

Health Care within the Community



**Health Promotion Information
for NHCs and CBOs**

Foreword to the 2006 Edition

The Government of the Republic of Zambia is committed to providing Zambians with equity of access to cost effective quality health care as close to the family as possible. The Ministry of Health is helping to make this happen through community partnerships. Communities have a major role to play in achieving health for all through health promotion, early detection of illness and community-based case management. Therefore, it is important that communities participate in the planning, implementation, monitoring and evaluation of community-based health programs.

Community-based health care is a big part of the Ministry of Health's vision for better health in Zambia. Community-Based Organisations (CBOs) and Neighborhood Health Committees (NHCs) play an important role in achieving this goal.

The government of the Republic of Zambia realized the great need for communities to be involved in the prevention of illness and delivery of health care. They therefore established the NHC through an act of Parliament. NHCs work in conjunction with other CBOs to achieve better health in the communities.

The booklet is designed to serve the purpose of empowering the community. It is to be used by NHCs and other CBOs as a reference guide in the implementation of community health activities, and in support of community-based volunteers such as Community Health Workers and Traditional Birth Attendants. The booklet is useful as a training tool for NHCs and other CBOs in the promotion of health and prevention of disease.

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Neighbourhood Health Committees and other Community-Based Organisations

What are Community-Based Organisations?

Community-Based Organisations (CBOs) are those groups that work within the community for the betterment of the community in various ways. Some examples of CBOs include women's groups, self-help groups, church groups, farming cooperatives, care and support groups for plha, etc.

What are Neighbourhood Health Committees?

Neighbourhood Health Committees (NHCs) are community-based groups that help their communities meet health needs more effectively. NHCs are the link between the community and the health care system.

Why do we need NHCs?

We need NHCs because they can help communities know their health problems and learn to solve them, starting with the most important ones.

How are NHCs formed?

With the help of clinic health workers, the community chooses leaders who are community members and are concerned about their community.

These leaders and health workers discuss how to divide the communities that are served by the health centre into zones of 100-200 households. The leaders then organize a community meeting within each zone to select NHC members that will include women, youth and disabled people. The total number of NHC members should be a maximum of 15. Each NHC then selects a chairman, secretary and a committee treasurer.

NHC members comprise of community leaders such as village headmen, religious leaders, traditional leaders, school teachers, extension workers and other ordinary members of the community. It is important to ensure that at least half of the members of an NHC are women and that other disadvantaged groups are represented.

In addition, there is a Health Centre Committee (HCC) for the whole area which draws members

from each zonal NHC. The chairman of each NHC represents his/her community on the HCC.

What is the role of NHCs and how do they work within the health system?

With the help of health workers, NHCs, CBOs and community members conduct a community needs assessment to identify local problems and see what programmes that can solve these problems. These programmes are included in the health centre and district action plans. This kind of planning involving community members (participatory planning) helps to create a good flow of information and action that strengthen the community and health plans. Some of the activities carried out by the NHC:

- Identify community needs.
- Identify health problems in the community and decide which ones are most important and need to be carried out first.
- Coordinate with other CBOs on health activities in the community
- Find solutions and plan activities.
- Implement community-based health activities.
- Implement community-based disease control programmes for malaria, diarrhoea, etc.
- Act as a link between the community and health centre.
- Participate in health activities at health centre and community level.
- Identify, select and support community-based health care volunteers (i.e. CHWs, CBDs and TBAs).
- Collect and share community-based information.
- Mobilise local resources to implement community-based activities and account for them.
- Establish strategies to manage, monitor and evaluate community-based activities.
- Mobilise community members to implement community-based programmes which are usually from community needs assessment.

In addition to health promotion, some NHCs and CBOs even have fund-raising projects to increase their self-reliance. One NHC raised and sold chickens to buy food to supplement the diet of children who are not well-fed. Another community organized a choir competition to raise money for block-making and soya preparation. Money collected from selling blocks was used to transport sick people to the hospital.

Health Care Activities

We can solve most health problems in Zambia if we concentrate on the most important health care issues. These include prevention and early detection and treatment seeking activities.

Safe Motherhood and Family Planning	<ul style="list-style-type: none"> • Promote family planning services • Promote getting tested for HIV before getting pregnant • Encourage all pregnant women to go to the antenatal clinic as soon as they know or suspect that they are pregnant • Promote education on care for mothers during pregnancy and child birth • Form Mother Support Groups for promotion of their health • Encourage Traditional Birth Attendants to use safe delivery methods as outlined by health care staff • Encourage women to deliver at the health centre • Establish emergency transport system for women in labour
Child Health and Nutrition	<ul style="list-style-type: none"> • Promote education on nutrition, immunization, deworming and growth monitoring • Organise community-based growth monitoring promotion • Encourage early treatment of illnesses like malaria (fevers), diarrhoea and chest pains • Support community-based immunisation/vaccination programmes • Encourage use of iodated salt in food • Encourage breast feeding and mixed diet for young children • Encourage parents to take their children for an HIV test at 1 year 6 months if they continue to grow poorly
Malaria	<ul style="list-style-type: none"> • Promote education on prevention of malaria • Promote indoor residual spraying • Encourage pregnant women to take malaria prevention medicines 3 times during pregnancy as advised by health worker • Promote use of insecticide-treated mosquito nets (ITNs) • Ensure pregnant women and children under five sleep under the ITN every night • Encourage early recognition and early treatment of fevers • Encourage the use of effective malaria medicine as guided by the health worker

Water and Sanitation	<ul style="list-style-type: none"> • Promote education on safe and clean surroundings • Promote boiling of drinking water, home water treatment using <i>Clorin</i> and safe storage in clean, covered container • Promote digging, building and use of protected wells, pit latrines and rubbish pits • Promote regular hand washing with soap and water
Tuberculosis (TB)	<ul style="list-style-type: none"> • Promote education on tuberculosis (TB) • Identify and refer family members of TB patients for TB test at the clinic • Support home-based care for TB patients • Encourage family of TB patients to help and observe patient taking medicines • Identify and refer to the clinic, clients who are not taking their TB medicines properly
HIV/AIDS and STIs	<ul style="list-style-type: none"> • Promote education on HIV/AIDS prevention: A = Abstinence if you are young and not yet ready for sex B = Being faithful to one, HIV partner and both of you know your HIV status C = Condom use, correctly and every time you have sex, if you are HIV positive or if you do not know your own or your partner's HIV status • Support home-based care and counseling for People Living with HIV/AIDS (PLHA) – encourage formation of positive living support groups • Promote the reduction of stigma and discrimination against PLHA • Promote voluntary testing and counseling (VCT) so people know their HIV status • Promote early detection and treatment of Sexually Transmitted Infections (STIs) • Encourage community members to learn about Prevention of Mother to Child Transmission (PMTCT) of HIV • Promote the use of and adherence to Anti Retroviral (ARV) drugs in HIV positive adults and children
Sexually Transmitted Infections (STIs)	<ul style="list-style-type: none"> • Seek treatment early, as soon as they see any symptoms or think they may have an STI • Take their treatment correctly (as they are told by the health worker) and until the medicines are finished. If they stop when they feel better, the STI can come back stronger and this time the medicines may not work for them. • Inform their sexual partner/s. This is a difficult thing to do but unless the partner is also treated, the infection can come back to them.

