STopping a KIllER:

PREVENTING MALARIA IN OUR COMMUNITIES

A Guide to Help Faith Leaders Educate Congregations and Communities About Malaria

Christian
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Do you not know?
Have you not heard?
The Lord is the everlasting God,
the Creator of the ends of the earth.
He will not grow tired or weary,
and his understanding no one can fathom.

He gives strength to the weary
and increases the power of the weak.

Even youths grow tired and weary,
and young men stumble and fall;
but those who hope in the Lord
will renew their strength.
They will soar on wings like eagles;
they will run and not grow weary,
they will walk and not be faint.

Isaiah 40:28-31
# ACRONYMS & DEFINITIONS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
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<tbody>
<tr>
<td>ACT</td>
<td>Artemisinin Combined Therapy</td>
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<tr>
<td>DALY</td>
<td>Disability Adjusted Life Year</td>
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<tr>
<td>IPT</td>
<td>Intermittent Preventive Treatment</td>
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<tr>
<td>IRS</td>
<td>Indoor Residual Spraying</td>
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<tr>
<td>ITN</td>
<td>Insecticide-Treated Net</td>
</tr>
<tr>
<td>LLIN</td>
<td>Long-Lasting Insecticide-Treated Net</td>
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<tr>
<td>NMCP</td>
<td>National Malaria Control Program</td>
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<tr>
<td>RBM</td>
<td>Roll Back Malaria</td>
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<tr>
<td>RDT</td>
<td>Rapid Diagnostic Test</td>
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<tr>
<td>SP</td>
<td>Sulfadoxine Pyrimethamine</td>
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<tr>
<td>WHA</td>
<td>World Health Assembly</td>
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<td>World Health Organization</td>
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MALARIA: PROBLEM, PROGRESS, POSSIBILITY

PROBLEM

Malaria is Destructive, but Malaria is Preventable

Malaria is a killer that preys on many of God’s children. More than one million people across the globe die each year from malaria and it is the number one killer of children under five years of age in sub-Saharan Africa. The good news is that we have the resources to stop this destructive disease.

Malaria is a preventable disease that can be managed if we take steps that have proven to cure the disease and control its spread. We know malaria is spread by mosquitoes and we know how to control, treat, and combat this killer. The sample sermons in this guide will help you share this knowledge with your congregation and community to help save lives. The introductions to each sermon will give you more information and help you better understand the disease.

Malaria’s Human Toll

Each year, 247 million people are stricken with malaria across the globe, and over 1 million die from this disease annually. Africa is hit especially hard by malaria. Two hundred and twelve (212) million malaria cases and 91% of global deaths from malaria occur in Africa each year. Children are among the most vulnerable, as 85% of malaria deaths each year are among children under five years of age.¹

Pregnant women are also particularly vulnerable to malaria as pregnancy reduces a woman’s immunity to the disease, making her more susceptible to malaria infection and increasing the risk of illness, severe anemia, and death. Malaria in the mother increases the risk of miscarriage, stillbirth, and premature delivery and low birth weight for the baby, a leading cause of child mortality.²

Malaria’s Economic Burden

Malaria affects more than just the people who are stricken with the disease and their families. It also has a heavy economic toll. Malaria-related illnesses and mortality cost Africa’s economy $12 billion USD each year. Approximately 40% of public health spending in sub-Saharan Africa is spent on malaria and an estimated 20 to 50% of healthcare facility admissions and up to 50% of outpatient visits are related to malaria.³ In addition to these direct costs, malaria has many associated indirect costs for developing countries. For instance, malaria accounts for 3-8% of all-cause absenteeism from school, and up to 50% of preventable absenteeism.⁴ Malaria is also responsible for an incalculable amount of hours, days, years lost during the life of an individual. The World Bank uses a unit of measurement for this called Disability Adjusted Life Years, or DALYs, which is “The sum of years of potential life lost due to premature mortality and the years of productive life lost due to disability.”⁵ According to this measurement, malaria is responsible for an annual loss of 42,279,000⁶ DALYs, or lost years of productive, healthy living. Just imagine what could be accomplished if this loss was reduced or diminished altogether. Nations could regain lost productivity and harness the positive energies and talents of the people that have been lost to this destructive disease.

MALARIA IS A KILLER … BUT WE HAVE THE POWER TO STOP IT
Where Does Malaria Strike the Hardest?

Although malaria has been virtually eradicated in many countries, approximately 3.3 billion people - half the world's population - live in areas where malaria is a constant threat, and those living in lower-income countries are particularly at risk. The five countries with the most cases of malaria are Nigeria, the Democratic Republic of the Congo, Ethiopia, Tanzania, and Kenya.

What Can We Do?

According to the **World Malaria Report 2009**, malaria is present in 108 countries, with 98% percent of the deaths from malaria occurring in only 35 countries—30 countries in sub-Saharan Africa and five (5) in Asia. This tells us that there are steps we must take in these nations to greatly reduce the number of deaths.

In 1998, global partners founded the Roll Back Malaria Partnership (RBM) to do just this—to take action to combat malaria by accelerating malaria control efforts towards meeting specific targets. In April 2000, African Heads of State, as part of...
the African Summit on Roll Back Malaria, made commitments to an intensive effort to cut malaria mortality in Africa by 50% by 2010. Then in 2005, the World Health Assembly determined to “ensure a reduction in the burden of malaria of at least 50% by 2010 and by 75% by 2015.” It is important to note that this resolution is interpreted to mean a reduction in malaria morbidity (illness from malaria) as well as mortality (deaths from malaria). In an effort to meet these goals, many organizations and governments are engaged in scaled-up prevention & treatment campaigns which have led to success in certain regions, due to improved disease surveillance and use of effective intervention methods.

Appropriate malaria control interventions include:

• use of long-lasting insecticide-treated nets (LLINs) while sleeping,
• use of intermittent preventive treatment (IPT) among pregnant women,
• indoor residual spraying (IRS) of insecticide in households,
• use of rapid diagnostic tests (RDT) to test for malaria
• use of Artemisinin Combined Therapy (ACT) for treatment of malaria.

The World Malaria Report 2009 highlights progress made in meeting these World Health Assembly (WHA) targets for malaria, reporting that in the past year, “more than one-third of the 108 malarious countries (9 African countries and 29 outside of Africa) documented reductions of malaria cases of > 50% in 2008 compared to 2000.” This proves that there are specific things we can and must do to successfully reduce the malaria burden, globally and in our communities.

**Examples of Success**

In settings where there are high levels of use of the effective interventions listed above, dramatic reductions in the numbers of childhood deaths from malaria have been reported. Examples of nations that have had success in reducing the burden of malaria include Eritrea, Rwanda, and the island nation of Sao Tome and Principe. These nations reduced the number of cases and deaths from malaria by 50% or more between the years 2000 and 2008 by increasing malaria control activities. On the island of Zanzibar, malaria cases have dropped from 60% to almost zero in just a few years; similarly, malaria cases have fallen by around 60% and 40% in certain districts in Uganda and Tanzania, respectively. In Rwanda, malaria cases declined 64% and child deaths from malaria dropped 66%. These lower malaria incidence rates are attributed to a few targeted interventions, including: increased use of LLINs while sleeping (31% increase in high-burden countries by the end of 2008), increased use of IPT by pregnant women, and increased availability and use of RDTs and ACTs for testing and treatment of malaria.

