

Participants and attendees at the Affected Voices Meeting in Bindura, Zimbabwe



Community Health Workers in Zimbabwe

Despite their severe impact on health and economies, Neglected tropical diseases (NTDs) historically received little attention. Recent initiatives like the Kigali Declaration and WHO's NTD roadmap aim to address this, emphasising collaboration and political commitment. However, individuals with chronic NTDs often remain overlooked, hindering effective management of these diseases. Therefore, we arranged a meeting with individuals affected by NTDs as the focal point, enabling them to share their experiences with their disease.

The Affected Voices meeting aims:

- Amplify the voices of NTD affected individuals from Tanzania and Zimbabwe to have a positive impact on policy and practice.
- Understand those living with chronic and debilitating disease manifestations of NTDs, especially, the elderly who are missed by national control programmes.
- Forming such a network of the affected which draws lessons from different African health systems in order to shape the formulation and deployment of effective control strategies for Africa's most burdensome NTDs.

PARTICIPATING PARTNERS

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UNITING TO COMBAT NEGLECTED TROPICAL DISEASES

HIGHERLIFE FOUNDATION
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P.I.G Parasite Immuno-epidemiology Group

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ELIOT

Eliot, works as a fisherman and frequently faces the repercussions of fishing in contaminated water, leading to constant exposure to schistosomiasis. This persistent condition arises because he cannot refrain from fishing in contaminated water, as it is his means of livelihood. Consequently, although he has undergone treatment and recovers temporarily, he invariably contracts the disease again shortly afterward.





TAFADZWA

Tafadzwa was diagnosed with lymphatic filariasis (LF) and sought medical attention, where it was recommended that the accumulated fluid in her leg needed to be drained. The condition causes visible nerve emergence, resulting in progressive swelling of her legs over the years. One of her legs is larger, with veins becoming increasingly prominent. The hospital provides injections and painkillers to alleviate her discomfort. While Tafadzwa is generally able to work, the onset of pain leaves her bedridden. When in pain, she requires assistance from her child, even for basic tasks such as going to the toilet, bathing, and eating, as getting out of bed becomes challenging.

Tafadzwa reflects on how her life would have been significantly better without LF. Contracting the disease during her school years led to the discontinuation of her education due to the impact of her condition.

CATHERINE

Catherine spoke on behalf of her child, Takudzwa (on the right), who was bitten by a snake while using pit toilets at school. This incident resulted in Takudzwa experiencing symptoms such as delirium, dizziness, and frequent headaches, causing her to miss school often due to illness and excessive sleep. Upon seeking medical help at Shamva Hospital, they found that anti-venom was not available, prompting the administration of a drip and painkillers. Additionally, they had to cover the expenses for antibiotics.

Catherine firmly believes that anti-venom is widely acknowledged and suggests that traditional healers might have access to it. She advocates for investment and research to facilitate the production of anti-venom, ensuring its accessibility across various regions. She also suggests that developing it into a pill form could be a more practical approach.





ROSEMARY

Rosemary sustained a cobra bite to her thigh during the night. Despite seeking help from a community health worker and a hospital, she was unable to access anti-venom. The hospital administered fluids and medication, but upon returning home, her wound worsened, resulting in necrosis. Financial constraints prevented her from returning to the hospital, so she sought assistance from a traditional healer. However, this remedy was insufficient, and she continues to suffer from occasional wound reopening, leading to pain and loss of appetite.



EMILIA

Emilia hailed from a community that held reservations against conventional medical interventions. Consequently, she endured the painful symptoms of schistosomiasis for 23 years, which developed to female genital schistosomiasis and ultimately resulted in infertility. Upon finally seeking medical assistance, Emilia successfully conceived at the age of 33 and now has two children.

Emilia's journey underscores the efficacy of schistosomiasis treatment. Furthermore, she has played a pivotal role in dissuading others in her community from engaging in practices that facilitate disease transmission. However, challenges persist in her community, notably in accessing safe water from boreholes. Among the 11 villages in her area, only five currently have access to such reliable water sources.

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