Your Name

Instructor Name

Course Number

Date

Title: Global Health, Improve health outcomes

Malaria infection causes about 11.2% of all deaths and approximately 1 million new cases are diagnosed every year in rural India. Increased community engagements have emphasized on malaria global control and elimination. One of the challenges is to ensure that small children and pregnant women use bed nets and also seek early treatment when infected. It has been shown in previous studies that engagement of communities is critical in the diagnosis, prevention, and treatment of malaria and it also helps to change the belief, knowledge, and practices of communities. In recent decades, significant progress has been made in neonatal, maternal and child health. Between the years 1990 and 2015, the global rate of under-five years' mortality rate decreases to 42% in 2015 from 90.6% in 1990. Despite this progress, still under 5 mortality rate remains very high in low and middle-income countries. It is reported that more than half of the deaths under 5 years of age occur in 5 countries: Nigeria, Pakistan, India, China and the Demographic Republic of Congo. It is estimated that 5.8 million children under 5 years of age die each year globally.

 Malaria is defined as a parasitic infection that is caused by the female mosquito anopheles and it is responsible for approximately 661,000 deaths globally. Although high income has been able to eliminate malaria many low-income countries are still struggling to eliminate this disease. The factors that are associated with the existing burden of malaria in developing countries are emerging insecticide and drug resistance climate change, treatment costs, and massive demographic shifts. The leading cause of death under 5 years of children is diarrhea (11.1%); malaria (7%) pneumonia (18%) and intrapartum complication (9%). Most of these are preventable if the correct implementation plan is implemented. In this community-based intervention program, the main focus will be on the reduction of child mortality associated with malaria and to improve the quality of life of the members of the community. The main intervention to reduce the child malaria associated with malaria is the implementation of insecticides treated bed nets

**Intervention #1: Community workshops on Malaria**

The workshops that are led by trained health professionals will be implemented in 25 villages in Southern India. The main objective of this intervention will be to reach a considerable proportion of the population with malaria education and its prevention and control. The aim of this intervention will also be to increase the compliance of people with the nationally recommended control measures of malaria and to encourage the actions. This intervention will be done through monitoring, support, and training of health professionals. A manual will be developed in consultation with different stakeholders that will be translated into the local language. In each workshop session self-reporting on cases of malaria and group discussion will be conducted.

**Intervention # 2: Provision of insecticide-treated bed nets.**

This intervention will be implemented in 25 villages. The intervention will consist of targeted intervention for community mobilization in making appropriate improvements. The intervention will include the provision of insecticide-treated bed nets. Other interventions will include the provision of vitamin A, home management of fever, ITN distribution, and treatment of malnourished children.

**Intervention# 3: Management of Larval Source**

Larval source management will be implemented in all 25 villages. The intervention will consist of activities that aim to mobilize the community to implement larval source management. The main aim of implementing this intervention will be to remove the removal of standing water and larviciding.
**Conclusion**

This is a funded community-based intervention program to reduce the incidence of malaria in 25 villages of Sothern India. Planning will be done at the end of 2019 and will be implemented through 2020. This program will be based on the funding provided by the government. In the planning phase, local community groups and leaders will be allowed to participate. The major part of the total funding will be provided on people counseling, vaccination, and provision of insecticide-treated bed nets.