



# Friends of Sick Children in Malawi



(‘FOSCiM’ and ‘FOSC’)

[FOSCiM registered charity number 1140578]

[FOSC registered charity number (Malawi) C647/2013]



**SPRING 2022**



Malawi is one of the very poorest nations of the World.

**In 2021 \*99.5p of every £1\* received by FOSCiM from donors was applied for the frontline needs in Malawi. Very few charities can claim that sort of outcome.**

Welcome to our Spring 2022 newsletter and update.



## Tropical Storm Ana

At the end of January Malawi was hit by Tropical Storm Ana with devastating effect. Southern Malawi and the River Shire valley bore the brunt, the Chikwawa district being the worst hit. ‘Reliefweb’ reported 1m people affected over 19 districts; 46 people dead, over 150 injured, another 18 missing and 150,000 displaced. Homes were destroyed, families were trapped, and heavy rain caused severe flooding with damage to roads, bridges, schools, health centres and churches. The situation was worsened by a nationwide power cut, and displaced people had nowhere to go, with emergency camps the only option. A number of areas were declared natural disaster zones.

The storm floods have devastated maize crops in the affected areas and we await the assessment for this year’s harvest and its consequences for food poverty.

Natural disasters such as this only add to the already perilous state that so many Malawians find themselves living in under normal circumstances and one cannot help but feel for them.

## **Covid-19**

Malawi saw a third peak in cases around Christmas building up from early December and falling back down by the end of January.

At time of writing, 85,561 people have been recorded as Covid cases with 2,626 fatalities.

## **In this edition of our newsletter**

- Tribute to Professor Malcolm Molyneux OBE.
- Introducing Yami Chimalizeni, consultant paediatric cardiologist and FOSC trustee
- The new High Dependency Unit for Children opens.
- **Children's Accident & Emergency - Major Appeal**
- The 2021 Christmas mobility appeal.
- Some of the FOSCiM 'army' of knitters, sewers and crafters; donors and fundraisers.
- Sea container – the latest.
- Our website make-over
- Just Giving replaces Virgin Money Giving

## **Professor Malcolm Molyneux OBE**

“Inspirational physician devoted to medicine in Malawi.” – *The Lancet*

Last November, the World lost one of the 'giants' of improving healthcare in Malawi and of our better understanding of malaria, especially the curse of cerebral malaria in children.

The husband of Liz Molyneux, one of our trustees, together they were very much the dynamic professorial duo of tropical diseases, paediatrics and the formation of The University of Malawi College of Medicine. The impressive achievements of both in the field of medicine occupy many pages.



Malcolm was very much 'a friend of sick children in Malawi' and leaves an enormous legacy of achievements in and for Malawi, and a void in the world of academia and medicine at large. Our thoughts have been very much with Liz during these subsequent months.

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## **Introducing Yami Chimalizeni**



I am Yamikani Chimalizeni, the current Academic Head of the Department of Paediatrics and Child Health, Kamuzu University of Health Sciences (formerly known as the College of Medicine, University of Malawi).

I am one of the executive members of the Paediatric and Child Health Association of Malawi. I am a consultant paediatric cardiologist and one of the senior investigators with Blantyre Malaria Project.

I was born in 1978 in Zomba district in a family of 10 girls and 2 boys. After primary and secondary school education, in 1997 I was selected to go to the University of Malawi Chancellor College to pursue a Bachelor of Science degree. My passion was always to become a medical doctor and in 1999 I was selected to go to the College of Medicine, University of Malawi to study medicine from where I graduated in 2003.

After finishing internship, I joined Mua Mission hospital, a rural mission hospital, as the principal medical officer. It was such a wonderful experience. There is a cultural centre at Mua and it is also not far from the beautiful Lake Malawi. When I was at Mua hospital my initial thoughts were to go into public health, for which I started to look for opportunities to train. However, after working for 18 months at Mua, in 2007, having had a chat with one of my mentors, the late Prof Malcolm Molyneux, I was convinced to join the Malawi-Liverpool-Liverpool Wellcome Trust Clinical Research Programme as a medical officer working in the paediatric research ward and the paediatric wards. The job also provided me with an opportunity to start training in paediatrics under the headship of Prof Elizabeth Molyneux.