Safe Motherhood and Family Planning

Safe Motherhood is treating or controlling any problems that may put the life of the mother and her baby before, during pregnancy and after birth in danger are treated or controlled.

All men and women in the child bearing age group, including every pregnant woman and her partner, should be given knowledge on how to keep pregnancy safe.

The child bearing ages that are safer for a woman are between 18 and 35 years.



For safe pregnancy, mothers should:

- get tested for HIV before they get pregnant
- have babies spaced at least 2 - 3 years apart
- be between ages 18 and 35 when pregnant
- sleep under an insecticide treated mosquito net every night
- not smoke or drink any alcohol while pregnant
- go to the clinic for antenatal check-up as soon as she finds out she is pregnant
- go to the clinic immediately if there are any signs like
 - bleeding from private parts
 - bad headaches and vomiting
 - high fever
 - dizziness or swelling of feet or face
- plan to deliver her baby at a health centre or with a trained birth attendant

Antenatal Care

This is care given to a pregnant mother until she gives birth. All pregnant women should be encouraged to go to the nearest health centre for antenatal care as soon as they know they are pregnant. The earlier they go to the health centre, the better the chance of correcting and treating any problems they may have.

Things to do during Antenatal Visit to the Health Centre

The health worker asks the mother:

- If she has had an HIV test
- If she has prepared a birth plan
- The number of past pregnancies and number of living children.
- The last time she had her monthly period.
- If she had any problems during the last pregnancy.
- If she has received an injection for tetanus, and if so, when
- If she has received malaria prevention medicine

The health worker explains:

- How to prepare a birth plan
- How past pregnancies may affect this pregnancy.
- Problems that may arise during pregnancy, labour and after delivery
- What malaria prevention medicine to take, how, when and why
- Importance of VCT if the mother does not already know her HIV status

The health worker checks:

- The general well-being of the mother, head to toe.
- Breasts for any abnormalities.
- Blood pressure to see if it is high.
- For past operation scars on the abdomen.
- If the mother has been eating well.
- For signs of extra water in the body (the skin on the legs remains depressed when pressed).
- For weak blood and advise accordingly (anaemia test).
- The position of the baby and the possible way of giving birth.
- Number of months of pregnancy and possible date of giving birth.
- Listens to the heart of the baby to check on baby's well-being.
- The mother's weight and estimates the growth of the baby.

The health worker collects:

- Blood to test for diseases like syphilis.
- Blood to test whether the mother's blood is strong enough (anaemia).
- Blood to test for HIV unless the mother does not agree to the test
- Urine to detect for diseases.

Finally, the health worker:

- Vaccinates the mother to protect the unborn child from serious diseases (Each woman 15 - 45 years should receive as many as five injections of tetanus toxoid).
- Discusses with the woman how the pregnancy is progressing and advises when necessary.
- Ensures that the woman takes malaria prevention medicine.
- Gives iron pills that help strengthen the blood.

Iron and Folic Acid

The growing, unborn baby needs a lot of foods that help make blood. The baby gets this from its mother during pregnancy. This reduces the strength of blood in the pregnant woman. A woman whose blood is too weak may give birth to a child with low birth weight. A pregnant woman needs to eat locally available foods such as fish, dark green vegetables and kapenta. These types of food can help the mother to have strong blood and provide for the baby. In addition, the pregnant woman should get blood strengthening tablets (iron and folic acid) from the ante-natal clinic and the health worker discusses with the mother and tells her when to come back (depending on the month of pregnancy).

Normal Births

When possible, it is safest to deliver at the health centre where a trained health worker will assist with the birth and is able to identify any problems that may arise and take action to solve them quickly or refer the woman to the hospital if it is very serious.

Traditional Birth Attendants (TBA)

- TBAs work in the community but should be trained by health centre staff to use safe delivery methods.
- They can help in advising the pregnant women where to go to give birth.
- They can assist pregnant women and their families plan for birth and escort women in labor to the health centre.
- They can educate new mothers on how to take care of the new born baby and advise them when it is necessary for children to have their the first vaccinations.

Birth Plans

All families should have a birth plan to make sure everything is ready in case of a normal or complicated birth. A birth plan should be written with a TBA or health worker and include knowing

WHEN: the baby will be born. Expected date of birth.

WHERE: place where mother will deliver

HOW: to get to the place of delivery and to call the trained TBA if there are problems

WHO: will assist with the delivery – RHC staff or TBA and family members

WHAT: materials for the mother and baby to bring along

Having a baby when you are HIV positive

It's important to think carefully about having a baby before you get pregnant. HIV can be passed from a mother to her baby when she is pregnant, during childbirth or when breast-feeding. This is called mother to child transmission (MTCT). Having a baby can put a lot of stress on the mother's body.

If you don't want to have a baby, ask your health care provider about family planning choices. They can help you make a decision about what method to use. Using a condom plus another family planning method (like the pill) is called 'Double Protection'.

If you still want to have a baby after knowing all the risks, you and your partner have to think seriously about your options. You can still get pregnant if you are HIV positive.

If you already know you are pregnant, then visit the clinic with your partner, and your health care provider can outline your options for having a baby. If you both visit the clinic together then you can support one another when you have to make important decisions about your baby.

Your health care provider can give you advice on:

- Taking ARV drugs to try and stop the HIV being passed on to your baby
- How to stay healthy while you are pregnant, including the right foods to eat
- Treatment for any illness or infections
- Safer sex while you are pregnant
- The best ways to feed your baby

When you talk to the health worker, you should also talk about the safest ways of giving birth. This will depend on the facilities that are available near where you live.

It is important to give birth at a clinic or hospital where the care provider knows how to reduce the chances of HIV passing to the baby during birth.

Remember

It's important to talk to your health care provider before you get pregnant so you and your partner know what you can do to make sure you and your baby are healthy.

What can the community do?

- Health education for men and women who are still in the child bearing age group
- Formation of Mother Support Groups
- Encourage pregnant women to attend Ante Natal Clinic (ANC) as soon as they know or suspect they are pregnant
- Encourage pregnant women to take their malaria prevention medicines
- Find pregnant women with problems and refer them to the clinic
- Encourage pregnant women and their families to plan for birth
- Give pregnant women iron pills to strengthen their blood
- Encourage pregnant women to deliver at the health centre
- Promote family planning so that there are no unplanned pregnancies
- If pregnant and found HIV positive, the mother should be encouraged to follow PMTCT steps to reduce chances of transmitting HIV to her new baby

Emergency Transport for Delivery

- Find out earlier who has transportation in the community (for example, ox cart, taxi, etc.)
- Talk to the owner of the transport about taking the mother to the clinic in the case of emergency, when she is in labour
- Create a community emergency fund to help pregnant mothers when they need help

