

# MALARIA FREE MEKONG

## FIELD VISIT NOTES

27 MAY – 3 JUNE 2022

KANCHANABURI

MAE HONG SON

TAK

THAILAND



**MALARIA**  
FREE MEKONG

A Platform of NGOs



## ABOUT THE MALARIA FREE MEKONG

The Malaria Free Mekong is a platform of Communities and Civil Society Organizations (CSO) in the Greater Mekong Sub-region. It was established in 2014 and also known as the CSO platform. The platform is a community constituency of the Global Fund RAI RSC. Currently, the platform is funded by the Global Fund RAI grant. The main objective of the platform is to provide a common space to share information on best practices, issues, and challenges from the communities in the implementation of the RAI grant. The platform also plays a key role in advocacy, communication, and community engagement through various activities such as consultations, cross-partner learning visits, strengthening the capacity of CSOs by training and sharing the new information and tools, and improving coordination at the national and regional level. The platform provides opportunities to communities to meaningfully engage and represent in the Country Coordinating Mechanisms and Global Fund activities. The Malaria Free Mekong is hosted by the ALIGHT South East Asia.

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## OBJECTIVE OF THE VISIT

During 27 May to 3 June 2022, the Malaria Free Mekong CSO Platform Secretariat with its senior advisor organized field visits to Thai – Myanmar border provinces namely, Kanchanaburi (Sai Yok and Thong Pha Phum districts), Mae Hong Son (Mae Sariang and Sob Moei districts) and Tak (Mae Sot and Tha Song Yang districts). The main purpose of the visit was to consult with local CSOs, communities, and government authorities to understand the actual situation on the border areas and identify the support needs.

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## ABBREVIATIONS

ACD	Active Case Detection
COVID-19	Coronavirus Disease 2019
CSO	Civil Society Organization
DPH	District Public Health
GMS	Greater Mekong Subregion
HPH	Health Promotion Hospital
LLIN	Long-lasting Insecticidal Net
MC	Malaria Clinic
MCH	Mother and Child Health
MP	Malaria Post
NGO	Non-Government Organization
PPE	Personal Protective Equipment
RDT	Rapid Diagnostic Test
VBDU	Vector Borne Disease Unit

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## SAI YOK AND THONG PHA PHUM KANCHANABURI PROVINCE

During 27– 28 May 2022, the platform and its senior advisor visited Sai Yok and Thong Pha Phum districts of Kanchanaburi province. Communities in both districts share border with neighboring Myanmar. In 2021 Kanchanaburi reported 430 malaria cases, where Sai Yok accounted for 85 cases and Thong Pha Phum 139 malaria cases. The main objective of the visit was to get an update on the field situation, especially on the mobile and migrant population along the border regarding malaria situation.

The team met with Sai Yok district health officer and representatives from the local interior ministry and police station. The meeting was led by Deputy District Chief for Security Affairs section, Mr. Kittikhun Yuenboon. According to local police authority, approximately 70–100 undocumented migrants are arrested in Sai Yok district every month and kept in detention centers. Thong Pha Phum has a high undocumented migrant movement. Since March 2022, Thong Pha Phum Police informed that they have been arresting more than 1200 undocumented migrants, however, the actual numbers of undocumented migrants can be 3–4 times higher based on the update from the village head and CSO in the border.



The visit team meeting officers from security affairs, district public health, local authority offices and police station.





