



Friends of Sick Children in Malawi

FOSCiM registered charity number 1140578
FOSC registered charity number (Malawi) C647/2013

Establishing and developing sustainable paediatrics for the 50% of Malawians who are children.



AUTUMN 2023



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

In 2022 *99.5p of every £1* received by FOSCiM from donors was applied for the frontline needs of sick children in Malawi. Very few charities can claim that sort of outcome.



WELCOME to our autumn 2023 newsletter and update.

Malawi – a current overview

Malawi has the fourth highest percentage of people living in extreme poverty in the world. More than two-thirds of the population live in extreme poverty, almost all of whom rely on small-scale farming for their livelihoods.

Deforestation for farming is one of the biggest environmental challenges in Malawi which was once heavily forested. Malawi also faces constrained water resources, declining fisheries, limited institutional capacity to manage natural resources, and farming practices that lead to soil erosion and reduced fertility, among many other challenges.

Earlier this year, in March, Tropical Cyclone Freddy hit Malawi as the country was facing one of the worst cholera outbreaks in recent history, as well as facing high food insecurity at the peak of the lean season. Flash floods led to multiple debris flows and other landslides in Blantyre, Chiradzulu, Mulanje, and Phalombe districts. Many lives and properties were lost.

In economic terms, real GDP growth has been adversely impacted by the Cyclone and the value of the currency (the Malawi Kwacha) has continued to weaken, impacting the costs of imports for this landlocked country and therefore the cost of living for Malawians.

Unreliable power and water supplies are continuing problems. Approximately 10% of Malawians have access to electricity (5% in rural areas and 46% in urban areas). There is

also a lack of skilled and semi-skilled labour, and high lending rates make it expensive to access capital on the local market.

Against this backdrop and with your greatly valued support, our medical and related colleagues meet all the challenges put before them as they continue the drive to develop sustainable paediatric healthcare and improve the life chances of the children of Malawi.

In this edition of our newsletter:

1. *Meet Kondwani Kawaza, consultant paediatrician, neonatologist and associate professor of medicine*
2. *The Paediatric Accident & Emergency Project – latest news*
3. *Education to achieve Sustainability of Paediatric Healthcare in Malawi- latest*
4. *The Orthopaedic Workshop and ‘Gang’*
5. *On the high seas.*

Meet Kondwani Kawaza

In previous newsletters we have been systematically introducing readers to members of the team in Malawi. Here is the latest in the series.



My name is Kondwani Kawaza. I am a consultant paediatrician as well as a neonatologist at Queen Elizabeth Central Hospital, and Associate Professor of Paediatrics at the Kamuzu University of Health Sciences (KUHeS), formerly The University of Malawi, College of Medicine. I am one of Malawi's Principal Investigators for the Newborn Essential Solutions and Technologies ('NEST'), an executive member of the Paediatric and Child Health Association of Malawi (PACHA), and Vice President of the Medical Association of Malawi (MAM).

Born in Lilongwe rural in 1977, I was one of the lucky candidates to be admitted to Kamuzu Academy, at that time the only grammar school in the country, where I was exposed to, and developed, varied interests, from music, the arts and social sciences, to sports, the classics, and pure sciences. In 1997, I was selected to enroll into the University of Malawi College of Medicine to pursue the MBBS degree, at the expense of the Law degree at Chancellor College and Veterinary Medicine at the University of Zimbabwe.

After graduation from medical college in 2001, I spent 2 years at Kamuzu Central Hospital, before joining Likuni Mission Hospital in 2003, where I took up roles as Medical Officer, Principal Medical Officer and then Chief Medical Officer. Over time I had developed interest in the surgical elements of care, in general surgery as well as obstetrics. It was however, the interaction with mothers and babies at Likuni Hospital that pushed me towards an interest in maternal and newborn care.

In 2007, I was offered the opportunity to join the University of Malawi College of Medicine as Assistant Lecturer in the Paediatrics department and Research Registrar in the Malaria Research ward under the Malawi-Liverpool-Wellcome Trust research program, which provided the opportunity for growth in clinical, academic and research skills. It was during this time that I started hearing about and observing the

achievements of Friends of Sick Children in Malawi, through such charitable and developmental activities as the provision of nutrition to mothers and babies, medicines and supplies to oncology patients, renovations of wards and other structures in the department, and paying for extra clinical and nursing staff.

