

# Malaria Final Assignment

Malaria kills one child every two minutes. According to the UN children's agency, UNICEF malaria claims the lives of more than 2,500 each day.

The WHO's latest update – December 2019: In 2018, an estimated 228 million cases of malaria occurred worldwide (95% confidence interval [CI]: 206–258 million), compared with 251 million cases in 2010 (95% CI: 231–278 million) and 231 million cases in 2017 (95% CI: 211–259 million). Most malaria cases in 2018 were in the World Health Organization (WHO) African Region (213 million or 93%), followed by the WHO South-East Asia Region with 3.4% of the cases and the WHO Eastern Mediterranean Region with 2.1%. From 2014 to 2018, the rate of change slowed dramatically, reducing to 57 in 2014 and remaining at similar levels through to 2018. Malaria disease caused by *P. falciparum* may result in death within hours or a few days of infection especially in those with a low immunity such as children, pregnant women, people with AIDS and travellers with little or no malaria protection. It can also result in the miscarriage of pregnant women, low birth-weight infants, developmental disabilities and other complications.

It is important to stop this outbreak because it doesn't help stimulate the economy and the economic growth. Affecting the economic growth affects the increase in the amount of physical capital good in the economy, reduces the expansion of the labor force, reduces technological enhancement and decreases in human capital. It is also important to prevent this outbreak to last any longer because low income countries are vulnerable and don't have enough money for the medicines nor enough well-educated doctors to treat the patients who have malaria whereas high income countries can be better prepared because of the technology improvement and have enough money to buy medicines.

There are ways to prevent malaria: such as using repellents, wearing protective clothing, Venus flytrap, UV lamps, using netting. It has become a leading cause in death worldwide. If a person is diagnosed early and treated it can be cured. But a lot of people live in areas where the disease is common and get infected repeatedly and never recover. There have been programs aimed towards prevention of malaria by killing mosquitoes that carry the disease. If a person goes to the doctor they can ask for a vaccine and a drug used for anti-malarial infections. Malaria is at a low rate in the U.S. but it is widespread around. If a person travels on an airplane where malaria patients have been they should be tested three to four times back to back.

However, malaria could be a challenging disease to stop because if we have to result to killing mosquitos and as a consequence to that is we would ruin the cycle of life and the food circle and we, humans, will die starving of hunger because if we killed the mosquitos the predators that feed on mosquitos would die therefore causing a chain reaction until it kills all living species.

In 2016 Zambia saw an increase in malaria, with outbreaks turning into emergencies in the districts of Ndola, Kazungula and Kabwe. Kazungula recorded over 9,000 cases, however the entire Mukuni Chiefdom had only 200, but only a handful in the areas where our new malaria prevention intervention was applied. Whereas Singwamba, in the Nyawa Chiefdom, recorded 3,245 cases and 12 deaths in children between the ages of 1 and 13 years.

The villages in the Chuunga Community used to have high cases of malaria, due to lack of prevention methods. In November 2015 The Butterfly Tree distributed an innovative malaria prevention initiative, using a safe insecticidal coating, in all the households. From the 1st January to 31st March no new cases of malaria have been reported. Over 1,000 households have been protected in the Mukuni and Sekute Chiefdoms.

In conclusion if I was in a high-income country, I would install germicidal UV lamps all around the outside of my house nonetheless on the inside as well to attract the mosquitoes to the light and then it would electrocute them. I would also have mosquito nets attached to my windows and doors if possible. I would keep some mosquito repellent around my house and keep a spare protection suit just in case the mosquitoes entered my house. However, if I was in a low-income country, I would always keep my windows shut at all times and have my fan if I was hot. I would rub anti-mosquito cream on myself every time before I go out to the shops or grocery stores. I would also keep Venus flytraps around my house so that they could eat the mosquitoes. On the other hand, Venus flytraps could not always be effective because it's based on a possibility in whether the mosquito sits on the Venus flytrap or not. Mosquito nets would do some kind of justice but somehow mosquitos will find a way in just like a spare protection suit somehow a mosquito will find its way in. The method I recommend and I think would be the most effective is the germicidal UV lamps because mosquitoes are "31.8%" attracted to blue light

Reference:

- [www.ukessays.com](http://www.ukessays.com)
- <https://www.medicalnewstoday.com/articles/150670#prevention>
- [https://entomologytoday.org/2017/08/09/building-a-better-light-trap-study-finds-specific-light-waves-attract-anopheline-mosquitoes/#:~:text=The%20green%20light%20was%20most,incandescent\)%20light%20at%2024.9%20percent.](https://entomologytoday.org/2017/08/09/building-a-better-light-trap-study-finds-specific-light-waves-attract-anopheline-mosquitoes/#:~:text=The%20green%20light%20was%20most,incandescent)%20light%20at%2024.9%20percent.)
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