In Sao Tome and Principe and Zanzibar, reductions in the number of malaria cases and deaths were found within two to three years of aggressive malaria control, including widespread use of IRS, LLINs and ACTs. Specifically, a significant 30% increase over the past six to seven years in the number of children under five years sleeping under an LLIN is attributed as the reasons for the dramatic decrease in the malaria incidence rate in Sao Tome and Principe. Looking at Rwanda as an
example, there is evidence that the combination of long-lasting insecticide-treated nets (LLINs) and drug therapy (ACT) to treat the disease was responsible for a substantial reduction of cases in that country.\textsuperscript{19} Evidence from Sao Tome and Principe, Zanzibar and Zambia reveals that large decreases in malaria cases and deaths have been mirrored by steep declines in overall deaths among children less than five (5) years of age.

Although malaria-related illness (morbidity) and death (mortality) has improved in recent years, as the figure below shows, much more progress remains to be made.

**What Should We Do?**

The successes reported by the World Health Organization (WHO) in the *World Malaria Report 2009* demonstrate that increased funding for malaria “has resulted in steady increases in the coverage with malaria control interventions, especially insecticide-treated mosquito nets. It also shows that where these interventions have been fully scaled up, the malaria burden falls dramatically.”

As Margaret Chan, Director-General of WHO, said: “We can save millions of lives over the coming years by scaling up the malaria control tools that we already have available.”\textsuperscript{21} If we use the same proven strategies as those used by the countries

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**Figure 2: Trends in Malaria Morbidity and Mortality\textsuperscript{20}**

![Graph showing trends in malaria morbidity and mortality]

**Reported Malaria Cases per 1,000**

<table>
<thead>
<tr>
<th>Year</th>
<th>Reported malaria cases, all ages</th>
<th>Reported malaria cases, &lt; 5 years</th>
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**Reported Malaria Deaths per 1,000**

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</tr>
<tr>
<td>2007</td>
<td>9,812</td>
<td>5,452</td>
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</tbody>
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**Legend**

- ••• Reported malaria cases/1,000, all ages
- ••• Reported malaria cases/1,000, < 5
described above, we too can beat malaria where we live. We know what to do to fight malaria; now we must motivate our communities to take the actions that will save lives, protect our societies and avoid catastrophic burdens on our economies.

**Possibility**  
*How Faith Leaders Can Help*

As a faith leader, you have great influence among your congregation and in your community. You also have the great privilege and responsibility to protect the most vulnerable of God’s children. Jesus tells us with the Parable of the Lost Sheep that each life is precious. Like the shepherd who searches high and low for that one lost sheep, God holds each of His children as dear — each one’s life is precious to Him.

Like the good shepherd, you too can play a role in protecting your congregation. You can help families protect their health by giving them information to make the right choices. Information is a powerful weapon in the fight against malaria. Knowing how to protect against mosquito bites that transmit malaria, how to recognize the symptoms of malaria, and how to treat the disease can make the difference between life and death. Use the sample sermons in this guide to share this powerful information with your congregation and read the introductions to each sermon to help you better understand the disease.

**Six Messages to Fight Malaria and Save Lives**

Malaria is a dangerous disease for many people, and it is caused by infected mosquitoes. We should take all possible precautions to prevent and control malaria. We can do this by practicing important healthy behaviors.

Health experts have developed six (6) critical strategies to prevent malaria and to control its spread. Each of the six (6) sample sermons in this guide corresponds to one of these key messages.

1. All people in a household should sleep under a long-lasting insecticide-treated net, especially pregnant women and children under five years, since they are the most vulnerable to malaria.

2. Pregnant women must take two doses of anti-malarial medicine as prescribed by a healthcare provider.

3. Be receptive to local initiatives to spray the inside or outside of homes, as this also prevents malaria.

4. It is important to recognize the symptoms of malaria and to seek treatment as soon as possible at a health facility.

5. Follow treatment guidelines as directed by health facility staff and complete the full course of treatment to ensure malaria is cured and does not become resistant to medication.

6. Keep a clean environment, so mosquitoes cannot breed — Clear standing water and clean up trash around your property.

The following chapters will provide more information about these messages, including how these strategies protect against malaria and what can happen if the recommendations are not followed. Use the sample sermon accompanying each chapter as a model for how you can use Biblical principles to teach these life-saving messages about malaria control to your congregations and communities.

“We CAN SAVE MILLIONS OF LIVES OVER THE COMING YEARS BY SCALING UP THE MALARIA CONTROL TOOLS THAT WE ALREADY HAVE AVAILABLE.”

— Margaret Chan, Director-General, WHO
Introduction

As Christians, we know that the Bible says the body is the temple of the Holy Spirit. Since God’s Spirit lives in us, we should honor God with our bodies. As the Apostle Paul wrote, “Do you not know that your body is a temple of the Holy Spirit, who is in you, who you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.” (I Cor. 6:19-20). Therefore, we must take all the necessary precautions to protect our health and to honor God by caring for our bodies, especially by preventing diseases like malaria. Malaria is a dangerous disease for many people, and it is caused by infected mosquitoes. We should take all possible precautions to prevent and control malaria.

In order to help families protect their health, health experts have identified six critical strategies to prevent malaria and to control its spread. In places where malaria is a danger, it is a threat to all people, of all ages, even if it is particularly dangerous for small children, pregnant women, and elderly people. As a religious leader, it is important to use your influence to inform and educate your entire community about how to protect against mosquito bites that transmit malaria, how to recognize the symptoms of malaria, and how to treat the disease. Use the sample sermons in this guide to share this life-saving information with your congregation during worship services and teaching times. Read the introductions to each sermon to help you better understand the background to this disease and the suggested interventions. Each of the six sample sermons in this guide correspond with one of the following key messages …
1. Everyone who lives in an area where malaria is present should sleep under a long-lasting insecticide-treated net, but this is absolutely necessary for pregnant women and children under five years of age. Young children and pregnant women are especially vulnerable to malaria. Eighty-five percent (85%) of malaria deaths each year are among children under five years of age. For this reason, it is recommended that all people in a household should sleep under a long-lasting insecticide-treated net, especially pregnant women and children under five years, since they are the most vulnerable to malaria.

2. Malaria is especially dangerous for pregnant women and the babies they carry. It increases the risk of miscarriage, stillbirth, premature delivery, and low birth weight for the baby—a leading cause of child mortality. Malaria in the mother can also result in parasites in the placenta. The placenta is needed to deliver food to the baby and parasites hinder the child from receiving proper nutrition. The undernourished newborn suffers from low birth weight, making it more vulnerable to death and developmental problems. To help prevent any of these types of complications, pregnant women must take two doses of anti-malarial medicine as prescribed by a healthcare provider.

