

Mulanje Mission Hospital

Newsletter

October 2019

Mulanje Mission Hospital CCAP Blantyre Synod PO Box 45 Mulanje Malawi

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National Bank of Malawi

P.O. Box 945 Blantyre

Hospital accounts:

407275 (\$)

286818 (£)

380873 (€)

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Please send feedback to

info@mmh.mw

Editorial Comment

I hope will assist you to appreciate ment back home, by Hastings. some new developments taking place at MMH.

now open. Patients are receiving page 3. health care services in a modern spacious and well ventilated environ-

has embarked on tree planting exer- surroundings together. cises. By the end of last winter, over With all best wishes, 58,000 trees were planted in some disaster prone areas. This was Dickson Chisale championed by the Sustainable

- Dickson Chisale

Greetings to all donors, partners, Livelihoods team in a participatory friends and stakeholders of MMH. forest management approach. Read This is yet another newsletter which more on bringing forest manage-

It is now also possible to get involved in reforestation Firstly, the hospital's newly renovat- through offsetting your carbon emised outpatient department (OPD2) is sions via MMH! Read all about it on

Many thanks to our partners and friends for the tireless spiritual and material support rendered to MMH. In an effort to mitigate perpetual dis- We hope our relationship will continasters experienced by people as a ue to flourish, so we can reach out to result of floods and dry spells, MMH the needy people in Mulanje and

MMH Occupational Health Programme - David Saidi

MMH laboratory is one of the few laboratories in Malawi that is equipped with a vibrant microbiology department. The laboratory performs several types of microbiological tests from basic gram staining to cultures and sensitivity tests. The tests are either done as part of routine diagnostic tests or part of the food safety security program.

As Hazard analysis at critical control points (HACCP) and Food security systems certification (FSSC) requirement, companies that produce food products are required to ensure that their workers are not infected, and therefore should not lead to contamination of their food products. MMH nurses and laboratory work together with the local tea industry, lodges

and restaurants around Mulanje and Thyolo that are involved in the food business.

The laboratory processes environmental specimens, stool, and urine samples. Stool samples and specimens are cultured for bacteria isolation and microscopically screened for infections. The urine is checked for schistomiasis and urinary tract infections. In instances of infection, the clients are treated and rechecked to verify the efficacy of the treatment and validation of infection methods.

The program has so far been running smoothly, providing revenue to support other services, and at the same time ensuring quality service provision to its clients.

Bringing forest management back home- Hastings Chitengu

Forests play a vital role in the livelihoods of millions of Malawians, but uncontrolled exploitation of the country's forests has reached an alarming rate.

Malawian authorities recognized that they did not have the resources—money or people – to protect all the countries forests. Villagers were using the forests as an open access resource, indiscriminately gathering fuelwood, forest fruits and vegetables, medicinal plants and building materials for their own use, and cutting or to make charcoal for sales.

Participatory forest management (PFM) was seen as a way of getting local people to take responsibility for managing the forests themselves. The forest policy of 1998 and the Forest Act of 2000 provided a legal basis for the communities to own and manage forest resources on village lands and

jointly manage forest resources in government forest reserves.

Based on the above scenario, Mulanje Mission Hospital is implementing a 5 year (2017-2022) participatory forest management project for Mlatho hills and river bank protection for three major rivers: Ruo, Lichenya and Thanguzi, under group village head (GVH) Misanjo area. The aim of the project activity is to conserve and encourage natural regeneration in the protected areas as one way of revitalising the degraded environment. By the end of 2022, more than 90ha of forest area will be under community based management.

The impact of reforestation and tackling forest degradation is promising. The size and volumes of trees are increasing in forests under PFM, but are continuing to decline elsewhere; cutting of poles and cul-

tivating in marginal areas are lower in PFM areas than in traditionally managed forests. The impact on livelihoods is also improving, with community based forests contributing more to livelihoods. Forestry based enterprises have also creased more than ever before. Bee keeping groups are benefitting from the protected areas. People are getting more financial benefits from the honey they are harvesting since there is already a market at Mulanje Mission Hospital -Thandizani Resource Centre.

