

Bringing health care to the people by the people

Three months ago, 18-year-old Agita Amando's fever began. She had no choice but to make the three hour walk to the hospital with her one year old baby, Edson. At the hospital, she tested positive for malaria and was given appropriate treatment; that was three months ago and she has since made a full recovery.

Unfortunately, two months after that it was baby Edson's turn to be sick; this time with a lower respiratory infection. Along with malaria and diarrhoea, this is one of the main child killer diseases despite the fact that all three diseases are preventable and treatable. However, for the first time Agita had an alternative to making the long trek to hospital as she was able to take Edson to a trained health worker in her own village.

Last year, she attended a community meeting where one of their leaders informed them of a training course aimed at improving the work of community health workers or Agentes Polivalentes Elementares (APEs).

Although community health workers have been practising in remote rural areas for decades in Mozambique, they lacked support and knowledge to make a real impact. Agita, like many in her community, did not rely on them. "Many of the people here chose to use traditional healers instead," says Manuel Nyhaposa, the community leader.

Agita attended a second meeting to elect the three candidates who were to enrol on the four-month APE training course on health prevention and treatment of common childhood illnesses.

At this meeting, Agita heard how the new APEs would not only learn new skills but would receive a treatment kit including diagnostic tools and treatment for malaria, diarrhoea and lower respiratory infections. Moreover they would make house-to-house visits instead of being located in a health post. This training was implemented by the Ministry of Health with technical support from Malaria Consortium and other partners.

Now, newly trained Fernando Zucule, one of the successful APE candidates, is on a follow-up visit to see how Edson is responding to the treatment he was given a few days before. He looks confident as he examines Edson, but concedes the job is different to anything he has done before.

"I was surprised to be elected to be an APE because I had never worked in health before," says Fernando, who used to be a local photographer.



Agita Amando waits with her sick son, Edson, for the APE to see them

Community health workers have been practising in remote rural areas for decades in Mozambique, but lacked support and knowledge to make a real impact

He explains how he diagnosed Edson with a chest infection. "As I haven't yet received a chronometer for measuring breathing, I used my watch to count his breaths per minute. He was breathing more than 60 times per minute and as he had a fever and was coughing too, I suspected an infection. I prescribed paracetamol for his fever and antibiotics for the lower respiratory infection." He explained to Agita that she should take her baby to hospital if he did not show signs of improvement. Luckily, Edson seems to have made a good recovery.

Fernando says he enjoys the work, which for now is voluntarily. The government plans to give a subsidy of 30 percent of the minimum monthly wage, equivalent to about US\$50. Despite various challenges, Fernando is most concerned about his ability to diagnose and treat effectively.

"It is sometimes difficult for me to determine what illness a person has, especially when people make up their symptoms because they want to stock up on medicines in their homes or get medication for their neighbours," he says. "Sometimes, they tell me they have a host of symptoms. If I had the rapid [diagnostic] test for malaria, I would at least be able to test for that. Others will come and say they have a sick child at home and want me to give them medicine. But I don't, I tell them they must bring that child to me."

Zulmira da Silva is project coordinator for Malaria Consortium's Integrated Community Case Management programme in Mozambique, funded by Canadian International Development Agency. "Initially there were some bottlenecks with supplies getting out to the communities," she explains, "But soon all of the APEs will have complete kits, which include rapid diagnostic tests for malaria, a chronometer and antibiotics as well as zinc for diarrhoea. They will also receive bicycles for their home visits, which are a key part of their work."

Healthcare remains a major challenge in Mozambique with only 40 percent of the population able to access health services. Although child mortality rates have reduced over the past two decades, for every 1000 live births 138 children die before their fifth birthday, according to UNICEF. Edson, at least, has not become another grim statistic. He sticks close to his mother as she walks with Fernando down her well-swept path. When asked what she thinks of Fernando, Agita is quick to respond: "He is everything that is good."

When asked what she thinks of APE Fernando, Agita is quick to respond: "He is everything that is good."

Fernando Zucule, one of the successful APE candidates, conducts a follow up visit with Edson to see how he is doing

