2024 Annual Report

January - December





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Dear Partners, Supporters, and Community Members,

As we reflect on 2024, we take immense pride in the strides we have made in transforming healthcare access for underserved communities in Malawi.

Wandikweza Health Centre served 86,998 patients, with 15,336 revisits, underscoring the community's trust in our services. Our work in chronic disease management ensured continued care for patients with conditions such as hypertension and asthma, reinforcing the importance of follow-up healthcare.

Maternal and child health remained at the heart of our mission. The newly established Ebenezer Maternity Home provided a safe waiting space for expectant mothers, while the Ebenezer Maternity Wing successfully conducted 366 deliveries and referred 71 high-risk pregnancies for advanced care.

Additionally, we achieved a major milestone with the certification for antiretroviral drug (ARV) dispensation, expanding HIV treatment services. Our HIV testing and counseling programs reached 739 pregnant women and 2,313 general patients, further strengthening prevention of mother-to-child transmission efforts.

This year, we expanded pediatric care through the El Shaddai Children's Department, addressing childhood illnesses such as pneumonia and malnutrition. Furthermore, our digital transformation through strategic partnerships with RippleWorks and GHII allowed us to digitize 85% of our data tools, improving efficiency in patient management and healthcare delivery.

Despite infrastructure and resource challenges, we remained resilient and innovative, adapting our strategies to serve communities better. As we look ahead to 2025, we are committed to expanding maternal and child health services, deepening community engagement, scaling digital health solutions, and strengthening chronic disease management.

To our partners, donors, and dedicated staff, we extend our deepest gratitude. Your support makes this transformative work possible. Together, we are breaking barriers to healthcare and uplifting entire communities.

With hope and determination,



Mercy Chikhosi Kafotokoza



THE CONTEXT: Barriers to health care

In Malawi, access to essential healthcare, particularly for maternal and child health, is severely hindered by geographic isolation, economic constraints, and limited health awareness. Over 50% of the population lives more than 5 kilometers from the nearest health facility, contributing to a maternal mortality ratio of 349 per 100,000 live births and an under-five mortality rate of 40.1 per 1,000. Chronic underfunding of the health sector (8.8% of the national budget in 2022) exacerbates these challenges, limiting resources, increasing out-of-pocket costs, and delaying care, often with fatal consequences.

Wandikweza implements Proactive Doorstep Care (PDC) to address these barriers in rural and underserved communities characterized by high poverty levels, poor infrastructure, and a heavy burden of preventable diseases. By bringing healthcare directly to households, PDC eliminates obstacles related to distance, cost, and awareness, ensuring equitable access to life-saving services and improved health outcomes for Malawi's most vulnerable populations.



Wandikweza is a community focused organization transforming healthcare delivery in Malawi. Committed to ensuring equitable access to quality care, we tackle the barriers that prevent underserved communities from receiving essential, life-saving health services.

At the heart of our work is Proactive Doorstep Care (PDC), an innovative approach that delivers healthcare directly to families' homes. Through a network of Community Health Workers (CHWs), Nurses on Bikes (NoBs), mobile clinics, and health facility support, we eliminate obstacles such as distance, cost, and lack of awareness. This model empowers communities to take charge of their health while strengthening the broader health system.

We aim to eliminate preventable maternal and newborn deaths by ensuring women and their children receive quality care at every stage, before, during, and after pregnancy, and throughout a child's early years.

To scale, we partner with public health facilities, which serve the majority of underserved women and newborns, to deliver the Proactive Doorstep Care.

Vision

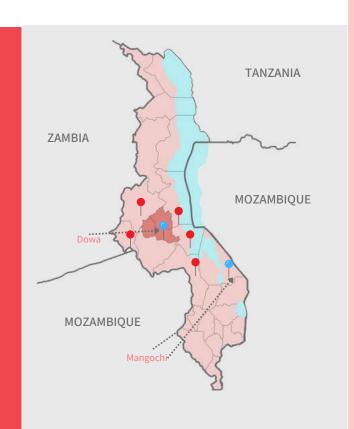
A Malawi where all mothers, children, and families thrive.

Mission

Transform maternal and child health care delivery to reach every woman and newborn.

