



Action against AIDS Germany

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"Malaria, HIV and tuberculosis have by no means disappeared just because Covid-19 has emerged"

Interview with Naomi Wanjiru from Kenya, in preparation for our conference "Global Health Champion Germany? From HIV to SARS-CoV-2. What have we (not) learned?"

Text Axel Schock. Photo: Naomi Wanjiru

Nurse and community activist Naomi Wanjiru from Kenya talks about her tuberculosis infection, stigma and discrimination associated with TB, poverty and treatment options in the Global South, and the role of the Global Fund, especially in supporting vulnerable communities, without whose help she would not have survived.



Photo: Naomi Wanjiru, Kenya

Naomi Wanjiru's commitment to the fight against TB comes at a high personal cost: The nurse had become infected with the pathogen during her work and was seriously ill. But these experiences have

strengthened her resolve to work even harder for better care and against the stigmatisation of the disease.

For twelve years now, Naomi Wanjiru has been working as a nurse in a Comprehensive Care Centre, and she continues to love her job. "It always inspires me to see a patient leave the hospital cured after months of treatment," says Naomi Wanjiru. The fact that she still works in a clinic specialised in HIV and tuberculosis and has not changed fields is not so self-evident. Barely a year after she started working there in 2009, she suffered from severe back pain that nothing could alleviate. Only after many months and numerous examinations - in the meantime, Naomi Wanjiru couldn't hardly walk anymore because of the pain - did an MRI scan lead to a diagnosis: she was suffering from so-called extrapulmonary tuberculosis. It did not affect the lungs as usual, but the inflammation had settled in the lumbar spine.

A misdiagnosis and its consequences

It was difficult to understand why the cause of the disease was not found for so long in a clinic specialised in tuberculosis. For Naomi Wanjiru, however, a much more existential question arose: "How could I pay for treatment? When I was diagnosed, I was about to just give up on myself."

But she did not give up, she fought. More than two years of treatment eventually followed. Because, as it turned out after the completion of the first-line therapy, the pain had still not disappeared; the cause was multidrug-resistant tuberculosis.

The spine was finally so badly damaged that the affected vertebrae had to be removed and replaced with metal plates to support her back. The necessary operation could be carried out in India, made possible by a fundraising campaign initiated by friends and family members.

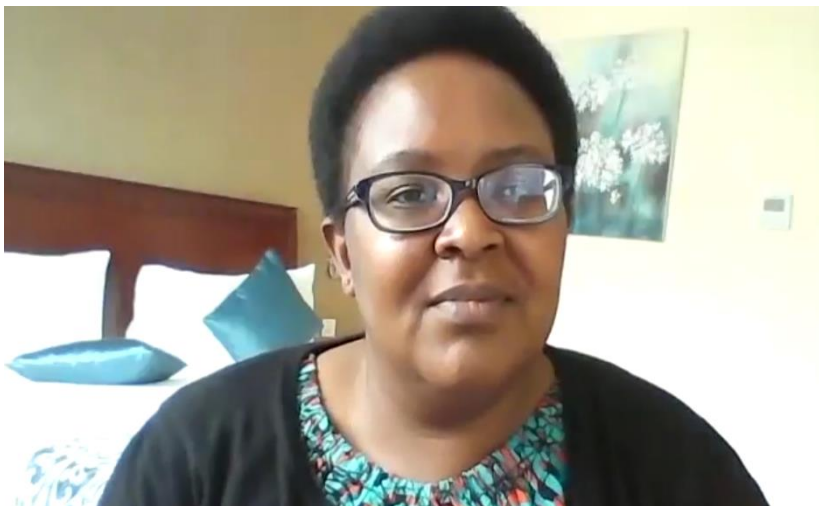


Photo: Alexej Stoljar. Naomi Wanjiru, interview with Action against AIDS Germany

Malaria, HIV and tuberculosis particularly affect the socially disadvantaged

But it was at least as important that her tuberculosis was treated first. "HIV, malaria and tuberculosis have hit our already economically weak country hard," says Naomi Wanjiru. And people in the lower income bracket are

particularly at risk, she says, i.e. those who cannot afford expensive health insurance and thus good health care. "I am only alive because of the Global Fund," says Naomi Wanjiru unequivocally. "Millions of people in Kenya alone are like me. Because of the Global Fund's support, we have been given a future again."

The Global Fund has not only provided the drugs, but also the infrastructure for the treatment and care of tuberculosis sufferers. Financial support is given, for example, to psychosocial counselling centres, self-help groups and the provision of food for needy patients.

Role model and encourager

Naomi Wanjiru uses her own example to illustrate the importance of such structures. "In the worst phase, I couldn't even walk for over a year, and yet I didn't miss a single dose of my medication because I was visited at home by the staff of a community facility. This not only gave her the strength and hope to persevere and find her way back into life step by step, but also encouraged her to use her own experiences. "I survived and am a living example that you can be cured even of severe tuberculosis," says Naomi Wanjiru. "This is a powerful argument to convince other people that it is important to seek help and take the medication, and to do so as prescribed and without interruption," explains the mother of two.

Naomi Wanjiru therefore also speaks openly about her own medical history to the patients in her clinic. But she also wants to inspire Kenyan society. On the one hand, so that more is done against tuberculosis, but on the other hand also to fight stigmatisation. Here, too, Naomi Wanjiru speaks from experience. She has experienced that nursing services did not want to visit her at home because of her tuberculosis, so she had to give herself the injections. But she is also no stranger to self-stigmatisation. For a long time, she denied to other people that she had tuberculosis for fear of being ostracised. "We have to teach people that tuberculosis is a disease like many others," says Naomi Wanjiru. This work of persuasion is at least as important as the treatment of sufferers themselves, she adds.



Photo: Naomi Wanjiru, Kenya

Community projects as a decisive key

For her, a key to this is the empowerment of the particularly affected groups in society.

"The Global Fund provides drugs, but it must be ensured that they reach the people and communities in need," warns Naomi Wanjiru, who is also involved in the Global Fund Advocates Network. "HIV, malaria and tuberculosis is not in the offices and administrations, but in the communities. That is where the people who need help meet those who can provide help." That's why the donations have to go there and be passed on directly to the people by grassroots organisations.

Especially in the wake of the Covid 19 pandemic, Naomi Wanjiru sees a danger that should not be underestimated, that the other diseases will be forgotten. "Malaria, HIV and tuberculosis have by no means disappeared just because Covid-19 has

emerged."

Rather, in her view, these diseases need to be tackled equally and, above all, with equal priority. Anything else would lead to a new stigmatisation.

For Naomi Wanjiru, it would therefore be important for the Global Fund to have an emergency fund for surprising developments, as is the case with Covid-19, in order to be able to react quickly. "But also the infrastructure in the health sector, such as hospital equipment, must be built up to the extent that we are prepared for such situations."

Thanks to Axel Schock for the article and to Naomi Wanjiru for sharing her story and to the Global Funds Advocates Network for facilitating!

[To register: Register for the conference "Global Health Champion Germany?! From HIV to SARS-CoV-2 - What have we \(not\) learned?" here](#)

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