3. To reduce or eliminate mosquitoes in the home, the WHO recommends spraying the inside or outside walls of a home with a long-lasting insecticide, known as indoor residual spraying, or IRS. The most effective insecticide to kill mosquitoes and fight the spread of malaria is DDT. Governments are implementing indoor residual spraying programs in many locations and residents should participate in the program, if available. You should encourage your community to be receptive to local initiatives to spray homes, as this also prevents malaria.

4. It is important to recognize the symptoms of malaria and to seek treatment as soon as possible at a health facility. Educating your community about recognizing the symptoms of this killer disease and seeking prompt treatment will save lives. Malaria can strike anyone at any time. Symptoms of malaria include: fever, shaking chills, headache, muscle aches, and fatigue. The infected person may also experience nausea, vomiting and diarrhea. Malaria can cause anemia and jaundice (yellow coloring in the eyes) due to the loss of red blood cells. A simple blood test done at the local healthcare facility can tell if a person is infected with malaria, and then doctors can prescribe the proper medicine.

5. Over the years, malaria has become resistant to medications that were highly effective in treating the disease in the past. ‘Resistant’ means the malaria parasites are not eliminated by the medicines and the drug can no longer cure the disease. When a drug is not powerful enough to kill all the malaria parasites infecting a person, it can allow the stronger ones to survive. These stronger malaria parasites can multiply, and the resulting infection will be resistant to the medication. A disease can become resistant to a medicine if patients do not take the drugs exactly as they are instructed by a healthcare provider. Therefore, it is very important to inform your community to follow treatment guidelines as directed by health facility staff and to complete the full course of treatment to ensure malaria is cured, and does not become resistant to medication.

6. Diseases like malaria can spread rapidly in unclean environments. You should encourage your community to reduce the spread of disease by motivating people to keep their homes and the areas around their homes clean and free of trash. Controlling the mosquito population is crucial in reducing the spread of malaria, and mosquitoes, which can carry and spread malaria, breed in stagnant pools of water. Mosquito larvae live in water while they develop into adults. Therefore, a very effective way to reduce the spread of malaria is to keep a clean environment, so mosquitoes cannot breed—especially by clearing standing water and cleaning up trash around your property.

The sermons you will deliver in the following weeks will provide your congregations with more information about these interventions, including how these recommended actions will protect them against malaria and the biblical basis for putting them into practice.

“Do you not know that your body is a temple of the Holy Spirit, who is in you, who you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.”

(I Cor. 6:19-20)
Suggested Introductory Sermon: “Guard the Temple”

Scripture

“Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.”

(1 Corinthians 6:19-20)

“Therefore, I urge you, brothers, in view of God’s mercy, to offer your bodies as living sacrifices, holy and pleasing to God—this is your spiritual act of worship” (Romans 12:1)

Sermon

The Bible says the body is the temple of the Holy Spirit. Since God’s spirit lives in us, we should honor God with our bodies. As the apostle Paul wrote to the Corinthians, “Do you not know that your body is a temple of the Holy Spirit, who is in you, whom you have received from God? You are not your own; you were bought with a price. Therefore honor God with your body.” (1 Corinthians 6:19-20) We must take all the necessary precautions to protect our health and to honor God by caring for our bodies, especially by preventing dangerous diseases like malaria.

Paul also urges us, “in view of God’s mercy, to offer your bodies as living sacrifices, holy and pleasing to God—this is your spiritual act of worship.” (Romans 12:1) It is worshipful to God to care for our bodies, so that we may be healthy, pleasing living sacrifices to him. Therefore caring for and guarding our bodies – the temples of God’s Spirit here on earth – is a responsibility we cannot ignore. Preventing malaria is one critical way we can and must “guard the temple,” but it is important to know what a powerful but preventable threat malaria is in order to understand why this is so.
Malaria is a deadly disease which kills more than one million people across the world each year, and it sickens 212 million people each year in Africa alone. However, it does not have to be this way; we have proven methods to avoid mosquito bites, and instructions about what to do if we think we have malaria.

In places where malaria is a danger (like sub-Saharan Africa, Southeast Asia, and parts of South America), it is a threat to all people, of all ages. Even though it is particularly dangerous for small children, pregnant women, and elderly people, malaria is a danger to many people, and it is caused by something as small as bites from infected mosquitoes. Thus everyone must take all possible precautions to prevent and control this deadly disease, in order to eliminate it from our communities forever. Scientists, medical professionals, and government officials are working to fight this disease and to stay ahead of it as it changes. Following the recommendations of these experts will help our congregation fight this killer. Therefore, during the following weeks, we will learn together about some of these specific interventions we can use to prevent malaria and to control its spread in our community.

These actions include:

1. Sleeping under a long-lasting insecticide-treated net, especially pregnant women and children under five years, since they are the most vulnerable to malaria.
2. Pregnant women taking two doses of anti-malarial medicine as prescribed by a healthcare provider.
3. Being receptive to local initiatives to spray the inside or outside of homes, as this also prevents malaria.
4. Recognizing the symptoms of malaria and seeking treatment as soon as possible at a health facility.
5. Following treatment guidelines as directed by health facility staff and completing the full course of treatment to ensure malaria is cured and does not become resistant to medication.
6. Keeping a clean environment, so mosquitoes cannot breed—by clearing standing water and cleaning up trash around your property.

The sermons you will hear in the following weeks will provide more information about these interventions, including how these strategies protect against malaria and what can happen if the recommendations are not followed. Together, let us commit to honoring God by guarding our bodies from malaria, so that we may be living sacrifices, holy and pleasing to God!
Sermon 1: Protect One Another

Introduction

Malaria is spread through the bites of mosquitoes. Although there are other types of mosquitoes that bite during the day, the type of mosquito that carries malaria is most likely to bite late at night. Avoiding mosquito bites during the night can drastically reduce the cases of malaria. A net that has been treated with an insecticide to kill or repel mosquitoes will protect against these night-time bites and malaria.

Everyone who lives in an area where malaria is present should sleep under a long-lasting insecticide-treated net, but it is absolutely necessary for pregnant women and children under five years of age. Young children and pregnant women are especially vulnerable to malaria. Eighty-five percent (85%) of malaria deaths each year are among children under five years of age.24

Dangers to Pregnant Women and Their Babies

Pregnant women and their unborn babies are also particularly vulnerable to malaria as pregnancy reduces a woman’s immunity to the disease. She is more susceptible to malaria infection and has an increased risk of illness, severe anemia and death. The mother may die during her pregnancy from the malaria itself, or from the anemia that results from the malaria.25 Anemia is a condition where red blood cells cannot carry the oxygen the body needs and causes the mother to be more vulnerable to excessive bleeding after childbirth.

Malaria in the mother increases the risk of miscarriage, stillbirth, and premature delivery and low birth weight for the baby, a leading cause of child mortality.26 In areas where the number of malaria cases is very high and people have developed some immunity to the disease, a mother with malaria may not display symptoms, but the disease can still be very harmful to her and her developing baby. In addition to anemia, malaria in the mother can also result in parasites in the placenta. The placenta is needed to deliver food to the baby and parasites hinder the child from receiving proper nutrition, which results in low birth weight and is a leading cause of poorer infant survival and development.27

Insecticide-Treated Nets Work

The evidence is clear. Nets treated with an insecticide protect against malaria. A study showed that the use of long-lasting insecticide-treated nets reduced the cases of malaria by 62% compared with using no net and 43% compared with using a net that is not treated with an insecticide.28 Thus use of long-lasting insecticide-treated nets is a proven method of reducing night-time mosquito bites and the number of malaria cases they cause.

