

Worker Health

Project clinics provided 23,410 worker medical consultations during the fourth quarter of 2002, about half of them in Chad and half in Cameroon. A major focus of the Project's worker health program continues to be malaria control.



A new larger Project worker clinic has been opened to serve the construction workforce at the central oilfield facility. The clinic will provide medical care until the Project's permanent clinic is constructed at the main residents' camp.



At the facilities contractor's camp at Komé Base, a new restaurant was commissioned in the fourth quarter. Thanks to the opening of this new dining hall, kitchen and dining space has been doubled, new food preparation areas have been created, and several improvements to enhance food safety have been implemented.



The Project launched a campaign this quarter to improve the first aid capabilities in its field workforce. Individuals who have received "first responder" training have green crosses on their helmets, making it easy for their fellow workers to identify them if they need help.



Employees and their families from the main COTCO office in Douala attended a December educational event on the prevention of sexually transmitted diseases and HIV/AIDS. The event included a presentation, a question and answer session, and the distribution of literature designed for all family members.

Annual Summary: Worker Health

◀ 2002 Aggregate Worker Health Data

	<i>Number of Diagnoses</i>				<i>Cumulative Total 2002</i>
	<i>1Q2002</i>	<i>2Q2002</i>	<i>3Q2002</i>	<i>4Q2002</i>	
Chad					
STDs	100	106	82	124	412
SSS* Events (excluding Malaria & STDs)	103	52	26	6	187
Hospitalizations	0	5	3	3	11
Medevacs	1	10	3	3	17
Cameroon					
STDs	401	309	272	317	1,299
SSS* Events (excluding Malaria & STDs)	133	180	100	119	532
Hospitalizations	29	31	40	26	126
Medevacs	2	5	5	7	19

**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.*

**Tracking Malaria
in Worker
Populations**

As part of its comprehensive Malaria Control Program, the Project carefully tracks malaria cases among its workers. The tracking system divides the worker population into two categories - non-immune and semi-immune.

Semi-immune workers are those individuals who were born in and have grown up in the Project area. Over their lifetime, they have been repeatedly exposed to the malaria parasite and have developed a degree of immunity to the disease. Taking anti-malaria medication could damage this natural protection. Therefore, for semi-immune workers, the objective of the Malaria Control Program is to limit the seriousness of their malaria cases, Tracking of malaria in the semi-immune workforce therefore focuses on those cases requiring hospitalization.

Non-immune workers are those individuals who come from outside Sub-Saharan Africa (excluding South Africa). These individuals can gain benefit from taking effective anti-malaria medication and they are required to do so under the Project’s Malaria Control Program. Therefore, for non-immune workers, the objective is the outright prevention of malaria cases. Thus, the Project tracks all cases of malaria in the non-immune worker population.

Malaria case statistics tend to rise and fall depending on the season. The malaria parasite is spread by mosquitoes, and the annual rainy season produces countless pools of water, which are the ideal breeding habitat for mosquitoes. As a result, the mosquito population explodes during the rainy season, thereby triggering a significant increase in an individual’s risk of being bitten by a parasite-carrying mosquito. The rainy season months vary in the Project area but generally center on the third quarter of the year.

◀ Non-Immune Population (all cases)

	1Q2002	2Q2002	3Q2002	4Q2002
Chad	0	4	45	31
Cameroon	15	30	68	41
Project Total	15	34	113	72
% of Total Non-Immune Workforce	0.4%	0.8%	2%	0.7%

◀ **Semi-Immune Population (serious cases)**

	1Q2002	2Q2002	3Q2002	4Q2002
Chad	0	0	0	0
Cameroon	28	22	26	38
Project Total	28	22	26	38
% of Total Semi-Immune Workforce	0.1%	0.1%	0.1%	0.1%

In addition to these data tables and the events described above for the fourth quarter, the following key developments took place in the first three quarters of 2002.

First Quarter 2002

- A series of action plans were prepared and implemented by the Project’s prime contractors to address the findings of an independent health and sanitation assessment. The plans addressed such areas as catering, camp sanitation, and the medical preparation of expatriates before their arrival in Africa.

Second Quarter 2002

- An investigation determined that two Project contractor workers who died from malaria had not been taking their anti-malaria medication. In response to this tragedy, the Project developed an enhancement to its Malaria Control Program, aimed at ensuring the proper use of effective anti-malaria medication by non-immune workers.
- An STD/HIV/AIDS education and prevention campaign targeted at Project truck drivers was launched at the main storage yards located in Douala and at the rail head in Ngaoundal.

Third Quarter 2002

- The Project’s Malaria Chemoprophylaxis Compliance Program for non-immune workers went into effect. The program features intensive re-education and counseling, backed up by random testing for compliance with the Project’s requirement for taking effective anti-malaria medication.



This group of newly arrived workers is receiving the mandatory malaria briefing. The briefing includes information on the particularly dangerous form of malaria found in the Project area (*Falciparum* malaria), and the Project's policies regarding the use of effective anti-malaria medication by non-immune individuals. The briefing also stresses the prevention of mosquito bites as a first line of defense against malaria.



Major scientific advances were announced in October that promise hope for better control of malaria. The discoveries have particular significance for the Project because a vector control specialist stationed at Komé, Dr. Madama Bouaré, is a co-author of one of the studies. The article *Genetic Loci Affecting Resistance to Human Malaria Parasites in a West African Mosquito Vector* was published in the journal *Science*. Both *Science* and *Nature* published special issues in October focusing on research into the mapping of the genetic makeup of the malaria parasite and the mosquito that spreads it. This genetic knowledge could lead scientists to discover new ways to combat the disease. Findings from other malaria research programs partially funded by ExxonMobil were also published in the two special issues.