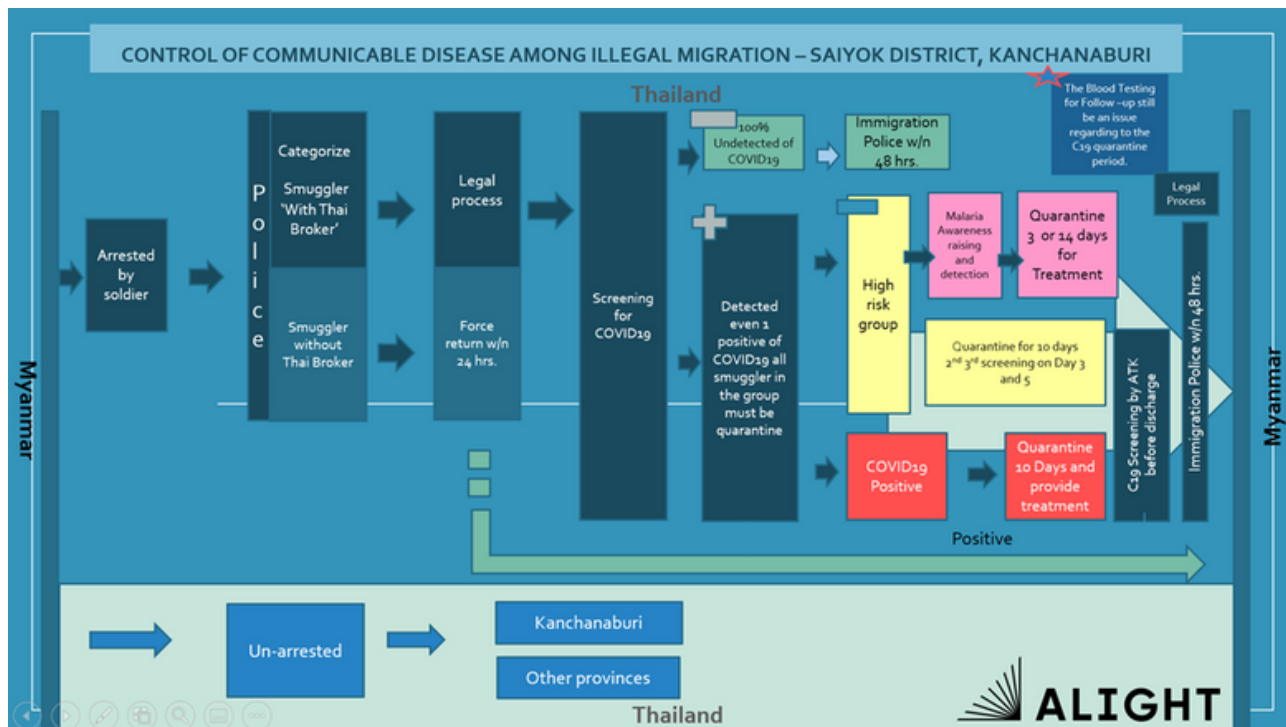
Undocumented migrants being rounded up by the border police patrol

Sai Yok shares 80 kilometers border with Myanmar, while the whole province shares with Myanmar 371 kilometers border area. Most of the migrants cross the border through natural crossing points. Many migrants walk up to 28 days from their homes to reach Thailand border. Most of them walk through the forest and spend several nights in the forest during their journey. Sai Yok and Thong Pha Phum are not the final destination to most migrants as they use these border districts as entry points to go to other provinces with better job prospect such as Bangkok and its neighboring provinces and southern provinces.

When authorities arrest migrants, they will do COVID-19 screening test before sending migrants to the detention center. If COVID-19 test is positive, migrants are sent to local isolation center for 14 days of quarantine. On average, 10% of covid-19 tests was found positive.







Infographic showing the cascade for screening and control of communicable disease among undocumented migrants



ALIGHT field staffs with the police to provide necessary support and services to the undocumented migrants





The front view of detention center

The detention center on above photo is designated to COVID-19 infected migrants as a isolation center. Due to increased COVID-19 cases and limited available budget, this center faces critical problems of managing enough food, hygiene and sanitation. Detention center becomes congested due to large volume of migrants. ALIGHT has been providing malaria and covid-19 prevention activities inside the detention center, but no other health services are being provided including malaria testing. Police authority is cooperating with ALIGHT for additional assistance and support the basic needs to detained migrants.



ALIGHT provided humanitarian support and food to the migrants





ALIGHT, together with local police station are providing weekly psychosocial activities and physical exercise for migrants to keep them physically and mentally healthy and boost their morale. According to the police authority, the deportation process and return of detainees back to Myanmar can take 2 weeks and up to months. Myanmar authority is unable to accept all deported migrants from Thailand immigration police because of their limited capacity to coordinate and facilitate the return of migrants back to their hometown. Once Thailand immigration sends migrants to Myanmar immigration police, they are responsible for keeping all the records in their system and physically sending those migrants back to their homes. Due to ongoing conflict and unrest, this process has been delayed. Cross border referral service is interrupted because of COVID-19 preventive measures and border closure. The restart of official referrals can be challenging because of the conflict and security issues in the Myanmar side.