Formation of Mother Support Groups

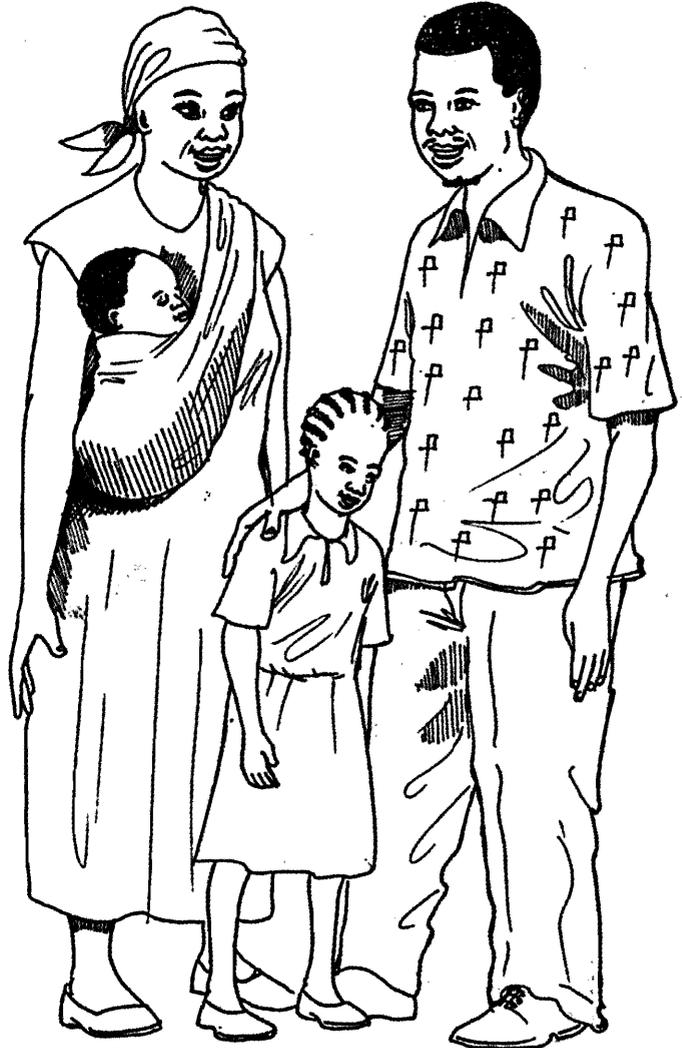
Mother support groups are formed by women who help each other in many different activities related to safe motherhood, for example:

- Helping mothers accept and make use of family planning methods so that there are no unplanned pregnancies and their children are spaced at least three years apart;
- Encourage each other to go for antenatal care early in the pregnancy;
- Discuss with each other and share information on safe motherhood and child care;
- Discuss with each other and share information on danger signs during pregnancy. Encourage each other to go to the health centre when necessary;
- Work with the NHC to establish emergency transport for women who may have problems when giving birth;
- Encourage breastfeeding children for the first 6 months of life without giving anything else (exclusively), not even water;
- Ensuring that materials for TBAs to conduct antenatal care and assist with births in the community are provided by the health centre.

FAMILY PLANNING

Family planning means a couple decides if they want to have children and if so, how many children they want to have and when they want to have them. Family planning is good because of the following:

- The mother's body will have more time to recover from the last pregnancy and the mother will have more time to breast-feed and take good care of the new baby.
- The family will have more time to save money for food, clothing and education for the children.
- Well spaced children have less chance of suffering from malnutrition.
- The couple will have a planned pregnancy.
- Husband and wife can have some time for each other



There are many family planning methods which people can use. A few examples are:

- Pill
- condoms (male/female)
- Injectable, like Depo-Provera, Norplant
- Loop (or IUD)
- Permanent: like sterilisation (tubal ligation) for women and vasectomy for men

People are free to choose and use the method of their choice depending on their health status, age, lifestyle, etc. Most methods are available at the health centre and the health worker can help people to decide on which method is good for them. Some methods are available with the community-based distributors (CBDs) and condoms should be available in shops and markets as well.

Young people should also be given education on reproductive health and family planning and given services when needed. When thinking about family planning, people should remember that of all the family planning methods, ONLY condoms protect against sexually transmitted infections (STIs) and HIV/AIDS.

Things done at the Family Planning Clinic

The health worker asks the client:

- About his/her health, social well-being, and explains the benefits of family-planning to the client
- How many children s/he wishes to have
- If the client is a woman, the last time she had her monthly period

The health worker gives information on:

- Family Planning methods to help people make informed choices and select the method that suits the client best
- Advantages of different methods and explains to them how to use each method
- Health problems that may not allow certain family planning methods to be used
- Possible health problems that may arise from the use of a particular family planning method

Health workers give members of the community information on methods of family planning and inform them to go to the health centre for family planning services.

Community-Based Distributors (CBDs) are trained to provide family planning information and services to members of the community. They also advise and send people to the health centre if they need a method they cannot provide.

FOUR GOLDEN RULES OF FAMILY PLANNING

- | | |
|-------------------|--|
| Too young: | Pregnancy is a greater risk if a girl becomes pregnant before the age of 18 |
| Too many: | Having too many children places a burden on the mother's health, survival of the children and the resources of the family |
| Too close: | Have children at least than 3 years apart |
| Too old: | Avoid becoming pregnant after the age of 35. With older pregnancies there is a greater risk of birth defects in the babies |

Family Planning for a Happy, Healthy Family

Child Health And Nutrition

A lot of children in Zambia die before reaching the age of five years. Most of these children die before they reach one year of age. These deaths and illnesses are caused by diseases that can be prevented by the following simple steps:

- From birth to 6 months breast-feeding only. Not even water or any other drink.
- Introduce other foods from 6 months and continue breast feeding until the child is at least 2 years. If the mother is HIV positive, talk to the health worker about ways to feed the baby that reduces the risk of passing HIV on from mother to child through breast milk. Weigh the child every month from birth to 1 year. Mark the weight on the child's clinic card and check if the child is growing. Follow up children who may be losing weight and make sure they are taken to the clinic. Children who are failing to grow well should also be tested for HIV. If found HIV positive, there is now treatment available for children in Zambia.
- Continue feeding during illness and give extra feeds when recovering.
- Give Vitamin A to children who are between six months and five years of age.
- Use iodated salt in foods.
- Treat children aged 2 – 5 years for worms every three months.
- Vaccinate children against diseases. All children should finish vaccination before 1 year.
- Seek immediate treatment any signs of illness are noticed in children, like chest pains, fever, cough or diarrhoea.



Breast milk is best for babies because:

- It is clean.
- It has all the types of food the baby needs.
- It protects babies from many diseases.
- It contains all the food and water needed by the baby.
- It is always at the right temperature.
- It is always available. It does not need to be prepared.

Feeding options for HIV positive mothers

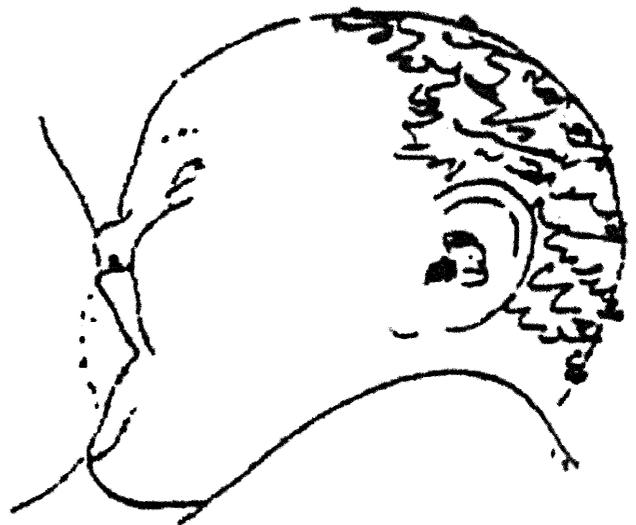
Option 1:

Breast milk contains HIV but it is hard to pass it on through breast feeding. If you give your baby nothing but breast milk for the first 6 months, the chances of passing on the virus are small.

