

2021 Q3 Impact Report





About Wandikweza

Everyone has the right to access healthcare. Yet to many people in Malawi, this right is denied. Healthcare facilities do not exist where they are most needed. Over half of the Malawian population has no access to health care. This is especially true in rural and remote areas where the distance to travel to a facility, or the cost to do so, is too great.

Wandikweza is a locally-led organization determined to improve access to healthcare in remote communities. We train and empower local community health workers to be on the ground and available to improve the health and wellbeing of vulnerable communities.

We believe everyone should have access to high-quality health care when they need it.

A MESSAGE FROM THE EXECUTIVE DIRECTOR

Accelerating Impact

The time is now, a time when we look toward the future with a hopeful eye and feel strengthened with optimism and anticipation. With Wandikweza Health Centre opening its doors to the public early December 2021, we see life around us renewing and we feel driven to get things done! Wandikweza Health Centre opening fever makes everything more exciting.

When the Health Centre opens it will offer reproductive health (maternity, family planning and antenatal), child health, chronic diseases, mental health, STDs and HIV/AIDS, trauma and injuries among others. We are super excited about a lot of things!



At Wandikweza, we are re-committing ourselves to creating a future that is far better than today by building healthy and prosperous communities.

We have embarked on a journey to reach one million people at their point of need by 2025. That means providing tools and resources to Community Health Workers that result in better care at the doorstep, better health education and better results. It means being consistently available to mothers, newborns, men and families who cannot access quality healthcare because of poor physical accessibility to healthcare facilities or costs. It means educating our communities on the importance of vaccinations to deal with the pandemic and what can be done to lead us to future solutions. It means an additional four Maternal Health Posts in our district.

We can do these things and we are going to accomplish them through strong and viable collaboration. We're going to increase our collaboration with local leaders, families, corporations, the Government of Malawi and impact partners.

However, the most important collaboration you will see is with our communities and global partners. It must be that way! If Wandikweza is the body, then communities and global partners are the vascular systems through which our lifeblood flows.

We are certain to wake tomorrow and have it feel more brilliant than today!

Serving together!

Mercy Chikhosi Kafotokoza



Program Milestones

MATERNAL CHILD HEALTH



171 pregnancy home visits

conducted by Nurses on Bikes and Community Health Workers



1,001 women

received family planning services



158 postnatal home visits

conducted by Nurses on Bikes and Community Health Workers

COMMUNITY HEALTH WORKERS



670 home visits

conducted by Community
Health Workers for case
finding, treatment and
follow-up.



411 tele-visits

conducted by
Community Health
Workers for follow-up
and health education



2,470 under-five

screening and treatment conducted by Community Health Workers

MOBILE CLINICS



28 mobile clinics

conducted in hard to reach areas



10,150 patients

served during the outreach mobile clinics



2,814 malaria cases treated

87 cases were referred to public health facilities for advanced care

SEXUAL & REPRODUCTIVE HEALTH



907 adolescents' health and rights

accessed services to prevent, diagnose and treat sexually transmitted infections; and counselling on family planning. Empowered to know and exercise their rights – including the right to delay marriage and the right to refuse unwanted sexual advances.



849 young people

accessed accurate sexual and reproductive health information; safe and affordable contraceptive methods; sensitive counselling, quality obstetric and antenatal care for pregnant women and girls; and the prevention and management of sexually transmitted infections, including HIV.



Quarterly Update

PROGRAM UPDATES

This quarter, Wandikweza continued with its outreach work in eight villages. Through these outreaches, we have been able to treat over 3,000 patients per outreach and save people from having to walk for 10kms to access health services.

Our Nurses on Bikes and Community Health Workers have continued to play a crucial role in following up pregnant women and ensuring that women attend ANC visits and deliver in health facilities. They conducted 171 pregnancy home visits while our CHWs referred 22 women for delivery and conducted another 670 home visits.

The progress of the Wandikweza Health Centre is taking place on time and plans to open in early December 2021. This quarter, the installation of running water and solar-powered electricity has been completed. The electricity will provide a dependable source of power, maintaining the 'cold chain' for vaccines and medicines that require refrigeration, cold rooms, and information technology (IT) systems for data and stock management. Using solar power will help the health centre save money, which can be reinvested to support other priority health programmes. The water supply will promote basic WASH services at the health center that is fundamental to providing quality care and for ensuring primary health commitments.