In 2008, I joined the College of Medicine as an assistant lecturer in the department of Paediatrics and Child Health. Ever since, I have never regretted joining this wonderful department. During the paediatrics training, I spent 2 years in Malawi and 2 years in Durban, South Africa. Dr George Chagaluka (see the Autumn 2021 newsletter - Ed) was my trainee companion in Durban and we were housemates. George and I have been great friends ever since.

During my training in Durban, the subspecialty which I really enjoyed and grew so much interest in was cardiology. It was not surprising therefore that, when in 2011 I qualified as a paediatrician, I was attached to the paediatric cardiac clinic where I was working with Prof Neil Kennedy. Prof Kennedy taught me how to perform a cardiac echo; the equipment and the visiting expertise from Birmingham Children's Hospital had been funded by Friends of Sick Children in Malawi donors. I also continued with my research activities in the paediatric research ward, improving my research skills.

We also had visiting paediatric cardiologists namely; Prof. Anne Greene, Dr Heather Clements and others. With the help of Prof. Kennedy through a scholarship and Prof. Molyneux I managed to train as a paediatric cardiologist at Steve Biko Academic Hospital in Pretoria, South Africa.

I returned to Malawi in November, 2017 as a consultant paediatric cardiologist. As a cardiologist, I strive to improve the health of children with cardiac disease. Over the years, we have managed to improve diagnostic services by increasing the number of people who can do a basic echocardiogram and recognize when a child needs to be referred to specialists for confirmation of diagnosis, management and possible referral for surgery. One of the places where I visit quarterly is Mzuzu Central Hospital located over 650 kilometers from my base in Blantyre. With the help of charitable donations, I can reach out to children with cardiac diseases. The children and their guardians do not have to travel all the way to Blantyre. I am also training several sonographers who can perform an echo and consult. We have also been able to get donations of ultrasound machines.



We are planning to send another paediatrician to train as a cardiologist. Our future plans are to conduct cardiac camps where cardiac surgeries can be done within the country, to have cardiac catheterization services and hopefully one day to be able to perform cardiac surgeries.

I am married to Akuzike and we have 2 beautiful girls Olive (8) and Venus (5). We like travelling to national parks and to Mangochi (Lake Malawi) to relax at the beach. Occasionally George (Chagaluka) pushes me to go hiking with him!

I am grateful to my family for their support throughout all these years, to my mentors Prof Elizabeth Molyneux, the late Prof Malcolm Molyneux, Prof Neil Kennedy, Prof Tom Heikens, Prof

Terrie Taylor and Prof Anne Greene. I am also grateful to all those people who have helped us in various ways to provide cardiac services to the children of Malawi, including the supporters of Friends of Sick Children in Malawi.

**High Dependency Unit for Children opens - the pictures need no text.**



## Children's Accident & Emergency Department – Major Appeal

The project to re-model and upgrade the **Children's Accident and Emergency** building continues but not without problems and, critically, there is a funding shortfall of

**£ 200,000**

As most of our supporters will know already, in Malawi there is no primary healthcare such as we take for granted in our more developed countries; i.e. no community General Practitioners who can decide whether or not your child should be referred to hospital. In Malawi this assessment takes place at the hospital 'gate'/ the Paediatric Accident & Emergency building. In any one year almost 100,000 children could present at 'our' Paediatric A&E, a quarter of whom will become inpatients for more substantial treatment.

**Dan & Liana Tyrell** in Malawi have generously volunteered to orchestrate an appeal 'to the World' to fund this gap which most importantly will ensure that the high quality of care that has been developed over the last 20 years can continue - and continue to develop.

**Liana** has sent us the following message:

**"If you were to take your child in to be seen at Queens A&E in Blantyre right now, you would be pointed toward what looks like a construction site, because that's what it is. You would walk along some temporary metal sheeting, around a few corners, and eventually wind-up walking through small double doors into a reception area. Your journey would be accompanied by the sounds of hammers and saws coming from behind the metal sheeting, and you may try and shield your child from breathing in construction dust.**



**Paeds Consultant 'Joe' Langton negotiating the current chaos that is Children's A&E**

**As you wait, it's clear that what currently constitutes the Paeds A&E is temporary. Benches are pushed together, and staff weave around each other as they navigate through several rooms that are frankly not enough space for all that the A&E does for sick children.**

The space is so limiting that several weeks ago, staff members were apologizing to parents as their children had to be examined on the cement ground. Although the construction noise and dust make working in the temporary space even more uncomfortable, it's also become a symbol of hope to the staff.



