



Mulanje Mission Hospital

Newsletter

April 2022

**Mulanje Mission Hospital
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Malawi**

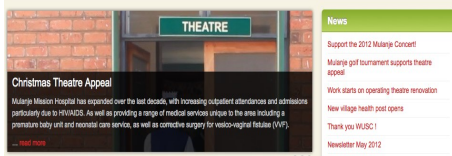
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**Hospital accounts:
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Editorial comment

By Dickson Chisale

Dear friends, partners and colleagues of Mulanje Mission Hospital.

Here comes another Easter period when Christians across the world commemorate the suffering, crucifixion, death and resurrection of our Lord Jesus Christ.

These days we are dealing with increased prices of food, fuel and daily living. These effects of COVID-19 and now the war in Ukraine are felt acutely in Mulanje. Medicines have become extremely expensive over the last months, and many food items doubled in price in just a few weeks.

Next to that, the storm Ana destroyed many crops, houses and latrines here in the South of Malawi. Sometimes it can be tempting to lose hope.

Many people in Malawi deal with these issues on a day-to-day basis. Life is tough and we all feel it. Yes, all countries in the world are affected, but unfortunately, it is the poorest being affected the most: those that have no job or social security, those that are sick or or-

phaned and those that don't have houses that can withstand climate change.

We can draw strength from Philippians 4:4, which says: *“Let your gentleness be evident to all. The Lord is near. Do not be anxious about anything, but in everything, by prayer and petition, with thanksgiving, present your requests to God. And the peace of God, which transcends all understanding, will guard your hearts and your minds in Christ Jesus.”*

We are glad that, with the support of many, at the hospital we can be present for all people seeking our services.

By giving care and love in the hospital and by supporting the most vulnerable in the community. It is a privilege to care for the needy and to be of help to them. There is no need to be desperate when the prices rise and when we don't know what priorities should be first: we know, the peace of God will guard our hearts and the Lord is near. He is risen indeed!

Donate easily to MMH: scan the QR code!



In € to the English Reformed Church (Amsterdam)

In £ and other currencies using Paypal (to MMH UK Trust)



Appalling health standards at the Mulanje prison triggered MMH to start prison health clinics in 2014. There used to be deaths every quarter, malnutrition was as high as 30%, there were a lot of bed bugs and waste disposal was bad. Since then MMH has worked on all these challenges and now standards are better. A clinic has been operating

weekly, and apart from medical care, the hospital continues nutrition support by providing cooking oil and soya pieces to the inmates. In case there are malnutrition cases, fortified porridge flour and fortified peanut butter paste are provided.

Every quarter MMH Prison health Coordinator, Kondwani Kudzala and his team conduct a mass screening

exercise to all inmates to understand some prison health indicators. In February, he and his team assessed all 363 inmates out of which 31 were hypertensive representing 9%, the medical team took care of them accordingly. 46% of the inmates were previously HIV positive and already on ART and one more new positive was found. It is very encouraging that all inmates know their HIV status unlike outside population where not everyone knows it.

The team was so excited because of inmate's tremendous improvement in nutrition status, unlike when prison health clinic started in 2014 when mal-nutrition was above 30%, this time around it is 0%. This means the project has to postpone food supplements as treatment like fortified porridge and peanut butter paste.

The Hospital would like to thank the Edinburgh churches, Stockbridge and St. Andrews and St. Georges West and also others who have been supporting the project since it 2014.



Clinical Officer Thokozani Kamwendo conducting a weekly clinic

Staff house renovation

-by Pearson Soka

One of the challenges for hospitals in rural settings is the issue of staff accommodation. Mulanje Mission Hospital is one of such hospitals. We have some hospital houses which were built in the 1970s and the quality of the houses is not up to standard. The hospital is therefore renovating such houses one-by-one with the help of donors. The hospital has about 120 houses now to maintain. This year we have renovated house number 39.



The house before renovation

Staff house renovation - continued

The roof was in a poor state, the ceiling had falling, the floor had big holes and window frames were eaten up by termites.

The work was done by a local contractor. Following renovation, the occupant is happy with the changes made to house. The hospital would like to thank members from H.H.G. Barneveld e.o for the generous contributions that has changed the condition and face of the house. We would also like to thank volunteer Gerwin Habermehl for coordinating the donation and supervising the works.



▲ Works in progress

Did you know...

In 2021 MMH provided

- 1269 major procedures
- 625 caesarean sections
- 5997 hospital admissions
- 67771 out-patient visits
- 600 children in care programme
- 14 regular outreach clinics
- 4 major reforestation sites



▲ The renovated house!

