How Community Action in Dobi Ward Prevented a Lassa Fever Outbreak in Nigeria

Public health emergencies, particularly infectious disease outbreaks, pose a serious threat to rural communities across Nigeria. Dobi Ward, in the Gwagwalada Area Council of the Federal Capital Territory, has faced recurring challenges with diseases like cholera, Lassa fever, and measles. These continued outbreaks highlight the challenges Dobi Ward faces regarding its community resilience and its ability to respond effectively when these diseases emerge. A key contributor to the recurrence of the outbreaks is the lack of accurate information about priority public health diseases. Misinformation, combined with fear of stigma and discrimination associated with infectious diseases, often leads to delays in seeking healthcare when symptoms appear. Rapid access to healthcare is crucial during a disease outbreak, as timely treatment can significantly reduce the severity of the illness, prevent further transmission, and, ultimately, save lives.



Ishaku, supports a community member with a referral to access health services. Credit: Breakthrough ACTION-Nigeria

Recognizing the urgency of effective disease response,

Breakthrough ACTION-Nigeria launched the Community Action for Readiness and Resilience initiative to collaborate with Ward Development Committees (WDCs), local leaders, and influencers, equipping them with the skills and knowledge necessary to strengthen community connections and enhance the ability to respond rapidly and effectively to emerging health threats

At the forefront of this initiative is Danladi Ishaku, the WDC Chairman of Dobi Ward. Ishaku participated in a training organized by Breakthrough ACTION-Nigeria, which focused on the life-saving role WDC members, like himself, can play when infectious diseases hit their communities. From just one training, Ishaku learned how to set up systems, when an outbreak occurred, that would quickly identify symptoms of infectious diseases and coordinate with key stakeholders for immediate treatment. These stakeholders include local health care facilities, which share important messages about the disease and treat referred cases, and town announcers, who can track and report rumors and misinformation to the WDC so the rumors can be addressed. Community members with access to transportation can also mobilize to assist with emergency cases. Ishaku also gained skills to engage directly with his community on how to respond during health threats.





Ishaku wasted no time applying what he learned. He began hosting regular meetings with different community groups such as women groups, community leaders, market associations and other influential groups. In those meetings, he passionately raised awareness about the benefits of early disease detection and reporting, prompt care-seeking and highlighting the dangers of misinformation. He also established direct communication lines with local health care staff ensuring that residents exhibiting symptoms would quickly receive referrals and receive care.

Over the course of July and August 2024 alone, Ishaku's efforts became evident. He and his committee reached 422 residents of Dobi Ward with messages, effectively spreading knowledge to prevent the transmission of diseases such as Lassa fever, cholera, mpox, and measles. He engaged with various community groups to educate household members on personal and environmental hygiene, the importance of vaccinations for both children and adults, and the necessity of seeking prompt medical care for fevers.

He referred 15 individuals with suspected infectious diseases to health facilities. By identifying symptoms early and facilitating prompt medical care, communities like Dobi ward can quickly isolate and treat cases, which prevents the spread of diseases.

Ishaku provides support through a whole-of-community approach. Specifically, he collaborated with a local town announcer, Mohammed Barde, who identified and notified him of a suspected case of Lassa fever during his routine announcement. Ishaku, in his role as the community-facility linkage, reported the incident to the Disease Surveillance and Notification Officer to ensure both the community member and his family got tested. The results identified them all as Lassa fever positive. All five patients received timely treatment and were discharged, and they successfully reintegrated back to the community without stigma. These rapid and coordinated efforts effectively prevented a potential Lassa fever outbreak in the community.

Ishaku remains committed to his mission in Dobi Ward, fueled by the success of his initiatives. He envisions strengthening partnerships with local health workers and involving more community influencers in health promotion activities.

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