If you mix breast feeding and any other liquids or foods during this first 6 months it can upset the baby's stomach and make it easier for the virus to pass to the baby. This means no water and no food.

After 6 months a baby's stomach is stronger and can manage on other foods. This is when breast milk should be completely stopped and you can start giving your baby other foods.

Your breasts and nipples should not be sore when you are feeding your baby. You should talk to your health care worker about how to breast feed properly to avoid sore breasts or nipples. These can lead to infection. Any infection will increase the chance of passing HIV on to your baby.



Remember

After 6 months you should stop breast feeding and start your baby on other foods.

Option 2:

Using baby formula, e.g. Lactogen, is fine but you must be sure that you will be able to find the money to buy formula to feed your baby for at least 6 months. You must decide whether you want to breast feed or give your baby formula. You can only do one or the other not both. If you decide to use formula remember to:

- Only give your baby formula and don't breast feed
- Use clean and safe water to make the milk – this means boiling all water for at least 5 minutes
- Sterilise all the bottles & teats using boiling water or chlorine

Remember

Formula is expensive. Once you start giving your baby formula, you cannot stop and then start breast feeding again. If you still have questions about how to feed your baby talk to your health care provider.

How to feed a child after the age six months:

At six months of age a child may be given other foods but special care and hygiene must be observed. The mother can continue breast feeding as much as the child wants, unless she is HIV positive. An HIV positive mother, as discussed in the previous section, should stop breast



feeding suddenly and completely when the baby is 6 months. For other mothers, breast-feeding should not be stopped too suddenly as it may lead to the baby not growing well. For all babies,

- Identify and use foods that are easily available in the home
- Foods that will assist the child grow
- Give more food if the child enjoys the food and wants more
- Take time when introducing a new food. It takes time for a child to get used to a new type of food
- Cooked food that has become cold should be well heated and cooled before feeding the child to avoid diarrhoea
- Give thick porridge to which some of these have been added – sugar, oil, pounded groundnuts, pounded kapenta, mashed beans, milk or eggs
- Give nshima with relish, mashed or cut in small pieces, not just the soup. The soup is not enough food for the baby
- Feed children 6-12 months of age at least three times a day if they breast-feed, and at least five times a day if they do not breast feed. Infants and young children have small stomachs and cannot eat a lot, all at once
- Feed children 12-24 months at least three main meals a day, plus food like fruit, sweet potatoes and pumpkins between main meals

Home gardens should be encouraged to increase food variety for the children.

More Ways to Improve Nutrition

- Visit homes of children with health or feeding problems to advise on better food selection, preparation and storage.
- Encourage mothers to prepare meals which have all the foods needed by the child.
- Make use of nutritious foods, such as cassava leaves, groundnuts, potato leaves, beans, ants, caterpillars, grasshoppers.
- Continue trying to feed the child even when he/she is sick. Give a sick child some of his or her favorite food.
- Use salt that has iodine. By Zambian law, all salt sold in Zambia must have iodine. Health workers and NHCs should encourage people to use this kind of salt that has iodine. Salt with iodine should be kept away from sunlight and heat.
- Give children aged 2 – 5 years worm medicine from the clinic to kill worms inside their bodies. Children may not get enough food because worms feed on the food the children

have eaten. So it is important to make sure children have no worms by giving them worm medicine every six months.

- Encourage families to plan how to use money wisely according to what they earn.
- Encourage communities and families to start small businesses that can help them make some money.

Growth Monitoring and Promotion

You can not tell if a child is growing well by just looking at a child. Weighing and growth checking helps parents know if their child is gaining weight and growing well.

Children under 2 years should be weighed every month. The weight will be recorded on the card. The line made on the card will show if the child is growing well, or losing weight and not growing. Poor growth usually results from a number of things like poor feeding habits; diseases (malaria, diarrhea and measles), and poverty. In the early stages of malnutrition, many children do not show any obvious signs. However, poor weight gain or loss of weight is a sign of possible malnutrition. It could also be a sign that the child may be HIV positive. It is important to get children tested for HIV after they are 18 months old if they are not growing well.

Children who lose weight should be weighed every two weeks.

Neighbourhood Health Committees are encouraged to organize weighing of children. The weighing session should include:

- Identification and referral of sick children to health workers.
- Checking children's clinic cards and advising where to go for immunisation and Vitamin A.

Immunisation/Vaccination

All children need to be vaccinated against the killer diseases: Tuberculosis, Diphtheria, Polio, Whooping Cough, Tetanus, Measles, Pneumonia, Hepatitis B and inflammation of the brain (Meningitis).

All children should be vaccinated even when they are sick. The health worker will check if there are any reasons why a child should not be vaccinated.

Vaccinations are given by trained health workers. Community volunteers who are trained will weigh children and provide nutrition education to mothers.

Mothers should be encouraged to ensure that children complete their vaccinations before they are one year old.

Things to look for and do when a child is sick

NHC members should encourage mothers or their helpers to give sick children plenty to drink and to continue feeding the child. They should take the child to the nearest health centre for treatment when they when they notice any of the following in the child:

- Looks unwell
- Is vomiting everything
- Is not eating or drinking
- Has a high fever
- Has fast or difficult breathing

How to Reduce Childhood Illnesses

The mother should:

- prevent illness in a well child by making sure he/she is well fed and has completed all vaccinations
- notice any signs of illness in the child
- take a sick child immediately to the health centre
- provide proper care to sick children in the home, give them plenty of drinks, give them their regular meals and continue breast feeding
- follow all the instructions given by the health centre and give all medicines as advised
- take the child back to the health centre if not improving
- find out from the health centre when the child is better and what can be done to prevent the disease from happening again.

What if my baby tests HIV positive?

Even if the mother takes ARV drugs to prevent her baby becoming infected with the HIV virus, there is a small chance that the baby may still be HIV positive. One of the earliest signs that a baby may be HIV positive is if they are not growing properly. If you are worried about your child's HIV status, go to your local health centre to get them tested.

Remember

Even if your child tests HIV positive there are ARV drugs for children which they can take. These are available from the same health centres which distribute ARV drugs to adults.

Like adults, children must take the ARV drugs for the rest of their lives.

What can the community do?

- Promote health education on nutrition, immunization, deworming and growth monitoring
- Organise community-based growth monitoring promotion
- Encourage early treatment of illnesses like malaria (fevers), diarrhoea and chest illnesses
- Support community-based immunization/vaccination programmes
- Encourage use of iodated salt in food
- Encourage breast feeding and mixed diet for young children
- Encourage parents to take their children for an HIV test if they continue to grow poorly

Malaria

Malaria is Zambia's biggest health problem in all age groups. Most of the people who go to the health centres and hospitals are suffering from malaria. It is likely to be one of the biggest causes of illness and death in your neighbourhood too.

What causes malaria?

