



Most of the tourists heading for Tanzania's beaches will be unaware of the threat posed by bilharzia, a tropical disease common in the country's northern rivers and ponds

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Snail fever was almost beaten in Zanzibar — then the UK stopped aid overnight

The archipelago is a cautionary tale for what happens when Britain turns off the money tap without warning

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For Mashavu Jumbo Mabula it started with bloody urine. Then came severe stomach pain as her body rejected the eggs laid in her organs by parasitic worms. At a clinic in Kinyasini, doctors informed the 52-year-old that she had become Zanzibar's latest victim of schistosomiasis, or "snail fever".

With its white beaches, windswept coconut trees and proud history as an Indian Ocean trading hub, the tropical archipelago off Tanzania draws half a million [tourists](#) annually. Most are unaware that in its northern rivers and green ponds, burrowing worms carried by snails are on the hunt for human hosts.

It does not have to be this way. For years the UK set aside tens of millions of pounds annually to tackle neglected tropical diseases (NTDs) in Africa, of which schistosomiasis, also known as bilharzia, is one. In the decade since 2011, a sliver of that budget took Zanzibar to the brink of eliminating snail fever. But without warning in April last year, Britain announced it was ending such funding as part of £4.2 billion in [foreign aid cuts](#). Amid reports that Liz Truss's government could be considering the foreign aid budget for another £5 billion worth of cuts, Zanzibar, which is part of Tanzania, serves as a cautionary tale.

On the islands, the impact has been immediate, clear and alarming. Having had the rug pulled out from under them with the end in sight, frustrated doctors say cases are once again rising. And in Kinyasini the consequences of the type of aid reductions the UK is said to be considering are apparent.

“We are seeing sporadic cases in places that had zero schistosomiasis,” said Dr January Zilabumba, an adviser to the health ministry's NTD programme. There are also new cases in areas where the disease had not quite been stamped out. “The danger is if we are not careful it may rebound,” he added. “That means all efforts and resources that have been put in would be wasted.”

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In 2019 an estimated 237 million people worldwide required preventive treatment for intestinal or urogenital schistosomiasis, according to the World Health Organisation (WHO). At least 90 per cent of them were African. Worms

burrow through skin, enter the bloodstream and lay eggs in the walls of organs, causing chronic inflammation. The parasite can remain in the human body for 25 years, seriously damaging organs.

The disease is particularly nasty for women because the worms can lay eggs in the cervix, causing infertility and ectopic pregnancies. It can also kill by aiding the development of cervical and bladder cancer, or by causing lesions that quadruple a sufferer's chances of contracting HIV. An estimated 280,000 deaths are caused annually by schistosomiasis.



A Zanzibar mangrove forest. Snails that live here carry the burrowing worm that causes schistosomiasis

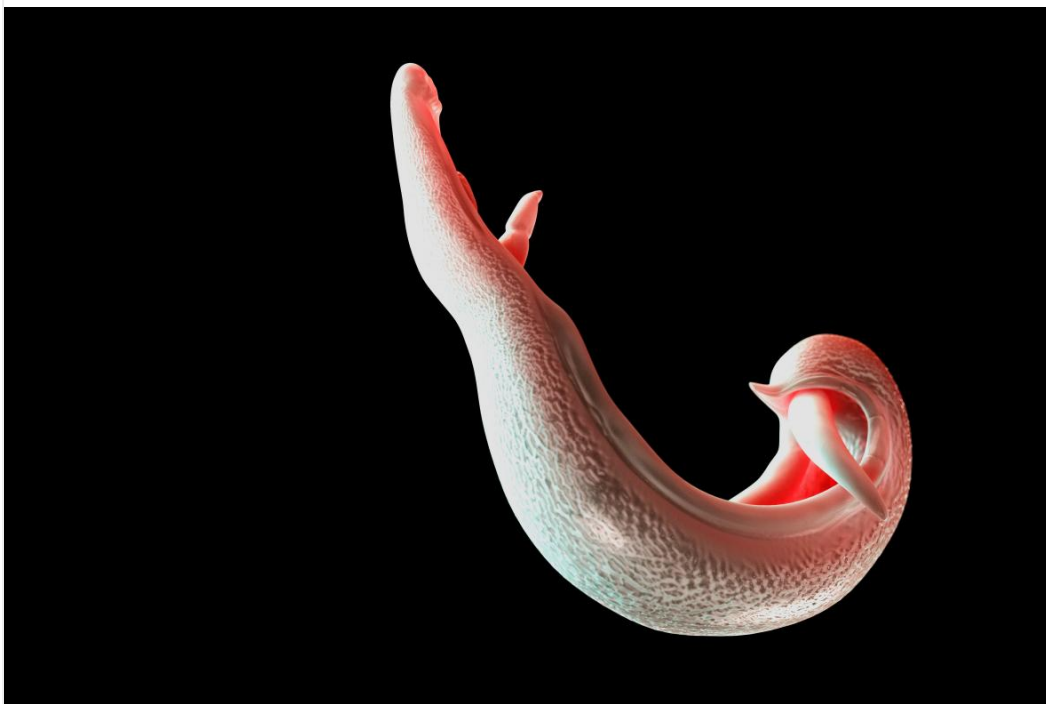
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Yet in areas without clean water and sanitation, people have no choice but to wash clothes, clean cooking utensils, fish, bathe and mix cement in [contaminated water](#). Zanzibar, where gruesome posters of painful lesions and yellow eggs embedded in organs hang on the walls of village clinics, falls into that category.