In 2009 I went on attachment to the Red Cross War Memorial Children's Hospital in Cape Town, where my resolve to sub-specialize in Newborn Care became firm. Upon my return to Blantyre, I was allowed more responsibilities in neonatal care in the department, including leading local representation in major international research collaborations. I was further encouraged by Prof Elizabeth Molyneux and Prof Neil Kennedy to sub-specialize in Neonatology, so, in 2015, I went back to Cape Town, to train as a Neonatologist, and returned in 2017 to head the neonatal Unit at the Queen Elizabeth Central Hospital.

Here are some pictures of me and our great neonatology team



..... and some shots with patients; some tiny ones and with some of the mums practising life saving Kangaroo Mother Care with their premature babies.



Over the years, with support from organisations such as FOSCiM, we have managed to improve the quality of newborn care at QECH. The ward has been expanded to a 65-bed unit, accommodating around 35 Kangaroo Mother Care (KMC) patients.

Mothers continue also to receive food and warmth during their prolonged stay in the KMC ward.

Staff have been trained in comprehensive newborn care, including the use of various equipment and technologies. The unit has participated in ground-breaking international research, such as the bubble CPAP clinical evaluation study and the WHO-coordinated immediate Kangaroo Mother Care (iKMC) study.



Most exciting, the overall in-hospital neonatal mortality has come down from around 20% to the current figures of around 10%.

Our team aspires to do more and achieve greater.

Our attention will continue to focus on the greatest contributors to neonatal deaths in our setting, which include birth asphyxia, prematurity, sepsis and hypothermia.

We will additionally aim to develop the Chatinkha Neonatal Unit into an improved environment for training, and build capacity to deliver courses such as post-graduate diploma in Newborn Care, MSc courses in Neonatal Nursing and MSc Neonatology.

Our wish is to make Chatinkha Nursery the Centre of Excellence and learning hub for newborn care in Malawi. For this to happen, we anticipate significant investments in infrastructure, equipment and personnel who can participate in training others, supervising and mentoring others in out-reach, all in a country which still has only one neonatologist.

In May this year, Alexis Cowie, one of the FOSCiM trustees, raised the funds to send us a transfer incubator - expensive, life-saving, equipment used to protect babies from getting fatally cold during transfer from the delivery areas elsewhere to our nursery ward.

From left to right pictured with me and the new life saving equipment:

Edith Tewesa (Matron)

Pauline Ndawala (Ward in-charge)

Kondwani Jephther (Medical Officer)

Ruth Bvalani (Paediatrics Registrar)

Mtisinge Lumani (Ward Nurse)



On the personal front, I am a family man, who likes to spend time home with wife Judith and three daughters Alinafe (15), Takondwa (11) and Apatsa (8). Previously, I used to occasionally remind myself of the old sportsman-me and go onto the squash or volleyball

court or football pitch, or trail Dr George Chagaluka (Oncology) on his runs, until I tore a hamstring muscle about 5 years ago, from which I never recovered. I have now taken solace in writing!

I and all my colleagues are very grateful to FOSCiM and its supporters for the support that the charity has rendered to our services in the Paediatrics department. I am also thankful to other organisations such as Rice University and NEST 360 for their support throughout all these years.

Last, but by no means least, I applaud you and all those who are 'holding hands' with us to improve the care and outcomes for the newborn across Malawi. Zikomo kwambiri!

PAEDIATRIC ACCIDENT & EMERGENCY – an update

News from Joe Langton in Malawi is that the paediatric A&E renovation and development is progressing nicely.

Phase two – the building works for the staff block have been completed, the artwork has been finished and plans are in motion to start a peace garden where staff can eat lunch and decompress from the traumas they face on a daily basis.

Phase three – the short stay unit, minor theatre, orthopaedic assessment area and isolation unit are also almost complete. It is anticipated that the building works will be completed by mid September and the artwork for this space has also been commissioned. The theatre light and oxygen piping are yet to be installed but plans are in progress now the building works are almost complete.