**In a building site it is an enormous struggle to deliver the standards of treatment, privacy and dignity that have been progressively the norm for the team in recent years.**

In November 2021, the Paeds nurses and clinicians sat together and began to plan. It's all too easy to dwell on the heartbreak – the memories of mothers mourning in the middle of the waiting room with no physical space to privately say their final goodbyes or the embarrassed face of an adolescent being asked questions about their sexual health and development within earshot of other patients. There is nowhere for the staff to even make a cup of tea on break. The Paeds staff is choosing not to accept this reality.

Drawing on their collective experiences as healthcare workers, last year they began to put into words and on paper their dreams for spaces that could provide better care, privacy, and dignity for patients and staff alike.

The new space is halfway finished. Although incomplete, walking through it now one can see the intent behind the design. There is obvious thought been given to functionality and better clinical care - an ambulance bay, oxygen ports in the walls, space for more beds – things that will absolutely save lives.

~8~

Equally, there are rooms set aside for privacy and peace amidst chaos. The room for families to mourn is particularly striking. It is the size of a small classroom, with large windows set high on the walls. The room is lit by natural light, but the windows are high enough to prevent those passing by from looking in. The room is divided in two by a half-wall. A simple addition, but thoughtfully designed – some families wish to see the body and sit with it while it is prepared for the mortuary, and others don't. Some families need a bit of both. Such a room could only have been designed by people who have spent years watching families who didn't have any control over how to spend those first moments of life without a loved one.

The room to mourn is just one example of how the new spaces will change the experiences of patients, their families, and staff. It is so close to becoming a reality – but it's not there yet. The bottom line is the second half of the project is not yet funded and until it is the Paeds team will continue to endure working next to a construction site, frustrated by current circumstances but full of hope and determination that soon they will be receiving children in a space with bright murals on the walls.”

Thank you, Liana.

- Would you like to help with a donation? The Just Giving link is below\*
- Would you be happy to promote this appeal to your contacts? Please feel free to.
- Would your employer like to help, perhaps as an element of their corporate social responsibility program?
- Can you suggest any possible sources of funding that we could approach?

Please feel free to contact me at the usual [gordon@friendsofsickchildreninmalawi.org](mailto:gordon@friendsofsickchildreninmalawi.org)

\*The all important link to the appeal page at JustGiving is :

<https://www.justgiving.com/campaign/PaedsAERemodel>

## **The 2021 Christmas Mobility Appeal**

In the wake of the record smashing 2020 Christmas Appeal we had modest expectations for 2021's Christmas appeal for children in Malawi with severe mobility issues. As it turned out, in monetary terms, 2021 was just a whisker short of 2020....truly amazing!

### **The result:**

**Donations for 88 wheelchairs and 91 home chairs for tots; plus money for othoses and for a new Workshop laptop for this project, and for various other items.**

**Thank you so much to everyone who took part; we are all humbled by the response.**



~g~

The Covid pandemic just refuses to go away and this year the impact on the Workshop was to the supply chain of raw materials. Appreciating that all countries are experiencing the same issues, when I had to announce that for want of materials it would be impossible to deliver before Christmas all the case stories 'ordered' by donors, supporters again were incredibly understanding. On top of that came the cyclone which prevented a lot of families from getting to our Workshop for several weeks early in the new year and again our donors were supportive. Thank you.

At time of writing we have managed to deliver to donors 67 case details for 'Christmas' wheelchairs and 80 for 'Christmas' home chairs for tots.

**Please note:** There has been a significant increase in the cost of materials in Malawi due both to global supply issues and the relative weakness of the Kwacha. As a result, we have had to agree to an increase in our Kwacha contribution towards wheelchair and home chairs for tots **but** with Sterling gaining against a weakening Kwacha one almost cancels out the other, so at least **for the near future**, there will be no change to a donation of £100 (if Gift Aid is available) or £125 if not, funding a wheelchair; and £15 (if Gift Aid is available) or £18.75 if not funds a home chair for tots. These donation levels have been in place now for several years which I hope donors will agree is exceptionally good value but realistically cannot continue forever. I will keep followers informed of any changes.

### **Some of our Knitting, Sewing and Crafting 'Army'**



**Rose Gould** is pictured at her stall in St Anne's RC Church, Buxton.

For 30 years Rose has been making and selling jams, marmalade, chutneys and knitted characters, with all proceeds going to charity, including FOSCiM.

Her efforts have enjoyed the support of Steve & staff at her local One Stop as well as the parishioners of St Anne's.