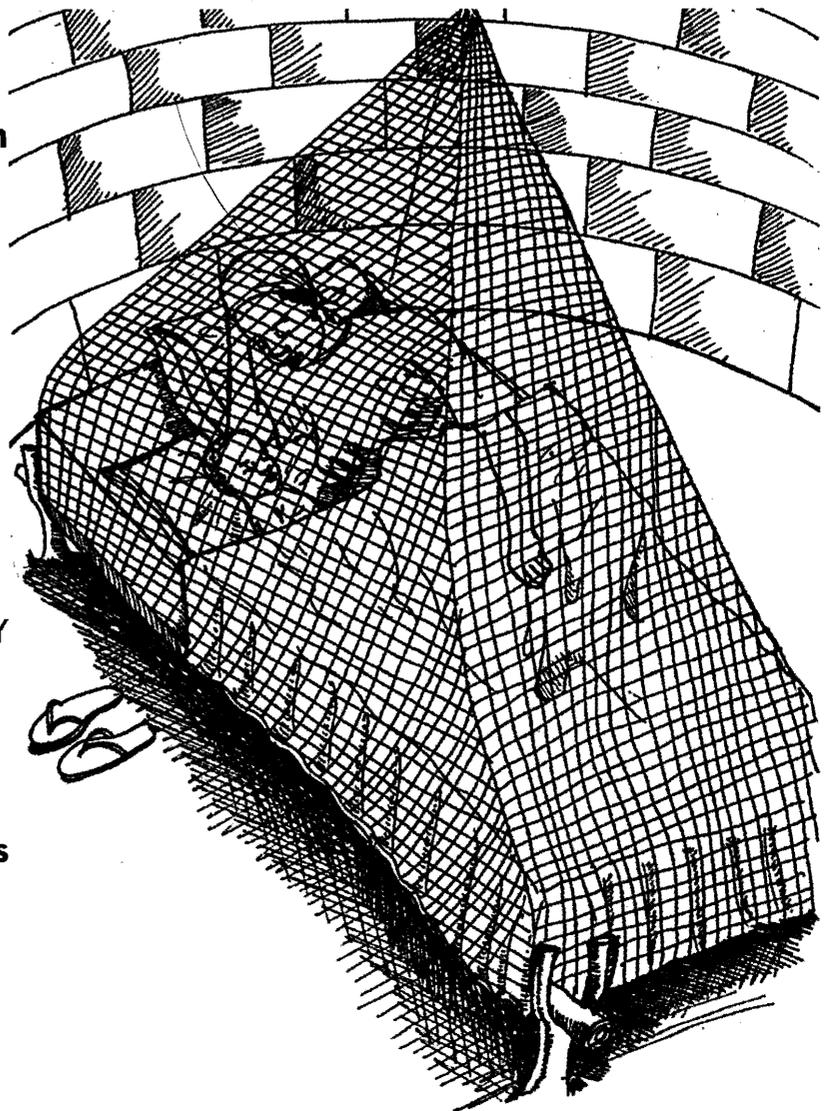
Malaria is caused by very small germs which get into our blood through mosquito bites. Mosquitoes get the malaria germs when they bite a person who is infected with malaria. When they later bite a healthy person, they pass the malaria germs into their blood, the person eventually becomes ill with malaria.

Who is most likely to suffer from malaria?

Children under five years of age, pregnant women, and people who are HIV positive are most likely to suffer seriously from malaria. This is why insecticide-treated mosquito nets are very important for this group of people. However, EVERYONE of us will benefit from sleeping under an insecticide-treated mosquito net EVERY night throughout the year because malaria can affect us all.

How can one know that s/he has malaria?

Anyone with a high fever may have malaria and should be taken to a health centre for examination and treatment.



Where do malaria mosquitoes come from?

Mosquitoes that carry malaria lay their eggs in pools of water where the water is fresh, standing still or moving slowly. The pools of water can be large or very small.

PREVENTING MALARIA

Here are the most effective things you can do to protect yourself from malaria

Buy an insecticide-treated mosquito net. If possible get enough mosquito nets for all the members of family. **EVERYONE** should sleep under an insecticide-treated mosquito net every night so that mosquitoes cannot bite them. It is important to remember that malaria mosquitoes are most active and bite in the middle of the night when most of us are sleeping.

Sleep **EVERY** night under the insecticide treated mosquito net. If there is only one net in the home, ensure that children under five and pregnant women sleep under it. Remember malaria mosquitoes are around your neighbourhood all year long, not just in the rainy season.

Keep your net treated with insecticide. When you buy your net make sure it is treated. Re-treat the net after every three washes. If the net does not get washed regularly, re-treat it once a year. Ask your clinic health worker about how to re-treat your net.

If you live in the boma or with many houses near you, get your house sprayed with insecticide to kill mosquitoes that rest on the walls and other places.

Here are some other things you can do to prevent yourself from getting malaria

- Cover yourself up in the evening so mosquitoes cannot bite you (long sleeve clothing or a chitenge to wrap yourself)
- Rub on mosquito cream or oil that keeps mosquitoes from sitting on you.
- Burn mosquito coils, mealie meal, or mango leaves to keep mosquitoes away.

TREATING MALARIA

Here is what you must do to treat malaria effectively:

1. **AS SOON AS** you notice any signs of malaria take the patient to the health centre. Start giving malaria medicine as advised by the health centre. We should make sure that they are given correct malaria medicine and that they take all the medicines as advised by the health workers. This kills all the malaria germs in the body.
2. Here are the signs of malaria:
 - Body hotness and feeling cold
 - Shivering and sweating
 - Headache, body pains, or pains in the joints
 - Nausea and vomiting
 - Loss of appetite
 - Sometimes diarrhea
3. Give the **CORRECT** amount of medicine (Coartem) as advised by the health centre. (See the dosage chart on the next page). Start the treatment as soon as you have the medicine.
4. Give the **COMPLETE** three-day treatment of coartem in the **CORRECT AMOUNT**. Even if the fever goes away and the patient feels better, continue to give the medicine for three days.

You can also give the patient Panadol and sponge them with cool water to make him/her more comfortable and bring down the fever.
5. If the fever does not go away after 2 days, take the patient immediately to the health centre. The patient may have another illness or serious malaria that will require treatment with another medicine which may need to be given at the health centre.



If you see any of the **DANGER** signs of malaria, take the patient immediately to a clinic or hospital. Do not try to treat them at home. Here are the **DANGER** signs of malaria:

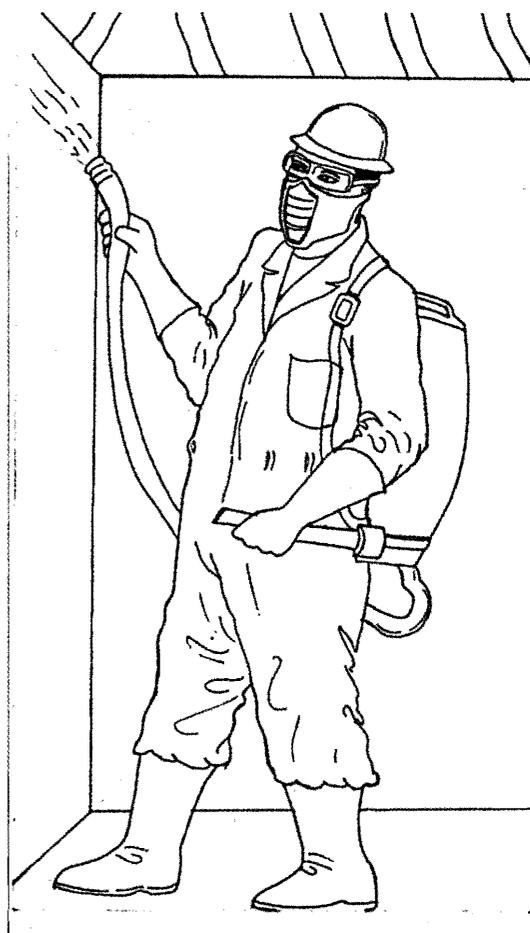
- Fitting (Convulsions)
- Being unconscious
- Unable to take medicine by mouth
- Unable to eat or drink

AGE OR WEIGHT	DAY 1		DAY 2		DAY 3	
	IMMEDIATELY	AFTER 8 HRS	MORNING	EVENING	MORNING	EVENING
1yr – 5yrs or 10kg – 14kg	1	1	1	1	1	1
6yrs – 8yrs or 15kg – 24kg	2	2	2	2	2	2
9yrs – 12yrs or 25kg – 34kg	3	3	3	3	3	3
12yrs & above or 35kg & Above	4	4	4	4	4	4

How to fight malaria in your community!

