

### 5. Mosquito repellents at home and on skin -

Mosquito coils, sprays, lotions, or ointments are chemical substances that can repel or kill mosquitoes.

### 6. Protective Clothing -

Wearing clothing that covers most of the body especially at night helps to protect against mosquito bites.

### 7. Prompt diagnosis and treatment of malaria -

At the onset of symptoms, individuals should visit a health facility to get tested for malaria. If positive for malaria, immediately take treatment to reduce the length of illness, prevent complications, and reduce transmission to other people.

## V. TREATMENT OF MALARIA DISEASE

In Botswana all suspected malaria cases should be tested with either a Rapid Diagnostic Test (RDT) or microscopy before treatment. All confirmed malaria cases should be treated with drugs recommended by Ministry of Health.



## ORDER FORM

To order simply complete the details below and post or fax to:

MALARIA FREE BOTSWANA STAMP ISSUE  
Poso House, Khama Crescent. P.O. Box 100, Gaborone Botswana,  
Tel: +267 3953131 Fax: +267 3911138, +267 3913955

PLEASE PRINT

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_

Please charge my (please tick appropriate box)

<input type="checkbox"/>		<input type="checkbox"/>	
CARD NO:	<input type="text"/>	<input type="text"/>	<input type="text"/>
EXPIRY DATE:	<input type="text"/>	<input type="text"/>	<input type="text"/>
CVC:	<input type="text"/>	<input type="text"/>	<input type="text"/>

Signature: \_\_\_\_\_

- P2.60 Spraying of Houses
- P5.50 Keeping surroundings clean
- P4.10 Using anti-malaria medicine
- P6.10 Sleeping under treated mosquito nets

OFFICIAL FIRST DAY COVER @P30.00 \_\_\_\_\_

COMPLETE SET @18.30 \_\_\_\_\_

POSTAGE & PACKAGING @4.10 \_\_\_\_\_

TOTAL \_\_\_\_\_

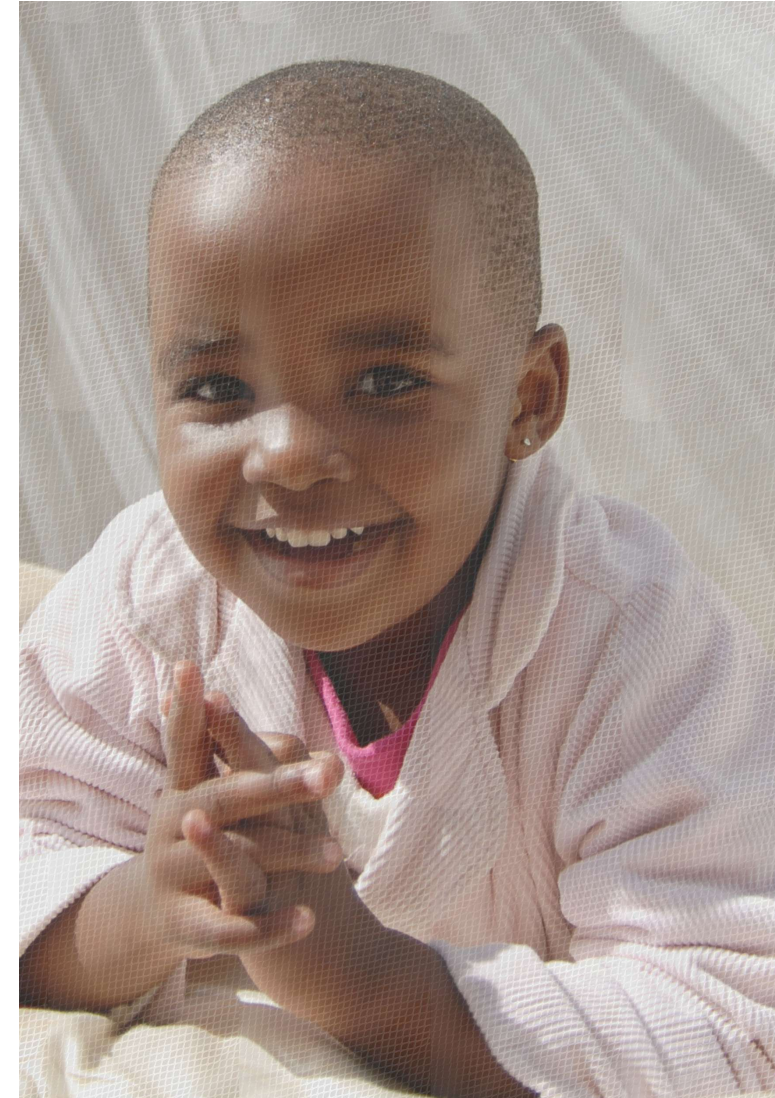
*If you are not fully satisfied with your purchase, kindly return it within 14 days and a full refund will be forwarded to you. - Manager, Philatelic Bureau*

