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



WELCOME to our AUTUMN 2026 Newsletter + Update





In 2025 *98.6p 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.

Congratulations to the **Malawi women's national football team** nicknamed The Scorchers on reaching the final of this year's Women's African Cup of Nations. Ranked 153 in the world this was the first time the Scorchers had qualified for the finals of this competition. To get through the group stages would have been an amazing achievement but to reach and get through the knock out phase to reach the final is truly outstanding. Very well done ladies!

Malawi since our last newsletter.

Daily life in Malawi has not got any easier and far too many people are desperate for whatever they can earn (or find) to feed themselves and their families.

Funding in the public health sector continues to be constrained against a poor national economic situation.

Too many Malawians are desperate and one consequence has been an upsurge in theft, even from our departments, especially the Children's A&E through which all patients and their families pass. As a result, we have been forced to invest valuable funds in CCTV to try to protect patients and staff.

As to the state of public health sector funding, existing funded staff posts are suffering from shrinking pay against rampant inflation, but even worse is the lack of enough funded staff posts to meet patient demand. As a result, in the absence of proper pay, or even no pay, we are having to find funds to either augment low or no pay or to attract staff by offering stipends, or upkeep allowances, or even small 'gifts' of cash. This is currently our greatest funding need - more on this below.

There is quite a lot to update you in this newsletter, so here we go.....

CHILDREN'S ACCIDENT & EMERGENCY

Resuscitation trolleys/beds and maintenance



An overjoyed Joe Langton welcomes the **8 resuscitation trolleys/beds** bought with the sponsorship funds raised by her amazing circumnavigation of the Mulanje Massif (Malawi's highest mountain) on foot.

And right, in situ at the emergency arrival facility in the Children's Accident & Emergency.

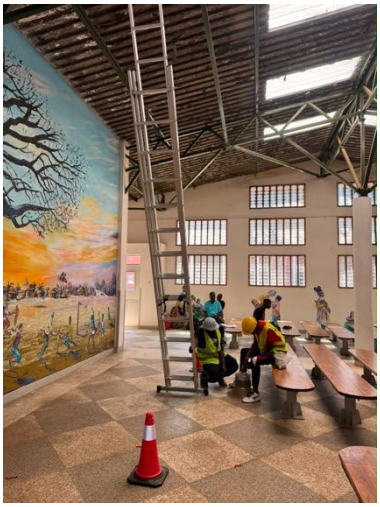
These beds are a huge step forward in the emergency treatment of children but also of enormous help to the attending staff.



We are starting them young in paediatrics!

This little Malawian using a stethoscope to check up on the health of Joe Langton, Head of Children's Accident & Emergency.





Just as the flow of children with medical needs continues unabated, so too do the maintenance needs of the facilities that have been created. Perhaps not as 'glamorous' as procuring new equipment or creating facilities, routine and sometimes special maintenance requires funds to ensure that essential business as normal is possible. Pictured left – ensuring the roof in Children's A&E is watertight.

CHILD CANCER CARE AWARD

generously awarded us funds to enable the procurement of vital cancer treatment medicines and diagnostic reagents over the next three years. A big and hugely appreciated step forward for us.

The McClay Foundation, advancing the use of diagnostic tools and drugs in the prevention, control and cure of disease.

We would dearly like to go a step further in diagnosing cancer in our child patients and have flow cytometry equipment. This is specialised laboratory instrumentation used to analyse the physical and chemical characteristics of cells or particles. It can typically cost circa £90,000.



With the much appreciated support of The McClay Foundation the diagnosis of cancer in our child patients becomes a less blunt instrument. When we are able to afford flow cytometry equipment, diagnosis and treatment of cancer will become even better, as will the life chances of the children.

Any funding help you can offer will be very gratefully received

Addressing a Sharp Increase in Respiratory Problems

There is a medical phenomenon manifesting itself all over the world and that is a sharp increase in children presenting with respiratory problems. The received wisdom is that this could be a legacy of Covid.

As far as our facilities in Malawi are concerned, it means that we are being inundated with respiratory cases - and out of the usual peak season for this particular problem.
Our Paeds Special Care Ward (PSCW) (40 beds, often occupied x3) is full and means that non-respiratory cases are 'suffering'.

We are hugely grateful to one of our very generous long term donor couples who are helping fund our proposal to :-

1. open our 10 bed day patient short stay ward (occupancy often x2) in Children's A&E for a maximum 36 hours to take many of the cases blocking PSCW;
2. develop our Medical Bay Ward to also take some of the pressure; and
3. look at what can be done at the PSCW to take more patients.

The first two of these require more staff and equipment.

