

Vector Management for Dengue Control in Cambodia

Impact of socio-ecological systems and resilience (SESR)-based strategies on dengue vector control in schools and neighbouring household communities

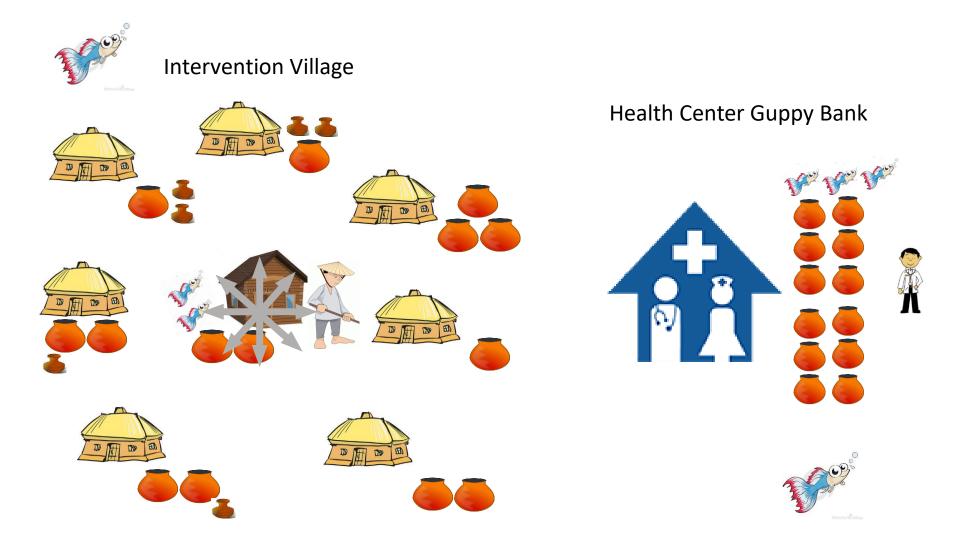
WHO/TDR program 2018 - 2020

Overview of MC work in dengue across Cambodia:

- Knowledge, attitudes, and practices (KAP) survey related to dengue prevention across 6 provinces
- 2. Insecticide resistance of dengue vector across Cambodia (with IPC)
- 3. Cluster randomised trial to evaluate field efficacy of **guppies** and community engagement on dengue vectors (Kampong Cham)



Method for guppy project 2015-2016 Distribution & Coverage



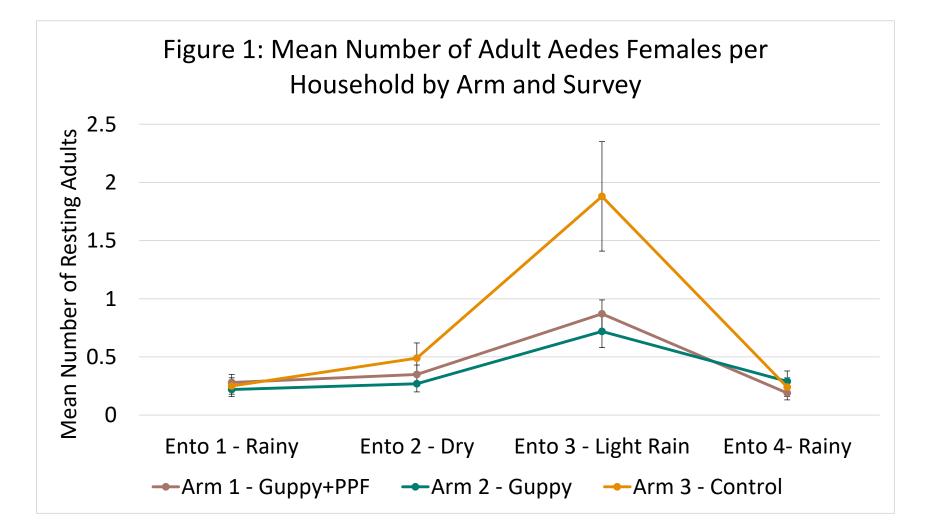
Communication for Behavioural Impact (COMBI) activities



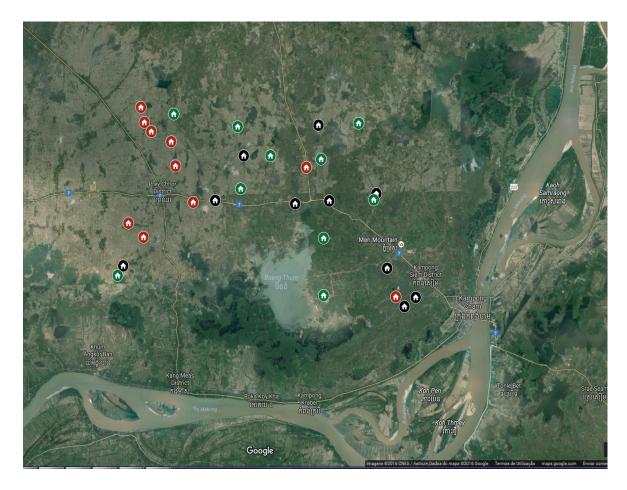
Using tuk tuks with messages



Entomological impact



New WHO/TDR supported project for dengue control in schools and communities 2018-2020



Kampong Cham was initially selected as it has one of the highest per-capita dengue burden in Cambodia, and is ecologically similar to other endemic areas

