

Worker Health

Two Project contractor workers died this quarter from malaria. Sadly, an investigation into the circumstances of these two deaths determined that the two men had not been taking their required anti-malaria medication (technically referred to as malaria chemoprophylaxis) This is in contrast to their attested commitment to take chemoprophylaxis.

New Malaria Prevention Initiative

In response to the results of the investigation into the two malaria deaths, planning started this quarter for the launch of a new malaria prevention initiative. The new program is aimed at ensuring the proper use of effective anti-malaria medication by non-immune Project workers.

It is important to note that only non-immune Project workers need to take anti-malaria medication. Workers who were born in and have grown up in the Project area are semi-immune to the malaria parasite and taking the medication could actually damage their natural protection against the disease. The semi-immune workers, who should not take anti-malaria medication, are individuals from Sub-Saharan African countries excluding South Africa.

The new Malaria Chemoprophylaxis Compliance Program (MCCP) augments the Project's ongoing Malaria Control Program. It provides greater protection to non-immune workers by making sure they properly take effective anti-malaria medication.

- Non-immune workers are required as a matter of policy to take an approved anti-malaria medicine.
- A comprehensive briefing program emphasizes the risks to non-immune workers who fail to take the approved medications. The education program also helps workers understand the relative risks of malaria infection versus some potential side effects of the protective medication.

- The Project will conduct random, unannounced, periodic testing of individual non-immune workers to check that they are taking the required malaria prevention medicine.
- Medical evaluation and counseling are required for those workers with test results indicating non-compliance with the requirements. This medical follow up focuses on addressing potential individual medical issues associated with the requirement for taking one of the effective anti-malaria medications. The medical evaluation process may determine that a worker is not able to safely work in the Project area, even with the worker’s full cooperation and efforts to establish and maintain measurable levels of medication in his or her body. Reassignment may therefore be the best course of action for the well-being of the individual.

Ongoing Malaria Prevention

The Quarterly Report for the first quarter of 2002 provided a comprehensive overview of the Project’s Malaria Control Program. The program includes comprehensive education and prevention measures for Esso employees and Project contractor workers. The fundamental tenets of the malaria control program include the ABCD approach: **A**wareness, **B**ite prevention, **C**hemoprophylaxis, and early **D**agnosis and treatment.



Frequent bulletins and posters help raise malaria prevention awareness of Project workers, in this case by emphasizing the potential fatal consequences to non-immune individuals of failing to take their required malaria prevention

medication.



In addition to the universal, standard training provided to all workers joining the Project, refresher briefings like this one emphasize the ABCD basics of fighting malaria.



Health advisors and disease vector control specialists work at reducing the malaria infection risk by various measures, such as the spraying of insecticide in construction camps to help reduce the malaria mosquito population.

Trucker
HIV/AIDS
Campaign



The Project has contracted with CAMNAFAW, a Cameroonian NGO, to provide an HIV/AIDS awareness and education program for truckers hauling construction material and equipment. Since the truckers are transient, the NGO has taken the program to them, setting up kiosks at two main shipping points, the P2 and Ngaoundal storage yards. As they pass through, the truckers can drop in to receive condoms and get information about how to avoid infection.

Worker Health
Tabulation

Project clinics provided nearly 19,000 worker visit consultations during the second quarter of 2002, about 40% of them in Chad and 60% in Cameroon.

◀ Second Quarter 2002 Project Worker Health Data

	Malaria	STDs	SSS* Events (excluding Malaria & STDs)	Hospitalizations	Medevacs
Chad	4	130	103	5	10
Cameroon	33	249	133	31	4
Project Total	37	379	236	36	14

*SSS: Early warning system used to identify changes in disease rates. Some examples of diseases covered by the SSS include gastrointestinal, dermal and respiratory diseases.