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How Malaria Impoverishes Country

The Monitor (Kampala)

NEWS

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Kampala

Until recently malaria was only known as the leading killer disease in Uganda and sub-Saharan Africa. But studies from the Ministry of Health indicate the disease is also the leading cause of poverty.

This is because it has serious impact on the economic, social and cultural aspects of society.

A study carried out in 2002 in Uganda identified ill health as the most frequent cause of poverty. The study showed that a poor malaria-stricken family might spend up to 25 per cent of its income on malaria treatment and prevention. There are also direct costs in form of treatment, treatment seeking and funeral expenses.

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Industry

Malaria leads to loss of household incomes through absenteeism from work. It is estimated that workers suffering from a malaria bout can be incapacitated for five to 20 days. A study showed that a high percentage of employees were absent from work due to malaria.

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In Apac District 54 per cent of workers cited malaria as the reason for absenteeism, in Kampala 33 per cent and 50 per cent in Rukungiri. On the average out of seven working days, between four to nine days were lost per malaria episode. This means that recovery would take longer than a week in some workers.

During such a period some companies pay for workers' treatment while the employees are not productive at the moment. Company production is affected leading to lower profit levels and higher costs of production. And this occurs several times a year in many families.

This affects the national budgets because the lower the output, the lower the taxes paid to the government. As such, the government cannot meet the obligation of providing services such as in health, thus creating a vicious cycle of poverty.

Apart from direct effects of malaria to industries is the additional low demand level. A sick and perennially poor population has low consumption levels. Because of low household incomes, such a population can hardly afford basic necessities in life.

This makes it difficult for such a country to attract investment because of the small market available. The opportunities that go with investment (jobs, taxes, social infrastructure and a higher standard of living) are lost.

In industry and agricultural enterprises like tea, sugarcane, coffee, rice, tobacco estates, malaria accounts for the greatest number of man-hours lost, which maybe up to or more than 50 per cent all the man-hours lost. This affects production and revenue for the industry, families and the nation as well.

Malaria also leads to loss of investment funds thus affecting the economy. It is known that investors are not much interested in investing in countries where most of their profits will be eroded through absenteeism from work due to malaria and on treatment of malaria infected workforce.

Agriculture, Education

This means there are high chances that children in such families will not be able to attend school. This affects performance. It is estimated that in endemic areas like Uganda, malaria may impair as much as 60 per cent of the schoolchildren's learning ability.

Children from such families will perform poorly, go to poor schools and have fewer or no opportunities to higher education. This makes them miss out on good employment opportunities and they end up doing low skilled labour intensive jobs.

In case the dead person is the breadwinner for the family, children will automatically drop out of school and are condemned to living a wretched life.

In agriculture, the period parents (mostly mothers) spend nursing sick children is lost whereas it could be used to grow crops for food and income.

Hence, an episode of malaria affects health, education, agricultural activity and food security. All these build up to increasing poverty in homes.

Statistics from the Ministry indicate that malaria afflicted families on the average can harvest only 40 per cent of the crops.

It must be remembered that Uganda is basically an agricultural-dependent country. About 90 per cent of the population is engaged in agriculture. The country earns more from agriculture than from any sector. When this mainstay of the economy suffers, the very fabric of the country is threatened.

Malaria is transmitted by the anopheles mosquito and it spreads faster during the rainy season. Unfortunately this is the main farming season, when families can least afford to be sick. Hence malaria interferes with farm activities increasing poverty in homes.

Social-cultural Impact

Malaria has also caused serious socio-cultural consequences in families.

Frequent illness or deaths of children due to malaria can lead to misunderstandings within families (especially polygamous families) and between families.

Those with sickly children or children dying often are likely to accuse others whose children do not fall sick or die often of bewitching their children, which may result into a fight or hatred.

Families with a lot of problems (frequent illnesses, poverty, low education levels and inability to fend for children) are usually unstable.

In most parts of rural Uganda (if not all) it is conceived insensitive if a person continues with farm work like digging. Until a person is buried no digging is permitted.

Yet during this period the bereaved families provide food for mourners although some neighbours assist.

This increases poverty and food insecurity as President Yoweri Museveni noted. Whereas food is being consumed, no production is taking place thus creating not only food deficit but increasing poverty since agriculture is the income earner in rural Uganda.

Cost of Treatment

Dr John Bosco Rwakimri, the National Malaria Control Programme manager in the Ministry of Health says Uganda loses at least \$690 million to malaria every year. This is in terms of treatment, prevention, time lost due to sickness not counting burial expenses.

According to the Ministry of Health direct cost of treatment for an episode of malaria is estimated at Shs8,000 (\$4.10) in urban settings and Shs3,300 (\$1.80) in rural populations.

Assuming that 50 per cent of the 5,200,000 children under five years old currently in Uganda suffer an average of six episodes annually and are treated in health facilities at Shs2,000 per episode, then Ugandans are spending $(50/100 \times 5,200,000 \times 6 \times 2,000) = \text{Shs}31,200,000,000$ annually for malaria treatment of the under fives only! (US\$20 million, ed. note)

This does not include other expenses incurred, such as transport while seeking treatment, treatment for adults, and children over five years old, treatment of adults and children admitted in health facilities, the higher costs of treating the under 5s and other family members in private clinics and urban areas, chloroquine failures which require more expensive drugs, funeral expenses for children and adults who die, aerosol sprays, mosquito coils, mosquito nets and other mosquito control expenses.

It therefore follows that controlling malaria is not only a health concern but a socio-economic and cultural obligation for all sectors. It is one way of improving human development and fighting poverty in Uganda.

Statistics used are from the Ministry of Health obtained from www.health.go.ug. However, some adjustments have been made to reflect the growth in population and the currency exchange rate, although the figure for treatment of malaria has remained at Shs2,000 as per study.

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