Message:
All people in a household should sleep under a long-lasting insecticide-treated net, especially pregnant women and children under five years of age, since they are the most vulnerable to malaria.
Suggested Sermon 1: “Protect One Another”

Scripture

“‘Teacher, which is the greatest commandment in the Law?’ Jesus replied: ‘Love the Lord your God with all your heart and with all your soul and with all your mind.’ This is the first and greatest commandment. And the second is like it: ‘Love your neighbor as yourself.’ All the Law and the Prophets hang on these two commandments.’” (Matthew 22:36-40)

“Let no debt remain outstanding, except the continuing debt to love one another, for he who loves his fellowman has fulfilled the law. The commandments, ‘Do not commit adultery,’ ‘Do not murder,’ ‘Do not steal,’ ‘Do not covet,’ and whatever other commandment there may be, are summed up in this one rule: ‘Love your neighbor as yourself.’ Love does no harm to its neighbor. Therefore love is the fulfillment of the law.” (Romans 13:8-10)

“This is my command: Love each other as I have loved you.” (John 15:12)

“What good is it, my brothers, if a man claims to have faith but has no deeds? Can such faith save him? Suppose a brother or sister is without clothes and daily food. If one of you says to him, ‘Go, I wish you well; keep warm and well fed,’ but does nothing about his physical needs, what good is it? In the same way, faith by itself, if it is not accompanied by action, is dead” (James 2:14-17)

“Religion that God our Father accepts as pure and faultless is this: to look after orphans and widows in their distress and to keep oneself from being polluted by the world.” (James 1:27)

“I am the good shepherd. The good shepherd lays down his life for the sheep. The hired hand is not the shepherd who owns the sheep. So when he sees the wolf coming, he abandons the sheep and runs away. Then the wolf attacks the flock and scatters it.” (John 10:11-12)

“Defend the cause of the weak and fatherless; maintain the rights of the poor and oppressed. Rescue the weak and needy; deliver them from the hand of the wicked.” (Psalm 82:3-4)

Sermon

In the Bible we are commanded to love one another. One time when a lawyer tried to test Jesus by asking him which was the greatest commandment in the law, “Jesus replied: ‘Love the Lord your God with all your heart and with all your soul and with all your mind.’ This is the first and greatest commandment. And the second is like it: ‘Love your neighbor as yourself.’ All the Law and the Prophets hang on these two commandments.’” (Matthew 22:36-40).

In his letter to the Romans, Paul instructed them to: “Let no debt remain outstanding, except the continuing debt to love one another, for he who loves his fellowman has fulfilled the law. The
commandments, ‘Do not commit adultery,’ ‘Do not murder,’ ‘Do not steal,’ ‘Do not covet,’ and whatever other commandment there may be, are summed up in this one rule: ‘Love your neighbor as yourself.’ Love does no harm to its neighbor. Therefore love is the fulfillment of the law.” (Romans 13:8-10) Thus we learn that by loving one another, we are fulfilling the law, since this commandment sums up all commandments. We also learn that we are to love our neighbors—those living near to us—just as much as we love and care for ourselves.

In John 15:12, Jesus is recorded as saying: “This is my command: Love each other as I have loved you.” So not only must we love one another, we must use Jesus’ love as our model; and when we consider how Jesus loved people, it was through actions. He did not only tell people he loved them—He showed them by healing them, by talking with them, by spending time with them, and by giving them life-giving instructions about how to live vibrant lives, both on earth and in Heaven.

Therefore, our love also must manifest itself in action, just as faith is best demonstrated through action. James, one of the Disciples of Christ, asked a group of believers: “What good is it, my brothers, if a man claims to have faith but has no deeds? Can such faith save him? Suppose a brother or sister is without clothes and daily food. If one of you says to him, “Go, I wish you well; keep warm and well fed,” but does nothing about his physical needs, what good is it? In the same way, faith by itself, if it is not accompanied by action, is dead.” (James 2:14-17)

When it comes to issues of health, our love and our faith must be evident to our neighbors through our actions to protect not only ourselves, but one another. God calls us to protect the vulnerable, both in our own families and beyond. In the book of James, we learn that “Religion that God our Father accepts as pure and faultless is this: to look after orphans and widows in their distress and to keep oneself from being polluted by the world.” (James 1:27) As healthy adults, we have the ability to make decisions for ourselves and to act on them. If we decide we need something for our protection, we can seek it out. But a young child or a baby developing in its mother’s womb cannot, and this is especially true of orphans or those who have no one to look after them. Therefore it is up to us as protectors of the vulnerable to provide for them.

Protecting the vulnerable in our families and communities from malaria is a responsibility we cannot ignore. Malaria is a killer among us, taking more than one million lives across the globe each year. Children are especially vulnerable: Out of all those who die from malaria each year, 85% of the deaths are among children under five years of age.
A pregnant woman and her unborn baby are also highly vulnerable to malaria. Pregnancy makes the mother more susceptible to malaria infection and she has an increased risk of illness and death. But it does not have to be this way. We have a proven method of protecting against malaria and the mosquitoes that carry the disease. We have evidence that sleeping under a special net treated with an insecticide can protect against malaria. The mosquitoes that carry malaria are more likely to bite late at night. Therefore if we can protect ourselves and our families from mosquitoes at night, we can greatly reduce our chances of contracting malaria. That is why **all people in a household should sleep under a long-lasting insecticide-treated net, especially pregnant women and children under five years of age, since they are the most vulnerable to malaria.**

Our instincts tell us to protect our children from dangers we can see. What would you do if you were walking with your child up a mountain and your child ran to look over the edge of a cliff? Would you let the child lean dangerously over the edge without concern? No, you would stay with the child, closely watch him and even pull him back if he was leaning too far. Just because you cannot see the disease of malaria and may not even see mosquitoes as you and your family go to sleep, the danger is there. Mosquitoes can easily seek out and find your family and infect them with the disease. We should not leave our children unprotected any more than we would let them lean dangerously over a cliff.

Jesus does not leave his flock unprotected. He tells us in the Book of John, “I am the good shepherd. The good shepherd lays down his life for the sheep. The hired hand is not the shepherd who owns the sheep. So when he sees the wolf coming, he abandons the sheep and runs away. Then the wolf attacks the flock and scatters it.” (John 10:11-12) Jesus does not leave the sheep unprotected as the wolf appears. Nor should we leave our families unprotected from mosquitoes and the disease they carry.

We should make sure our own families are protected, but we should also do what we can to protect the young and needy among us who may not have families and resources for protection. In scripture, the psalmist tells us to defend the poor and very young: “Defend the cause of the weak and fatherless; maintain the rights of the poor and oppressed. Rescue the weak and needy; deliver them from the hand of the wicked.” (Psalm 82:3-4) Who can be more vulnerable than a small child? Our communities must work together to make sure that all God’s children are protected with insecticide-treated nets, and that they know how to use them properly.