More needs to be done to capture the benefits of forest management for local communities, including payments for environmental services and introduction of other activities like irrigation farming, livestock pass-on programs and energy-efficient cooking stoves.



Mlatho Hills beekeeping

Offset your carbon footprint and support MMH! - Dr Ruth Shakespeare

you have all returned renewed and refreshed. Many of our readers have travelled to their holiday destinations by car, train or plane – but how many of you worked out the amount of carbon dioxide released into the atmosphere as a result of your travel and activities - part of your individual carbon footprint? These days we are all aware of the global warming potential of greenhouse gases, and most of us try to 'reduce, reuse and recycle' to reduce emissions. Perhaps we are also trying to cut food miles, eat less meat, and walking or cycling more for short journeys. If you took a flight to your holiday destination you may find that the tonnes of CO2 emitted by your share of the flight is one of the biggest single contributions to your By supporting the MMH Sustainable carbon footprint for the year. A few examples:

			. ?
London-Paris	1 economy class return	0.11 tonnes	
	class return	torries	,
Amsterdam-	1 economy	0.61	
Athens	class return	tonnes	,
Edinburgh—	1 economy	1.57	
New York	class return	tonnes	,

We all have a responsibility to tackle climate change - but no matter how * committed we are to reducing our use of energy and keeping our carbon footprint small, all of us will still be responsible for some unavoidable carbon emissions.

Carbon offsetting provides a way to compensate for these by funding an equivalent carbon dioxide saving else-

where – for example by supporting more renewable energy production, reducing deforestation, or helping to plant more trees to capture and store carbon that has already been emitted into the atmosphere.

Forests are natural and economically important 'carbon sinks' yet globally tree cover is reducing. A tree can absorb 20kg or more of carbon dioxide per year - that's about one

tonne of carbon dioxide sequestered by the time it reaches 40 years old. In the last two decades Mulanje has lost much of its tree cover through logging for timber and fuel wood, charcoal burning and overgrazing. This has resulted in the drying of rivers and streams, soil erosion, poor crop

that could generate more income school. through tourism.

and 'offset' emissions generated else- ted? These include training the community in agroforestry and conservation agriculture, developing community tree nurseries, tree planting in reforestation and riverbank conservation schemes, cultivating school orchards and village managed woodlots, generating income from trees through bee keeping, and promotion of fuel-efficient cooking stoves.

Livelihoods programme you can:

- Offset your unavoidable CO2 emissions
- ment creation
- fruit
- Reduce soil erosion, soil nutrient loss and risk of flooding
- Help conserving water catchments and wildlife habitats
- Create a brighter future for village members including orphans and So - four easy steps: people living with HIV / AIDS
- Restore the beauty of the local landscape

Did you know?

Average CO2 emissions (metric tonnes) per person, per year

Malawi	0.1
United Kingdom	6.5
Netherlands	9.9
USA	16.5

Source: World Bank data 2015

Already, in the Mlatho Hills reforestation programme area, we see communities where women used to walk many kilometres searching for firewood, now growing and selling tree seedlings, protecting their wooded

The holidays are over and we trust yields, loss of shade from the hot sun, areas, making and using fuel efficient loss of wildlife and birds and the dis- stoves and using the income from figuring of a beautiful mountain area honey sales to send their children to

> So next time you fly, why not con-MMH Sustainable Livelihoods pro-sider a contribution to planting gramme supports a number of activi- broad leaved indigenous trees in ties which reduce carbon emissions Mulanie to offset the carbon emit-

> > A final thought – for our partners who visit Mulanje. Please consider offsetting the CO2 emissions arising from

Northern	1 economy	2.46
Europe—Malawi	class return	tonnes
Blacksburg,	1 economy	3.65
Virgina– Malawi	class return	tonnes

MMH SL programme will plant two trees for every metric tonne of CO2 Reduce poverty through employ- you wish to offset. The cost of tree planting includes a contribution to community activities supporting refor-Support income generation from estation, such as development of tree trees eg bee keeping and sale of nurseries, bee keeping training, and use of fuel efficient cooking stoves.

