

SUCCESS STORY

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Tumuramyé's story on the fight against malaria

The burden of malaria has the greatest impact on the poorest communities and is felt not only in terms of the human suffering and death that it can cause, but also by the significant economic cost and burden to families and to national economies.

This is Mr. Tumuramyé's story of living with the threat of malaria. At 35-years old, he is a father to five children and expecting his sixth child soon. His wife and children would get infected with malaria regularly and he would have to borrow money from relatives, friends and in-laws to get treatment for them. When the children were admitted to the clinic, he also lost income because of spending time at the health facility instead of working. Fortunately for Mr. Tumuramyé, his story was about to change.



The Communication Officer and Key Influencer meet Mr Tumuramyé's family

BACKGROUND

Malaria is one of the most common infectious diseases and is an enormous public health problem. It accounts for 25-40 percent of outpatient visits at health facilities, 15-20 percent of all hospital admissions, and 9-14 percent of all hospital deaths (UDHS 2016). In Uganda, malaria is not just a disease commonly associated with poverty, it is also a cause of poverty and a major hindrance to economic development. A single episode of malaria costs 30,000 Ugandan shillings (approx. US\$8) per person on average.

In communities, such as Mwitanzige in Kakumiro district, where health facilities are far away from some of the villages, access to health services is a big challenge. However, with the help of USAID's Malaria Action Program for Districts (MAPD)

trained Key Influencers¹ use the 'zooming in' approach – a data driven surveillance approach – to help identify and reach the most affected communities, households and individuals. Together with the family, the Key Influencer draws up action plans and a monthly follow up plan is agreed upon.

Through the 'zooming in' approach, Tumuramyé's household was identified and visited by the Key Influencer to support them in identifying solutions to the frequency with which his family were contracting malaria. Tumuramyé tells how he has had to borrow money to treat malaria and that for the past year it has been

¹ Key Influencers are trusted members of the community who carry out who help share communications on malaria, they are integral to this campaign to help overcome misinformation and stigma, address social norms, and model the desired behaviors to help fight COVID-19 and malaria.

so bad that every month two or three of his children fall ill and are diagnosed with malaria and admitted at Kisiita health center III. “By the time the Key Influencer visited me, I had taken four of my children aged between six and twelve years-old and all had tested positive for malaria within the week.”

During his routine activities at the health facility, Julius Ngabirano, the Key Influencer for the area, noticed that Mr Tumuramyé’s household had four children registered in the outpatient OPD register and had tested positive for malaria in the same week. This prompted Julius to make a visit to Tumuramyé’s house.

At the time of the home visit, Julius Ngabirano observed that the household did not have any long-lasting insecticide nets (LLINs). During his interaction with Tumuramyé, he heard how much money was being spent on treating the children. “I would ask myself, are we under a spiritual attack or the disease just loves to visit this home? I have to spend 15,000 Ugandan shillings on transport for each trip. Sometimes the boda boda [motorbike driver] even feels sorry for me and lets me pay a bit less to take me to the health center. I also need money for other things like a meal and medicines that you find out of stock at the health center. I have borrowed money from my friends and relatives. I have to do all sorts of work to pay it back,” Mr Tumuramyé related.

Julius gave a talk to the family and emphasized the importance of sleeping under LLINs to prevent malaria and highlighted the serious dangers to health of malaria, including death, cerebral malaria affecting the brain and risks to unborn children, in serious cases resulting in miscarriage. Julius also encouraged the family to clear broken bottles, polythene bags and other detritus from around the compound that could hold water and become a breeding ground for mosquitoes.

At the time of the follow up visit in August 2020, Mr. Tumuramyé had saved some money and bought two LLINs and had also benefitted from the Government’s universal net distribution campaign through which he received an additional two nets, “It’s been two months of freedom from malaria, and I have not yet had to go back to the health center,” said a beaming Mr. Tumuramyé.

NEXT STEPS

- Home visits are key especially to households that suffer frequent malaria episodes. Julius, the Key Influencer, will continue to support the family to ensure the nets are taken care of and that the net culture is strengthened.
- Mr. Tumuramyé is willing to share his experience and life changing story with his family and friends. He will be hosted on one of the radio shows supported by MAPD to share his story and influence other community members.

This success story is published as part of a series from the USAID’s Malaria Action Program for Districts project. For more information, see www.malariaconsortium.org/resources/publications/977/ or contact: Dr Sam Gudoï, s.gudoï@malariaconsortium.org

USAID’s Malaria Action Program for Districts aims to improve the health status of the Ugandan population by reducing childhood and maternal morbidity and mortality due to malaria. The project will support the Government of Uganda for a period of five years, focusing in particular on children under five years of age and pregnant women.

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