Undocumented Migrants at the Detention Center

ALIGHT is the only local CSO providing coordination services on communicable disease, awareness-raising activities (malaria and COVID-19) inside this detention center on the border. Only symptomatic cases are tested for malaria, thus there might be many asymptomatic malaria carriers. Hundreds of migrants are kept in the detention center on this border district, waiting for the deportation process.,

Local health authorities, CSOs and community all agreed that financial resources and malaria commodities on the Thai – Myanmar border should be reassessed according to the real needs and urgency. There is a small group of the local community, ethnic and youth network helping these undocumented migrants by providing food and humanitarian support. ALIGHT coordinates with local health authorities, but needs are three times higher than available and existing resources for CSO and the local health authority. There are shortages of health commodities for LLIN and rapid diagnostic test kits for both malaria and COVID-19.





Group photo of ALIGHT team, CSO Platform and Local Authorities in front of the Sai Yok District Public Health Office



Bong Ti Sub-district Health Promoting Hospital where ALIGHT and CSO Platform met with migrant volunteers and village heads





## ศปก.สภ.ทองผาภูมิ

“พิทักษ์ชาติ ศาสน์ กษัตริย์ เป็นที่รักของประชาชน”



Meeting with the Police Superintendent at Thong Pha Phum Police Station



## MAE SARIANG DISTRICT MAE HONG SON PROVINCE

From 30 May – 1 June 2022, the Malaria CSO Platform together with World Vision Foundation (WVF) visited Mae Sariang and Sob Moei districts of Mae Hong Son province, where communities live in forested areas close to the Myanmar border. In 2021, Mae Hong Son reported 736 malaria cases. Mae Sariang district accounted for 343 and Sob Moei 328 malaria cases. The WVF works closely with the local government authorities to coordinate and provide malaria service in the communities.

In the past few months, malaria cases have been increased because of the high number of migrants and ethnic communities coming from Myanmar. The schools and some factories in Thailand have been closed for over two years due to COVID-19. Migrant communities went back to Myanmar during the COVID-19 lockdown.



CSO Platform Team being briefed by World Vision Foundation



As Thailand is relaxing COVID-19 restrictions, many people from Myanmar are coming back to Mae Hong Son, including school children. This leads to the increase in influx of people from the Myanmar side to Mae Sariang district. The province also experienced increased IDPs from Myanmar a few months ago, most of these IDPs have stayed near the forest areas in a temporary shelters/cottages.

The team traveled to Mae Samlaep subdistrict, a border area where the local communities closely connect with the Myanmar side (culture, ethnicity, language, and family relations). Due to airstrike and fighting, several wounded people came to seek medical treatment at Mae Samlaep Sub-district Health Promotion Hospital, and some of them being referred to the district hospital. The malaria clinic is located on the border and provides complete services; RDT, Microscopy, and treatment for non-complicated cases. The trend of malaria has been slightly increasing compared to last year. Most of the patients were from the village, with a few migrant cases reported. Most of the people from this ethnic community have resident permits which allow them travel freely in the province (including cross border) and also to stay in Thailand.



Salween river at Mae Samlaep sub-district, bordering with Myanmar





A staff taking health records of the patients at Ban Mae Samleap Subdistrict Health Promotion Hospital (HPH),

วันที่ตรวจ	ชื่อ	อายุ	เพศ	หมู่	บ้าน	ตำบล	อำเภอ	จังหวัด
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Malaria records collected by Malaria Clinic (MC) in Mae Samleap



The primary school at Mae Samlaep border has 164 students, of which about 10% are from migrant family and the rest are Thai and ethnic community with residence permit. Despite having high malaria cases among children in other areas the student in this school has not infected by malaria since it open in May. Malaria prevention activity is not the priority for schools because of other competing health needs among children and the community. The WVF is providing awareness-raising activities in the border schools.