Mabula, a rice farmer who contracted schistosomiasis by wading through infected water, is one of the lucky ones. Without the Kinyasini clinic, she said, she would have opted for traditional medicine, mainly crushed black pepper.

“It was very scary,” she said beside her home in Ziwani hamlet, her orange and black woven kanga blowing in the wind. “I didn’t know if I would be cured.” Now she worries about her children, who also bathe and fish in nearby waters.

Although there is no vaccine against snail fever, it is treatable. Japan and Tunisia have eradicated it and last year Zanzibar was on the cusp of joining them.



Schistosoma worms can be killed by a mild form of chemotherapy
ALAMY

Mass administration of praziquantel - a mild form of chemotherapy that kills the parasite - and water and sanitation programmes, funded mainly by UK aid, reduced cases in children by 72 per cent and adults by 60 per cent between 2011 and 2017. Britain’s largesse also paid for snail control, education initiatives, diagnostic and training programmes. A decade ago Unguja, the main island, had 50 per cent prevalence of schistosomiasis. Today it has been eliminated in all but two districts, one of them around Kinyasini, where rice paddies

stretch to meet swathes of jungle that end at the coast and the prevalence of the disease is at 20 to 30 per cent, doctors say.

The UK aid to the island totalled roughly £400,000 a year, a fraction of the £360 million funding over five years earmarked in 2017 for NTDs, a series of ailments that blind, debilitate and disable some of the world's most vulnerable people. Last January, [Boris Johnson](#), who was then prime minister, justified the country's overall spending on reducing tropical diseases overseas in a speech on World NTD Day.

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“Children are blinded. Many have their growth stunted. People are disfigured and even killed by conditions that are quite often simple to treat and prevent,” Johnson said. Touting the UK's impressive record on fighting NTDs and eagerness to support WHO's elimination plans, he added: “There is nothing inevitable about this weight of suffering, it can be avoided.” Experts say Britain's NTD programme, called Ascend (Accelerating the Sustainable Control and Elimination of Neglected Tropical Diseases) since 2017, was among the UK's most fruitful aid efforts.

Just over two months later, however, the [programme was cut](#) and an estimated £150 million of committed funds withdrawn. Charities deplored the decision, claiming it “undermines hard-fought gains and will weaken the very partnership the UK is seeking to forge with African countries in the post-Brexit context”.

It also threatens to waste millions of pounds of UK taxpayers' money already spent on trying to defeat the illness.

In Zanzibar, British aid money made up 72 per cent of the total schistosomiasis funding pool in the year 2020-21. In the past year, the programme has received nothing from the UK. "Once you cut it off you are going back to square one," said Zilabumba, the health ministry adviser. Desperate appeals to the UK government for a brief extension proved futile, he said, fuelling a scramble for funds. The programme drew less than £120,000 last year in the absence of UK aid, most of it from private donors.

"We were in total disbelief, because we hadn't really been given any indication that a total severance was going to happen," said Dr Wendy Harrison, chief executive of the London-based SCI Foundation, which is crowdfunding for elimination efforts in Zanzibar. "It's just so frustrating that in that last mile [the UK government] seems to have abandoned the cause."

While aid is extremely cost-effective when prevalence is high, it becomes less so when cases start to fall, making it harder to secure vital funding. "You don't want to waste all the investment you've made to get to that point because obviously by stopping all the control measures you then get a rebound of the infection because you're not exerting that downward pressure," said Harrison.

Although an exact figure is hard to come by, elimination in Zanzibar will require mass administration of preventive drugs, education programmes and efforts to reduce contact with contaminated water.

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That final step appears to have been thwarted by Zanzibar's government. In recent months, it has built five new dams, one of them in Kinyasini, to boost economic growth, thanks to a loan from South Korea.

Despite its rise to prominence as a trading post for spices and other commodities dating in the 17th century, the archipelago is one of East Africa's poorest places. With the population reliant on imported food, the government reckons the dams will boost rice production, allowing Zanzibar to feed itself.

Yet the dams offer a breeding ground for freshwater snails and parasitic worms and increase the chances of humans coming into contact with contaminated water. As a result, the health ministry is sounding the alarm. Experts say it reflects a classic trade-off between development and health for cash-strapped governments in Africa.

Zanzibar is the thin end of the wedge. The UK previously funded schistosomiasis control in Ivory Coast, Niger, Democratic Republic of Congo, Liberia, Guinea, Guinea-Bissau and Sierra Leone but has stopped doing so.

"We just saw it as incredibly short-sighted," said Harrison of the cuts. "It's a horrible perfect storm and [elimination] was just tantalisingly close."

The Foreign Office said: "The UK is a longstanding supporter of the health sector in Tanzania, funding a range of services to ensure access to quality healthcare for every Tanzanian. We continue to work with African countries to strengthen their health systems to address all causes of ill health, including NTDs."

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