

Field Story from Kirker Hospital
Doses of antibiotic and iron supplement from a MAP/IRT Shipment
help a woman get back to normal and productive life again

Zeinabou Moussa is a 24 years old woman from Nguel Belli, a village located in the Northern edge of Maine-Soroa District, Eastern Niger. The village population is estimated at 2,000 inhabitants, mainly sedentary farmers and nomad herders. A mother of two young children, Zeinabou has always been quite instrumental in providing for her family through whatever means she could.

Her day typically starts at dawn, right after the Morning Prayer. Her family chore begins with preparing breakfast for the whole family, followed by fetching water from the well located at the other end of the village. She needs to make several trips to fill up the family jars to provide enough drinking water for the day, for cooking lunch and diner, as well as for doing the dishes, and bathing the children.



She then would have to travel 2 to 3 miles outside the village to fetch firewood that would be used to cook food.

After cooking and taking lunch to her husband on the farm, she would spend a couple of hours helping cultivate on the family farm before making her way to her own farm where she produces beans, peanuts, okra and other cash crops that she not only uses to feed the family, but also sells to earn a little cash that she could use to buy some clothes and provide for her personal needs.

The rainy season, with its increased load of farm work, also comes with the burden sicknesses topped by malaria. This rainy season is not any different from previous years for Zeinabou's family. In the community, each member awaits his turn to have his malaria episode.

According to the World Health Organization, About 3.4 billion people – half of the world's population – are at risk of malaria. There were an estimated 207 million cases of malaria in 2012, and an estimated 627 000 deaths. 90% of all malaria deaths occur in sub-Saharan Africa. It killed an estimated 482 000 children under five years of age, that is 1,300 children every day, or one child almost every minute.

Zeinabou fell sick of Malaria in late September, and remained untreated for almost 10 days as a result of lack medicines at the satellite rural clinic in her village. In her

condition, she could not afford to take the 3-5 hour trip to Kirker Hospital. The trip would require a couple of hours of donkey ride to a near town to catch an erratic public transport vehicle. Even if she could physically do it, her husband did not have the money needed to make the trip possible.

The only possibility for her to be easily evacuated was on the village market day, which takes place once every week. On that day, the village becomes a hub for business activities with sellers and buyers getting together to trade cereals, livestock, and other commodities; with transport vehicle easily available on that occasion.

Seeing her deteriorating health, and thanks to extended family and community contributions, she was brought into Kirker Hospital in a critical condition, two weeks after she became sick. Very sick and weak upon her arrival at Kirker Hospital, she was admitted to the emergency room, where the nurse on duty evaluated her condition. It was determined that, besides malaria she was suffering from not only anemia, but also urinary infection.

Zeinabou was lucky enough that her admission into Kirker Hospital coincided with the arrival of the last MAP IRT-sponsored shipment in September. The Hospital treated her for malaria, and from the MAP shipment she received iron to treat her anemia and antibiotics for her urinary infection. She remained hospitalized for over ten days until she fully recovered. She was discharged from Kirker Hospital on October 7th, forever grateful to MAP, IRT, KAMRA, Kirker Foundation Niger, and Kirker Hospital. Upon her discharge, she said, *"I am thankful to God, who granted me with my health back. I am also grateful to those involved in making my journey to recovery possible. May God bless them all ! I can't wait to be back in my village and resume normal life again."*

Now that the MAP/IRT shipment has been distributed to medical facilities throughout the region, thousands of patients like Zeinabou will be able to get medical treatment right in their villages, without having to travel as far as Maine Soroa. Besides the Kirker Hospital of Maine Soroa, the Regional Hospital of Diffa, the District Hospital of Nguigmi and more than 20 satellite rural clinics like the one in the village of Zeinabou received medicines to care for not only local patients, but also patients among Nigerian refugees.