



# Friends of Sick Children in Malawi



(‘FOSCiM’ and ‘FOSC’)

[FOSCiM registered charity number 1140578]

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## SPRING 2021



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

**In 2020 \*99.2p 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.**

Hi everyone and welcome to our Spring 2021 newsletter and update.



In the Northern Hemisphere there are signs that **Spring** is well on its way (thank goodness!) and in Malawi the rainy season should soon begin to withdraw in favour of the dry season. It feels like it’s been a very long winter north of the equator and a long rainy season south on the equator.

Forecasts for the Malawi **maize harvest** are good this year due largely to the current rainfall patterns plus increased use of subsidised fertilisers and hybrid seeds. The threat is the dreaded armyworm which can have a devastating impact.

These days there cannot be many newsletters that can avoid beginning with a comment about **Covid-19** and so it is when talking of Malawi. In common with many of its neighbouring countries, and even allowing for the vagaries of official figures, the early impact of Covid-19 in Malawi during 2020 was relatively low compared to other countries on other continents. However, January 2021 saw a big rise in both cases and fatalities. At the time of writing, the spike has passed and Malawi reports a cumulative 33,323 cases with 1,099 deaths. The population is roughly 19m. Many colleagues in Malawi have been ‘touched’ by the pandemic, some with tragic consequences and we feel for them.

With Covid-19 being the inevitable backdrop, I am nevertheless going to try to focus on as much **good news** as I possibly can in an effort to cheer everyone up a bit.

This edition of the newsletter includes:

- Dr. Queen Dube's national appointment and her successor at QECH.
- Reporting progress in the 20 years since the year 2,000.
- New water well for a Malawi village.
- The new High Dependency Unit for Children is becoming a reality.
- A record breaking Christmas mobility appeal.
- One thousand children now 'mobile'.
- Sea container.
- A special, very personal Letter from Malawi thanks to Dr. Bridget Freyne.

## Queen Dube

Many congratulations to consultant paediatrician, colleague and friend, Queen Dube on her appointment as Director of Health Services in the Malawi Ministry of Health.

Our loss at The Queen Elizabeth Central Hospital of the Head of Paediatrics is the nation's gain and we wish Queen nothing but our very best in her new role. We know that paediatrics will continue to be very much at the heart of her life and focus.



(picture) Malawi President, His Excellency Dr Lazarus Chakwera and Dr Queen Dube.



Stepping up into the position of Head of Paediatrics, congratulations go to Paediatric Oncologist,

George Chagaluka.

A very worthy appointment, we look forward to working with George.

George has many talents and apparently knows the fellow in red on the right!



## REPORTING PROGRESS ~ 2000 to 2020

I am often asked about the progress being made in establishing and developing sustainable paediatrics in Malawi, so I am taking this opportunity to give readers as context some comparisons between Malawi and the UK and the USA, followed by numbers that illustrate how Malawi child and maternal mortality rates have 'improved' over the last 20 years. These improvements are in no small measure due to the work and achievements of colleagues at The Queen Elizabeth Central Hospital (QECH) Paediatric Department.

	<u>Malawi</u>	<u>UK</u>	<u>USA</u>
Area (square miles)	45,750	94,500	3,800,000
(square kms)	118,500	244,800	9,840,000
Population	19m	67m	328m
GDP per capita	£ 300	£ 32,500	£ 50,000
(a measure of economic wealth)	\$ 400	\$ 42,300	\$ 65,200
Doctors per 50,000 people	2	140	130
Nurses/midwives per 50,000 people	22	405	725
Health spend per person	£ 25	£ 3,100	£ 7,750
	\$ 32.5	\$ 4,000	\$ 10,000

Standing out is just how poor the population of Malawi is relative to two of the wealthiest nations in the World. Malawi sits in the bottom 5% of all nations in the GDP per capita table whilst the UK and USA sit in the top 15%.

Medical human and financial resources per capita may make grim reading as regards Malawi but believe it or not have actually increased substantially in the last 20 years.

### Child Mortality (per 1,000 live births)

	<u>Malawi</u>		<u>UK</u>	<u>USA</u>
	<u>2000</u>	<u>2020</u>	<u>Current</u>	
Neo nates < 1month old	39	20	2.8	3.7
Infants <1yrs	100	31	3.7	5.6
Child < 5yrs	173	42	4.3	6.5
Malawi <i>child</i> in-patient mortality	1 in 5	1 in 20	1 in 100	

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	<u>Malawi</u>		<u>UK</u>	<u>USA</u>
	<u>2000</u>	<u>2020</u>	<u>Current</u>	
<b><u>Maternal Mortality</u></b>				
(per 100,000 births)	749	349	7	19
<hr/>				
<b><u>Life expectancy (years of age)</u></b>	45	64	81	78.5
Male/female	43/48	61/67	80/83	76/81

It is very pleasing to see how the trend of the numbers in Malawi is heading in the right direction **but, but, but** with still a long way to go and still many challenges ahead.