Here are some of the most important actions you and your community can take:

- Promote health education on prevention of malaria
- Promote indoor residual spraying (IRS) – ask your health centre for more information about this
- Destroy places where mosquitoes lay eggs
- Promote use of insecticide-treated mosquito nets
- Ensure pregnant women and children under five sleep in the ITN every night
- Encourage early recognition and treatment for fevers
- Encourage the use of an effective malaria medicine as guided by the health care worker



Water and Sanitation

Water is life. A person can live for three weeks without food but only one week without water and yet water can also spread diseases. Many diseases can be prevented if we:

- Keep our surroundings clean
- Protect water sources (like wells, streams, tanks, etc.)
- Use a clean bucket and chain/rope to draw water.
- Store drinking water in a clean, covered container
- Use pit latrines or toilets
- Wash hands before cooking, eating and especially after going to the toilet or changing a baby's nappy

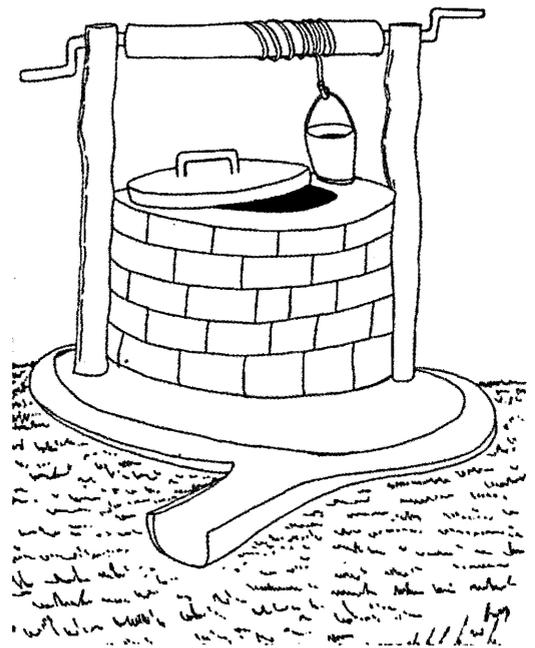


Protection of wells

Many communities do not have protected wells and many diseases can be prevented by protecting this water source.

A protected well should:

- Be located more than 30 adult steps from a pit latrine.
- Be deep enough to maintain a continuous good flow of water.
- Have concrete rings to line the walls.
- Have a raised concrete slab and platform.
- Have a windlass and chain.
- Have a bucket.
- Have a cover.
- The surrounding of the well should be kept clean.



Rivers and streams

Water from the rivers can be safe for drinking by making sure that:

- Drinking water is collected from up stream as everyone generally lives down stream.
- Washing and bathing should be the next point down river.
- Animals should drink from the last point in the river.
- Passing urine and stool should not be done in or near the river

Making water safe for drinking

- Boil drinking water
- Keep water in a clear bucket in the sun for 4 hours.
- Add *Clorin* to drinking water and it will be ready to drink after one hour

Pit latrines

The NHC, CBDs, CHWs, TBAs, NGOs and the health centre staff should encourage the community to construct and use pit latrines. A good pit latrine should be:

- Located at least 30 adult steps away from a well and at least 10 adult steps away from the house.
- Should be at lower ground than the well and the house
- Well-lined and deep.
- On a raised concrete slab.
- The walls and roof constructed with permanent materials.
- With enough windows so fresh air and light can pass through
- With a cover.



Rubbish pits

Every family should have a rubbish pit where they can throw away rubbish. The pit should be

- sited and dug away from the house
- deep enough so that it does not overflow with rubbish quickly.

Cover the rubbish with a little soil/ash every time rubbish is thrown in the pit. This prevents flies from sitting on it and also reduces the bad smell and keeps away animals that may come and dig it up.

Diseases spread by water

The most common diseases spread by water are diarrheal diseases like:

- Cholera
- Diarrhea
- Dysentery
- Typhoid
- Bilharzia
- some eye infections
- skin diseases (rash, scabies)

How can one know they have diarrhea?

A person with diarrhea may have the following:

- Stomach pains
- Loose watery stools more than three times in one day

Dehydration

A person suffering from diarrhea loses a lot of water from their body and may become very sick and die from this loss of water called 'dehydration'. It is very important to recognize the signs of dehydration and replace the water lost through diarrhea as quickly as possible. These signs are:

- General body weakness
- Frequent or continuous feeling of thirst
- Dry mouth and lips
- The skin of the abdomen does not go back quickly when pinched
- Sunken eyes
- Very little urine passed
- Vomiting
- Loss of appetite

If blood is present in the stool the patient needs a different treatment and should be taken to the clinic immediately.

Treatment of diarrhoea

The simple treatment for diarrhea is to give any fluids available in a home such as rice water, samp water, freshly brewed munkoyo (sweet beer), fruit juices or give oral rehydration solution (ORS), do not give beer. In the case of children, it is important to continue breast-feeding and to give food even when the child has diarrhea. Be careful not to use herbs without advise from the health centre. A number of herbs traditionally used for diarrhea actually suck water from the sick person and make them more sick or even die.

Treatment

- Give patient fluids available at home.
- Mix ORS and give with a spoon or cup
- Take the patient to the health centre immediately and continue to give ORS on the way.

What can the community do?

Diarrheal diseases can be prevented by encouraging community members to:

- boil drinking water or adding *Clorin* to the water
- store drinking water in a clean, covered container
- cook all food well
- eat food when it is still hot
- heat left over food before eating or feeding the child
- always wash hands with soap after using the toilet, after changing the baby and before preparing and eating food
- keep your house and surrounding area clean to prevent flies
- keep food well covered to prevent flies sitting on it
- wash fruits before eating
- in case of diarrhea and/or vomiting, give fluids immediately and take patient to clinic or hospital
- promote digging, building and use of protected wells, pit latrines and rubbish pits

The combination of using a pit latrine and hand washing provides the best protection against disease. Prepare a place for hand washing with water and soap next to the latrine. This is good hygiene behaviour. If you don't have soap, it is better to wash your hand with water than not to wash them at all!

How to mix rehydration solution



Pour two 500ml cups of safe drinking water.



Empty the ORS sachet into the bowl.
(If ORS is not available, use half
teaspoon salt and 8 teaspoons of
sugar.)



Stir until well mixed.



Give the child with a spoon or cup
to drink every few minutes.

