

PETER AND JANICE CLARK IN SIERRA LEONE

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In the Southern Highlands of Papua New Guinea in the mid 1970s, it was not uncommon to be buying fresh vegetables and notice that the lady selling her produce was missing part of one or more fingers. Leprosy was prevalent in the region and one aspect of the disease involved the loss or part of the ear, the nose, a toe or two and perhaps a finger. However both the Huli and the Mendi tribes practised a mourning ritual, which involved a widow severing her own fingers with a blow from a hand held rock. It was therefore never easily evident as to what had caused the loss of a food seller's finger(s).

We were reminded of this episode when encountering numerous people in wheel chairs in certain locations in Freetown. Whilst an occasional wheelchair user can be seen in many places there are a couple of locations where they socialise in groups and demonstrate their chair-skills and occasionally take to mixing it with the traffic and getting a tow from a vehicle by holding onto its tow bar. At first we had thought these young people might have been victims of the war as some are missing lower limbs but it became evident that most had withered rather than missing limbs. They, mostly young men and women, appear to have suffered polio and the need for immunisation programme which has just begun would support such a probability. The West Africa wide programme covering 19 countries was initiated in Sierra Leone, where polio was once thought to have been all but eradicated.

Over the next few weeks, 400,000 health workers and volunteers will be going from house to house to ensure 85 million children under the age of five, are be immunised against polio with an oral vaccine. In Sierra Leone, ten years after the last reported case, new cases of the most contagious type of polio have surfaced in the country. Polio, which attacks the nervous system, has clearly not been stamped out by previous joint efforts by the Red Cross and United Nations. The current programme is supported by Rotary International, who has donated \$30 million towards the first round of vaccinations.

Dr. Thomas Samba is responsible for child health at the Salone Ministry of Health. He says the biggest challenge is getting the vaccine to the most remote areas of the country. In the interior and the northern province of Koinadugu, (see map above) where roads are few and far between, local chiefs have hired bicycles, and on the coastal Sherbro island, the fishermen are helping to transport vaccination teams in boats. Another logistical challenge involves the vaccine which must be kept below 8 degrees Celsius, a challenge in a tropical country where electricity is limited even in the capital, Freetown.

A 2009 polio immunization campaign failed to stamp out the disease because it did not reach enough children with vaccines. This year, Sierra Leonean children will receive an additional dose after three weeks and a third dose one month later to ensure the population builds up immunity to the disease. The success has been impeded in the past by some religious leaders suggesting the vaccinations were an attempt to spread HIV and would cause sterility. The new campaign hopes to reach 1.2 million children under five years of age, across the country.