Core Philosophy

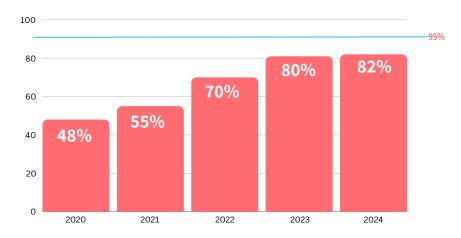
At Wandikweza, we believe that every individual, regardless of their location or circumstances, deserves access to quality healthcare. Our philosophy is grounded in the conviction that empowering communities is the key to building resilient health systems and achieving sustainable health outcomes.



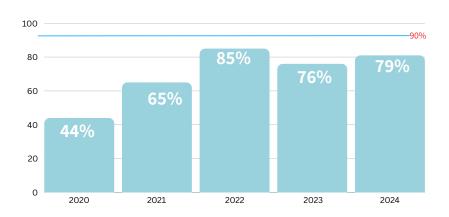
Milestones That Matter

Target

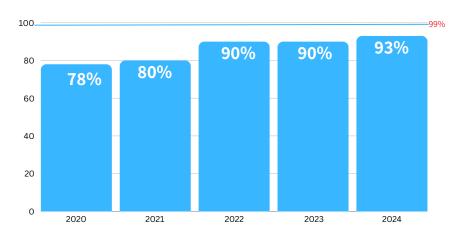
% of women of reproductive age (15-49 years) with access to modern contraceptive method has been successfully increased from 48% to over 82%



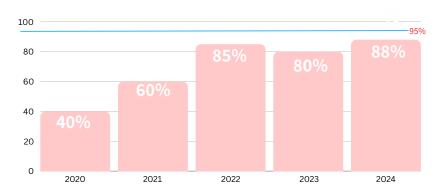
% of pregnant women registered in the first trimester and are tested for syphilis increased from 44% to 79%



% of births attended by skilled health professional increased from 78% to 93%



% of children assessed, with a symptom of malaria, diarrhea, or pneumonia, within 24-hours of symptom onset increased from 40% to 88%





PROGRAMS AND REACH IN 2024



PROGRAMS

- Community Health Workers
- Mobile Clinics
- Nurses on Bikes
- Health Centre
- Perinatal Mental Health



- Dowa
- Mangochi



• 360,094 all programs inclusive



Health promotion, disease prevention, and curative care through Community Health Workers (CHWs)

In 2024, Community Health Workers (CHWs) continued to serve as the backbone of Wandikweza's Proactive Doorstep Care (PDC) model, transforming healthcare delivery in Malawi's underserved communities. These dedicated individuals brought life-saving services directly to the doorsteps of families, bridging critical gaps in access to healthcare caused by distance, cost, and limited awareness.

This year, the Community Health Workers conducted 146,093 home visits to provide personalized healthcare and education directly to families

The CHWs played an important role throughout the year in promoting health, preventing disease, and providing essential care to vulnerable populations. From conducting home visits and educating families on maternal and child health to screening for malnutrition and referring cases to health facilities, CHWs have been at the forefront of creating healthier, more resilient communities.

In addition to their core responsibilities, CHWs actively mobilized communities to participate in health campaigns, collected vital health data for informed decision-making, and acted as trusted advocates for sustainable health solutions. Their efforts have not only improved immediate health outcomes but have also fostered a culture of prevention and proactive care.

The achievements of 2024 reflect the strength of our CHWs' dedication, the impact of their work, and the ongoing need to invest in their training, support, and empowerment. As we look ahead, we remain committed to equipping CHWs with the tools and resources they need to continue delivering quality care and driving transformative change in the communities we serve.

Health Promotion:

The CHWs educated **11,649** individuals and families on healthy practices, such as proper nutrition, sanitation, immunization, and maternal and child health.

They conducted nutritional assessment/growth monitoring for 2,220 children under 5 years. Growth monitoring was the regular measurement of a child-size weight and head circumference to detect abnormal growth like stunted growth, affecting many children. 35 children who were found to be malnourished were referred to public health facilities for proper management.

Disease Prevention:

The CHWs conducted **9,761** screenings for malnutrition, **10,625** were treated for childhood illnesses, and reached **21,687** beneficiaries with maternal health risks education. They provide preventive interventions like distributing **1,002** bed nets and promoted **1,779** antenatal visits in the first trimester.

