Malawi: Testing times for TB in prisons

Studio cue

Prisons provide the perfect environment for tuberculosis to spread. In Malawi between six and ten per cent of those infected countrywide are behind bars. But now a TB screening and treatment project at the Central Prison in Zomba, which shows prison warders how to diagnose the disease, is showing positive results. Frank Kapesa reports.

Script

*Sfx: prison door closing*

**Frank Kapesa:** I am right in the Zomba Central Prison, the oldest prison in the country. As part of TB management the prison authorities over here set aside a special room which is now serving as a clinic. I am in that particular clinic, we have all the necessary equipment, some piles of medication and some nutritious food that they give to those that have been found with tuberculosis.

*Sfx: door opening*

**George Muyaba:** My name is George Muyaba I was working as a civil servant in the Ministry of Education. I misappropriated some funds, that's why I was convicted to 14 years.

**Frank Kapesa:** How did you feel when it was finally confirmed that you had TB?

**George:** I appreciate the way the doctors responded to the way I was because I was getting the right treatment for the right disease.

**Frank Kapesa:** How long has your treatment taken?

**George Muyaba:** Six months. If I was outside it was a different case. Because most people outside they die quickly just because it takes time for them to discover that they have TB.

**Frank Kapesa:** What was the reaction like from fellow inmates?

**George Muyaba:** My fellow inmates were very happy since if you haven't been discovered, sometimes you can spread TB to other people and like when you have been discovered they take us to the general hospital for 14 days. After that then we come back, we sleep normally the way we have been sleeping normally in the cells. They cannot get TB.

**Frank Kapesa:** Previously prisons were seen as places where one would easily get the TB infection, maybe because of overcrowding, but according to officials here, on average the number of people that are suffering from tuberculosis is dropping over the years and right now I am being joined by the commissioner of prisons.

**Commissioner Nowa:** My name is Tobias Nowa. When prisoners get admitted they get tested, he is asked if he had been coughing for some two weeks or so before he entered. In
addition to the question he should explain how he is feeling so that if he is in with TB, treatment should start and he is put in isolated cells so he doesn’t infect others.

*Sfx: traffic*

**Frank Kapesa:** Three to four minutes walk from the Zomba Central Prison is the Zomba Central Hospital which works hand in hand with the central prison authorities to contain and manage tuberculosis within the prison.

*Sfx: hospital noises*

**Peterson Chisale:** My name is Peterson Chisale – clinician from prison. Where we are now is the prison ward for TB, they are infectious to others we isolate them.

**Frank Kapesa:** Do we have many prisoners actually who are TB positive?

**Peterson Chisale:** The previous years we had a lot of patients but as you can see the number now has decreased. Last month we had about four.

**Frank Kapesa:** And why is the number decreasing?

**Peterson Chisale:** The system of prisoners submitting sputum while they are coming in prisons, and also because of the prison lab microscope, it is also assisting us to have more results.

**Frank Kapesa:** With funding from the National Tuberculosis Control Programme the prison department is training its staff to operate microscopes.

**George Kholowa:** I am George Kholowa – a prison warder. I am working as a microscopist.

**Frank Kapesa:** OK just to give a picture of where I am, it’s a room with about three Olympus CX31 microscopes which are used to diagnose suspected TB patients.

**George Kholowa:** First of all, when a patient comes, he comes with bottles containing specimen which is sputum. As you can see there, those are the bottles. From there we smear the sputum on the slide. After that we prepare it by mixing with some chemicals. Our microscope uses electricity for extra light. Here on the microscope...*(he is interrupted)*

**Frank Kapesa:** So when you illuminate like that you are able to start reading your data?

**George Kholowa:** Yeah we have started now, where we can see some organisms through this microscope.

**Frank Kapesa:** So in a day how many bottles of sputum are you able to screen?

**George Kholowa:** About 50 of them.

**Frank Kapesa:** What used to happen before when you had no microscopes?

**George Kholowa:** We were waiting for a week or more before the results came out for our patients to start taking the drugs but as it is of now it’s only a day.
Frank Kapesa: The whole process has involved training prison warders to be TB managers and right now I am joined by the commissioner of prisons. Mr Nowa, it’s a real big drive that is taking place. Of the 2,100 inmates that you have over here, how many have been diagnosed with TB?

Commissioner Nowa: We used to have 20 plus, but we are having less than ten now. The story is changing. Prisons are focusing on informing prisoners. I think we are managing it nicely. I think this programme is also encouraging prisoners to keep their bodies clean, their premises clean. If we are to manage we need enough resources.

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