



Justina, her husband Kelvin and their five children

Justina and her husband, Kelvin, are farmers who grow maize and soya beans in Fitebo, Serenje District, Zambia. The malaria burden here is high which is why it was selected as the location for the MAMaZ Against Malaria (MAM@Scale) project.

One day when Kelvin was away from home, Justina noticed that Annette, one of the couple's five children, had developed a high fever. By the evening, her symptoms had worsened and she began vomiting and having diarrhoea.

"I was very scared because that day I was alone. My husband had gone to a funeral, so I was the only one that remained with the children," Justina said.

Justina knew that she needed to seek help as soon as possible and travelled as quickly as she could to the local Community Health Volunteer (CHV), Charity.

CHVs are the backbone of the health system in rural Zambia, where they provide invaluable health advice to their communities, which are often located far from healthcare facilities.

By the time they reached Charity's house, Annette was very unwell, "my child was unconscious, she had no energy, no power, I was so scared, I did not know if she would survive."

Charity examined Annette by completing a Rapid Diagnostic Test (RDT) to check whether she had malaria. When the test came back positive, she gave Annette rectal artesunate suppositories (RAS), an oral rehydration solution, and a referral note was written for the closest healthcare facility.

Annette was rushed to the healthcare facility by bicycle ambulance. When they arrived, Annette was taken straight to the clinical officer who admitted her immediately. She was given injectable artesunate and other therapies at the clinic, and Annette and Justina remained there for four days.

This was the first time that any of Justina and Kelvin's children had suffered from malaria, and they are grateful for the CHVs and the lifesaving interventions, especially RAS and the bicycle transport, that are provided to the community by CHVs.

“Without the CHVs,” Justina says, “my child would have died. And without the pre-referral medicine, it would have been even worse, as this is what enabled us to reach the facility.

“The challenge is how do you move a sick child from here in the community to the facility? With the help of RAS and the CHVs, it is easier now. We feel confident as parents that our children will survive episodes of malaria.”

Their wish is for the project to continue, because there are many more who will benefit from it.