The CHWs successfully dewormed **3,369** children, providing them with protection against intestinal parasites that can cause malnutrition, anemia, and stunted growth. This intervention played a critical role in improving children's overall health, enhancing their ability to absorb nutrients, and supporting optimal physical and cognitive development.

3,254 children were fully immunized, protecting them from preventable diseases. Additionally, the CHWs provided Vitamin A supplements to **1,989** children. Vitamin A helped the children to have a normal function of the immunity system and to maintain healthy vision.

Curative Care:

The CHWs delivered 16,509 basic treatments, such as managing diarrhea, minor injuries, early stages of malaria to under five children, and ensured timely 13,916 referrals to public health facilities for complex conditions.

Behavior Change: Impact of health education

Through the Community Health Workers and Village Health Committees (VHCs), we continued to focus on creating awareness, empowering individuals, and facilitating behavior changes that improve maternal and child health outcomes. Each VHC consisted of 10–15 dedicated community members who met on weekly basis under the guidance of a CHW. Each VHC member was responsible for sharing the health lessons they learned with 10–15 neighbors, creating a ripple effect that saturated the villages with critical health information.

Health education sessions emphasized the importance of regular Antenatal Care (ANC) visits, resulting in a 15% increase in ANC attendance across targeted communities. 76% of targeted women reported better preparedness for childbirth and early detection of pregnancy-related complications.

Awareness campaigns on breastfeeding led to a 30% increase in mothers exclusively breastfeeding their babies for the first six months, improving infant nutrition and reducing preventable illnesses.

Sessions on the introduction of complementary foods helped mothers transition infants from exclusive breastfeeding to a balanced diet, improving growth metrics in children. Community members demonstrated increased awareness of danger signs in pregnancy, childhood illnesses, and chronic diseases, leading to timely referrals to health facilities for advanced care. The health education empowered women with knowledge, enhancing their roles as decision-makers in family health matters.

We aimed to reach 8,000 mothers with knowledge on neonatal danger signs, and successfully reached 10,886 mothers, surpassing the target by 2,886 mothers. This indicated comprehensive coverage of the community. This achievement reflected strong demand for neonatal health education and the effectiveness of the Proactive Doorstep Care services. The health education on neonatal danger signs was also integrated into postnatal care (PNC) visits, ensuring that most mothers attending PNC sessions also received information on neonatal health.

Empowering Girls 15-19: Transforming lives through Sexual and Reproductive Health Education

5,352 of 7,567 girls aged 15 - 19 knew at least three pregnancy related danger signs. We exceeded the target by reaching 5,352 girls against a target of 5,000, demonstrating strong performance in promoting the benefits of delaying childbirth until age 20. However, we only covered 70.7% of the eligible population, indicating a need to enhance outreach strategies for full population coverage. Despite surpassing the target, a significant portion (29.3%) of the eligible population was not reached. This points to a need for enhanced strategies to reach more girls.

Cultural taboos surrounding discussions of sexual and reproductive health limited open conversations with adolescents. Some parents opposed adolescent health education, fearing it promotes early sexual activity. To mitigate this, we focused on educating the parents about the importance of health education in preventing risky behaviors and improving overall adolescent well-being. The CHWs and VHCs delivered health messages tailored to the community's cultural and linguistic context, making the information relatable and actionable.





Mobile Clinic: Expanding healthcare access to hard-to-reach communities

This year, we continued to bridge healthcare accessibility gaps in underserved communities through mobile clinics, a crucial component of the Proactive Doorstep Care (PDC) model. With 84% of Malawi's population living in villages far from fixed health facilities and only 46% residing within 5 km of a health facility, access to primary healthcare remains a significant challenge. High disease burdens, particularly malaria, HIV, and maternal and child health complications, further emphasized the need for community-based healthcare solutions.

Our mobile clinics provided essential medical services to **53,960 patients,** reducing healthcare access barriers for pregnant women, children, and the elderly, who often struggle with long distances to health facilities. The mobile clinic teams travelled to hard-to-reach areas eight times a month to bring life-saving care directly to communities. Strategically set up at schools, churches, and community buildings, the clinics ensured maximum accessibility, ensuring that no one was left behind due to distance, cost, or lack of awareness.