Some words from an elective medical student

- by Annemiek de Vries

Muli bwanji? My name is Annemiek and I'm a medical student from the Netherlands. Currently I'm doing my final elective at Mulanje Mission Hospital. It's a privilege to be here and being able to learn from the people in and around the hospital. My time here has once again confirmed that I want to specialize in International Healthcare and Tropical Medicine once I graduate from medical school.

I've already learned so much in the short period that I've been here. My

first few weeks here I've rotated on the different wards of the hospital (pediatrics, female, male and maternity). I've seen patients with diseases that I hadn't seen before and diseases that are at a more advanced stage than we see in the peripheral hospitals in the Netherlands.

I have seen patients with tropical (infectious) diseases that we don't see in the Netherlands (for example malaria, typhoid fever, severe acute malnutrition). It was like learning a whole new specialty.



Luckily everybody here took the time to answer my questions and teach me about these different tropical diseases.

Also, a lot of the diseases (and stages of the diseases) that are seen and treated here would be sent to an academic hospital in the Netherlands. Yet, the doctors, clinical officers and nurses know so much about all the different diseases and treatments.

I also think it's very valuable MMH has a palliative care team. When there was a palliative patient in one of the wards, it was really helpful that we could ask them to come by and review the patient and assess their needs. I'm impressed by how they care for and listen to the patients and how they stand by the patients and their family. Besides the medical part, I've also learned life-

lessons while being here. For example, how to be innovative (like using a surgical blade for cutting pills and an iv-canula and use the line of a catheter as a drain).

A big shout-out to all the employees and volunteers at the hospital, they really care for and take care of the patients so well! I'm looking forward to the next few weeks!

Solar project progression in pictures

— by *Gerwin Habermehl*



▲ *Renovation of the solar trees with in the background new panels in place on OPD*



▲ *Preparation for new panels on female ward*



▲ *New panels on female ward*



▲ *Renovation of the solar trees*

Bernadette January is a disabled girl who has made it to Catholic University of Malawi after being supported by the orphan and vulnerable children project.

Born in 2002, Miss January was enrolled in the project in 2008, when she started standard one at Apatsa primary school. According to her mother, Bernadette was born through a normal delivery but they realized there were some abnormalities when she was one month old. The doctors told her that the child had multiple congenital disabilities.

Bernadette narrates that being a disabled girl using a wheel chair has not made her school life easy. She relies on other people for her to move from one place to the other. One time she remembers she was absent from school for two weeks because there was no one to push

her chair to school. With a big smile she says, “Despite being absent for 2 weeks during exams, I was performing better than most of those who attended all lessons!”.

Bernadette’s mother is a single woman, her husband left her in 2004 when her daughter was 2 years old and she was pregnant of the second child. Up to date the family does not know where her father is, the second born has never set eyes on his dad. As a single mother life is tough. “Sometimes I sell tomatoes or African donuts, but I can’t find earn enough money to support myself and my children. Words are not enough to thank PWS&D and Mulanje Mission for supporting my daughter” narrated the mother of Bernadette.

After primary school, Bernadette was selected to start form one at

Mulanje secondary school. She got a few strong credits during the Malawi school certificate examination. Her ambition is to be a social worker and this is coming to reality because this March, the Catholic University of Malawi has accepted her to start studying for a Bachelor degree of social science, majoring in social work.

Bernadette is so happy and her dream is to help disabled children like her when she is a social worker. She knows what it means to be disabled, and that it is even more difficult when you are a girl. She wants to support disabled girls educational needs just as she has been supported in the past.

Many people are proud of you, Bernadette, for reaching this far and believe you will become a great social worker!



▲ Photos of Bernadette January, student at Catholic University (Social Work)

To ensure that girls do not fall pregnant and subsequently drop out of school, MMH is implementing a programme called Teenage Pregnancy Prevention. A major part of the program is empowering girls through education and vocational skills training. The back-to-school program is for those girls who dropped out due financial problems but now want to continue with their education. The vocational skills training is for those who can't go back to school but can manage to do vocational skills training. The aim is for girls to achieve economic independence and also basic literacy skills. Currently 120 girls are enrolled: 60 in secondary school and 60 in vocational skills training. School fees, shoes, bags, uniform and stationary are provided. The work is supported by EMMS International.



▲ *Girls in the programme receiving exercise books*



▲ *Handout of schoolbags at the beginning of the semester*

What is vocational skills training?

This is practical training accessible to young men and women who did not have a chance to complete secondary school. Courses offered are tailoring, welding, carpentry, mechanics and others. For the training, students are attached to local small companies. Safety wear is provided and students are followed-up. In future the programme would like to provide a workshop and basic tools at a small fee, for the first year after graduation, so that the new artisans can start their own businesses.