According to District Public Health (DPH) officer and Vector Borne Disease Control Unit (VBDO) officer, the reported positive malaria case in the Mae Sariang district are increasing compared to 2021. A total of 82 cases were reported from January – June 2022 compared to 74 patients in the entire year of 2021. The majority of cases are P Vivax. The 10-15 years age group is being mainly affected; most are males. LLINs are not sufficient for distribution because of limited allocation.

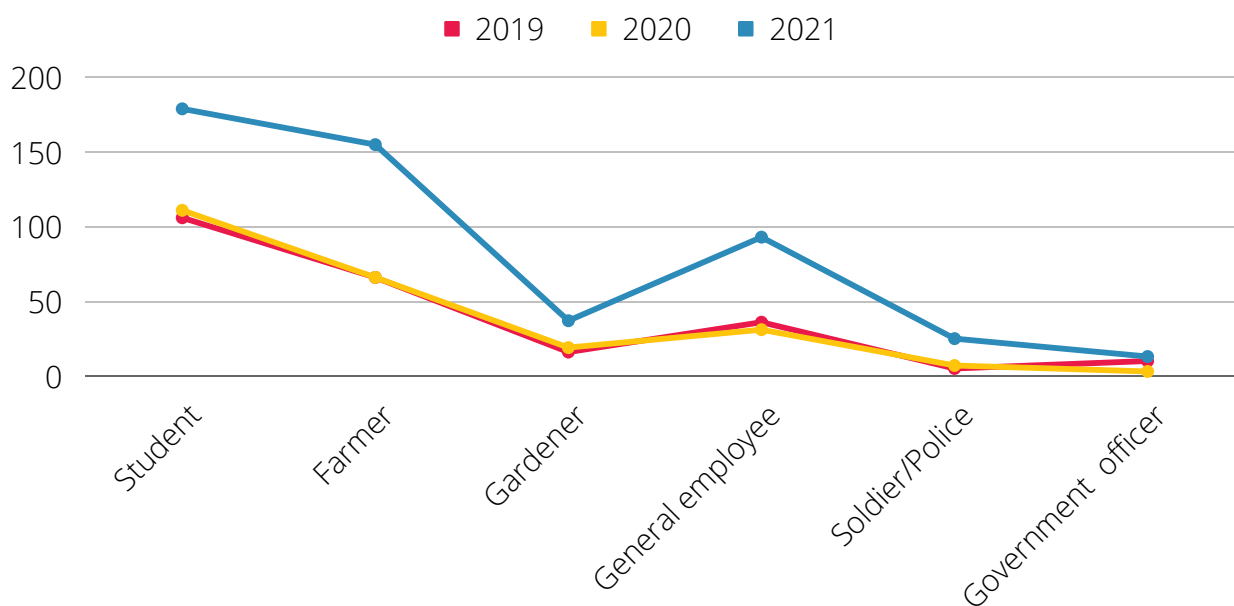


The CSO platform team with the director of Mae Sariang District public Health



## WORLD VISION FOUNDATION IMPLEMENTATION UPDATE

The WVF covers 71 foci villages in 3 districts of Mae Hong Son; Mae La Noi, Mae Sariang, and Sob Moei. They are implementing malaria awareness-raising activities, community mobilization for active case findings, treatment monitoring, supporting the local government to implement the 1-3-7 strategy, and distributing LLIN.



In 2021, malaria cases were higher than in 2019 and 2020 (as shown above). Students remained the most positive cases detected for 3 consecutive years, with the farmer group coming in second for the occupation with most malaria cases.

The table below depicts the number of malaria cases by group, the numbers of migrant who contracted malaria were increased from 2020 to 2021 (80 to 145 patients)

Groups	2019	2020	2021
Migrant	81	80	145
Thai	193	180	370
Male	206	178	381
Female	68	82	181
0-5	8	16	27
5-15	85	80	135
15-25	56	50	108
25-45	78	65	188
45 -up	47	49	104
PV	256	258	557
PF	13	2	4
Students	106	111	179



## MALTESER INTERNATIONAL (MI), MAE SARIANG OFFICE

The team met the head of Malteser (Per Vogel) and team in their office. The MI is implementing RAI3E in Mae Rama Luang (MRM) and Mae La Oon (MLO) camps. Malteser provides health and other humanitarian support to 18,000 refugee populations in total. According to their update movement on the border is increased. Malaria cases in the camp have been rising since the beginning of 2022. Local community networks and organizations are providing food and other support officially. Most cases are found among refugees returning from Myanmar. In MLO camp, 60% of malaria cases are among those who returned from Myanmar. Last year, there was no *P. falciparum* case, but this year already 4 *P. falciparum* cases have been reported. The malaria cases reporting from 2 refugee camps under MI are 108 cases in 2021 and 163 cases in 2022 (from January to May).