This year, fuel shortages and deteriorating road infrastructure posed significant challenges to the effective operation of our mobile clinics. To ensure continued service delivery in hard-to-reach communities, several strategies were implemented. Clinic sites were prioritized and rescheduled based on disease burden, maternal and child health indicators, and lack of alternative healthcare access. Mobile clinic routes were strategically adjusted to focus on the most critical locations while consolidating services in other areas to maximize fuel efficiency. Clinic visits were also rescheduled in line with fuel availability, ensuring that essential services were maintained without unnecessary trips.

Additionally, we secured priority fuel access for mobile clinic vans at designated fuel stations in communities where services were operational, established a contingency fuel reserve, and implemented strict fuel management protocols to optimize fuel use and minimize wastage.

We also expanded the role of Community Health Workers and Nurses on Bikes to deliver essential services directly to communities, reducing reliance on mobile vans. Through these measures, we successfully adapted to the fuel crisis and infrastructure challenges, ensuring that mobile clinics continued to reach vulnerable populations with essential healthcare services.

On the other hand, shortages of essential medicines and supplies, particularly malaria drugs, antibiotics, and HIV test kits, affected service delivery, but we strengthened the supply chain partnerships with the government and funders to ensure a more reliable drug supply.

Furthermore, low health-seeking behavior in some communities due to cultural beliefs and lack of awareness posed a challenge, which was addressed through expanded community engagement efforts, with Village Health Committees playing a crucial role in educating and mobilizing residents to seek timely care. These targeted solutions have reinforced the resilience and effectiveness of mobile clinics, ensuring continued healthcare access in underserved areas.



Porridge for Immunization Feeding Initiative

This year, the Porridge for Immunization Feeding Initiative, supported by the Mosso Foundation and the Topple Family, addressed the pressing food insecurity and hunger crisis in Malawi. This innovative initiative integrated porridge feeding with child immunization services, creating a dual approach to tackle malnutrition and improve vaccination rates among children under five and pregnant women in underserved areas of Dowa District. We linked nutrition with immunization to ensure that children and pregnant women received life-saving vaccines alongside fortified porridge, addressing immediate nutritional deficiencies and supporting long-term health outcomes.

The porridge, made from a mixture of roasted and ground white corn and soy (in a 4:1 ratio), was fortified to provide essential nutrients for growth and immunity. Thus, initiative targeted two primary groups:

- Children under five: Provided with nutritious porridge during immunization sessions to enhance growth and boost immunity.
- Pregnant women: Offered porridge to support maternal nutrition and fetal development.

The porridge was distributed through mobile clinics, where Community Health Workers (CHWs) ensured comprehensive coverage of all registered children and pregnant women.

Cultural taboos surrounding discussions of sexual and reproductive health limited open conversations with adolescents. Some parents opposed adolescent health education, fearing it promotes early sexual activity. To mitigate this, we focused on educating the parents

about the importance of health education in preventing risky behaviors and improving overall adolescent well-being. The CHWs and VHCs delivered health messages tailored to the community's cultural and linguistic context, making the information relatable and actionable.

Children who regularly consumed the fortified porridge showed improved growth metrics, with many moving out of the malnutrition risk category. Caregivers reported noticeable improvements in energy levels and overall health in children. 28,409 meals served to children under five and 2,187 meals served to pregnant women during this reporting period.

Immunization rates in targeted areas increased by 15%, with many caregivers motivated to attend mobile clinics due to the added benefit of porridge distribution. The increased coverage led to 10% reduction in childhood diseases such as pneumonia in the communities served. The pregnant women who received porridge reported improved health during pregnancy, reducing risks of complications and supporting better birth outcomes.