What remains is to equip and furnish these spaces. In-country quotes have been obtained and we have identified the equipment that needs to be sourced from abroad. In-country purchasing has commenced and we are all excited to see things progressing. More funds are still required to complete this process and to ensure ongoing maintenance as this space sees a lot of daily use! *Please help us with donations if you can; we have many equipment and furnishing needs for this fantastic new space to treat our young patients.* Please follow the instructions at the end of the newsletter or contact me directly at gordon@foscim.org.

The planned 110km Mount Mulanje fundraising run has been postponed but is still planned for either later this year or early 2024.

Some of the artist's work on the walls of the refurbished facility:



~5~



EDUCATION to achieve SUSTAINABILITY – latest news

Again from Joe: With regards to our educational fund we are currently supporting two nurses in their Master of Nursing, three nurses in a BSC in Child Health Nursing, a clinical officer in their Postgraduate Paediatric Clinical Officer training and a department personal assistant engaged in a Bachelor of Science degree focussed on our medical data needs.

Excitingly, we have four more students about to start further training. Two nurses will be starting their Masters in Paediatric and Child Health Nursing, one nurse will be starting a Masters in Paediatric Critical Care Nursing and our clinical officer from the One Stop Centre will be starting a Master of Science in Sexual and Reproductive Health and Rights.

If you support our approach to sustainability through education and would like to donate towards the further education of Malawians in paediatrics please follow the instructions at the end of the newsletter or contact me directly at gordon@foscim.org.

The Orthopaedic Workshop - Our collaboration to mobilise Malawian children

First of all, if you have not received our **annual Christmas appeal email** please let me know **asap** at gordon@foscim.org

A wheelchair **STILL** costs **just £100.00** if the donor is a UK taxpayer and Gift Aid is available, or **£125.00** if not.

A home chair for tots costs **just £16.00** if the donor is a UK taxpayer and Gift Aid is available, or **£20.00** if not.

Orthotic devices costs around £15 per item if Gift Aid available or **£18.75** if not.

At time of writing, 1,319 wheelchairs and 1,141 home chairs have been delivered to children in need. The Malawi costs of materials keep rising, but for our donors this is offset by the falling value of the Kwacha, hence the reason that the costs to donors remain the same.

On the High Seas



Another 27 boxes (2 cu. mtrs.) of medical consumables, handmade re-usable feminine hygiene kits, blankets, hats and baby and child clothing, pencils for the classroom and items for the orthopaedic workshop were loaded on a Cycle of Good sea container at the end of August. Thank you to all those ladies who continue to amaze with the quality and quantity of their work; their generosity is immense and greatly appreciated. Big thanks to Adrian Bytom of Withybed Limited for yet again transporting everything to Cycle of Good in Stoke.

It is *your* support that makes possible all the developments that you read about in our newsletters.

We are always proud to say that more than 99% of every donation received is available for use 'at the frontline' for the healthcare of Malawi's children. [2022 - 99.5%]
How many charities can make that boast?

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

gordon@foscim.org

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 online, intermediaries like PayPal and Just Giving all deduct charges from your donations but when making your donation you may be able to opt to cover some of their charges so that more of your donation comes to the charity.

<https://justgiving.com/friendsofsickchildreninmalawi>

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

Bank details for direct donations:

Please *identify yourself* in the appropriate box of the electronic transfer so we know who to thank.

UK - FOSCiM bank details:

Account name: Friends of Sick Children in Malawi
Bank sort code: 40-11-04
Bank account: 21612069

Malawi - FOSC bank details:

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

And finally, on behalf of everyone involved in supporting the establishment and development of sustainable paediatric healthcare for the 50% of the population of Malawi who are children, and on behalf of those tens of thousands of children and families who benefit from your generosity, a very big thank you and please keep supporting us to whatever extent and in whatever way you feel able.

Please feel free to email me for 'a chat' if you would like to explore further any of the above issues in the newsletter or if you have any questions.

Sincerely,



Gordon Cowie MBE
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