprayed?

The walls of the house or boma.

What does the liquid spray do?

- Dries on the surface that it is sprayed on
- **Repels** and kills **mosquitoes** when they land on it

Does IRS cause other insects to appear?

No! The spray bothers all pests, not just **mosquitoes**, so spraying sometimes causes them to come out of their hiding places in your home. IRS is good because it kills all pests in a home, not just **mosquitoes**.

How long does it last?

4-6 months.

Why should we spray the walls of our homes with **insecticide?**

It is one of the best ways to **prevent malaria** when it is used properly.

How does it work?

- Kills the **mosquitoes** before they lay eggs (reducing **malaria mosquitoes**)
- Kills the **mosquito** before it can become infected with **malaria**
- It also acts as a **mosquito repellent**

Does the spray make people sneeze, itch or have diarrhoea?

No!

Does the spray stain the walls?

No!

Should you do anything to prepare for having your home sprayed?

- Yes! It is a good idea to be outside of your home for 2 hours while it is being sprayed and the spray is drying
- Put away or cover with a cloth your food or any cooking and eating dishes while the spraying is going on

Who should have their home sprayed?

Anyone who lives in an **urban** or **peri-urban** area where there are **malaria mosquitoes**.

Can you live in the house after it has been sprayed?

- Yes! 2 hours after the walls have been sprayed they are dry and you can be inside without any problems
- Even children and **pregnant** women can move back in with no problems

Are there any risks to your health from having your home sprayed with **insecticide?**

No!

How can you find a **professional person that you can trust to spray your house for **malaria mosquitoes**?**

- Ask at a health facility
- Talk to someone who has had their house sprayed already

ACTIVITY

Ask the group to answer the following questions:

- Has anyone had their home sprayed?
- Would people be interested in getting together and having a professional IRS person come and spray their homes? If yes, contact a health facility for more information.

Organize the group if they are interested so that it is decided how and when they will go to the health facility to obtain this information and get it organized.





EDUCATING EACH OTHER ON HEALTHY LIVING



Ministry of Health



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FROM THE AMERICAN PEOPLE