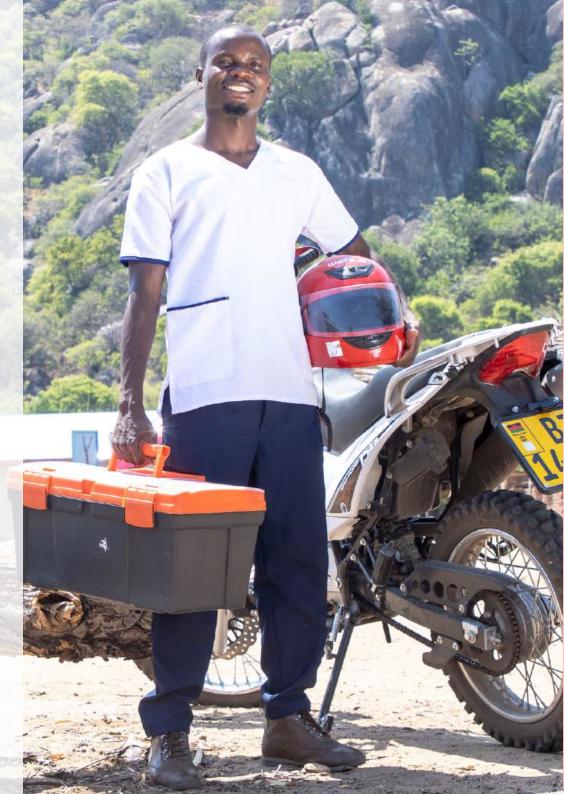


Nurses on Bikes: Bringing healthcare closer, overcoming barriers, and saving lives

The Nurses on Bikes (NoBs) initiative has been a cornerstone of Wandikweza's Proactive Doorstep Care (PDC) model, transforming maternal and child health services in underserved communities in the areas we serve. The NoBs brought healthcare directly to the homes of the most vulnerable to address critical barriers such as distance, cost, and lack of awareness, which often prevented families from accessing life-saving healthcare. This year, the NoBs continued to make a profound impact in Dowa and Mangochi districts, contributing to improved maternal and child health outcomes.

To eliminate transportation costs, the Nurses on Bikes covered a total of 11,269 kilometers during the reporting period, reaching hard-to-reach communities where healthcare access is limited. They brought maternal and child health services directly to women's doorsteps, to eliminate the need for long, costly journeys to health facilities, ensuring that women received timely and essential care when they needed it most.

The Nurses on Bikes delivered comprehensive maternal and child health services, including antenatal and postnatal care, administration of long-lasting contraceptives, and child healthcare interventions.



Additionally, NoBs provided critical support to Community Health Workers (CHWs), stepping in to manage cases beyond the CHWs' capacity, ensuring that patients received timely and appropriate care.

In cases of high-risk pregnancies and maternal complications, NoBs made 304 timely referrals to higher-level facilities, reducing delays that often lead to maternal and neonatal deaths.

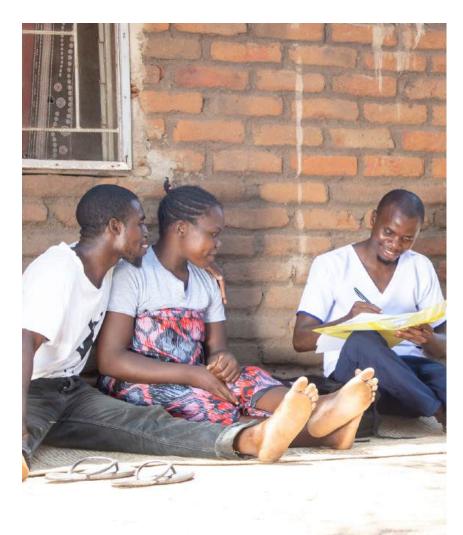
Engaging Men in Maternal and Child Health

The Nurses on Bikes (NoBs) continued to emphasize the critical role of men in maternal and child health, successfully engaging them through targeted health education sessions and home visits. Men participated in discussions on antenatal and postnatal care, exclusive breastfeeding, and family planning, equipping them with the knowledge to actively support health-related decisions within their families. To foster shared decision-making and address cultural barriers, the NoBs facilitated 12 village meetings and community dialogues. These activities challenged traditional gender norms, encouraged greater male participation in reproductive health, and provided a safe space for men to ask questions, share concerns, and receive accurate health information from the healthcare professionals.

As a result, 1,417 men were reached with sexual and reproductive health (SRH) messages, and 51% of them accompanied their spouses to antenatal care visits, delivery, and child health clinics, a significant cultural shift from previous norms where male involvement in reproductive health was minimal.

Additionally, the dialogue meetings improved men's health-seeking behavior, leading to increased uptake of family planning, STI screening, and general healthcare services in target communities.

Beyond knowledge sharing, many men took on an active role by providing financial support for delivery costs, arranging transport for their wives at the onset of labor, and offering companionship throughout pregnancy.





Delivering comprehensive primary healthcare services at Wandikweza Health Centre

As a primary healthcare facility, Wandikweza Health Centre continued to deliver life-saving services to underserved communities, addressing critical health needs with a focus on maternal and child health. This year, the health centre expanded its service offerings and infrastructure, impacting thousands of lives.

