

**DRAFT QUESTIONNAIRE FOR REPORTING BY COUNTRIES ON THE
AMOUNTS OF DDT USED, CONDITIONS OF SUCH USE AND ITS
RELEVANCE IN DISEASE MANAGEMENT STRATEGIES**

**BACKGROUND INFORMATION & INSTRUCTIONS
FOR COMPLETING THE QUESTIONNAIRE**

A. BACKGROUND INFORMATION

1. The Stockholm Convention on Persistent Organic Pollutants (POPs) restricts the production and use of DDT to disease vector control in accordance with World Health Organization recommendations and guidelines on the use of DDT and when locally safe, effective and affordable alternatives are not available to the Party in question (Annex B, Part II, paragraphs 1 and 2). Parties are required to notify the Convention Secretariat of the intention to produce or use DDT in accordance with the provisions of the Convention.
2. Each Party that uses DDT is also required to provide to the Secretariat and WHO, every three years, information on amounts used, conditions of such use, and its relevance to that Party's disease management strategy (Annex B, Part II, paragraph 4).
3. Annex B, Part II, Paragraph 6 of the Convention reads as follows:

“Commencing at its first meeting, and at least every three years thereafter, the Conference of the Parties shall, in consultation with the World Health Organization, evaluate the continued need for DDT for disease vector control on the basis of available scientific, technical, environmental and economic information, including:

 - (a) The production and use of DDT and the conditions set out in paragraph 2 [of Part II of Annex B];
 - (b) The availability, suitability and implementation of the alternatives to DDT; and
 - (c) Progress in strengthening the capacity of countries to transfer safely to reliance on such alternatives.”
4. Pursuant to the above provisions, and at the specific request of the Sixth and Seventh Session of the Intergovernmental Negotiating Committee the draft questionnaire has been developed by the Secretariat of the Stockholm Convention and the World Health Organization, to enable countries report on the use of DDT for disease vector control and to assist the evaluation processes of the Conference of Parties.

B. GUIDANCE FOR COMPLETING THE DRAFT QUESTIONNAIRE

The National Focal Point for the Stockholm Convention, in his/her capacity as the primary channel of communication between the country and the Secretariat of the Stockholm Convention, is requested to take responsibility for submitting the completed questionnaire to the Secretariat of the Stockholm Convention **not later than 22 October 2004**. (Directions for submitting the completed questionnaire is provided in the Cover Letter from the Convention Secretariat).

The National Focal Point for the Stockholm Convention should coordinate effectively with the Ministry of Health that has the primary responsibility of using DDT for disease vector control, , as well as other relevant Agencies to ensure timely and adequate completion of the questionnaire.

The questionnaire is available in electronic format from
<http://www.pops.int/documents/meetings/inc7/followup/>.

Please do not change or alter the questions or headings in the tables.

Terminologies and definitions

- 1. Reporting period:** This refers to the 3-year reporting period 2001 – 2003. This is also indicated on top of the first page of the questionnaire.
- 2. Units of measurement:** All measurements are to be provided with their units in the metric system.
Weights (*kilograms*).
Volumes (*liters*)
Length/height/distance (*centimeters, meters, kilometers etc.*)
- 3. Amount/weight of insecticide (DDT and other):** Should be provided as the total weight of the formulated product that is produced, exported, imported or used, as requested by the question.
- 4. Formulation of insecticide (DDT and other):** should be provided as both type of formulation (i.e. W.P, Emulsion etc.) and the *percentage composition for the active ingredient*.

For example, question # 17 should be completed as follows:

17. What is the total amount of DDT used annually for disease vector control (kg)?

Yr 1 (2001):	<u>700 kg</u>	, formulation (type & % a.i.)	<u>W.P. 75% a.i</u>
Yr 2 (2002):	<u>850 kg</u>	, formulation (type & % a.i.)	<u>W.P. 75% a.i</u>
Yr 3 (2003):	<u>850 kg</u>	, formulation (type & % a.i.)	<u>W.P. 75% a.i</u>

5. Malaria endemicity and transmission (re: Question #19)

Unstable malaria transmission: malaria is transmitted only at certain times of the year

Stable malaria transmission: malaria is transmitted throughout the year.

Malaria endemicity can be divided into four levels:

Holoendemic: Areas with perennial high-degree transmission producing considerable immunity in all age groups, particularly adults (parasite rate in infants constantly over 75%).

Hyperendemic: Areas with intense but seasonal transmission where immunity is insufficient to prevent effects of malaria in all age groups (parasite rate in children of 2–9 years old constantly over 50%).

Mesoendemic :Typically found in rural communities with varying intensity of transmission (parasite rate in children of 2–9 years old as a rule 11–50%).

Hypoendemic: Areas with little transmission and malaria does not affect the general population significantly (parasite rate in children of 2–9 years old as a rule less than 10%).