Malaria cases had always been higher in MLO but this past year sees the trend reversing with increasing cases found in MRM. Malaria among children is increased in refugee camps which many are relapse cases. One child has had 5 relapses since last year. Treating children following Thai national guideline is difficult because of the primaquine dosage adjustment is different to SMRU guideline which MI formerly adopted before switching to the national treatment guideline. Thailand national guideline prohibits the use of primaquine to children weigh less than 15 kg (11 kg for children 1 year or younger). MI received EU funding in health and humanitarian reliefs including malaria activities in two refugee camps. COVID-19 vaccine hesitancy is high in these two refugee camps with vaccine coverage less than 50% and only 15 % of all MRM and MLO camp populations received full vaccination (2 doses) of the COVID-19 vaccine. The vaccine coverages are expected to be 70 % in other refugee camps along the border in Tak province.







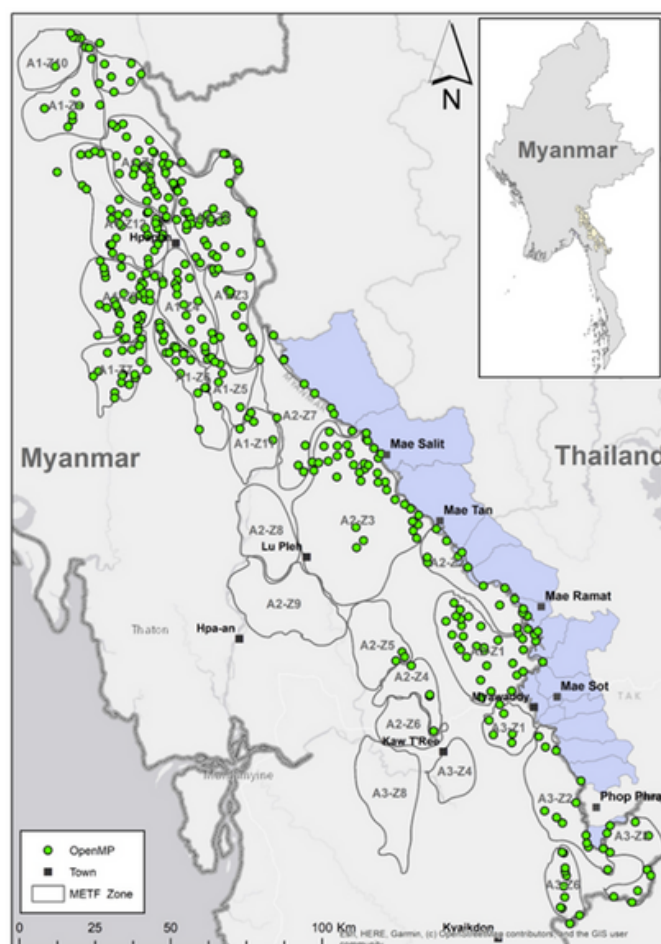
WELCOME TO KAWTHOOLEI



## MAE SOT TAK PROVINCE

### SHOKLO MALARIA RESEARCH UNIT (SMRU) AND BORDER HEALTH FOUNDATION

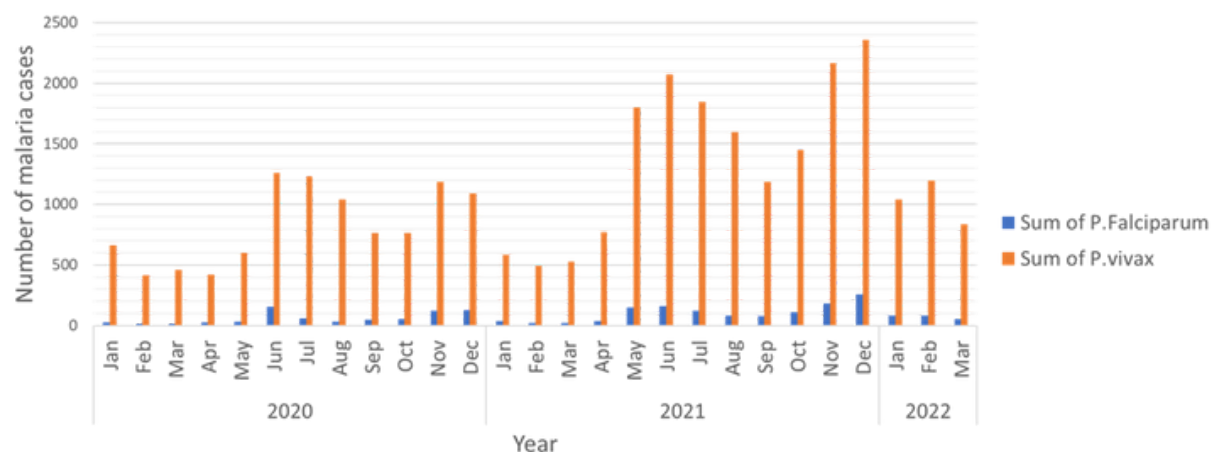
The team visited SMRU office and one of their clinics in Thailand–Myanmar border. SMRU covers larger area of malaria implementation on the Myanmar side. However, the unrest and conflict situation has resulted in only 414 malaria posts remain functioning. SMRU activities spanning from malaria program, COVID 19, tuberculosis, mother and child health (MCH) to community engagement activities. SMRU raised the concern on the malaria supplies which could last for only 3 more months.