Key milestones and new services in 2024

Antiretroviral Drug Dispensation Certification

This year, Wandikweza Health Centre achieved certification for antiretroviral drug (ARV) dispensation, a significant milestone that enabled the provision of essential HIV treatment and management services to individuals living with HIV. This service reduced the burden of traveling to distant facilities, improved treatment adherence, and enhanced the quality of life for HIV-positive individuals.

Alongside this, HIV testing and counseling remained critical components of the centre's efforts to improve community health and prevent the spread of HIV. Voluntary testing services were provided to both pregnant women and general patients, ensuring early detection, prevention of mother-to-child transmission, and timely initiation of treatment for those in need.



Together, these initiatives underscored Wandikweza's commitment to combating HIV and improving health outcomes in the communities we serve.

HIV Testing Among Pregnant Women

739 pregnant women voluntarily underwent HIV testing during antenatal care visits. 9 women (1.2%) tested positive for HIV. The low positivity rate among pregnant women indicates a promising trend toward controlling mother-to-child transmission in the community. Early identification and enrollment into antiretroviral therapy (ART) programs ensured that HIV-positive mothers can deliver safely and minimize the risk of transmission to their babies.

All HIV-positive pregnant women were immediately enrolled in Prevention of Mother-To-Child Transmission (PMTCT) programs, ensuring access to antiretroviral drugs and regular follow-up to reduce transmission risks.

General HIV Testing

2,313 patients across different demographic groups were tested for HIV during the year. 54 individuals (2.3%) tested positive for HIV. The general testing program captured individuals who may have otherwise gone undiagnosed, allowing them to access life-saving treatment and counseling services.

All individuals who tested positive for HIV were counseled and referred to antiretroviral therapy (ART) services for early initiation of treatment, improving their quality of life and reducing viral transmission in the community.

Opening of the El Shaddai Children's Department

The launch of the El Shaddai Children's Department marked a significant step in improving pediatric care. This dedicated wing addressed childhood illnesses such as pneumonia, diarrhea, and malaria, which are among the leading causes of morbidity in children under five. The department offered comprehensive care, including treatment for acute illnesses.

Opening of Ebenezer Maternity Home

The Ebenezer Maternity Home was established in 2024 as a safe haven for pregnant women nearing their delivery dates. This new infrastructure at Wandikweza Health Centre addresses significant barriers to maternal health, such as distance, lack of transportation, and late access to skilled care. The home provided a comfortable and supportive environment where expectant mothers can stay while awaiting labor, ensuring timely access to skilled delivery services.

With a 20 bed capacity, the Home offered comfortable lodging with access to basic amenities and nutritional support. Community Health Workers and Midwives conducted 61 health education sessions on birth preparedness, neonatal care, and danger signs during labor, reaching 102 women and their guardians. Regular check-ups by the midwives were done to assess the health of both the mother and baby during the waiting period.

Sustaining Impact: Ongoing Services at Wandikweza Health Centre

Ebenezer Maternity Wing

The Ebenezer Maternity Wing was a cornerstone of maternal healthcare services this year. This facility provided skilled labor and delivery services to pregnant women, ensuring safe childbirth and effective management of complications. The wing also facilitated referrals for high-risk cases, bridging gaps in maternal health service delivery.

As a primary-level care facility, we focused on providing basic maternity services and ensuring the safe delivery of mothers. While we aimed to reach 400 deliveries in 2024, we handled 366 births. A key reason for the shortfall is the referral of complicated maternity cases to higher-level facilities for specialized care, in line with our commitment to prioritize the safety of mothers and newborns. The 91.5% (366 of 400) achievement demonstrated the health centre's capacity to provide skilled delivery services for the majority of pregnant women in its catchment area. This figure reflects the trust and reliance of the community on Wandikweza Health Centre for safe deliveries.

The Health Centre managed routine deliveries while referring 71 cases (approximately 16.2% of total delivery cases) with complications such as severe preeclampsia, obstructed labor, and severe anemia to higher-level facilities for appropriate care. This significant proportion of referrals highlights the limitations of our primary-level services in handling complex obstetric cases and underscores the effectiveness of our robust referral system in ensuring timely and specialized care for high-risk pregnancies.

While the target of 400 deliveries was not fully met, the high referral rate accounts for the shortfall. The referral of these cases highlights the health centre's prioritization of patient safety and adherence to clinical guidelines, ensuring that women received the specialized care they needed at higher-level facilities.