We know malaria comes from the bites of mosquitoes. We know the type of mosquito that carries malaria is more likely to bite late at night. Sleeping under a net that has been treated with an insecticide is a proven way to avoid those mosquito bites and the disease they bring. We are called to be like the shepherd and to protect our own. We are also called to love our neighbors as ourselves, and to defend the poor, the fatherless, and the needy. Therefore we must all do what we can to protect one another from malaria with the proven strategy of using long-lasting insecticide-treated nets.
Introduction

Malaria is especially dangerous for pregnant women and the babies they carry. In Africa alone, around 25 million pregnant women each year are at risk of malaria infection during their pregnancy. Pregnancy reduces a woman’s immunity to the disease, making her more susceptible to malaria infection and increasing the risk of illness, severe anemia and death. The mother may die during her pregnancy from the malaria itself, or from the anemia that results from the malaria. Anemia is a condition where red blood cells cannot carry the oxygen the body needs and causes the mother to be more vulnerable to excessive bleeding after childbirth.

Malaria in the mother also harms the baby. It increases the risk of miscarriage, stillbirth, and premature delivery and low birth weight for the baby – leading causes of child mortality. Malaria in the mother can also result in parasites in the placenta. The placenta is needed to deliver food to the baby and parasites hinder the child from receiving proper nutrition. The undernourished newborn suffers from low birth weight, making it more vulnerable to death and developmental problems.

Intermittent Preventive Treatment (IPT):
Protection for the Mother and Baby

Fortunately we have proven methods of reducing a mother’s chance of contracting malaria during pregnancy. The World Health Organization (WHO) recommends a combination of interventions: use of insecticide treated nets (ITNs), and Intermittent Preventive Treatment (IPT). Currently, the most effective drug for IPT is sulfadoxine-pyrimethamine (SP), and all pregnant women should receive at least 2 doses of IPT with SP during regularly scheduled antenatal visits, after the mother feels the first movements of the baby. The WHO recommends a schedule of four total antenatal clinic visits, and pregnant women should receive 2-3 doses of IPT during antenatal visits in the second and third trimesters of pregnancy. This IPT has been shown to effectively reduce a mother’s chances of contracting malaria, so all pregnant women should be encouraged to seek it.

NEW LIFE IS PRECIOUS.
IT IS ONE OF GOD’S GREATEST GIFTS.
**Suggested Sermon 2: “Prepare for God’s Gift”**

**Scripture**

“Sons are a heritage from the Lord, children a reward from him.” (Psalm 127:3)

“Before I formed you in the womb I knew you, before you were born I set you apart; I appointed you as a prophet to the nations.” (Jeremiah 1:5)

“Husbands, love your wives, just as Christ loved the church and gave himself up for her.” (Ephesians 5:25)

**Sermon**

New life is precious. It is one of God’s greatest gifts. Scripture tells us, “Sons are a heritage from the Lord, children a reward from him.” (Psalm 127:3) We must not accept this gift lightly and fail to prepare for the birth of the child or to protect his or her health. God expects special planning for a baby long before the child is born. He expects that we are planning great things for our children just as He plans for His children. As God said to the Prophet Jeremiah, “Before I formed you in the womb I knew you, before you were born I set you apart; I appointed you as a prophet to the nations.” (Jeremiah 1:5) God expected great things of Jeremiah and was prepared for him to be born and become a great priest and prophet, as he did. Likewise, parents should prepare for their own child and his or her health.

There are many things we should do when we prepare for a new baby. The most important step is to protect the health of the mother and child while the baby is still developing in the womb. One of the biggest dangers to the baby is malaria in the mother. The mother must also be protected, since she is more vulnerable to malaria during pregnancy. She can catch the disease easily during her pregnancy, harming her and her growing baby. Dangers of malaria in pregnancy include death for the mother, miscarriage, premature delivery, or an undernourished baby. Therefore, mothers need the wisdom of trained healthcare providers. **Pregnant women must take two doses of anti-malarial medicine as prescribed by a healthcare provider.** God provided us with people who are motivated to learn to become healers and gave us tools to make medicines from the earth. We should seek out and use these gifts.

Fortunately, we have a medicine called intermittent preventive treatment (IPT), which a woman can take during pregnancy to protect her and her baby from malaria. All pregnant women should take 2-3 doses of IPT during pregnancy, after she feels the first movements of the baby, as part of regular visits to the antenatal clinic during the second and third trimesters. Studies have shown that taking this medicine will protect a woman and her baby from the dangers of malaria.

Men, you should make sure the mother of your child receives antenatal care, and visits a healthcare provider several times during her pregnancy. As devout believers, you are expected to love your wife as selflessly as Christ loved the Church. In Ephesians, God commands, “Husbands, love your wives, just as Christ loved the church and gave himself up for her.” (Ephesians 5:25) This means you are to love her by protecting her health, and helping her live healthily, including through pregnancy. And mothers, you should make sure you visit a healthcare provider and receive anti-malarial medication as soon as you become pregnant.

We must seek out the wisdom of trained healthcare providers. Pregnancy is one of the most important times to do this. We have an important task to protect the mother and the baby from the devastation of miscarriage. Fortunately, we have medicine, created with God-given wisdom, to protect against malaria during pregnancy. A mother-to-be must visit a healthcare provider for her IPT as soon as she realizes she is pregnant. Remember, a child is one of the most precious gifts God will give us. We must take care of this gift from the very beginning and protect the child from disease.

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**Preventing Malaria in Our Communities**

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**The most important step is to protect the health of the mother and child while the baby is still developing in the womb.**
Sermon 3: Defeat the Enemy

Introduction

Malaria is spread by mosquitoes that bite late at night, a time when most people are in their homes. Therefore, reducing the numbers of mosquitoes in the home will help protect families and control the spread of the disease.

To reduce or eliminate mosquitoes in the home, the World Health Organization recommends spraying the inside or outside walls of a home with a long-lasting insecticide, known as indoor residual spraying, or IRS. The most effective insecticide to kill mosquitoes and fight the spread of malaria is DDT. Many governments are implementing IRS programs in their countries. Therefore, be receptive to initiatives to spray the inside or outside of homes, if your government’s Ministry of Health sends representatives to do so.

Indoor residual spraying has been shown to reduce the number of mosquitoes in the home, control the spread of malaria, and save lives.

Message:
Be receptive to local initiatives to spray the inside or outside of homes, as this also prevents malaria.

Faced with a threat as dangerous as the giant Goliath
Preventing Malaria in Our Communities

Suggested Sermon 3: “Defeat the Enemy”

Scripture

“When he took his staff in his hand, chose five smooth stones from the stream, put them in the pouch of his shepherd’s bag and, with his sling in his hand, approached the Philistine” (1 Samuel 17:40)

“But David said to Saul, “Your servant has been keeping his father’s sheep. When a lion or a bear came and carried off a sheep from the flock, I went after it struck it and rescued the sheep from its mouth. When it turned on me, I seized it by its hair, struck it and killed it.” (1 Samuel 17:34-35)

Sermon

When David was preparing to fight Goliath, it did not seem likely to the Israelites or the Philistines that he would win. It may have seemed hopeless to the Israelites that this young shepherd boy could conquer a giant like Goliath. Goliath was very strong and had been fighting for a long time. King Saul tried to discourage David from battling the giant, telling him that he was just “a youth while Goliath had been a man of war from his youth.”