Tuberculosis

Tuberculosis (TB) is a common disease that affects a lot of people. The disease can be treated but the treatment takes a long time and most people do not complete the treatment and they make the disease worse. The role of the community and NHCs in the control of TB is:

- Teaching people about the spread and control of TB
- Helping families to watch and help the patient take TB medicines
- Finding patients who have stopped taking their TB medicine and helping them restart their treatment

What everyone should know about TB:

Tuberculosis (TB) is a disease caused by TB germs. TB is spread from one person to another by breathing in the air from an infected person who has coughed out germs.

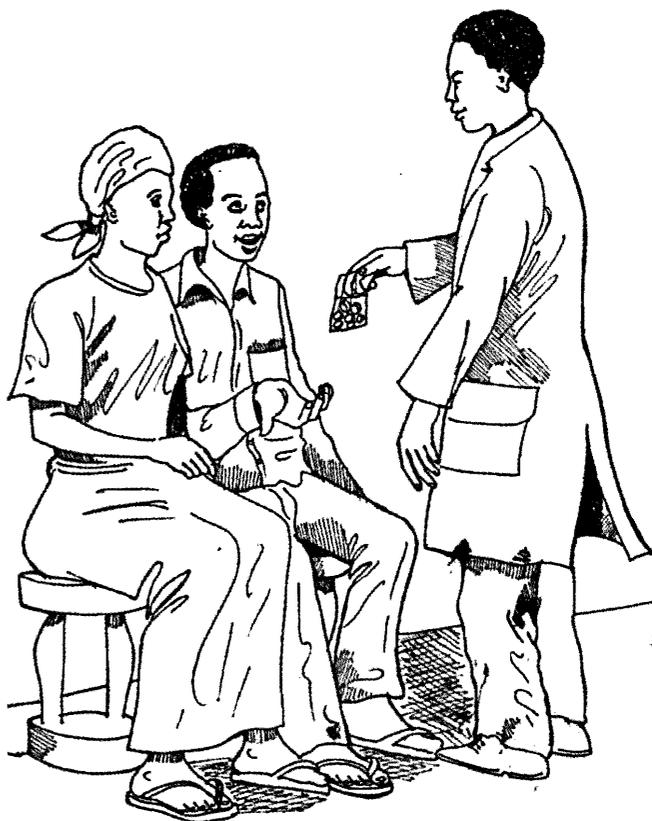
- Someone with TB can infect others in the house, especially children, if he or she does not get medical treatment.
- TB can be cured if treatment is followed without stopping until the doctors says so. Patients are encouraged to take daily TB medicines while being observed by family members, friends or health center staff. Children and others living in the same house with a TB patient should also be checked for TB. Eating good food and living in a house with plenty of air is an important part of treatment and prevention of TB.
- It is most important that patients complete the full **7 – 9 month treatment** even if they feel better after a few weeks. They could have serious problems if they stop taking their TB medicines too soon:
 - The disease will start again and become more serious.
 - The medicine given later for TB treatment may not work.
 - The person will increase TB infection in the community.



The NHC and community volunteers have an important role to play in helping the health center staff find patients who have stopped treatment. The health center will give the NHC the names of TB patients who have missed treatment for two days or who did not come to the health center to pick up their monthly supply of medicines. The NHC and community volunteers will contact the person to find out why s/he stopped treatment and encourage the person to start treatment for the sake of his health and the health of the community.

Role of the Community and NHC in the prevention of TB

- Encourage mothers to take their children for BCG vaccinations
- Organize and conduct community immunization sessions
- Encourage people to build houses with good windows that will allow fresh air that TB germs do not like
- People living in the same house with patients should also be checked for TB
- Encourage family members to observe and help the sick person take medicine and make sure that s/he completes treatment
- Find people who have stopped taking their treatment and encourage them to go back to the health center so that they can be assisted to restart their treatment.



TB and HIV

TB in Zambia, is becoming more common because of HIV. Even though TB can be treated, if a person also has HIV it can be more difficult to treat. TB may easily find its way into those whose bodies are too weak to fight diseases. If someone is found with TB, then it is a good idea for them to also get an HIV test. If they are found HIV positive, there are drugs now available that can manage the HIV/AIDS as well. Otherwise the person can keep getting sick with TB again and again if the HIV remains untreated.

You can know that one has TB by the following signs:

- Loss of appetite and weight
- Slight fever (especially in the evening)
- Sweating at night
- Tiredness and general body weakness
- Chest pains
- Coughing up of blood
- Cough for more than one month
- Difficult breathing
- Pale and dry skin
- If a woman is of child-bearing age, her monthly periods may stop



HIV/AIDS

WHAT IS HIV?

HIV is a virus, the Human Immunodeficiency Virus. A virus is a tiny germ – it is so small you cannot see it. HIV makes it difficult for your body to fight illnesses and you start to get sick very often, and it becomes more and more difficult to get better.

Where do you find HIV in the body?

HIV is found only in these body fluids:

- Blood
- Semen
- Vaginal fluids
- Breast milk
- HIV is found in small amounts in the other body fluids but the chance of being infected through these is very small – urine, sweat, tears and saliva DO NOT spread HIV

HIV is spread by:

Most of the time in Zambia, HIV is passed from one person to another during sex. Mothers can also pass HIV on to their baby when they are pregnant, during childbirth, or when they are breast-feeding. HIV can also be passed on through infected blood.

When you have been infected with the virus, you are HIV positive. Being HIV positive does not mean you have AIDS. You can still live a happy and healthy life for many years.

How does HIV affect the body?

Your body is kept safe from diseases by your immune system. Your immune system is like an army. HIV is like an enemy, which attacks your army.

Your army is made up of soldiers called CD4 cells. When the HIV enters your body, your CD4 cell 'soldiers' try to fight the enemy.

HIV attacks and destroys your CD4 cell soldiers. This means that your immune system becomes weak. The more CD4 cells you lose, the weaker your immune system becomes because your

CD4 cell soldiers are too few to fight back. This means you are no longer kept safe from diseases and you are more likely to get sick.

As the HIV destroys your CD4 cells, it also makes copies of itself.

After some time, the HIV will destroy so many of your CD4 cells, that it is very easy for you to get sick. AIDS (Acquired Immunodeficiency Syndrome) is the illness you get when HIV has destroyed almost all of your CD4 cells.



HIV test

It is not possible to know that a person has HIV just by looking at them. People can look and feel well and not know for a long time that they are infected with the virus. We can only know that a person has HIV when they are tested. It is important for people to get their blood tested so that they can begin to protect themselves from HIV infection if they are not yet infected, or if they are HIV positive they can take steps that will help them not develop AIDS quickly.

What is AIDS?

AIDS is the illness you get when your body has been weakened by HIV. The HIV will slowly damage the body's protection against disease. It may take a long time after someone has been infected with HIV before developing AIDS. The time it takes to develop AIDS depends on many things such as the infected person's overall health condition and other things like clean surroundings, good food and getting early treatment for infections.

There is no known cure for AIDS either through traditional or modern medicines but people are encouraged to get an HIV test even if they are not ill and see if they can get Anti Retroviral (ARV) drugs. ARVs are medicines that will assist them not to develop AIDS quickly and help them remain healthy longer.

How can one get HIV?

- Having unprotected sex – without using a condom – with someone whose HIV status you do not know
- Having many sexual partners
- Use of used or unclean needles, syringes or cutting instruments like razor blades
- Sexual cleansing
- Receiving infected blood
- If mother is infected with HIV, it can pass to the baby during pregnancy, delivery or breast-feeding

What can reduce the chance of HIV infection?