Outpatient Department

The total number of patients seen at our Outpatient Department (OPD) this year was 86,998, which includes both new and returning patients. Out of this total, 15,336 (approximately 17.6%) were revisits. The high volume of visits demonstrated the health centre's ability to provide accessible and reliable healthcare services to the community, meeting the needs of both acute and chronic conditions. The revisits highlighted our effective management of chronic conditions such as hypertension, asthma, and diabetes, where regular follow-ups are critical to maintaining health and preventing complications.



Organisation Updates

Strengthening Data Systems

In 2024, Wandikweza made significant strides in improving healthcare delivery through strategic partnerships with RippleWorks and the Global Health Informatics Institute (GHII). These collaborations were instrumental in enhancing our data systems, streamlining service delivery, and building the digital infrastructure necessary to provide efficient and impactful care in our communities.

RippleWorks: Digitizing data systems for better decision-making

Historically, Wandikweza relied on paper-based data systems, which limited efficiency and real-time analysis. With support from RippleWorks, we initiated a comprehensive project to digitize internal data collection and analysis processes. Together, we designed and piloted new digital data collection tools with 10% of our Community Health Workers (CHWs). The pilot demonstrated significant improvements, allowing us to analyze data in real time and respond more effectively to community health needs.

Through this partnership, 85% of our paper-based data collection tools were successfully migrated to digital platforms like Kobo Toolbox and Google Sheets. These systems have enhanced our ability to make data-driven decisions, improving the quality and timeliness of our service delivery. The RippleWorks collaboration has laid the foundation for a fully digital data ecosystem, which we aim to scale further in 2025.

GHII: Transforming facility operations with digital patient registration

We entered into a partnership with the Global Health Informatics Institute (GHII) to co-develop and refine data analysis and system performance for use at our health center. As part of this collaboration, a new digital registration system was implemented to streamline patient flow and reduce wait times. Previously, patients spent an average of 1 hour 30 minutes at the facility; with this system, we have reduced that time to approximately 1 hour 19 minutes, with a long-term goal of achieving under 30 minutes from registration to dispensary.

This innovation not only improves the patient experience but also enhances the overall efficiency of our health center operations, allowing us to serve more individuals with greater precision and care.

The partnerships with RippleWorks and GHII have brought transformative changes to Wandikweza's operations. With the digital systems and refined workflows, we have improved data accuracy, reduced inefficiencies, and enhanced the overall quality of care. These collaborations reflect our commitment to leveraging innovative solutions to meet the needs of our communities and strengthen our capacity to deliver high-impact healthcare.

As we move into 2025, we are excited to build on these successes, scaling these systems and exploring new partnerships to further our mission of transforming community health in Malawi.

Topple Family: Strengthening healthcare access through life saving antibiotics

This year, we received crucial funding from the Topple Family to procure antibiotics across all Proactive Doorstep Care (PDC) programs, addressing a critical healthcare gap in bacterial infection treatment, postnatal care, respiratory illnesses, and wound management. This support benefited over 55,000 patients, significantly reducing maternal and neonatal infections, improving safe motherhood initiatives, and expanding access to life-saving treatment in remote areas. This helped to alleviate pressure on overstretched public health facilities and strengthening community trust in healthcare services. Availability of antibiotics led to earlier health-seeking behaviors and increased preventive care participation. However, challenges such as supply chain constraints, lack of awareness, and access difficulties were mitigated through stronger medical supply partnerships, community education, and expanded deployment of CHWs and Nurses on Bikes (NoBs).

As a key component of our integrated healthcare approach, antibiotics played a vital role in managing infections across CHWs, NoBs, mobile clinics, and health facility support. This funding enhanced maternal and child health services, ensuring timely treatment of postnatal infections and pneumonia, a leading cause of child mortality in Malawi.

Mobile clinics and CHWs delivered antibiotics for skin and wound infections, UTIs, and STIs, preventing severe complications and hospitalizations.

Integrating antibiotics into community-based healthcare delivery, helped us strengthen local health systems, ensuring life-saving treatments reached underserved populations. Looking ahead, we aim to expand partnerships, implement digital health tracking for antibiotic distribution, and enhance education on antimicrobial resistance to sustain this critical intervention.