Yet, as we know from scripture, the young shepherd boy did fight Goliath, and won, slaying the powerful giant with a stone shot from his sling. David prepared for this battle by gathering five stones and gripping his trusted sling. “Then he took his staff in his hand, chose five smooth stones from the stream, put them in the pouch of his shepherd’s bag and, with his sling in his hand, approached the Philistine” (1 Samuel 17:40) David was skilled in using his sling as a weapon. He used it to fend off lions and bears when he was protecting his father’s sheep. It had been proven to him as a trusted weapon. When faced with a threat as dangerous as the giant Goliath, we too must use what weapons we have and know will work to protect ourselves.

In our area, the disease of malaria can be like a giant. It is the number one killer of children under five years of age in much of Africa. Malaria in a pregnant woman increases the risk of miscarriage, stillbirth, and delivering a premature and undernourished baby. Malaria is dangerous to everyone and can kill otherwise healthy adults.

We may feel powerless against malaria. We may think it is just part of life and there is nothing we can do. This is not true. We have weapons that have been proven to fight malaria just like David had his well-trusted sling and stones. We must use these weapons to protect ourselves and our families against malaria.

Malaria is spread by the bites of mosquitoes. The type of mosquito that carries malaria usually bites late at night, when we are in our homes. Reducing or eliminating the number of mosquitoes in our home is a powerful defense against malaria. Fortunately, we have an insecticide that can be sprayed on the inside or outside of homes to kill mosquitoes, which will remain on the walls for a long time. If your Ministry of Health sends teams of people to spray homes with this long-lasting insecticide, it is important to participate in this program and to agree to have your home sprayed. Be receptive to these local initiatives to spray the inside or outside of your homes, as this also prevents malaria. If your home is sprayed, be sure you do not wash the walls, so the insecticide will remain on them.

Although malaria is very dangerous, we are not powerless; rather, we have proven weapons against this disease. Sleeping under an insecticide-treated net is one well-known weapon that can protect us from malaria. These nets protect us from mosquito bites during the late hours of the night, when they are most active. Spraying the inside or outside of our homes is another powerful weapon in our arsenal against malaria. We must use all the proven methods we have to fight this killer.

Malaria is dangerous to everyone and can kill otherwise healthy adults.
The sheep David protected may have seemed defenseless against the lions and bears that tried to attack them; but they were not. The sheep had David and his powerful weapon to protect them. When he was trying to persuade Saul to let him fight Goliath, David said, "But David said to Saul, "Your servant has been keeping his father’s sheep. When a lion or a bear came and carried off a sheep from the flock, I went after it, struck it and rescued the sheep from its mouth. When it turned on me, I seized it by its hair, struck it and killed it." (1 Samuel 17:34-35)

David took his responsibility to protect the sheep very seriously and became skilled at fighting the lions and bears that came to harm them. We are no different. We must take our responsibility to protect ourselves and our families from malaria very seriously and use the weapons we have against this disease. We must do what we can to remove mosquitoes from our homes. Participating in available programs that spray the walls of our homes with a safe, long-lasting insecticide will reduce the number of mosquitoes in our homes, thus reducing our chances of getting malaria. Let us use all the weapons we have to fight this killer.

WE ARE NOT POWERLESS
**Sermon 4: Seek and You Will Find**

**Introduction**

Malaria can strike anyone at any time, and it can be fatal. Therefore, it is critical to be able to recognize the symptoms of malaria and to seek medical treatment as soon as possible. Symptoms of malaria include fever, shaking chills, headache, muscle aches, and fatigue. The infected person may also experience nausea, vomiting and diarrhea. Malaria can cause anemia and jaundice (yellow coloring in the eyes) due to the loss of red blood cells. A simple blood test done at the local healthcare facility can tell if a person is infected with malaria.

A person with these symptoms should be taken to a healthcare facility for testing and medical treatment as soon as possible. If the infected person does not receive prompt treatment, malaria can be fatal. Malaria is especially dangerous for young children and pregnant women. They should be watched closely for signs of malaria and treated immediately. Recognizing the symptoms of this killer disease and seeking prompt treatment will save lives.

**Message:**

It is important to recognize the symptoms of malaria and to seek treatment as soon as possible at a health facility.

**Recognizing the Symptoms of this Killer Disease and Seeking Prompt Treatment Will Save Lives**
**Suggested Sermon 4: “Seek and You Will Find”**

**Scripture**

“So I say to you, ask, and it will be given to you; seek, and you will find; knock, and it will be opened to you. For everyone who asks receives, and he who seeks finds, and to him who knocks it will be opened.”

(Luke 11:9-10)

**Sermon**

When we have a problem, can we ignore it and expect it to go away? If there is a hole in the roof of our house, will it be fixed by itself? Will a car with a flat tire repair itself without our help? No, we must recognize the problems we face and work to fix them.

God does not expect us to sit idly by and let our challenges go unanswered. While we must have faith in God and accept His plan for us, we are in control of our actions. We are also in control of much of our own health. We can make the best choice possible from among the food we have available to nourish our bodies. We can avoid unhealthy foods and alcohol. We must be aware of the diseases that threaten us and how to avoid them, including malaria.

One of the most common yet dangerous diseases we have in our area is malaria. Malaria strikes 212 million people in Africa each year. It is the number one killer of children under five years of age in sub-Saharan Africa and kills more than one million people across the globe each year. Malaria is spread by mosquitoes that usually bite late into the night while we are in our homes.

In the Book of Luke, Jesus teaches His disciples many things. He gives them the words that became the Lord’s Prayer. Jesus also uses many stories, called parables, to teach important lessons to His followers. In the Parable of the Persistent Friend, Jesus told His disciples about three friends, including one who did not sit idly by and let a friend go hungry. In this story, a man had traveled a long journey and had arrived hungry at the house of his friend. The friend did not have food to share with the traveler so he went to the house of another friend to ask for food for his hungry friend. The third man’s family had already eaten and was settled in bed, so he refused to come to the door. The friend did not give up and persisted knocking until the man did rise and give him food for his friend.

After sharing this story with His disciples, Jesus said, “So I say to you, ask, and it will be given to you; seek, and you will find; knock, and it will be opened to you. For everyone who asks receives, and he who seeks finds, and to him who knocks it will be opened.” (Luke 11:9-10)

Jesus tells us to seek. We should seek knowledge, seek wisdom, and seek answers to the problems we face.