No overlap with ECOMORE project

Types of intervention for the study

| Intervention type | Intervention Component | Intervention short description |
|-----------------------------------|-------------------------------------|---|
| Biophysical | Vector control | Autocidal gravid ovitraps (AGO) – see Annex 1 |
| | Biological control | Guppy distribution – see Annex 11 |
| | Solid waste management | Larval source control through improved solid waste management |
| Empowerment/Adaptive- capacity | Education and training | Place-based educational campaign on dengue disease; vector biology; ecology, and control; role of solide waste, clean water & health relationships |
| | Communication & Behaviour Change | Communication for Behavioural Impact using multipronged communication channels including interpersonal communication through volunteers, folk or local media and mass media. |
| | Participatory mapping | Map co-creation as a tool for community ownership of dengue decentralized surveillance and management |

Arm 1: biophysical interventions only

Arm 2: biophysical and empowerment internventions

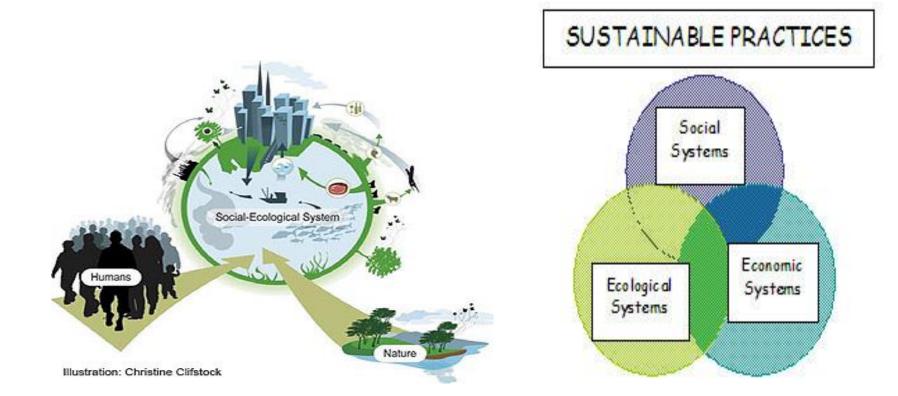
Arm 3: control – no intervention

Why an Socio-Ecological System and Resilience (SESR) approach for dengue control?

- Absence of effective therapeutics and vaccines; an <u>increasing need for novel</u> <u>vector control and management strategies</u> to respond to dengue,
- Changing conditions : emergence and persistence of these diseases (eg. population growth, land use change, climate change, insecticide-resistance)- <u>need</u> for an integrated response to prevention and control initiatives
- Needs understanding of local social-ecological systems
- Through a transdisciplinary research framework, an SES approach facilitates more comprehensive understanding of disease dynamics, focusing on <u>interactions</u> <u>between biophysical and social systems</u>

* See Spiegel et al. (2005). Barriers and Bridges to Prevention and Control of Dengue: The Need for a Social–Ecological Approach, and Arunachalam et al. (2012). Community-based control of *Aedes aegypti* by adoption of eco-health methods in Chennai City, India. **Socio-Ecological Systems (SES)**

(cross-diciplinary research)



Principles of an Ecosystem approach in health care

- 1) Principle 1: Systems Thinking
- 2) Principle 2: Transdisciplinary Research
- 3) Principle 3: Participation
- 4) Principle 4: Sustainability
- 5) Principle 5: Gender and Social Equity
- 6) Principle 6: Knowledge to Action

...and a focus on the 4 interacting sub-systems influencing health



How the TDR project complements the ECOMORE initiative

- Also targeting hotspot for transmission in schools, but <u>combining both the biophysical and</u> <u>sociological aspects of disease</u> transmission
- <u>Collaborating with relevant sectors for dengue control</u>, eg. district environmental health authority and local city councils to include strategies for solid waste management, including coordinated garbage collection and separation, recycling tins and plastic bottles
- Utilizes novel techniques such as **participatory epidemiology**, eg. co-creation of a map representing contextualised epidemiological dynamics at the landscape level using ento indices measurement, as well as incorporating community understanding and perception of these
- Incorporates strategy for <u>place-based education pedagogy</u>, that promotes learning in 'what is local', eg. hands-on learning for landscape ecology and localisation and mapping tools of actual and potential breeding sites for aedes mosquitoes, based on what options are available to participants (in addition to research tools) in their unique settings
- <u>Qualitative components</u> will include ethnographic methods such as FGDs, IDI's, participant observation, and participatory research techniques

Expected outcomes

- 1. Reduce exposure to dengue mosquito vectors in schools, homes and temples by:
- a) <u>Reducing mosquito entry</u> to school classrooms by vector and biological controls
- b) <u>Reducing dengue mosquito breeding</u> and transmission risk by vector and biological control
- c) <u>Improving school health education</u> on dengue prevention through more contextsensitive and community empowering health education and participatory epidemiology

2. Ecosystem approach developed with community:

- a) A system approach with the creation of a common vision across multiple disciplines (integration), i.e. experts from diverse disciplines such as sociology, medical entomology, ecology, anthropology, etc)
- b) Strengthening community participation comprising representation, involvement, partnership, empowerment and autonomy
- c) Implementing, a place-based education strategy that is intended to promote learning

Core study objectives

- 1. To **implement school-centred**, ecosystem-based innovative tools and **approaches** to address the challenge of dengue control
- 2. To undertake <u>appropriate, tailored training activities for research capacity</u> <u>building</u>, including strengthening the role of women in health outreach programs, technical assistance and advice, information exchange and dissemination, quality control, guidelines and SOPs, good laboratory practice, and monitoring and evaluation strategies
- 3. To <u>facilitate the uptake of new knowledge and research</u> results through translation of research for best practice and influence on policies

Partnership

- WHO/Tropical Disease Research program
- > MoH/CNM
- Ministry of Education
- Institute Tropical Medicine Antwerp
- Local communities and local authorities
- Schools teachers and parents
- Religious leaders

▶ ...

Thank you





disease control, better health

www.malariaconsortium.org