

# Local Communities in Kween District Embrace Marburg Virus Disease Control Interventions

Kween, 8th November, 2017:- The Marburg Virus Disease (MVD) response activities in Kween district eastern Uganda are now in full throttle despite initial scepticism from sections of the community. Association of the disease with witchcraft, poor information flow from the treatment centre to the community, inadequate logistics, terrain of the area and presence of few partners on ground were major challenges in the initial stages of the response.

Currently, all pillars of the response are up and running and there is increased support and participation which has made implementation of activities easy. The response in Kween is led by the local authorities; the Chief Administrative Officer chairs the daily District Taskforce and all pillars, that is, coordination, surveillance and Laboratory, case management and social mobilization are led by district officers supported by officers from the Ministry of Health, the World Health Organization (WHO), UNICEF, MSF/France, Uganda Red Cross and CDC.

Sustained community engagement, realignment of interventions, increased partner presence and above all, improved information flow to the communities have been instrumental in winning over the people especially in a few resistant communities. The interventions are firmly based on openness, inclusion and participation by the local people to the extent possible.

The MVD Treatment Centre for instance, has been constructed by local people supervised by MSF/France and WHO experts using local materials were available. The community was also conducted on a guided a tour around the facility and prayers held led by the local priest. These actions helped to demystify the facility thus reducing fear and stigmatization initially associated with it.

The locals are also involved in surveillance and in active case search which has enabled the people to identify with these activities thus demonstrating that there is no ulterior motive in the support provided by external experts. The same is true for the case management pillar where health workers have explained in plain language the concept of supportive treatment and why patients with signs and symptoms of AVD have to report early to health facilities.

Kween district is largely inhabited by the Sabiny who are closely related to larger Kalenjins of Kenya. In these communities, chiefs, “prophets”, elders and clan heads wield considerable influence. Therefore, meetings have been held with 34 out of the 150 identified from this category and MVD information shared with them which in turn contributed to community acceptance and participation.

Religious leaders of all denomination have also been instrumental with many disseminating MVD information to their congregations following orientation given to them earlier. A total of 150 religious leaders were identified and to date 141 have been oriented and are participating in the response. Even traditional healers, some with contrary views to conventional scientific knowledge have been approached, given MVD information for their own good and also requested to share it with people who utilize their services.

The political leadership is also fully on board and fully immersed in activities, traversing the district thus making the response even more acceptable in the communities. Overall, 258 local leaders and seven Members of Parliament are actively participating in the response in Kween district. This has boosted social mobilization efforts and advocacy for resources to support the interventions.

The private sector such as clinics, taxi operators, boda-boda riders, drug shops and restaurants have also been targeted and are participating. Apart from disseminating information, they are providing facilities for hand washing and hygiene in their places of work.

Schools have been targeted as well and to date, 43 out of the 129 schools in the district have been reached with MVD messages through assemblies and meetings. There are 426 teachers and 299 have been oriented on MVD and are participating in further dissemination of information to their students and communities.

Village Health Teams (VHTs) members, who are the first point of contact between the communities and the formal health sector are playing a commendable role. Kween district has 992 VHTs and 831 have been oriented and are undertaking individual and group sessions as well as house to house interventions. There are 23,217 households in Kween and as of 6th November 2,341 had been reached by VHTs and other mobilizers in the high risk areas. Additionally, Ministry of Health film vans are traversing the district holding community dialogue sessions cognizant of the need for social distancing in this type of outbreak.

Solidarity packages provided by WHO to the relatives of CC and CJ who have so far died of MVD has created a lot of goodwill in the community. At the handover ceremony elders and family members expressed appreciation to WHO for the gesture and pledged to fully join the response and ensure MVD is stopped in their community.

All these efforts are yielding results and as of 7th October 2017, there was still one probable and two confirmed cases in Kween district. Most contacts have also been discarded having completed 21 days of follow-up and monitoring without developing MVD symptoms.

Despite that, a lot remains to be done. There are still many doubters and some communities have not yet been reached with messages and other interventions. Health workers are determined to finish the job not only in Kween but also in all neighbouring districts and across the border in The Republic of Kenya in collaboration with counterparts there.

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<http://www.afro.who.int/news/local-communities-kween-district-embrace-marburg-virus-disease-control-interventions>