Managing the risk of malaria in pregnancy in Nigeria

SuNMaP ensures women who visit ante-natal clinics are given free nets and learn to protect themselves and their babies

Tosin Kareem, 25, is nine months’ pregnant with her second child and seems pleased to be sitting down. The apprentice book printer is taking part in a discussion group about malaria at her ante-natal clinic. It’s a peaceful contrast to outside - the hectic streets of Lagos’s Somolu district.

“Before I came here, I didn’t take malaria prevention seriously. I had heard the messages, but I ignored them,” she says.

But as part of her ante-natal care, Tosin has been given direct and specific malaria prevention advice, designed to minimise the chances of either her, her four-year-old daughter, or the new baby, contracting the disease.

“I first came to this clinic when I was four months’ pregnant with this child. Normally, I have regular bouts of malaria sickness. I go to the nearby chemist and get drugs you can buy without a prescription. When I came here, they prescribed drugs to make sure I didn’t get malaria while I was pregnant. And they made sure I was using a net properly. Since then, I haven’t been sick.”

Nigeria accounts for a quarter of all deaths and illness from malaria in Africa. Almost everyone in Nigeria is at risk from contracting malaria sickness, but it is particularly dangerous for pregnant women...
and under-fives. Nigeria’s Support to National Malaria Programme (SuNMap) is a five-year project whose objective is to implement a comprehensive approach to malaria control. SuNMap is a multi-partner project managed by Malaria Consortium and funded by UKAid/the Department for International Development.

Sleeping under a mosquito bed net – specifically, a Long Lasting Insecticidal Net (LLIN) – is very important in the prevention of malaria. Six million LLINs were distributed free across two Nigerian states (Kano and Anambra) starting in 2009, with support from SuNMap. Additional LLINs (for instance, for larger families) are available through ante-natal clinics, and commercially. However, just having the nets is not always enough: families need to know both how to hang them properly, and to use them every night.

Tosin lives with her printer husband in a “face-to-face” house: a one-room home that directly faces another.

“Now, any time I sleep I make sure the child and I sleep under the net. Before I came to this clinic, we did use the net which we got from the public distribution, but not regularly. I am also more educated as to the importance of keeping the environment clean to prevent mosquitoes breeding. I know more what malaria is all about,” she says.

Tosin also listens to the SuNMap-produced radio jingles about malaria and thinks that the combination of information for the general public, and information targeted to pregnant women like her, works well.

“My husband also takes malaria seriously and sleeps under the net. My daughter hasn’t been ill since using the net,” Tosin continues proudly. “In fact, she has never had malaria.”

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