

Killer bugs

♦ *KAMPALA, Uganda*

Two weeks into my new life in Uganda, I'm quickly learning how precarious life can be when living with the threat of infectious diseases.

Take malaria.

"I guess I've been inducted as an African now," a Canadian colleague told me after recently suffering the first time from the mosquito-spread disease. In a best-case scenario, it's like going 15 rounds with extreme flu.

Africans, meanwhile, might get malaria dozens of times. "You mean this year?" said one when I asked how many times he's had it. But their built-up resistance means they suffer less during recurrent bouts than "Mzungos," as whites are called here.

Globally, about 200 million people survive malaria annually. But make no mistake, this old scourge still kills. The engineer building my family's Ugandan home lost his mother to it when he was 13. In fact malaria is on the rise in Uganda, killing about 70,000 a year, mostly children younger than five.

Across sub-Saharan Africa, malaria kills at least one million every year. It drains about \$2 billion US from the economy. In some African countries, up to 60 per cent of hospitalizations are malaria-related. AIDS may be higher profile, but it's clear malaria also threatens to destroy Africa's economic and political institutions from the inside.

Now add a pile of other infectious diseases. They take on a very personal dimension when one needs to protect one's own. Like now, while I've been setting up my family's home here at Uganda Christian University.

Mosquito bed-netting is part of that preparation for my wife and our two young children. They are all scheduled to be here by the time you read this. Three of the four of us – our 10-week-old Jonathan Thomas is still too young – take anti-malarials daily. And we're all immunized from a list of other diseases as long as your arm.

Meanwhile, unlike most of Uganda's 26 million people, we'll have potable water. That's thanks to a new water-treatment system at this growing university of 4,000 students that sits in gently rolling, green countryside near Uganda's capital, Kampala. So we won't have to boil our drinking water to avoid other killers like typhoid and cholera.

The clean water is a sign of good things possible in this unique corner of the world, a continent that can so easily capture your heart and break it at the same time. The challenge is getting such projects to spread faster than any infection.

When rock concerts for aid become a memory, and the television is click-clicked off, is there really much hope for such sustained progress? Maybe, if donor nations spend a dime wisely now to save a dollar, and an uglier mess, down the road. UNICEF notes, for example, that for a country of five million people, it would cost just \$400,000, or eight cents a person, to implement an anti-malarial program.

Corruption is an ongoing problem. Uganda's health ministry is currently being investigated for how it's managed, or mismanaged, some of its Global Fund to Fight AIDs, Tuberculosis and Malaria. Its \$201 million US share of this UN initiative is now frozen, at least until the probe's end.

But the corruption card is always easy to play for rich donor nations, like Canada, when they haven't met their own obligations, like reaching the long-standing international benchmark of giving .08 per cent of GDP for foreign aid.

Living in the sanitized West, it's also easy to think one is immune from killer infectious diseases. Yet history shows pandemics have never respected borders. Consider that after the First World War, which killed nine million, the Spanish Flu took 40 million lives worldwide in one year.

With easy global travel, such nightmares are just as possible today. Some health officials, in fact, argue that it's not a question of if, but when, a global pandemic of something like avian flu, which currently has no vaccine, will occur. They say it's no exaggeration to think of tens of millions of deaths again.

The reality is that nobody is entirely safe. Some of us just live closer to certain immediate threats. Now we're trying not to lose too much sleep over it all. Especially when considering the children.



In the past 30 months nobody in my family has contracted malaria. Except for me. Twice.