RUNNING for FUNdraising



Paediatric registrars Ciarra and Becky ran the Thyolo Medic to Medic half marathon and David ran a 10km because he was on duty during the half marathon. They raised a great £4,450 to help fill the Paeds wards staff shortage gap. **Thank you so much!**

TELECONFERENCING EQUIPMENT

The ability for our medical students to receive lectures from overseas located specialists has been made possible by investing in teleconferencing equipment.

This is a very cost-effective way to enhance the quality of medical education in Malawi and also represents good value for money.

A big thank you to those of our donors who have made this possible.

FINDING and FUNDING ENOUGH STAFF

The demand for healthcare continues to rise. Government funded staff places are not keeping pace with demand. Pay in funded places continues to lose value given rampant inflation. Unemployed but qualified staff are increasingly desperate to earn anything so as to support themselves and their families.

Against this backdrop we have decided to seek funds for the following:

Registrars (post graduates etc.) – Government pay does not cover their basic living costs. To secure the number of these staff members essential for us to function we are having to augment their pay with stipends.

Nurses – to try to get the numbers required we are having to attract unemployed nurses with upkeep payments. They are not employed and these are modest amounts to help them be able to buy the basics for their families.

– we have retired nurses who are not employed but want to help, and for them we try to give them a monthly gift of an amount of money sufficient to buy, for example, a bag of maize flour.

Some other staff members – again because of pay being insufficient to sometimes even cover the cost of transport to and from the hospital we are having to make some top-up payments to help them and keep them with us.

Of course, all of this sad situation costs money. Despite the incredible generosity of some of our donors we are still struggling to raise all that we need. **If you would like to help please let me know.**

FOSCiM (Northern Ireland)

I am delighted to announce that we now have a chapter of FOSCiM in Northern Ireland. The small but 'beautifully formed' group comprises Daniel Kane (recently retired Presbyterian minister, West Church, Ballymena) and his wife Harriet, their paediatrician daughter Charlotte (well known to Paeds at QECH!), Heather Clements retired cardiologist and long time supporter of Malawi and our efforts, and Neil Kennedy, Deputy Head of School of Medicine, Dentistry and Biomedical Sciences, Queens University, Belfast **and** one of the early pioneers of paediatrics at QECH.

Through Daniel we were introduced to the McClay Foundation (see article above), so a very early triumph. I will keep you updated on the group's activities and successes as they get into their stride.

The NI group is planning to target our funding needs to properly staff Paeds (see the previous article - **Finding and Funding Enough Staff**).

MOBILISING CHILDREN with severe mobility issues

CHRISTMAS APPEAL – 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 £17.00** if the donor is a UK taxpayer and Gift Aid is available, or £21.25 if not. Orthotic devices cost around **£20 per item** if Gift Aid is available or £25 if not.

At time of writing, 1,655 wheelchairs and 1,480 home chairs have been delivered to children in need of mobility. The costs of materials in Malawi keep rising, but the cost to our donors is largely offset by the falling value of the Malawi Kwacha against the GB £.



The team has conducted another out of town assessment day, this time at Nsanje, thus helping families avoid the prohibitive cost of transport to and from the hospital.

Gilbert hard at work assessing 'clients' at Nsanje.



Orthopaedic workshop manager Wilson Nanungu returns from shopping for shoes for those child patients without any but who need them given their condition.

Supporters Joan & Jay Brinkerhoff in the USA help with funds for shoes and similar items.



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I am sure that you will appreciate the very challenging environment in which to continue the development of sustainable paediatric healthcare in Malawi but *I can assure you that everyone involved continues to put their best feet forward and are as committed and determined as ever.* Your support not only helps fund the work but gives the staff a huge lift to know that people elsewhere care about their efforts.

With the backdrop of a nation that is one of the very poorest in the world and struggling economically, **more than ever we need your support** -

1. to continue to develop sustainable paediatrics in Malawi through the development of Malawians in paediatrics;

   and

2. to maintain, improve and develop the healthcare facilities for treating children.

It is ***YOUR*** support that makes possible all the developments that you read about in our newsletters. We are proud to say that nearly 99% of every donation received in 2025 was available for use 'at the frontline' for the healthcare of Malawi's children. How many charities can make that boast?

If you would like to discuss how you might help with any of our funding or other needs, challenges and issues, please email me for a chat at gordon@foscim.org

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 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: 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

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 have already benefitted from your generosity, a very big thank you and please keep supporting us to whatever extent and in whatever way you feel able.

Sincerely

Gordon

Gordon Cowie MBE
Founder and Chair of Trustees
Friends of Sick Children in Malawi
www.friendsofsickchildreninmalawi.com

gordon@foscim.org

Social media addresses
Instagram: @foscmalawi
Twitter: @of_fosc
Facebook: Friends of Sick Children Malawi

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