## 23 December 2016

## **Area-based Combined Efforts for Mosquito Control**

The 9<sup>th</sup> National Health Assembly,

Having considered the report on "Area-based Combined Efforts for Mosquito Control",

*Noting and realizing* that mosquitoes are vectors of dengue hemorrhage fever (DHF), dengue shock syndrome (DSS), dengue fever (DF), Chikungunya fever, and Zika virus disease, causing a large number of sicknesses and deaths around the world and that dengue hemorrhage fever, in particular, has been one of the most serious health problems for Thailand, causing enormous economic and social impacts, and that at present there is no vaccination against the disease;

*Realizing* that more outbreaks of mosquito-borne diseases are likely to occur and the world is facing a serious situation of more emerging diseases and that Thailand is beginning to see more of Zika virus disease that causes microcephaly in infants, another mosquito-borne disease just like the dengue hemorrhage fever, and that unless serious and timely action is taken it will pose great danger to health and the country's economy;

*Noting* that mosquito-borne diseases can be prevented and controlled, that people can take personal action against mosquito bites, and that mosquito control can be done by eliminating larva-breeding areas and mosquitoes;

*Commending* the will and determination of the public sector and academic/professional sector for their long, drawn-out and strong efforts for dengue control in various forms, including strategic planning, action-oriented policy formulation, generation of knowledge and innovation, research and development, community empowerment, public communication, and law enforcement;

*Seeing* that although the agencies/networks, public sector, academic sector, private sector, and civil society have over the years worked together to control mosquitoes and much effort has been spent on policy formulation, strategic planning and implementation in a participatory manner, in reality the people and civil society have not participated in the event adequately and seriously enough;

*Realizing* that while there is still inadequate participation from all sectors in a comprehensive and continuous manner, especially, from the people sector, in their efforts for mosquito control with an "act immediately, everywhere, and by everyone" approach, the mosquito-borne diseases continue to cause illnesses to many and that the occurrence of more emerging diseases like Zika virus disease also has a serious impact on the country's tourism and economy;

*Realizing* the mosquito goes through a life cycle of egg, larva, pupa and adult, that there are already in place guidelines and methods to control and eliminate larvae and mosquitoes in their life cycle, but in practice the work is not yet done in a comprehensive and sustainable manner because the problems are caused by human behaviors related to environmental care and control of larvae and mosquitoes in and around the house and community, and that the approach to the problem must be

<sup>&</sup>lt;sup>1</sup> Document HA 9/Main 4

continuous and sustainable and requires participation and responsibility of each and every one;

*Concerned* that the situation of dengue hemorrhage fever and Zika virus disease may cause serious damages to health and economy if there is no combined effort from every sector to control larvae/mosquitoes in a participatory and sustainable manner, especially from the people sector, throughout the country;

*Seeing* that the control of mosquito-borne communicable diseases requires efforts at national, provincial, organizational, network, community, social, family and individual levels as well as the enforcement of existing laws and processes, including environmental care, health charters, local health funds, and district health system, and that the health assembly process is an important tool to synergize the efforts of the networks at every level for the purpose;

## Hereby passes the following resolutions:

1. Requesting health assembly networks and health organizations in the people sector, with the support of agencies concerned, to work together to develop local measures for mosquito control in an integrated, comprehensive and sustainable manner, to promote a sense of discipline in the public for their own safety and the safety of their family, to use local resources and wisdom, to attach importance to the participation and responsibility of every sector, and to publicize the information to people of all levels ranging from individual to community;

2. Requesting the people oriented health region for the public to set mosquito control as one of the target priorities, linking provincial/Bangkok mechanisms for mosquito control to the health zones for the public in the locality, including monitoring, evaluating, and reporting the work progress to the sectors concerned;

3. Requesting provincial health offices and BMA's Department of Health, together with centers of vector-borne diseases or offices of disease prevention and control and other agencies concerned, such as provincial natural resources and environment offices, education institutes in the locality, and public health agencies at every level in the province, to do the following:

3.1 To provide information on the technical aspects and process of mosquito control in a participatory manner, e.g. on environmental management and vector-borne communicable diseases, to local government organizations of all levels, provincial administration offices, other local offices in the province, health partner networks of the people sector, and other agencies or organizations concerned,

3.2 To coordinate cooperation between provincial administration offices and local offices in the province to ensure a clear plan of action/activities at every level,

3.3 To promote and develop the teaching and learning or training on mosquito control in the locality;

4. Requesting the Department of Local Administration to provide budgetary support in the implementation of mosquito control;

5. Requesting members of provincial health assembly networks to work together with partner networks in every sector, including the people sector as follows:

5.1 To consider taking joint action through the area based health assemblyprocess to bring about a public policy at the provincial level on "area-based combined efforts for mosquito control",

5.2 To take action to eliminate mosquito-breeding areas in and around the house as well as in public areas in a concrete, serious and continuous manner, e.g. promoting and supporting the natural process and local wisdom and forming networks of mosquito larva-free villages,

5.3 To support local government organizations in the preparation of local regulations (e.g. local law or municipal laws) leading to mosquito control measures and serious implementation by the community in such matters as elimination of mosquito breeding areas and elimination of garbage in every area in a systematic, comprehensive and sustainable manner,

5.4 To participate in the district health system in the coordination, follow-up and evaluation and to support the implementation in every area at every level in a serious and concrete manner, for example, in the preparation of Tambon health charters and district mechanisms for disease control in an active and sustainable manner,

5.5 To support the incorporation of mosquito control measures by the community in the local health charter;

6. Requesting the Ministry of Public Health by way of the Department of Disease Control, to act as lead agency and coordinate with the Ministry of Interior, Ministry of Education, Ministry of Social Development and Human Security, Ministry of Tourism and Sports, Ministry of Natural Resources and Environment, Ministry of Culture, Ministry of Industry, Ministry of Defense, Ministry of Labor, Bangkok Metropolitan Administration, National Municipal League of Thailand, Bureau of National Buddhism, other religious organizations, and Village Health Volunteer Club of Thailand, and other agencies in the public sector, private sector and civil society,

6.1 To prepare action plans and guidelines on integrated area-based mosquito control in every sector within one year,

6.2 To coordinate and support the mosquito control in the area under jurisdiction in a concrete manner through an exchange of work experience, followup, evaluation and periodical progress reporting at least twice a year and disseminate to the public;

7. Requesting the Department of Local Administration, Ministry of Interior, and the Ministry of Public Health to support local government organizations in the issuance of local or municipal laws and, under the Public Health Act B.E. 2535 (1992) and the Communicable Diseases Act B.E. 2558 (2015), in the control of mosquito breeding areas in the areas under jurisdiction, e.g. construction sites, waste lands, rubbish dumping areas, construction worker campsites, temporary shelters, and rented houses, to encourage serious enforcement;

8. Requesting the Health Systems Research Institute to coordinate with other agencies concerned and to support the research and development of the "areabased combined efforts for mosquito control" and disseminate research findings to the public and agencies concerned;

9. Requesting the Ministry of Public Health, the National Health Security Office, the Thai Health Promotion Foundation, the National Health Commission, and Bangkok Metropolitan Administration by way of Department of Health to promote, support and publicize the area-based combined efforts for mosquito control, using the available mechanisms and human resources and attaching importance to the participation of every sector;

10. Requesting the Secretary-General of the National Health Commission to report the progress to the 10<sup>th</sup> National Health Assembly.