# DRIVE AGAINST MALARIA

" MALARIA IS AFRICA'S BIGGEST KILLER.

It is not about charity,

Bono

it's about justice"



"DRIVE AGAINST MALARIA" IN CONGO (DRC)

Mosquito nets, medicine and education are essential

Drive Against Malaria scores successes in DR Congo and Angola

Written by: Simone Pastoors Editing by: Stephen Johnston What difference can two people make in a Land Rover? A drop in the ocean? On the contrary. The Drive Against Malaria's David Robertson and Julia Samuël have a mission. With tens of thousands impregnated mosquito nets, malaria medicine, good educational tools and a lot of enthusiasm, they have achieve a real decrease in the number of malaria cases. During the past few years they have visited many African countries and have just returned from Angola and DR Congo. Julia: "In the DR Congo settlements near the river Kwango, with no access to any kind of health care, one in five babies die. That is horrible. A lot of work still needs to be done."



Inhabitants help to hang up the nets in the huts.

Others guard the supply on the Land Rover

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Every day 3000 to 4000 children under the age of five die in malariainfected areas on the African continent. During the last three months, DAM has been able to provide help to people in Angola and DR Congo who have no access to health care whatsoever - especially the children and pregnant women are the most vulnerable group.



The children in the town have no clean drinking water.

With some luck they eat only once a day.

Angola has been harassed by floods during the last year, and malaria has been running rampant due to the increase in stagnant waters. The Drive Against Malaria has ensured that several villages in this area have received 100% mosquito net coverage, meaning that there is now a net over every bed. They have also supported a very large campaign in the flooded areas. Overall, they have protected at least 28,000 families against malaria.

## A WARM RECEPTION

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The Drive Against Malaria has been able to do a lot in DR Congo. This former Belgium Colony has suffered from wars for more than 45 years – wars between rebel groups and government opposition parties as well those in surrounding countries like Uganda and Rwanda. Over the last 10 years, internal conflicts have cost the lives of 5.4 million people – the most deadly conflict since World War 2.



Prevention is better than cure.
The best way is an impregnated mosquito net above their bed.

DR Congo is a land of extremities. It could be one of the richest countries in the world, with valuable resources such as oil, gold, diamonds and koltan (an element found in only a few countries and used for mobile phones and laptops). But the fact is that three quarters of the population lives on only 110 dollars a year. The infrastructure of DR Congo has been completely destroyed by war. People are reluctant to travel, especially in the eastern provinces, so when David and Julia's Land Rover appears, it is hard not to recognize what they are doing. They receive a warm reception everywhere, from the

population as well as the police and military, who recently waived their toll at the toll-road to Kinshasa.

Julia: "Everywhere, people were very hospitable. They are aware of the huge malaria problem. First, we drove to the main capital Kinshasa and had meetings with the Ministry of Health about the National Malaria Control Program. We also spoke with the Dutch and the English Ambassadors, UNICEF, United Nations and US Aid to map the malaria situation in several areas."



The luxury in this kitchen speaks for itself
Three-quarters of the population in Congo lives from 110 dollars per year

#### A DESPERATE SITUATION

After the meetings in Kinshasa, David and Julia drove to Kwango, a village with more than 17,000 inhabitants near the Kwango river in Bandundu province. Julia tells us that although it was only 125 kilometres away from the capital, "It took us 6 hours to reach the village.

"It was our special intent to drive here because these villages are mostly forgotten. When we got there, the situation was even worse than we had been

told in Kinshasa. The hospital was a building with five employees and barely had any means to provide for qualitative health care. Almost 5,500 malaria patients visit the hospital each year, but the hospital does not have the proper medicine. Furthermore, there was no electricity and only five beds. Women were giving birth on the floor, without mosquito nets around them. There was no running water in the hospital, so water from the polluted river was used. When the children saw our water tank and tap on the Land Rover they opened it, but did not close it, so in a short time our water supply was empty as well. Because of this, David and I could not wash with clean water, and started to suffer from skin infections.

"We started off with a meeting with the hospital personnel. The doctors had little know-how and were very glad that we were there. In fact, they did not want to let us go. We decided to start a program for the

distribution of mosquito nets, and we explained to the personnel how to administer medication. We gave them enough supplies to last at least three months."



Every year the hospital gets almost 5,500 malaria patients.

There was no streaming water, no electricity and only five beds

#### PREGNANT WOMEN AND YOUNG CHILDREN

"Priority was given to the most vulnerable group of people: children under the age of three and pregnant women. When a pregnant woman becomes infected with malaria, the parasite is also present in her placenta, which means that if the baby is born it will most probably die. Malaria can be cured with 'artemisine', a combination of two different medicines. Pregnant women should take it from her second pregnancy trimester.