SMRU managed Malaria Posts (MP) along the border in Myanmar

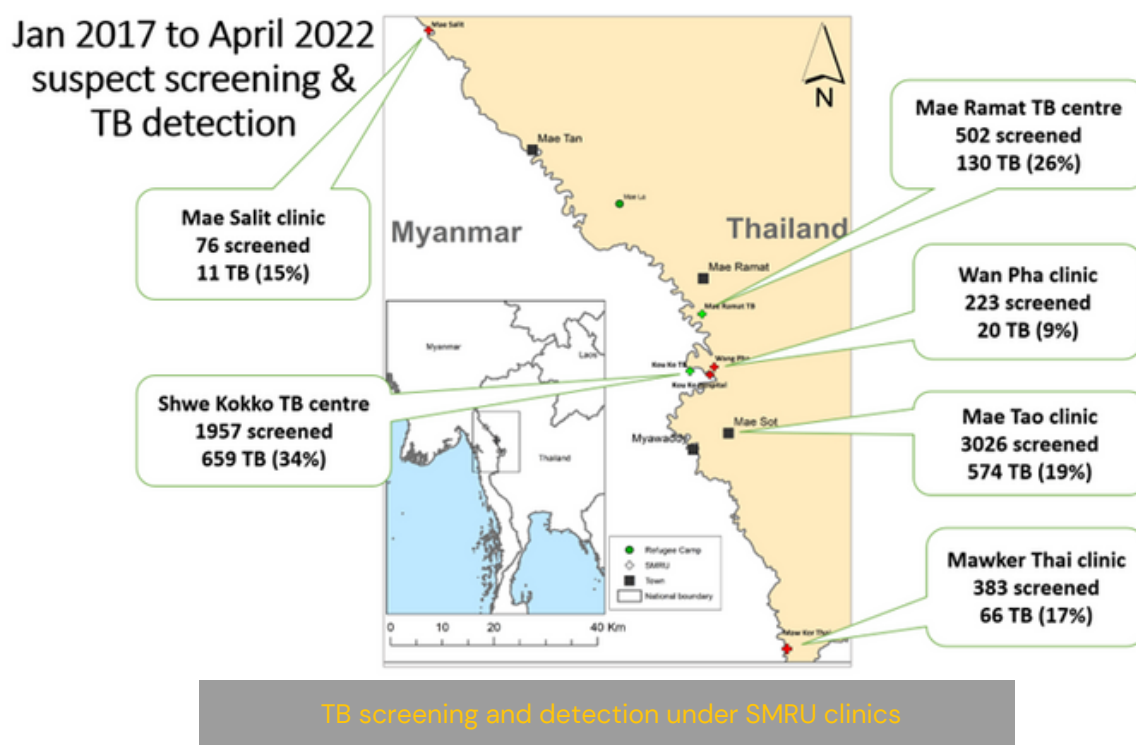


SMRU has been implementing key activities in malaria case management which include early diagnosis and treatment (EDT), training the village malaria posts, and targeted mass screening and treatment for PF/PV with G6PD testing. They actively engage with the communities for elimination support activities, and lastly LLINS/hammocks distribution as part of the vector control.



The malaria situation under SMRU operation has seen *P. vivax* incidence increased in 2021 following the Myanmar military coup from the 1st of February that year. Sixty percent increased of total malaria cases (mainly *P. vivax*) from 2021 to 2022 (data from only the first 3 months of 2022). COVID-19 cases have been declining since the beginning of April 2022. TB program reported of 12,829 presumptive TB cases were screened (84% sputum test), 2999 (23.4% of presumptive cases) were diagnosed as TB of which 53% were bacteriological confirmed TB cases. TB treatment achieved in 2593 cases (86.5%) of those who enrolled for the treatment program. The number of TB-HIV coinfection were found in 456 cases (17.6% co-infection rate) and Multi-drug Resistant TB (MDR-TB) was found in 152 cases (MDR TB 4.8% among diagnosed).





Outreach program contributes to 3475 participants screened and 43 TB detected (1.2%). The outreach activities were conducted from October 2020 to December 2021 in both Myanmar and Thailand.

### SMRU Clinic visit at Mawker Thai

The platform team travelled to Mawker Thai SMRU clinic on the Thai-Myanmar border. The team observed the malaria service and Mother and Child Health Program (MCH) activities and met with the clinic staffs. Comprehensive maternal and neonatal health care are given at the clinic free of charge to both the undocumented migrants (mostly) and Thai national.

SMRU implemented COVID-19 Awareness and Vaccination Information for Community Engagement and Campaign. They hold meeting and discussion with local key persons and stakeholders and conducted COVID-19 Awareness and Vaccination Information Workshop for Community Health Workers.