**Designer:** Ministry of Health, Healthgraphics  
**Printer:** Joh Enschede Security Print  
**Printing:** Offset 4 process colours  
**Paper:** 110gsm, gummed with PVA gum  
**Stamp size:** 40mm by 30mm  
**Sheet Format:** 2 x 25 Stamps including a gutter  
**Denominations:** P2.60, P4.10, P5.50 and P6.10  
**FDC Size:** 220 x 110mm  
**Release Date:** 25 October 2011  
**Period of Sale:** 1 year

Botswana Postal Services trading as BotswanaPost,  
Poso House, Khama Cres. P.O. Box 100, Gaborone Botswana,  
Tel: +267 3953131 Facsimile: +267 3913599, Telex: 2297 BD



# Malaria Free Botswana



*We deliver, whatever wherever*

## I.WHAT IS MALARIA

Malaria is a parasitic disease caused by a protozoa Plasmodium and is spread by female Anopheles mosquito characterized mainly by fever and chills.

## II.EPIDEMIOLOGY OF MALARIA IN BOTSWANA

Malaria is a public health problem in Botswana and transmission occurs mainly during the rainy season between the months of November to May each year. Malaria transmission is most intense in the northern parts of the country which experiences higher rainfall levels than the rest of the country. This region is responsible for about 80% of malaria cases. Most of the malaria infection in Botswana (98%) is caused by P falciparum and the main vector is Anopheles arabiensis. The country is currently classified into three transmission zones which are;

**Zone A:** Malaria endemic area which has substantial local transmission and has high risk of epidemics which is the situation in the Okavango district.

**Zone B:** Malaria focal transmission area that has local transmission and has high risk of outbreaks, which includes districts in the north central zone. These are Ngami, Chobe, Tutume, Boteti and Bobirwa where there is occasional transmission which becomes more generalized in years of good rainfall.

**Zone C:** Malaria transmission free area. This consists of districts other than those in Zone A and B. Malaria transmission in this part of the country is rare but sporadic malaria outbreaks may occur in years of heavy rainfall particularly in the more northern parts of this zone.

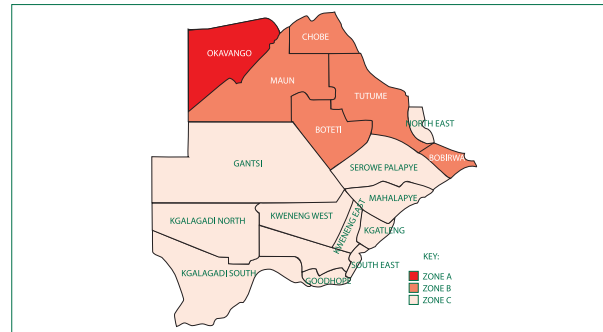


Fig 1: Map showing malaria epidemiology in Botswana

## III.CURRENT SITUATION OF MALARIA IN BOTSWANA

Significant strides have been made in achieving the Roll Back Malaria Targets and Millennium Development Goal 6. The burden of reported malaria cases declined from 71, 555 to 12, 196 cases in 2010, and the deaths from 35 to 8 over the same period. Effectively the incidence of malaria declined from 42.6 per 1000 population in 2000 to 6.7 per 1000 in 2010, a 76.2% decline.

### National Malaria Programme

Malaria Control in Botswana started in the 1950s, back then the main focus was Vector Control using Indoor Residual Spraying in North West, Chobe, Boteti, Nata/Gweta area. A comprehensive National Malaria Control Programme was launched in 1974 which was later decentralised to the District Health Teams and integrated with other Primary Health Care services in 1989.

To date the National Malaria programme is being coordinated from the national level and implementation of malaria prevention and control activities is carried out at the district and health facility level. The Goal is to achieve zero local malaria transmission in Botswana by 2015.

## IV.MALARIA PREVENTION

There are several measures individuals and communities can take to prevent or reduce malaria transmission:



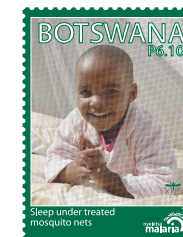
**1.Indoor residual house spraying -** Indoor spraying with a long lasting insecticide kills the adult mosquitoes that comes in contact with sprayed surfaces and prevents them from entering and/or resting in the household.



**3.Malaria Preventive Pills -** Individuals travelling to a malaria endemic area should take malaria chemoprophylaxis to prevent infection. Pregnant women living in malaria areas should also take malaria chemoprophylaxis throughout pregnancy until six (6) weeks following delivery.



**4.Environmental Management-** Maintaining clean surroundings by disposing of empty tins, old tyres and all other objects likely to collect water can help reduce mosquito breeding.



**2.Long Lasting Insecticide - Treated Nets (LLINs) -** Sleeping under LLINs every night reduces human - mosquito contact. The insecticide in the LLINs kills mosquitoes that come in contact with the net as well as repels some.