Malaria is one of our greatest earthly problems; it can strike anyone at any time, and young children and pregnant women are especially vulnerable to this debilitating disease. However, we are not helpless against this powerful disease. If we know the symptoms of malaria and seek immediate treatment when
we see these symptoms, we can fight it with medicine. *It is important to recognize the symptoms of malaria and to seek treatment as soon as possible at a health facility.* If you or someone you know has a fever, chills, headache, muscle aches, and fatigue, you should suspect malaria and seek treatment. Also, be on the lookout for nausea, vomiting and diarrhea, as they can also be signs of malaria. Malaria can cause anemia and jaundice. Look for yellow coloring in the eyes as a sign of jaundice.

If you or someone close to you has these signs of malaria, visit a healthcare provider as soon as possible for testing. They should have medicine to treat the disease. Someone infected with malaria will have a better chance of recovery if that person takes medicine as soon as symptoms are noticed and malaria is tested for.

God expects us to be persistent in our prayers and in our actions. Like the persistent man in Luke, we must seek, ask, and knock. We must seek knowledge on the dangers we face, including the symptoms of malaria. We must seek and ask for help, knocking on the door until the deadly disease is treated. God hears our prayers, but expects action and persistence from us when we are faced with a difficulty like malaria. The door will not be opened if you do not knock. The illness will not be healed if you do not seek treatment.

**God hears our prayers, but expects action and persistence from us when we are faced with a difficulty like malaria.**
Introduction

Over the years, malaria has become resistant to medications that had been highly effective in treating the disease in the past. Resistant means the malaria parasites are not eliminated by the medicines and the drug can no longer cure the disease. When a drug is not powerful enough to kill all the malaria parasites infecting a person, it can allow the stronger ones to survive. These stronger malaria parasites can multiply, and the resulting infection will be resistant to the medication.39

A disease can become resistant to a medicine if patients do not take the drugs exactly as they are instructed by a healthcare provider. Resistance can also occur due to changes in the disease which allow it to survive and “resist” the medication. To fight drug-resistant malaria, medical experts developed treatment regimens which combine more than one anti-malaria drug with another. If the malaria parasite mutates it is highly unlikely that the mutation will allow it to become resistant to both medicines.40 Drug combination therapies can help avoid the emergence of malaria that is resistant to medication.

The malaria parasites in one area may be different than the malaria in another country or part of the world. Medication that is effective on the malaria in one area may not be effective in another. Therefore it is very important to listen to the treatment guidelines approved by your government. Your local health facility staff will have information on which type of malaria parasite is infecting the people in your area, and they will prescribe you the most effective drugs. Your responsibility is to fill your prescription at a reputable pharmacy, and then to follow treatment guidelines as directed by health facility staff. Complete the full course of treatment, to ensure that the malaria is cured, and does not become resistant to medication.

Malaria is a powerful and deadly disease, killing more than one million people across the world each year. Scientists, medical professionals, and government officials are working to fight this disease and stay ahead of it as it changes. Following the recommendations of these experts will help you and your congregation members fight this killer.
**Suggested Sermon 5: “Go the Distance”**

**Scripture**

“Moses answered the people, “Do not be afraid. Stand firm and you will see the deliverance the Lord will bring you today. The Egyptians you see today you will never see again.” (Exodus 14:13)

“That day the Lord saved Israel from the hands of the Egyptians, and Israel saw the Egyptians lying dead on the shore. 31 And when the Israelites saw the great power the Lord displayed against the Egyptians, the people feared the Lord and put their trust in him and in Moses his servant.” (Exodus 14:30-31)

**Sermon**

In life, the road we must travel may be long and difficult. The solution to a serious problem is rarely quick and easy. The Israelites suffered for many years living as slaves in Egypt under Pharaoh and knew that escaping Egypt and this life of servitude could not be simple or easy. They longed to return to their homeland and find freedom, but did not know how to escape.

Fortunately for the Israelites, Moses had the strength and perseverance to tirelessly lead them to freedom. God called Moses and sent him to deliver the Israelites from slavery - a very difficult task. Moses objected at first and claimed he was not capable of saving God’s people, but he answered God’s call. He went to Pharaoh and said, “Let my people go.” Pharaoh refused and did not let the Israelites go until God unleashed ten plagues on Egypt. Perseverance is what saved the Israelites, and perseverance is what we need to protect ourselves.

We have a dangerous killer among us. Malaria spread by the bites of mosquitoes kills more than one million people in the world each year. It sickens 212 million people each year in Africa alone. We have methods to avoid mosquito bites, such as sleeping under long-lasting insecticide-treated nets and spraying the inside or outside of our homes with insecticide. Those should be our first line of defense. However, if you or someone in your family becomes sick with malaria, you must seek the proper treatment as advised by your local government to fully recover. Medicines that are effective against malaria in one area may not be effective in another area, so it is very important to be aware of what your government is recommending and visit a trained healthcare provider who follows those recommendations.

The parasite which causes the illness of malaria can become resistant to the medicines we have to fight the disease. Resistance means those medications will no longer be effective against malaria. If medications are not taken properly and a patient misses doses or stops taking the medicine simply because he feels better, the chance of malaria becoming resistant to that medication increases. Therefore, it is important to follow treatment guidelines as directed by health facility staff and complete the full course of treatment to ensure malaria is cured and does not become resistant to medication. We need every weapon we have to fight this killer disease and cannot afford to have medicines become powerless against it. If you or a family member must take medicine for malaria, you must make sure the entire course of treatment is followed so the malaria does not become resistant and is completely eliminated from the body.
Perseverance is what saved the Israelites, as travelled the great distance from slavery in Egypt to freedom in the Promised Land. Moses too persevered in leading them to the Promised Land. After Pharaoh released the Israelites, he changed his mind and sent his soldiers after them as they faced the Red Sea. Being pursued by Egyptian soldiers must have been frightening for Moses. He also had to listen to many complaints from the Israelites. They were scared and criticized Moses for bringing them out of the security they knew in Egypt to die in the wilderness. Moses could have given up. Instead, he was sure and strong, telling them, “Moses answered the people, “Do not be afraid. Stand firm and you will see the deliverance the Lord will bring you today. The Egyptians you see today you will never see again.” (Exodus 14:13) God told Moses to stretch out his rod and put it over the sea and divide it. Moses did as he was told and the sea parted, letting the Israelites cross in safety. The Egyptian soldiers pursued them and were swallowed by the Red Sea.

Under the leadership of Moses, the Israelites continued their escape from the Egyptians. Scripture tells us, “That day the Lord saved Israel from the hands of the Egyptians, and Israel saw the Egyptians lying dead on the shore. 31 And when the Israelites saw the great power the Lord displayed against the Egyptians, the people feared the Lord and put their trust in him and in Moses his servant.” (Exodus 14:30-31) Moses led the Israelites on this long journey over great distances to freedom and safety, although it would be 40 years before they would reach their new home in the Promised Land.

Recovering from malaria can be similar to a long journey. You must listen to the recommendations of medical experts speaking on behalf of your government, who provide you with advice on how to cure this dangerous disease. The course of medication may seem long, but you must “go the distance,” like the Israelites—be persistent and take all the doses as recommended by your healthcare provider.

Moses listened to God, even when he did not think he was capable of the kind of bravery and eloquence God expected. He listened and most importantly, he never gave up when the task was difficult. Perseverance is needed for any journey, whether it is a long journey home or a struggle to return to good health after a case of malaria. Listen to the advice of your government and healthcare experts and follow the guidelines they have developed. You will need them in order to “go the distance” on your journey to good health.

