Multisectoral Approach to Addressing Poor Health Status of School-age Children in Indigenous People Communities in Selected Provinces in the Philippines

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Problem addressed by the initiative: Soil-transmitted helminthiasis (STH) or worm infections is the most common and widespread of the neglected tropical diseases worldwide. School-age children (SAC), one of the at-risk groups for STH, harbor the highest worm burden. Heavy intensity infections cause detrimental effects on their nutritional status, physical growth, and cognitive development.1 Indigenous peoples (IPs), comprising approximately 13% of the Philippine population2, are more vulnerable to STH3 as they settle in geographically isolated and disadvantaged areas. However, data on the health status of these groups are very limited.

How the initiative was implemented: An innovative, integrated and multisectoral approach involving parasitologic4,5 and nutritional4 assessments in IP SAC was implemented to generate data that provided evidence for enhancement of policy and improved service delivery.

Achieved or intended outcomes: The study provided data on the parasitologic and nutritional status of IP SAC in selected sites. The project also provided a model for the use of existing platforms for collaboration, such as the existing public-private partnerships in one area and the Regional Inter-Agency Committee for IPs' Health in Davao del Norte, in developing approaches aimed at improving intestinal helminthiasis control and achieving desired health outcomes in these marginalized groups.

Lessons Learned: Results revealed high prevalence and intensity of STH in IP SAC4,5, with significantly higher (p<0.05) burden in IP SAC than in non-IP SAC in Davao del Norte.4 Undernutrition was also seen in IP SAC in these communities.4 Limited access to health services such as mass drug administration, water, sanitation, and hygiene (WASH), quality health education, as well as current knowledge, attitudes, and practices pertaining to worm infections and WASH further contribute to the persistence of STH in IP communities. A multisectoral approach proved useful in improving surveillance and service delivery in these groups. An integrated surveillance for parasitologic and nutritional status revealed the need to address the coexistence of parasitism and poor nutrition. This can be done through utilization of existing platforms to contribute to attaining control program targets and desired health outcomes especially in marginalized groups like IPs.

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