#### **Abstract:**

This study is based on the fact that, Malaria is a major public health problem in Sudan, and especially in Khartoum State, the field of study. Almost about 300,305 infections being reported yearly in a population of about 7 million. This amounts to about 4.3%. This disease constitutes the first highest cause of hospital admission in the country. Beside this, much as two-thirds of the entire national public health budget is spent on controlling it.

To try to control malaria disease and to reduce its effects in Khartoum State, we used a capable system that accepts various kinds of data - the Geographic Information System (GIS). The GIS provided to be an important tool for controlling malaria.

- Using GIS, areas covered by mosquitoes and area of breeding can be adequately determined, and hence fighted.
- The output data points to the risk area and is helpful for the administrative bodies to plan for controlling malaria as well as for the policy and decision makers to take actions.

#### مستخلص البحث

تنبني هذه الدراسة على حقيقة أن مرض الملاريا يعد أحد المعضلات الأساسية في السودان، خاصة في ولاية الخرطوم موقع الدراسة، والتي بها حوالي 300,305 مصاب حسب التقارير السنوية لإدارة مكافحة الملاريا بالولاية، وتمثل هذا العدد نسبة 4.3% من جملة السكان البالغ عددهم 7 مليون نسمة حسب آخر احصائية.

يعتبر مرض الملاريا من أعلى الأمراض نسبة في الدخول إلى المستشفيات في الولاية، إضافة إلى ذلك فإن ثلثي ميزانية وزارة الصحه الاتحادية تنفق في مكافحتها وعلاجها.

لمحاولة السيطرة على داء الملاريا بولاية الخرطوم، يجب وضع خطط محكمة بإستخدام نظام متكامل يمكن من عبرها التعامل مع بيانات كبيرة ومختلفة، عليه تم إختيار نظم المعلومات الجغرافية (GIS) كأحد الأليات المهمة التي تساعد في الحد والسيطرة على مرض الملاريا.

- بإستخدام نظم المعلومات الجغرافية يمكن تحديد مناطق توالد وإنتشار الباعوض بدقة عالية كما
  يساعد في تحديد الإتجاهات التي يمكن أن ينتشر فيها مرض الملاريا.
- النتائج المتحصل عليها بعد التحليل عبر هذه البرامج تحدد المناطق المتأثرة مما يساعد العاملين في الحقل الصحي من وضع الخطط والبرامج المناسبة للمكافحة، والتي بدور ها تساعد الساسة من إتخاذ القرارات الداعمة في الوقت المناسب.

# **Dedication**

To whom

Truly I find my self with (my wife and little kids)

### Acknowledgements

I wish to express my appreciation to those who helped me throughout this work and I feel I am indebted to them. First I am indebted to my supervisor, Dr Ahmed M. Ibrahim, for his guidance and help during the period of this study.

I am also indebted to the other members of the Surveying Department staff, the Ministry of Health in Khartoum, and the Ministry of Physical Planning in Khartoum State.

Finally I am greatly indebted to my family and friends.

## **Table of contents**

Contents	Page
Abstract	i
Dedication	ii
Acknowledgement	iii
Table of contents	iv
List of tables	vii
List of Figures	viii
Chapter One: The geographic Information Systems (GIS)	1
1.1 Introduction	1
1.1.1 GIS for the Study and Control of Malaria	3
1.1.2 Data Integration	4
1.1.3 Stratification (Spatial Decision Support)	4
1.1.4 Heuristic Modeling	5
1.1.5 Analysis	6
1.1.6 Global Changes and Malaria	6
1.1.7 Integration with other Information Systems	7
1.2 Tools Complementary to GIS	7
1.2.1 Satellite Remote Sensing.	7
1.2.2 Satellite Navigation System (SNS)	8
1.3 Project Informal	9
1.3.1 Objectives	9
1.3.2 Methods	9
1.3.3 The Information System	10

1.3.4 The Necessary Capabilities	10
1.4 Main Constraints of and Problems with the Current Use of GIS	11
1.4.1 Cost	11
1.4.2 Adequate Training.	11
1.4.3 (Garbage in, Garbage Out) GIGO	11
1.4.4 Misinformation and Misinterpretation	11
1.5 Objective of the Research.	12
Chapter Two Literature Review	13
2.1 GIS tools	13
2.1.1 Introduction	13
2.1.2 GIS through history	13
2.1.3 GIS components	16
2.14 Questions a GIS can answer	19
2.1.5 How Does GIS Use Geography?	20
2.1.6 Three Views of a GIS	20
3 Chapter Three Case Study Khartoum State	22
3.1 Study area	22
3.2 System Requirements	25
3.2.1 Specifications	25
3.2.2 Final output.	25
3.3 Model Development	26
3.3.1 Data Acquisition.	26
3.3.2 Data Management	33
3.3.2.1 Data Processing	33
3.3.2.2 Analysis and Overlaying.	33
3.3.2.2.1 Selection	33
3.3.2.2.2 Buffering	33
Chapter Four Results and Discussion of the Results	38
4.1 Results	38

Chapte	r Five Conclusion and Recommendations	53
5.1 Cor	nclusion	53
5.2 Rec	commendations	54
References		55
	LIST OF TABLES	
Table		Page
(4.1)	The area covered by mosquitoes compared with locality area in	
	square kilometers	42
(4.2)	percentage of infected people in Khartoum State	44
(4.3)	Humidity in Khartoum State	46
(4.4)	Temperature in Khartoum State	48
(4.5)	Rain fall in Khartoum State	50

4.2 Discussion of the Results .....

52

## LIST OF FIGURES

Fig.		Page
(2.1)	Group of stags (cave painting), Lascaux Caves, France (Art	
	Resources, N.Y.)	15
(2.2)	Tracks of caribou routes in Alaska from April 1985 to	
	December 1986 (U.S. Fish and Wildlife Service)	16
(2.3)	Scanning paper maps to produce digital data files for input into a	
	GIS	17
(2.4)	Collecting geodetic coordinates with a Global	
	Positioning System (GPS) receiver	17
(2.5)	Examples of finished maps that can be generated using a GIS,	
	showing landforms and geology (left), man-made, and	
	physical features (right)	18
(2.6)	Geography Object	21
(3.1)	location of Khartoum State	24
(3.2)	Boundary of Khartoum State	26
(3.3)	Boundaries of the localities	27
(3.4)	(a) Green area (farms)	28
(3.4)	(b) Waste water ponds	29
(3.4)	(c) River Nile	30
(3.5)	The residential area	31
(3.6)	layers of Khartoum State	32
(3.7)	Buffer Zone of a highly Infected Area	34

(3.8)	Buffer Zone representing highly Infected Area Identity	35
(3.9)	Buffer Zone of low Infected Area	36
(3.10)	Buffer Zone Representing low Infected Area Identity	37
(4.1)	Area highly affected by Mosquito	40
(4.2)	The area infected for each locality	42
(4.3)	Malaria infections from 2002- 2007	44
(4.4)	Humidity from 2002- 2007	46
(4.5)	Temperature from 2002- 2007.	48
(4.6)	Rain fall from 2002- 2007	50
(4.7)	Malaria, Rain fall, Humidity, & Temp	51