Data sources include - World Health Organisation; UN Inter-Agency Group; World Bank.

### Water well for a Malawi village

Back in November one of our generous donor families from the West Midlands (who prefer to remain anonymous) decided they would like to fund a new water well for a Malawi village badly in need of one and asked if we could help them. Quality of water can have a significant impact upon the health of both adults and children. With fantastic help from another of our donor families, The Kassams and their Mai Aisha Trust, both of Malawi, we were happy to help make this happen.



Our friends at Mai Aisha Trust identified Kachenga Village, Traditional Authority Karembo in the District of Balaka and in just a few days had Blue Water Drilling Limited on site and drilling. It was essential to complete all phases before the seasonal rains came so as to ensure that the well would be reaching the unadulterated water table.

They struck good water at 49 metres (158 ft.)

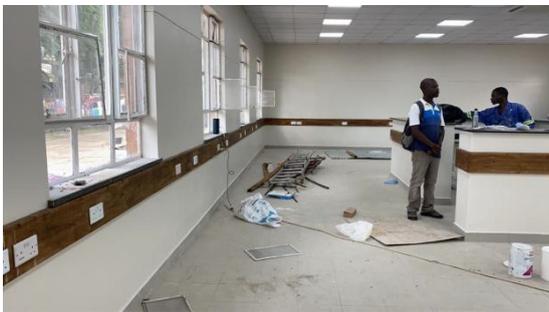
The new well was the cause of much celebration and singing in the village and it was dedicated to the memory of the West Midlands family's paternal grandparents by a suitable plaque.



## High Dependency Unit for Children becoming a reality

The project to create a High Dependency Unit for Children was suspended because of Covid-19 but thankfully was able to be restarted towards the end of the year and is scheduled for completion by 31 March 2021. Pictures below are from early March.

Amongst FOSCiM supporters who have helped make this happen, a very special mention must go to **Arthur & Sheila Dolby** and to **The Foundation of the Order of the Fleur de Lys**. Elma Philanthropies and an in-country donor have also contributed directly to FOSC for the project.



The project to re-design the **Children's Accident and Emergency** building has also been activated and I will report on progress in the Autumn newsletter. Regular readers will recall how important the A&E facility is as the 'front door' to medical assessment and treatment decisions for all children presenting at QECH. Demand has continued to grow and now outgrow the A&E facility to the point that it needs a major redesign and restructuring.

## Record breaking Christmas mobility appeal

The 2019 Christmas appeal beat all previous years by a factor of 3 and not unreasonably was assumed to be a record that would remain unbeaten.

Well, that assumption was blown away this last Christmas!

The Christmas 2020 appeal resulted in a truly incredible **103 wheelchairs** (2019 : 80) and **100 home chairs for tots** (2019 : 63), £200 for orthotic devices and a new fund requested

and made possible by donor friends in the USA to help the poorest families buy, for example, shoes where orthotic devices for legs/ankles would be ineffective without them but the family cannot possibly afford them.

We all continue to be truly humbled and overwhelmed by our followers' generosity and support for the Workshop project.

Covid-19 internal travel restrictions conspired against the Workshop 'elves' meeting this huge demand before Christmas Day but the affected supporters were all very understanding of the circumstances and have now received their case stories.

**\*\* 1000<sup>th</sup> wheelchair \*\***



This month we celebrated our 1,000<sup>th</sup> wheelchair. The 'lucky' recipient was 8-year-old Davie Luwishi who suffers from Cerebral Palsy (Microcephaly). His attendance at school had stopped because carrying him there and back had become too much for the family members as he grew and became too heavy.

To mark this special occasion, the family were given a small cash sum to help with the necessities of their child's and their family's lives.

They propose some new clothes for Davie and starting a micro-business of buying and selling fish to help the family's finances.



Lost in the centre is a shy **Davie Luwishi** – guest of honour – aboard his new wheelchair. From the back and left to right, Wilson Nanungu (Head of Department - Orthopaedic Centre), Mr and Mrs Luwishi (parents), Matron Ms Linely Chewere (Deputy Hospital Director), Robster Nyirenda (former Head of Department - Orthopaedic Centre) retired, Matilda Lali and Merlin Majawa (representing FOSCIM). Front – members of the Workshop team: Alex Jambo, Gilbert Chimpanzi, Langsfield Mwachimba, John Mmora and Lameck Mbungu.



Robster Nyirenda and Wilson Nanungu with one of the workshop 'gang' explaining to Matron and Deputy Hospital Director Ms Linely Chewere, some of the processes in making a wheelchair for a child.

Our collaboration with the QECH Orthopaedic workshop began in 2013 as something of a speculative experiment. Attracted by the many 'dividends' that arise from giving a child mobility, it soon caught the imagination of our supporters. Such was the early success of the project that in just a few years the workshop building needed to be extended and, again, some of our followers made this possible with funding.

The 1000<sup>th</sup> milestone has been dedicated to **Kitchen Table Charities Trust** (journalist and writer John Humphrys' charity).