Julia Samuël gives explanation to the hospital personnel how to administer medication

"Because there were so many children, a selection had to be made through registration of the number of pregnant women and the vaccination card for Tuberculosis for babies. Women in labour received a net immediately. DAM registered the names of all the people who received a net. "We decided to distribute nets in combination with vaccination for Tuberculosis. However, we stopped the vaccination the minute we found out that all of the children were being vaccinated with the same syringe!

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The hospital personnel had the plan to vaccinate 130 babies with only one syringe!

"Before we started the distribution of the nets we demonstrated how to hang them to make sure that people hung them from four different angles and right to the floor, because otherwise the mosquitoes are able to fly under them. On every front door we wrote down how many nets we had provided the family with. In the end, we distributed 300 nets. Three to four children can sleep under each net, which means that over 900 young children will be protected against malaria during the next five years. "The situation was much worse than we expected, we had a shortage of nets, and we still had to distribute nets in several other settlements as well near the Kwango river. As a result, some mothers who had not yet received nets

panicked. To calm the situation, we decided to drive about four kilometers away from the village. When we stopped and looked back, the emotions flew through my body: The mothers had followed our Land Rover. Some even had babies on their backs in the 42 degrees Celcius heat! We gave them nets

after all. "Because a net costs 7 dollars, which is almost as a month's wages

in these villages, all of the nets were distributes without the original package around them to prevent them from being resold.

"Apart from nets and medicine, we also provided French laminated posters and brochures to hospital personnel, a local school and the local nuns. We also showed videos: an animation film for children and a documentary for adults on how malaria infection occurs, how important medication is, and especially on how important it is to finish the medication. We showed these films on our own equipment, powered by electricity obtained from our solar panels."



David Robertson give the mothers a lifesaving net

#### THE BIGGEST MALARIA MISSION EVER

Some of the settlements on the Kwango river are completely closed off from the outside world. Together with hospital personnel, David and Julia went by boat to visit these settlements. Because they are situated near the river, malaria is a chronic problem both during and outside of the rainy season. The deadly Anopheles mosquito lives here all the time.

"We gave demonstrations in these settlements too and helped the people hang their nets. We also explained that they had to visit the hospital in Kwango village for medicine. On our way back to the hospital we took some inhabitants with us.

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Kwango village for medicine. On our way back to the hospital we took some inhabitants with us.

"Finally, we went back to Kinshasa to get thousands more mosquito nets. But the container with the nets was still in customs and not yet been released. This process can take days, weeks or even months. Even our partner organisation did not have nets.

"We now know found out that the container has been released, and we will make sure that the nets are distributed when we go back in September. "Obviously, we have also told the appropriate authorities about the acute situation in the villages; that there is no clean drinking water and that - against protocol - children are being vaccinated with the same needle.



The community on the Kwango river are cut off from healthcare. Today they get malaria protection for the first time

"David and I spend time in both the Netherlands and Africa, with an average of three months in Africa twice a year. When we are not in Africa we give presentations, educate people and try to get as much media attention as possible, both in Europe and the US. Fundraising is also essential if we are to continue to help the people in Africa.

"We are preparing for our next trip back to DR Congo in September, and we are on the eve of our biggest mission ever. Together with partner

organisations as US Aid, UNICEF, the Congolese Ministry of Health, NMCP (National Malaria Control Program), World Health Organisation, DFID and the UN-Foundation, we will visit the province of South-Kivu. On September 21<sup>st</sup>, the International Day of Peace, we will join with the United Nations to distribute more than 300,000 mosquito nets and provide people with medicine. The BBC will cover this trip, and all of our work will be videotaped to create a new documentary.

"Thanks to media attention in the Netherlands from SBS6 Shownieuws and two articles in Magriet magazine, the Drive Against Malaria has attracted many new donors. This is fantastic, and it gives us the possibility to continue our work."



Everybody is busy hang up their nets

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Julia Samuël and David Robertson meets the British ambassador in Kinshasa

### **Drive Against Malaria in Africa**

Since 1999, the Drive Against Malaria has worked in Africa to map malaria circumstances in the countries we visit and to provide help. Together, David Robertson and Julia Samuël have already visited Mali, Senegal, Mauritania, Cameroon, Chad, Sudan, Ethiopia, Kenya, Tanzania, Uganda, Rwanda, Zambia, Malawi, Mozambique, South Africa, Botswana, Zimbabwe, Namibia, Angola and DR Congo.

Julia: "In countries like Botswana and South Africa, the government has the malaria situation fully under control and does not need our help. This has been made possible mainly because of a well-functioning economy. People have more money to spend and therefore have access to good health care. However, our help is still needed in other countries. In these countries, we do not stay in offices in the cities, but set out to find distant aid posts and little hospitals run by local organisations. Before we began visiting these places, they hardly had any beds, medication or mosquito nets. We have been able to set up permanent programs in little hospitals in countries such as Kenya, Tanzania, Zambia, Mozambique and Zimbabwe. The mosquito nets we provide have been approved by the World Health Organisation as harmless to both adults and children, and have been impregnated for five years."

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