**LISTEN TO THE ADVICE OF YOUR GOVERNMENT AND HEALTHCARE EXPERTS. FOLLOW THE GUIDELINES THEY HAVE DEVELOPED.**

**YOU WILL NEED THEM IN ORDER TO “GO THE DISTANCE” ON YOUR JOURNEY TO GOOD HEALTH.**
Preventing Malaria in Our Communities

**Introduction**

God expects us to care for the Earth and for ourselves – His beautiful creations. We have the power to protect and nurture the land and to enjoy the bounty it produces, as God intended. However, we also are capable of harming the land and ourselves by failing to care for it properly.

Diseases like malaria can spread rapidly in unclean environments. You can reduce the spread of disease in your community by motivating your congregation to keep a clean environment, so mosquitoes cannot breed, by clearing standing water and cleaning up trash around their properties. Controlling the mosquito population is crucial in reducing the spread of disease, because mosquitoes – which carry and spread malaria – breed in stagnant pools of water.

Any area of standing water can become a mosquito breeding ground. Buckets, tires, cans, puddles, and any area where water can pool can provide an area for adult mosquitoes to lay their eggs, and for the larvae to live. Eliminating areas of standing water around homes therefore will reduce the places where mosquitoes can reproduce, and develop into malaria-causing threats. Other preventive actions that also honor God’s creation include cleaning up trash, filling in potholes, and covering vessels of clean drinking water.

Preventing the spread of a disease is far better (and easier) than being forced to cure it. Reducing the population of mosquitoes will help decrease the number of malaria cases and help save lives. Allowing stagnant water to remain in a community encourages the breeding of mosquitoes that carry malaria, which kills more than one million people across the globe each year. Keeping communities free of litter and standing water can help control the spread of this deadly disease.
Suggested Sermon 6: “Honor God’s Creation”

Scripture

“The Lord God took the man and put him in the Garden of Eden to work it and take care of it.” (Genesis 2:15)

“The earth is the Lord’s, and everything in it, the world, and all who live in it;” (Psalm 24:1)

Sermon

When God created the Earth, He blessed it with amazing beauty. Blue seas, snow-capped mountains, lush green forests, and golden deserts for the eye to see. When He put man on the Earth, He gave us the gift of this beauty, along with the powerful responsibility for this land. As we read in the Book of Genesis, “The Lord God took the man and put him in the Garden of Eden to work it and take care of it.” (Genesis 2:15) God put man in the Garden of Eden to tend and keep it. He wants us to act as the steward of this beautiful land He has given us and to use it to grow nutritious food to feed ourselves.

God expects us to care for the Earth and for ourselves. We have the power to protect and nurture the land and to enjoy the bounty it produces as God intended. However, we also are capable of harming the land and ourselves by failing to care for it properly. Disease can spread rapidly in unclean environments. If we throw our trash on the ground without disposing of it in the correct manner, we are disrespecting God’s creation and causing a danger to our own health by encouraging the spread of disease.

We must make a special effort to protect ourselves from the deadly disease of malaria. Malaria is spread through the bites of mosquitoes. Each year, 247 million people are stricken with malaria across the globe and more than one million people die. Africa is hit especially hard by malaria. Two hundred and twelve (212) million malaria cases and 91% of deaths in the world from malaria occur in Africa each year. Children are among the most vulnerable, as 85% of malaria deaths each year are among children under five years of age. Malaria is the number one killer of children under five years of age in many parts of Africa.

Pregnant women are also particularly vulnerable to malaria as pregnancy reduces a woman’s immunity to the disease, making her more susceptible to malaria infection and increasing the risk of illness and death. Malaria in the mother increases the risk of miscarriage, stillbirth, and premature delivery and low birth weight for the baby, which can be fatal. If we can control the growth of mosquitoes that spread this illness, we can save many lives.

Mosquitoes need areas of stagnant water to reproduce. They lay their eggs in water and the larvae live in water until they become adult insects. Even small areas of water outside can become breeding grounds for mosquitoes. Look around your houses and make sure you have no areas of standing water. Keep a clean environment, so mosquitoes cannot breed—Clear standing water and clean up trash around your property. Empty buckets, tires, cans, wheelbarrows and any area where water can pool, such as a tarp or other covering, can provide an area for adult mosquitoes to lay their eggs and for the larvae to live. If you see an area of standing water, dump it and remove the object so it can not fill with water again.

We should start with our own homes and the grounds surrounding our homes. After we are sure those areas are clean and have no containers or areas of standing water that
would attract mosquitoes, we should turn our attention to our communities. Even if your own home is free of areas of standing water, mosquitoes breeding just a few houses away can come to your home and infect your family. Containers of standing water should be removed from the entire community. We must join together as a community and support each other in this effort to reduce the population of mosquitoes and control the spread of malaria. We can begin a group here at the church to organize clean ups in our community. I will be asking for your help in this effort.

God has blessed us with beautiful land. It is our responsibility to keep it clean for the protection of the Earth and our own health. As the psalmist wrote, “The earth is the Lord’s, and everything in it, the world, and all who live in it;” (Psalm 24:1) When we throw our trash on the ground, or leave empty containers to fill with water and create breeding areas for disease carrying insects, we are disrespecting God’s creation and creating a hazard to our health. Join with me in a commitment to clean our community and protect our land and our health.

**WE HAVE THE POWER TO STOP THIS DESTRUCTIVE DISEASE**
Sources


Malaria Policy Center. “An Open Letter to President Obama and the Current Administration.” www.malariapolicycenter.org/blog/?p=1020


Otten et al. “Initial Evidence of Reduction of Malaria Cases and Deaths in Rwanda and Ethiopia due to Rapid Scale-up of Prevention and Treatment.” Malaria Journal, 2009


The Holy Bible (New International Version)

RBM. The Use of Anti-malarial Drugs, 2. Combination Therapy. http://rbm.who.int/cmc_upload/0/000/014/923/am_2.htm


ENDNOTES

1 Roll Back Malaria. www.rollbackmalaria.org
3 Roll Back Malaria. www.rollbackmalaria.org
8 WHO. Malaria Fact Sheet. www.who.int/mediacentre/factsheets/fs094/en/
9 Roll Back Malaria. www.rollbackmalaria.org
10 Roll Back Malaria. www.rollbackmalaria.org
11 Roll Back Malaria. www.rollbackmalaria.org
16 Roll Back Malaria. www.rollbackmalaria.org
17 Malaria Policy Center. “An Open Letter to President Obama and the Current Administration.” www.malarialogycenter.org/blog/?p=1020
22 Roll Back Malaria. www.rollbackmalaria.org
24 Roll Back Malaria. www.rollbackmalaria.org
39 WHO. Malaria Fact Sheet. www.who.int/mediacentre/factsheets/fs094/en/
40 RBM. The Use of Anti-malarial Drugs. 2. Combination Therapy. http://rbm.who.int/cmc_upload/0/000/014/923/am_2.htm