SMRU malaria service point at Mawker Thai clinic



## MAE TAO CLINIC

The team met Dr Cynthia Maung at the clinic. Situation and issues relating to ethnic health both side of the border were discussed. Commodities shortages and commodities transportation along the border area are the major challenges. Through regulated procurement channel, sometimes commodities cannot be provided adequately. Ethnic Health Organizations (EHO) and other agencies have been assisting in the Myanmar side of the border. The numbers of malaria case reported in Mae Tao Clinic are 50 cases in the first quarter of 2022 compared to zero in 2021.

Dr Cynthia Maung referred to the challenges in delivering cross-border aid and the issues on internally displaced people in ethnic areas, human rights issue, operational obstacles they face in delivering aid on the border.



Dr Cynthia Muang with CSO platform team



## KAREN DEPARTMENT OF HEALTH AND WELFARE (KDHW)

In the last day of the visit, the team went to Mae Sarit of Tha Song Yang district to meet with the head of KDHW and his team. The KDHW is running community hospital (The Kaw Thoo Lai Hospital) on the Myanmar side across the Moei river which divides Thailand and Myanmar. Most of the Migrant and ethnic population on the Myanmar side come to utilize services at the hospital. The hospital is newly established since mid-2021, providing services to around 40,000 Karen in the area (Myanmar side). It functions as the secondary healthcare settings with operation (Surgery), OPD, IDP, Laboratory, and Radiology services. During October to December is the peak season for OPD patients. The rainy season will see fewer patients coming to the hospital, partly due to the bad road condition making it difficult for people to come. Their malaria, MCH and TB services are conducted in partnership with SMRU. They noted that people in the refugee camps have also come to seek treatment in their hospital. This can be because of increased number of people coming to stay with their relatives in the camp.



The Kaw Thoo Lai Hospital on the Myanmar side across the river







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