> GBP 8, EUR 9 or USD 10 will buy two trees or offset one metric tonne of CO2.

- Calculate your carbon footprint, reduce where possible and work out the amount of CO2 (metric tonnes) you wish to offset
 - The Medical Director at MMH can advise on the best way to send funds:

Contact: director@mmh.mw

Why not team up with others in your church to make your travel carbon neutral and remit tree planting funds to MMH?

- MMH will send you a certificate when your tree(s) are planted
- You will be reducing your contribution to global warming and helping impoverished communities to combat the effects of climate change and deforestation!

Thank you

Adapting during times of climate change— Hastings Chitengu

Case study Rose Sembezi of Sembezi Village, T/A Mabuka, Mulanje, Malawi

Mrs Rose Sembezi lives in Sembezi village, TA Mabuka with her husband and three children and two grandchildren. She has been living in this village since her birth. This lady and her husband did not go a long way with their education. This made it difficult for them to understand improved agricultural technologies.

Mrs Sembezi was amongst most of the households in the village experiencing food shortages especially in the lean months and this problem become persistent from the late 1980's to 2017. Mrs Sembezi used to harvest only 3 bags of maize with the climate challenges. These problems were attributed to several factors in-

cluding high prices of farming inputs, cultural factors and her health status.

Thanks to the coming of Mulanje Mission Hospital's Sustainable Livelihoods Program who introduced the program in the village in 2017. This was the time she realized the causes of the food inadequacy through various training programmes. Among other factors, she understands that local effects of climate change are causing these food liable rainfall pattern and

extreme high temperatures.

"Just imagine, my village used to receive rains in good time starting from late October to at least March but these days we don't know as to when these rains will commence and stop. These type of patterns have affected my family a lot because we don't have the proper time we can say we start our farming activities" Mrs Sembezi complained. With MMH's assistance through hands-on trainings, sensitization and

meetings, she understands the issues of climate change and the ways to mitigate and adapt to it. "The coming in of MMH was aimed at equipping the local communities with skills and knowledge to adapt to effects of climate change like unreliable rainfall which is making water very scarce



shortages through unre- Irrigation scheme in Sembezi village

for crops and high temperatures which scorches our crops", she explained.

"Before MMH introduced the adaptation strategies in our village



awareness Mrs Rose Sembezi

and in our family to be specific, life was miserable, we did not know what the day would bring, we survived on one meal a day which was not even enough for us all" she explained. For the first time during the 2017/2018 farming season, I managed to harvest 10 bags of maize, 2 bags of Pigeon

peas from the same plot I used to harvest 3 bags of and during the maize. 2018/2019 farming season, I managed to harvest 12 bags of maize despite the harsh weather we experienced, many thanks to MMH. Through our Umodzi farmers club, we were trained in various technologies like (mtaya khasu) Conservation Agriculture, this merely involves laying dead grass or maize stalks in the field to suppress the weeds and conserve moisture considering scarce water. Apart from maize, I also grow groundnuts, soya beans and vegetables. I am now a happy

woman because I can take care of my dwindling health and family, we sold these produces to buy household needs and pay school fees for my children.

Houses under reconstruction - Wise Ndawa

Mulanje district is one of the districts that was affected by Cyclone Idai during the just ended rainy season and Mulanje Mission Hospital catchment area was not spared. The hospital conducted an assessment in the catchment area to find out how many households were affected, including orphan households. The assessment showed that a lot of pit latrines were washed out and this made the hospital take a step ahead and source funds to support the victims with materials to reconstruct latrines. During the same assessment two orphans were also identified whose houses were badly affected by the floods.

In making sure that orphans are living in decent houses, the Primary Health Care department is now renovating these two houses. The house at Khoviwa was in bad shape and it was decided to completely demolish it and build another one while the other house at Mponda village needed significant renovation. The community at Mponda had already started supporting the orphan through production of bricks. These houses are expected to be ready by next month. The Oprhan and Vulnerable Children programme at MMH is currently supported by the Good Little Company and Presbyterian World Service and Development. Support is rendered in the areas of nutrition, education and medical care. A recent development has been piloting of a digital database, containing essential data for every individual under the programme. This is aimed at improving quality of data and easier reporting. Data entry can now happen through an I -pad, which is synchronized with an online database once back at the hospital.



