# Volunteer Medical Pack



This medical pack is issued on behalf of Phunzira for volunteers who will be involved in development projects in Ruarwe, Malawi.

All volunteers MUST have medical insurance before their trip to Malawi; although Phunzira will provide as much support as possible with medical matters, Phunzira is not able to provide full or partial medical cover for any volunteers during their stay.

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# About Malawi

### Safety:

In terms of security, Malawi is perceived as being a very safe place to travel and reside, and Malawians are well known throughout the region for their friendly and welcoming attitudes towards foreigners. The country is roughly the size of England, which makes it relatively easy to travel around, but journeys can be very lengthy nonetheless. The country is landlocked between Mozambique, Tanzania and Zambia, yet since Lake Malawi consumes a fifth of the country's landmass, Malawi is surprisingly green and enjoys a sizeable coastline. Rainy season in the north of the country lasts approximately from November to April, during which time extra precautions should be taken to avoid mosquitoes.

There are five main cities: Lilongwe (the Capital), Zomba, Blantyre, Mzuzu, and Karonga. In most parts of the country tourist facilities are limited and lack of proper infrastructure can cause wild irregularities in electricity, roads, water supply and health care.

In general most parts of the country are perceived as safe and secure, mainly because the local communities play such a predominant role in society, especially in rural areas. Street and petty crimes, however, tend to be more common in Lilongwe and secondary cities. You should always watch your bag carefully and carry relatively small amounts of cash.

There is a multiparty democracy in Malawi and women have the right to vote. However, female volunteers should be sensitive towards certain cultural differences, especially clothing,

and should try to dress respectfully and appropriately when passing though towns and villages.

### Health:

Medical facilities are very basic throughout the country, and outside of the main cities medical resources (doctors, beds, medicines and sanitised equipment) tend to be very limited.

Life expectancy stands at approximately 54.8 years - this is due mainly to two factors: HIV and malaria. Around 11% of the adult population has HIV and this number is significantly higher in the rural, northern regions. Malaria claims more than a million lives each year in Africa alone, 90% of them children. It is prevalent in all parts of Malawi, especially during the rainy season (Nov – Apr).

In terms of foreigners travelling to Malawi, it has often been documented that there is a risk of catching bilharzia in the otherwise beautiful fresh water of Lake Malawi. Bilharzia is caused by a microscopic worm that lives for part of its life cycle in the human body causing severe stomach upset, exhaustion, and urinary tract infections. It is not a deadly disease and the overall risk is negligible (especially in the north); regardless, travellers should avoid swimming in stagnant water close to human habitation, particularly where there are reeds.

Volunteers should also beware of contracting giardia, an infection that affects the small intestine. Giardia is most commonly contracted by drinking contaminated water. Symptoms are very similar to malaria, and it is very easily treated if noticed at an early stage.

# Before Your Trip

### Vaccinations:

All volunteers should visit their GP or a travel health clinic 4 – 8 weeks before departure.

Vaccination	Information		
Hepatitis A	Recommended for all volunteers, preferably 4 weeks before departure. A booster should be given 6 – 12 months later.		
Typhoid	Recommended for all volunteers. Generally given in oral form.		
Yellow Fever	Required by the Malawian Ministry of Health for all volunteers entering Malawi. This involves a cost.		
Hepatitis B	Recommended for all volunteers.		
Rabies	Recommended for all volunteers. This involves a cost.  Please be aware that Ruarwe is a remote area and immediate access to treatment cannot be guaranteed.		
MMR (measles, mumps, rubella)	Two doses recommended for all volunteers born after 1956.		
Tetanus – diphtheria	Recommended for all volunteers who have not received a tetanus - diphtheria immunisation within the last ten years.		

#### Anti-malarial tablets:

A malaria prophylaxis is essential for all volunteers. Please consult a medical practitioner before starting any of these medicines. There are three main types:

Drug	Dosage	Side Effects	Note
Larium (Mefloquine)	Once a week, starting 2 – 3 weeks before arrival (change if side effects are noticed) and continuing for 4 weeks after departure.	Nausea, vomiting, dizziness, insomnia, nightmares. On some occasions depression, anxiety, hallucinations.	Cheapest. Adverse side effects – not suitable for everyone. Please consult a medical practitioner before starting this medicine.
Doxycycline	Once daily, starting 2 days before arrival and continuing for 4 weeks after departure.	Photosensitivity, exaggerated sunburn reactions, indigestion, nausea if taken on an empty stomach.	Mid-range price. Recommended for long-term volunteers.
Malarone	Once daily, starting 2 days before arrival and continuing for 7 days after departure.	Typically mild. On occasions abdominal pain, nausea, vomiting, headaches.	Most expensive. Least side effects. Recommended for short- term volunteers.

# Medication:

To avoid malaria, insect repellent with maximum 50% DEET should be bought before leaving for Malawi. Long-term volunteers may at times not have access to medical care whilst travelling and are advised to purchase a medical pack with materials for emergency self-treatment.

Travellers' diarrhoea is very common, although most cases are mild and do not require antibiotics or anti-diarrhoeal drugs. In such a situation adequate fluid intake is normally sufficient, however volunteers may wish to purchase relevant medication before entering the country.