Schooner Foundation: Advancing health equity

This year, we were privileged to receive unrestricted funding from the Schooner Foundation, a key partner in advancing Global Health Equity. This critical support enabled Wandikweza to expand healthcare access, strengthen community-based interventions, and address key barriers to maternal and child health services in underserved areas of Malawi. The unrestricted nature of the funding allowed Wandikweza to scale its Proactive Doorstep Care model, ensuring healthcare reached those who needed it most, regardless of economic or geographic barriers. With limited access to health facilities for many rural communities, this funding played a transformative role in bridging healthcare gaps by expanding maternal and child health services, and promoting preventive care.

With the Schooner Foundation's generous support, we expanded access to primary healthcare, reducing health disparities in the communities we serve. The funding boosted maternal and child health services, increasing antenatal and postnatal care visits, skilled deliveries, and immunization coverage.

It also strengthened community-based healthcare by supporting the Nurses on Bikes, mobile clinics, and emergency maternal referrals. Additionally, it enabled HIV screening, the provision of essential medications, ensuring lasting impact for thousands of families while reinforcing health equity and strengthening Malawi's community healthcare system.

Hibou Holdings Foundation: Transforming healthcare access

This year, we also received unrestricted funding from the Hibou Holdings Foundation, a key partner in strengthening primary healthcare delivery in Malawi. This unrestricted support allowed us to strengthen our Proactive Doorstep Care model, enhanced community-based health services, and addressed critical healthcare gaps in maternal and child health, emergency response, and essential medicine access. The flexibility of this funding enabled rapid response to urgent needs, ensured that thousands of underserved individuals received life-saving healthcare services.

Dovetail Impact Foundation: Sustaining Impact

Following a successful three-year engagement in the Accelerator Portfolio, Dovetail Impact Foundation deepened its partnership with Wandikweza by providing unrestricted funding for 2025. This continued support underscores Dovetail's commitment to strengthening community-based healthcare solutions, reinforcing our ability to scale our services and ensuring long-term sustainability in maternal and child health interventions across Malawi.

Sindilitha's Journey with Nurses on Bikes

From Uncertainty to Confidence: How Nurses on Bikes Transformed Sindilitha's Pregnancy Journey

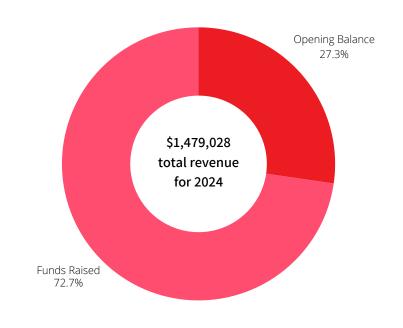
Sindilitha, a 27-year-old mother from Mtiti village in Dowa, is expecting her second child. Unlike her first pregnancy—marked by anxiety, long walks to the clinic, and uncertainty—this time, she has experienced confidence, better healthcare access, and consistent support through Nurses on Bikes (NoBs). During her first pregnancy, Sindilitha struggled to access antenatal care due to the long distance to the nearest health facility. She often walked for hours under the scorching sun just to receive a check-up, sometimes missing visits because the journey was too exhausting. When labor began, she had no transport and relied on a traditional birth attendant (TBA), which led to complications due to a lack of skilled care. The fear of reliving that experience was overwhelming when she discovered she was pregnant again—until NoBs arrived in her village, bringing healthcare to her doorstep.

Now, at eight months pregnant, Sindilitha feels relief and hope. A Nurse on Bike regularly visits her home, providing routine check-ups, monitoring her baby's growth, and educating her on proper nutrition and pregnancy care. She has received iron supplements, malaria prevention, and crucial birth preparedness guidance, ensuring a healthier pregnancy. Unlike before, her risk factors have been assessed early, preventing complications.

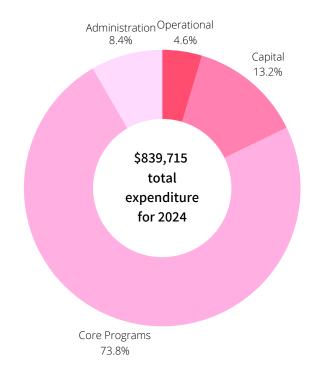


Our 2024 Financials

Revenue



Expenses



With Thanks































Steve & Susan Campbell





Hibou Holdings Foundation















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