House at Khoviwa after floods



Construction of the new house at Khoviwa underway



Reconstruction at Mponda

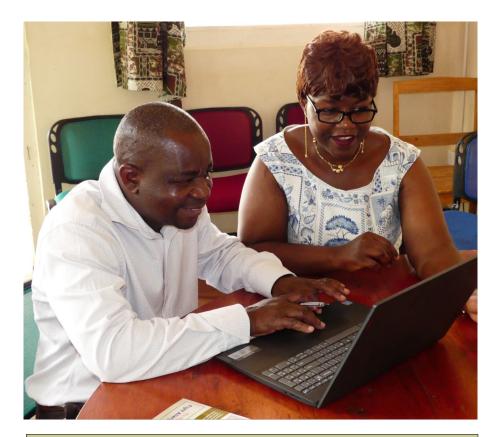
Improving IT skills at MMH - Evelyn Dzidekha

Mulanje Mission Hospital was privileged to receive Henriette Stam - an IT Consultant from Holland. She arrived in Malawi on 2nd August 2019 and stayed for two months. She has been very supportive especially to Mulanje Mission hospital staff and Mulanje Mission Community Day Secondary School staff. The IT Consultant offered the hospital staff basic courses of computer such as Microsoft Powerpoint, Excel and Word for the Nurses, Accounts personnel. Administration staff and Teachers from Mulanje Mission Community Secondary School. A few selected staff were offered Publisher courses which will benefit the hospital to publish newsletters and short stories on MMH website. This has helped imparting knowledge to staff who previously had no knowledge of computers. She also helped to update the website of Mulanje Mission Hospital.

She assisted the IT Officer in running some Programme utilities such as virus scanners for all the vulnerable computers at the hospital. She helped the HMIS data file re-construction and formatting.

Mrs. Henriette Stam has been active for many years with the Malawi Werkgroep Leeuwarden, in the Netherlands, who organize an annual bazaar and other activities in support of MMH.

Henriette, we wish you all the best as you travel back to the Netherlands!



Dickson Chisale & Evelyn Dzidekha during Microsoft Publisher lessons



Henriette Stam checking an I-pad application with Soldier Mangani

Goodbye to Dr Mphatso - Dr Arie Glas

Around the time this Newsletter reaches you, we are saying goodbye to Dr Mphatso Kantonya.

Dr Mphatso has worked with MMH since July 2018 as Medical Officer within the Clinical Department. Many patients have benefited from his care and leadership within the department.

Under Dr Mphatso's leadership a review of our obstetric protocols was undertaken. This process aimed at incorporating the latest medical evidence around obstetric care with existing guidelines from Malawi and other countries.

Most research being undertaken within the obstetric field is done in settings fundamentally different from rural Malawi. This means application of research findings needs to be carefully considered,

reviewing any differences between the research setting and our context. Development of evidence-based guidelines in our context is a delicate process that needs the input of both clinicians and nurses at all stages, on which Dr Mphatso has worked during the past period.

We cherish the contribution Dr Mphatso made to the further improvement of critical care at MMH, both in the High Dependency Unit and on the other wards.

You will be missed both in the hospital and around, especially by the colleagues and friends who enjoyed mountain biking with you around Mulanje!

We wish you all the best in your future career Dr Mphatso.



Dr. Mphatso Kantonya

A tree no longer stands!

On a busy Tuesday morning, last week, everyone suddenly dropped their work and rushed outside!

A loud squeaking sound followed by a thunderous crash led all to believe something terrible had happened.

It appeared a huge Jacaranda tree at the entrance of the hospital had fallen down. By all means we have been lucky, since no one was injured and only minor damage was inflicted to a few roof sheets on the neighbouring building. With help from the ground workers the entrance was quickly cleared.

Of course, a new tree will be planted!