KTCT has been a big supporter of our efforts and has funded some 200 of the first 1,000 chairs.



John and his colleague Brian Donaldson of the Trust have become loyal and hugely appreciated supporters of our workshop collaboration and its 'dividends'.



Another product of our collaboration with the Workshop is home chairs for tots, too young for a wheelchair.

This year we should reach a total of 950, well on the way to another 1,000 milestones.

As a reminder, a donation of £100 (if Gift Aid is available) or £125 if not, funds a wheelchair. £15 (if Gift Aid is available) or £18.75 if not funds a home chair for tots.

## **Our Knitting, Sewing and Crocheting Army**

The Droitwich Knits have recently celebrated completion of their 250<sup>th</sup> knitted blanket for us. Many, many thanks to Ann Smith and all her 'Knits' for an outstanding and generous achievement.

We are currently aiming for a load to be included in a Cycle of Good May container to Malawi so any donations should reach us by no later than mid-April please.

We managed to buy space on a Cycle of Good container that left the UK in November and was due in Malawi in February. The container is currently 'stuck' in S Africa due to Covid-19.

**APOLOGY:** In the Autumn 2020 Newsletter I got my Inner Wheels mixed up! Instead of crediting Redditch Inner Wheel it should have been Lickey Hills Inner Wheel and some of the 'Knit and Natter' ladies. Thanks again to Monica Clarke and apologies to the Lickey Hills ladies for the error.

## **A special, very personal Letter from Malawi**

My name is **Bridget Freyne** and I am originally from Dublin, Ireland.

I came to Malawi in 2017 with my husband Richard and my daughter Grace who was two at the time. We were living in Melbourne, Australia where we had spent 4 years while I did specialist training in paediatric infectious diseases at the Royal Children's Hospital and a PhD at the University of Melbourne. Melbourne is my mother's home town and has always been my second home.



*On Lake Malawi with Grace*

Travel has been a huge part of my life for as long as I can remember.

I was raised in a house where social justice and equality were daily topics of conversation. When you combine these two experiences, the draw to work and live overseas, to bear witness to the realities of life in different parts of the world and to help where you can is strong. I have discovered that the course of a medical career doesn't always leave time for altruism but it does provide the opportunity to take a valuable skill set and deploy it in many different settings. This is an incredible privilege and one which has provided me with many amazing opportunities, and I discovered that going overseas to 'help' is actually about going overseas to learn.

In 2007, while spending 18 months in Kampala, Uganda working at a Paediatric HIV clinic, for the first time ever I witnessed global inequity in action and I was overwhelmed. I left Uganda, determined that I would not return to work in the developing world until I was fully qualified. The contribution I could make as a medic required that I was not the best available but that I was the best that I could be.

The first day I walked into Queen Elizabeth Central Hospital in Blantyre, Malawi in 2017 I felt confident. I was a consultant paediatrician, I was trained. Within two minutes I realised that I was out of my depth and about to start learning all over again. I needed to learn to listen and not talk, to observe and not act, to accept and not challenge. I have not always been successful in this learning process! I have however been inspired every day by the compassion, wisdom and skill of my colleagues and the strength, resilience and faith of my patients.

A lot is not fair but there is no time to dwell on that. Somehow there is always hope and laughter even in the direst circumstances.

For our family, life in Malawi has been the best of times and the worst of times. I fell pregnant with our second daughter Winnie within six months of arriving in Malawi and soon after discovered that I had become infected with Cytomegalovirus (CMV) for the first time. This is a common virus which can have devastating consequences for unborn babies. All of a sudden, I was flying back to Australia and straight into the world of high-tech medicine, amniocentesis, fetal MRIs, hyper-immune globulin infusions, multiple consultations with world experts. In the end, no one could tell me what the prognosis was, whether she would be born with cerebral palsy or be completely fine. In the end, none of it mattered. I was a mum and whatever happened Winnie would be born and we would love her. Acceptance of difficult situations is something that doesn't sit easy with those of us who are raised with infinite options and opportunity. Working in Malawi reminds me of how great my privilege is, how our common humanity demands that we remain willing to listen and learn and ultimately to accept what life sends our way.



Winnie (left with giraffe in background) is fine by the way. A holy terror who loves being barefoot, climbing trees and eating ice-cream. She thinks elephants are 'so sweet' and that her big sister Grace looks like a lion. There is a real pleasure in the pace of life in Malawi for a young family; less to do, less in the schedule, less to buy and lots to learn. I will always regard this as the greatest gift I have received from my time here.

**Thank you for reading my musings and for supporting FOSC and FOSCiM. These organisations are the best at what they do that I have come across. The commitment they show to the development of equitable partnerships, the building of real capacity and the belief that all children have the right to a dignified life and death is constantly inspiring.**



(left) Being Santa's helper last Christmas. [We saw Santa earlier!]

(right) Dr Mbale and I with the Paediatric Nursery team as part of the COVID-19 appeal.

