

THE LONG ROAD TO RECOVERY

Esther is a single mother from an East African country, with four children. Her husband died a year ago, and now the small amount of sorghum she grows is the only way to provide for her family.

However after three years of scarce rains, there is barely enough to feed the family, and her two-year-old son, Akusi, is moderately wasted. This depicts a series of scenarios which could occur along a caregivers' journey to seek care.



DAY 1

After assessing Akusi, a visiting health worker refers him to a supplementary feeding programme (SFP) for treatment. The SFP is 10 miles away, and they can't visit until the next Wednesday when the SFP is open.



If I take Akusi for treatment, I won't be able to harvest my crops... how will I feed my family?

DAY 5

Increasingly worried about Akusi, Esther makes the long journey to the SFP. Esther's nine-year-old daughter cares for the other children.



AT THE SFP

By the time they have reached the SFP, Akusi's condition has deteriorated to severe wasting and he can't be treated at the SFP. He needs to be treated at the outpatient treatment facility (OTP) instead, which is six miles away from Esther's home.



Six miles away from my home? We already walked 10 miles to get here! We won't have time to go today...

DAY 9

Esther is unable to take Akusi for several days as her oldest child is sick. When the older child recovers, Esther and Akusi make the six mile journey from their home to the OTP.



AT THE OTP

Akusi's medical assessment shows he has a high fever and is unable to eat the ready-to-use therapeutic food (RUTF). This means he needs inpatient care at the hospital in the next town, 25 miles away. Esther will need to accompany him there and stay for about seven days.



DAY 9

Esther returns home with Akusi. She is worried about who will look after her other children while she is at the hospital and does not have enough money to pay for transport to the neighbouring town.



DAY 14

A kind neighbour says she will look after the children while Akusi is in hospital and Esther is able to take out a loan for transport.



AT THE HOSPITAL

Akusi is treated over six days, his condition stabilises and his appetite returns. Esther is advised she will need to bring him to the OTP every week, making the 12 mile round-trip journey until he has fully recovered. On average, a child needs to visit the OTP weekly for six consecutive weeks in order to recover.



DAY 21

Esther returns home to find her crops ruined and one of her children sick with malaria. With a loss of income and other children who urgently need her attention and care, it is impossible for Esther to take Akusi to the OTP.



2 MONTHS LATER

Akusi is still severely wasted and sick. He is re-admitted to the hospital and the winding, unrelenting road to recovery continues.



Millions of mothers and wasted children like Esther and Akusi are forced to navigate this system every year. It is a system built to work for UN agencies, not for them, and the unnecessary hardship they face is incalculable.

They need our help.