Rose is now hanging up her apron to take a well earned rest and we say thank you Rose and enjoy the years ahead.



**Left**  
**Rosemary Burton** of The West Midlands pictured with all the items knitted by her and her friends at **Hollywood & Wythall Knitting and Nattering Ladies**.



**Right**  
**Moira Todd** of Edinburgh pictured with her latest (of many regular) boxes of knitted hats. A one woman baby hat factory at work!



**“The Happy Crafters” of Blackwell, Worcestershire.**

Pictured:  
Sue K, Jenny, Ann, Sylvia,  
Norma, Rosie and Carolynne.

Absent:  
Sandra and Jan

Thanks also to the following supporters:-

- the **Business students at Luton Sixth Form College** who, learning of the devastating tropical storm Ana, raised £2,500 in a week to help with the medical response.
- **Marianne Moxon** who has re-launched her annual coffee and Malawi crafts fundraising days which had to be postponed during the worst times of Covid 19.

.....and

- **Jess Baker** who is going to be tackling Mount Kilimanjaro and raising funds for Friends of Sick Children in Malawi. If you would like to give Jess the encouragement she deserves you can sponsor her via the following link

<http://justgiving.com/Jess-Baker5>

## Sea Container

Our latest consignment of goods for Malawi is aboard a Cycle of Good container en route to Malawi so the knitted items will arrive in time for the dry season/their winter.

**Our website make-over**      <http://www.friendsofsickchildreninmalawi.org>

Coming soon will be a new look to our website

## After Virgin Money Giving

Many of you will be aware that Virgin Money Giving has ceased their charity donations and fundraising facilities.

We have switched to **Just Giving** so please use them in the same way as you did with Virgin.

<https://www.justgiving.com/friendsofsickchildreninmalawi>

## Kamuzu University of Health Sciences

For the record, I should have advised readers some time ago that what is now called Kamuzu University of Health Sciences is the result of a public sector 'merger' of what were The University of Malawi College of Medicine and The Kamuzu College of Nursing.

**And FINALLY.....**If you would like to discuss how you might help with **any** of our funding or other needs, challenges and issues, please simply email me or Joe for a 'chat' at:

[gordon@friendsofsickchildreninmalawi.org](mailto:gordon@friendsofsickchildreninmalawi.org)

or

[joelangton@doctors.org.uk](mailto:joelangton@doctors.org.uk)

**To make a donation.....**you can do this online or directly by bank to bank payment or by cheque if in the UK. Bank to bank donations or donating by cheque are **free** of charge, but only in the UK.

Please **be aware** that if you donate on line, intermediaries like PayPal, Virgin Money Giving, Just Giving etc. all deduct charges from your donations but you are able to opt to cover some of their charges so that more of your donations come to the charity.

And please take a moment to check out the story behind the **A&E project** (see above) and at <https://www.justgiving.com/campaign/PaedsAERemodel> and also to take a look at **Jess Baker's Kilimanjaro challenge** at <http://justgiving.com/Jess-Baker5>

**IMPORTANT** ~ Donors who are also UK taxpayers should donate through FOSCiM (rather than FOSC) so that 25% Gift Aid can be added to their donations courtesy of HM Government.

**UK FOSCiM bank details: at HSBC**

Account name: Friends of Sick Children in Malawi  
Bank sort code : 40 – 11 – 04  
Bank account : 2 1 6 1 2 0 6 9

**Malawi FOSC bank details:**

|                                |                                |
|--------------------------------|--------------------------------|
| Bank : National Bank of Malawi | Swift Code (BIC) : NBMAMWMWXXX |
| IBAN / Account : 358328        | Bank code: 002                 |
| Branch name: Chichiri branch   | Reference : FOSC GBP AC        |

**Finally**, on behalf of everyone involved in 'the project' in Malawi and those tens of thousands of children and families who benefit every day from your generosity, a very big thank you and please keep supporting us to whatever extent you feel able.

Sincerely,

*Gordon*



Gordon Cowie MBE  
Founder and Chair of Trustees  
Friends of Sick Children in Malawi  
[www.friendsofsickchildreninmalawi.org](http://www.friendsofsickchildreninmalawi.org)  
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**Social media addresses**

Instagram: @foscmalawi  
Twitter: @of\_fosc  
Facebook: Friends of sick children Malawi

**If in future you would prefer not to receive our newsletter please advise us at the email address above. The same applies for any other communications that we may send from time to time.**