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Central African Republic: Malaria

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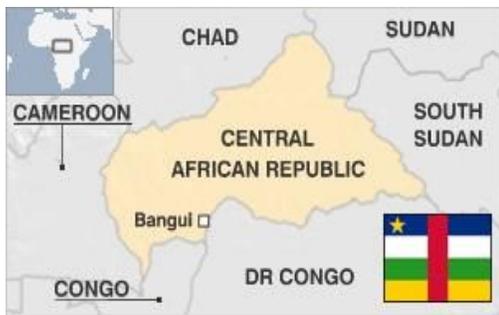
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Central African Republic

Location	<ul style="list-style-type: none"> Central Africa; bordered by Sudan, South Sudan, Chad, Democratic Republic of Congo, Republic of Congo, Cameroon
Population	<ul style="list-style-type: none"> 4.6 million people, 121st in the world and quadrupled since 1960
Languages	<ul style="list-style-type: none"> French, Sangho
Religion	<ul style="list-style-type: none"> Christianity, Islam, indigenous beliefs
Ethnicity	<ul style="list-style-type: none"> 80+ groups: Baya, Banda, Mandjia, Sara, M’Baka, Mboum, Yakoma, Fula
Political Structure	<ul style="list-style-type: none"> Republic, framework is semi-presidential republic President (elected by the people for 5 year term) is head of state, Prime Minister is head of government President appoints judges that make up supreme court National assembly nominates the prime minister and passes laws <p style="text-align: right;">(The World Factbook, 2017)</p>



Major challenges faced by nation(internal and external):

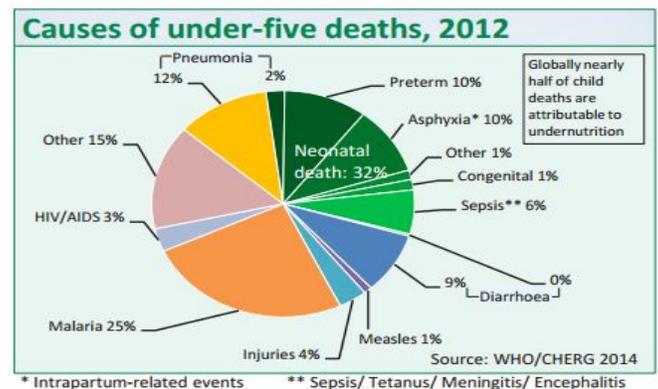
The CAR is one of poorest 10 countries in Africa and in the world, ranked 179 out of 187 on human development index which means a lower anticipated life expectancy and standard of living. They face a number of health and social issues.

Approximately 11% of the population between 15 and 49 is HIV positive, yet only 3% has access to antiretroviral therapy. Corruption & authoritarianism in a 2012-2013 rebellion led to

anarchy. By mid 2014, 1/3 of the population needed food, thousands were killed, tens of thousands of Muslims forced from homes in Christian majority country. The Country has been unstable since independence from France in 1960 (Ruckstuhl, Lengeler, Moyon, Garro, Allan, 2017). On top of these issues, malaria is a primary health concern and impacted over 212,000 in 2011(MSF, 2012).

Public health issue: Malaria endemic

The malaria endemic in this region is the primary public health problem. It is the leading cause of death, with higher risk seen in children under 5 (*Central African Republic*). There have been 1.5-2.5 million estimated annual deaths in sub saharan Africa (Reuters, 2014). Malaria is a vectorborne disease, meaning it is transmitted by an organism (mosquitoes), attacking red blood cells resulting in fever, chills, sweats, anemia (The World Factbook, 2017) . There is also damage to vital organs and interruption of blood flow to the brain. In

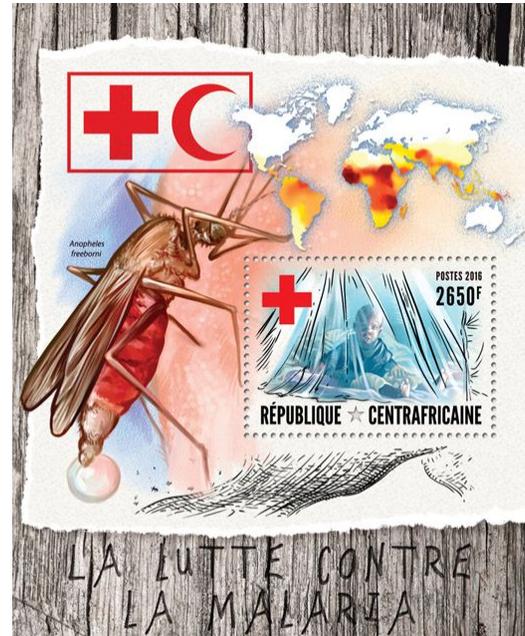


2015, 50-60% of inpatient cases seen were diagnosed as malaria and mortality was seen in anywhere from 30-50% of cases (*Central African Republic*).

Northern parts of the country suffered more, increases were seen in Kabo and Batangafo regions in 2012 (MSF, 2012). The CAR set up a program to provide free treatment to those under 5 years old. This was inefficient because there were medicine shortages. Unfortunately, free care is unrealistic. Violence in Kabo and Batangafo regions led to more severe outbreaks of the disease and as a result of the panic, people are afraid to leave their homes to seek treatment (MSF, 2012). Violent outbreaks led to villages being burned and people losing their belongings including protective netting, which only worsens the endemic (Tran, 2013).

What can be done?

- Increased use of insecticides could also impact the mosquito population and decrease the spread of disease.
- Mobile medical centers that can dispense medication and preventative supplies such as netting to those who are homebound or otherwise would be advantageous in mitigating the issue.
- By introducing a predator, such as bats, to the region, the mosquito population might be controlled, therefore mitigating the malaria issue.



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