- If you are young or not ready, do not have sex (abstinence)
- Stick to one faithful partner who is also not infected with HIV
- Use condoms if you are HIV positive or if you do not know your status and/or your partner's status
- Avoid sexual cleansing methods
- Avoid sharing of sharp cutting instruments or syringes and needles
- Avoid beer drinking because when people are drunk they are more likely to behave in a way that may put them at risk of getting HIV/AIDS, like having sex without using a condom with someone they have just met, or other risky behaviours in general
- Follow the steps of Prevention of Mother To Child Transmission (PMTCT) as the health care provider advises if an HIV positive mother is pregnant so chances of child being infected with HIV is reduced.

False beliefs about HIV/AIDS

Many people have false beliefs about how HIV/AIDS is spread. Some of these beliefs are that HIV infection can be caused by:

- Eating and drinking with someone who is HIV positive

- Shaking hands with someone who is HIV positive
- Using the same toilet as someone who is HIV positive
- Having sex with someone who had an abortion/miscarriage
- Mosquito bites

These beliefs are **NOT** true. It is important for NHC members to educate others in your community. Discuss the real causes of HIV/AIDS and how community members can prevent the spread of HIV/AIDS.

Role of Community in HIV/AIDS Prevention

- Promote health education on HIV and AIDS prevention:
A = Abstinence if you are young and not yet ready for sex/unsure of your partner
B = Being faithful to one, HIV uninfected partner. You should also know your HIV status
C = Condom use, correctly and every time you have sex
- Support home-based care and counseling for PLHA – encourage formation of positive living support groups
- Promote the reduction of stigma and discrimination by speaking openly about HIV in your community
- Promote voluntary testing and counseling (VCT) so people know their HIV status and be sure to get tested yourself
- Promote early detection and treatment of Sexually Transmitted Infections (STIs)
- Encourage community members to learn about Prevention of Mother to Child Transmission of HIV (PMTCT)
- Promote the use of Anti Retroviral (ARVs) drugs in HIV positive adults and children. ARVs are not a cure but can help HIV positive people stay well



Remember

Condoms used correctly stop HIV passing from one person to another when you are having sex. You must use a condom each time you have sex to avoid passing the virus on to your partner.

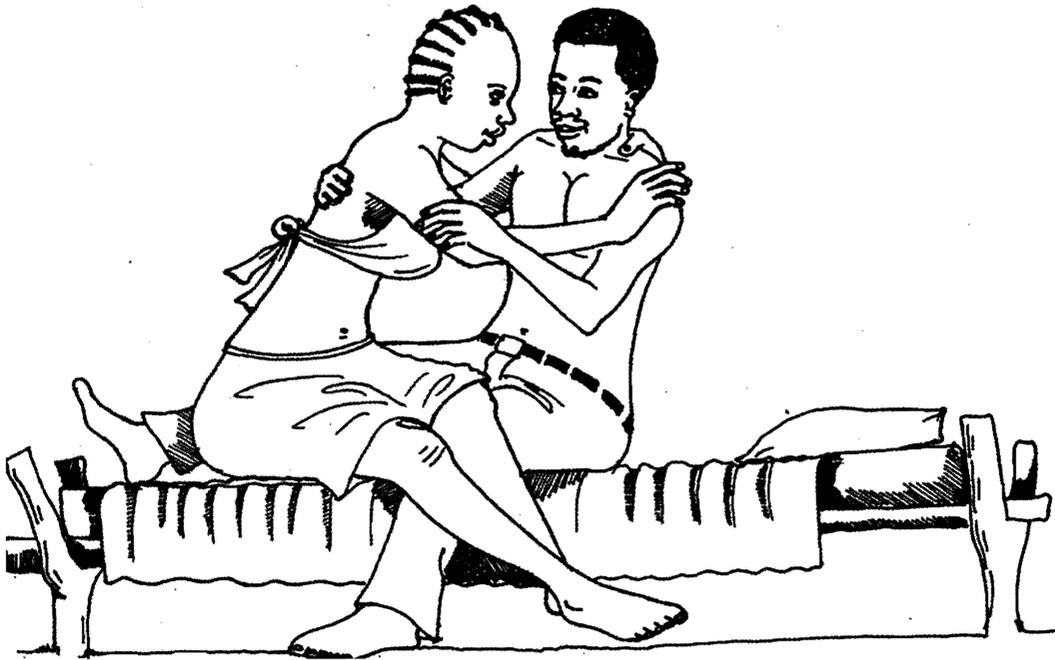
You must still use a condom even if you and your partner are both HIV positive to avoid re-infecting one another and increasing the amount of virus in the body.

Sexually Transmitted Infections (STIs)

Sexually Transmitted Infections (STIs) are diseases which are passed on during sex from an infected partner to an uninfected partner. Some STIs can also be spread from mother to child before or during birth.

Anyone can get STIs if they:

- Have unprotected sex with someone who is infected with an STI
- Have many sexual partners
- Have unprotected sex with someone who has many sexual partners



How would someone know that they have an STI?

- Swelling in the groin
- Pain on passing urine
- Pus/discharge from the private parts
- Lower abdominal pains
- Sores on the private parts
- Growths on the private parts
- Often women may not see any outside signs that they have an STI but still have one inside

Problems you can get from an untreated STI:

- Greater risk for getting HIV if you have an STI. The STI creates sores which are like doors through which HIV can easily enter
- Miscarriages
- Not able to have children
- Infection can be passed to the child during pregnancy or during childbirth
- Some STIs are very serious and can even lead to death

Remember

You can avoid getting an STI by:

- Not having sex (abstinence) until you are old enough and ready
- Not having sex with many partners
- Only having sex with one faithful partner who does not have an STI
- Using condoms correctly, all the time when you have sex with a partner whose STI status you do not know

What can the community do?

Encourage community members to:

- seek treatment early, as soon as they see any symptoms or think they may have an STI.
- take their treatment correctly (as they are told by the health care provider) and until the medicines are finished. If they stop when they feel better, the STI can come back stronger and this time the medicines may not work for them.
- inform their sexual partner/s. This is a difficult thing to do but unless the partner is also treated, the infection can come back to them.



For Better Health in your Community

Remember

PREVENTION IS BETTER THAN CURE

Combining the prevention and treatment of diseases within a community can stop the spread of diseases and improve health. The community can work together and combine efforts while using the resources available to them. For example, the list below shows prevention and promotion activities a community can carry out:

1. General health education for the community on all health issues.
2. Early treatment of diseases, like diarrhoea, malaria (fevers), TB, STIs, etc.
3. Proper maintenance of water supplies and sanitation.
4. Construction of windows in houses which allow plenty of light and air.
5. Avoid overcrowding in homes.
6. Establishing community support groups like: Home-based care, NHC, Peer Educators, TBAs and CHWs.
7. Proper child feeding to prevent malnutrition.
8. Encourage parents to take their children to the under-five clinic during child health weeks for deworming, growth monitoring, immunisation and Vitamin A supplementation.
9. Organising emergency community fund to help those who need to be taken to get special medical help.
10. Use of insecticide treated mosquito nets (ITNs).
11. Indoor Residual Spraying (IRS) for mosquitoes.
12. Encourage all community members to get tested and learn their HIV status – those who test HIV positive should be encouraged to access ARV treatment.







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