HIV/AIDS is extremely prevalent in most parts of Malawi, and all volunteers are recommended to bring condoms before their arrival.

Phunzira has a medical kit kept at Zulunkhuni River Lodge and reserved for volunteer use. It contains basic antibiotics, painkillers, malaria preventatives and treatment, as well as bandages, gloves etc. We do however recommend all volunteers to carry their own personal first aid kit with the following items:

- Antibiotics a broad spectrum antibiotic such as a penicillin for general infections and either metronidazole or ciprofloxacin for bacterial diarrhoea
- Antiseptic powder/ointment cuts and sores get easily infected in a humid environment
- Anti-diarrhoeal medication e.g. Imodium
- Oral rehydration salts
- Painkillers and anti-inflammatories e.g. Paracetamol, Ibuprofen
- Antihistamines for allergic reactions

- Hydrocortisone cream for allergic skin reactions or itchy bites
- Bandages, plasters, gauze and adhesive tape
- Syringes and sterile needles
- Thermometer
- Insect repellent with max 50% DEET
- Suntan lotion
- Antiseptic hand lotion
- Please don't forget any of your usual medication such as the contraceptive pill, epi-pens etc.

There are emergency first aid kits for travellers available at many stores or online which contain some or all of the above equipment in one pack.

# **During Your Stay**

# Volunteer Precautions:

#### A – Malaria

Malaria is a problem in Ruarwe and we strongly advise all volunteers to follow recommended precautions:

- Make sure to take anti-malarial tablets for the recommended time before entering the country and after leaving.
- Make sure to take your pills everyday around the same time and after eating (or every week if you are taking Larium).
- Use insect repellent.
- Try to cover yourself in the evening, minimising as much bare skin as possible.
- Always use a mosquito net, and check to make sure any holes are covered.

### B - HIV/AIDS

- Volunteers are not at risk unless they have unprotected sex or receive injections or blood transfusions.
- Always use a condom.
- There are clinics close to the popular tourist town Nkhata Bay (approximately 5 hours from the village by boat) where volunteers can get free HIV tests and same-day results.

# C – Bilharzia

- Only swim in areas of the lake where the water is moving and clear (Ruarwe is fine).
- Avoid stagnant areas where there are many reeds.
- Make sure to get medication (Praziquantel) before leaving Malawi (these should be taken as a single dose with a large meal and plenty of water before bed approximately 6-8 weeks after leaving).

## D – Giardia

- Do not drink tap water unless it has been boiled, filtered or chemically disinfected.
- Do not drink unbottled beverages or drinks with ice.
- Do not eat fruits or vegetables unless they have been peeled or cooked.
- Avoid cooked foods that have been sitting at room temperature for a long period of time.
- Do not eat raw or undercooked meat or fish.

### Phunzira Precautions:

- Volunteers that are worried about having contracted any of the above should report immediately to the project coordinator. Cases of severe illness are very rare but often occur due to lack of action.
- In case a situation arises where a volunteer contracts malaria, Coartem or an equivalent is stocked. Coartem is one of the most successful and side-effect-free malaria treatments around and is suitable for use in most cases.
- In case a situation arises where a volunteer contracts malaria that is not treatable with Coartem, the health centres in Ruarwe and Khondowe stock appropriate treatment. Alternatively, transport to a bigger hospital will be arranged if necessary.
- If a volunteer wishes to get tested for HIV/AIDS then they can travel to Nkhata Bay for this. The tests are free and confidential.
- If the situation arises where a volunteer experiences sickness that is most likely not related to malaria, they will be referred to one of the following:
  - 1) The main hospital in Mzuzu or Nkhata Bay, which will be free of charge except for any medication prescribed.
  - 2) The private drop-in clinic in Nkhata Bay, which costs but has an extremely good and thorough reputation.
- In most medical situations the volunteer is expected to cover the costs for their treatment, appointments, and travel to and from the clinic/hospital.
- Primary contact details in case of an emergency:

Philippa Mander; Health Coordinator.

Philippa lives on-site in close proximity to the volunteer quarters for 6 months of the year.

Email: philippa@phunzira.org

# After Your Visit

#### Precautions:

After volunteering at the centre, Phunzira recommends you take the following precautions before embarking on your journey home:

- Anti-malarial tablets should be taken for at least one week after leaving the country. For more information on specific time frames, please refer to section two of this pack or ask your GP for advice.
- Tablets for treating bilharzia should be bought <u>before leaving Malawi</u>. These can be obtained from any pharmacy and the chemist will provide you with further information on how and when to take the tablets (you need to know your approximate weight in kg).

- Due to the nature of the high HIV/AIDS rate in Malawi, Phunzira recommends volunteers to get tested once they are back in their home country.
- If any volunteers plan to travel around Malawi or other parts of Africa once they have completed their work with the centre, then they are strongly recommended to consult their GP to seek further advice on precautions for cholera, yellow fever etc.

We hope that all volunteers have a wonderful stay in Malawi with Phunzira, and we will do our very best to ensure the safety and well being of all our helpers.

If you need any more information about precautions to take before volunteering with us then please contact our Health Coordinator Philippa: philippa@phunzira.org