The health center will have laboratories and a pharmacy on-site and will perform immunizations, prenatal care, maternity care, trauma care and provide services for chronically ill patients among other services.

Wandikweza is providing a safe space for men and boys to talk about their mental health issues. We aim to help end the stigma around men and boys talking about their emotions and feelings. Through peer support groups, men listen to the needs of their colleagues and provide the right assistance where possible.



HOW WANDIKWEZA IS

Accelarating Impact



PROVIDING ACCESS

Wandikweza will provide quality health care within local remote and rural communities in four districts of the Central region of Malawi, minimizing the need for one million people to routinely access clinical services outwith their locality by 2025.

TRAIN & HIRE

Wandikweza will ensure the health care that is safe, effective, patient-centered, timely, efficient, and equitable by training and hiring 130 accredited Community Health Workers, 20 Nurses on Bikes for community health rapid response, proactive searching of patients, and home-based care by 2025.



MOBILE CLINICS

Provide accessible health care services for 500,000 ultra-poor people, living in remote hard to reach areas in the four districts through well-equipped mobile clinics by 2025. The services include; preventive screenings, dental, medical care, chronic illness management, immunizations, health education, referrals to social services, and community health centers.



MATERNAL & CHILD

Provide early access to Maternal, Newborn, and Child Healthcare in rural, ultrapoor communities by constructing 4 Maternal Health Posts serving 500,000 women and children by 2025.



SUCCESSES

- Decongested public health facilities by 20% compared to 15% same quarter last year
- 80% of pregnant women attending all four antenatal care visits compared to 65% last quarter
- Met 85% of family planning needs among women, men and youths compared to 60% last quarter
- 80% of mothers and babies received postnatal care at their doorstep within two days following discharge from the hospital.

CHALLENGES

LOW SUPPLY OF COVID-19 VACCINATIONS

RESOLUTION

Wandikweza has undertaken steps to encourage all of our staff to get vaccinated with particular attention given to Community Health Workers, who serve on the frontlines. They are thus most at risk of contracting COVID-19 or transmitting the infection to the patients we serve. CHWs are connecting people with vaccines.

TEAM UPDATES

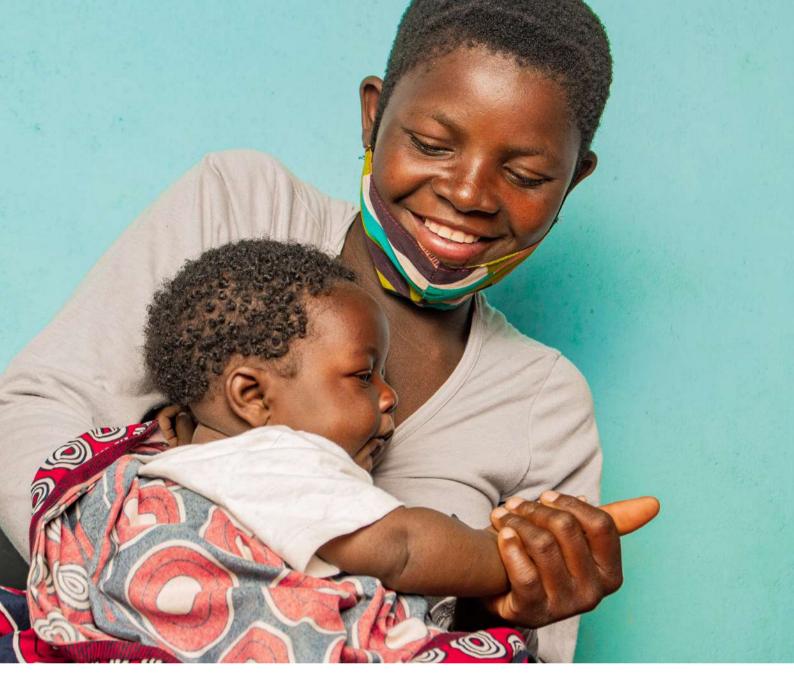
- Wandikweza is working to accredit and pay its first 20 Community Health Workers out of 130.
 Currently, the CHWs get a stipend. Accrediting and paying CHWs will allow Wandikweza to apply and join the Community Health Impact Coalition that exists to make professionalized community health workers a norm worldwide.
- Wandikweza is working with a consultant to develop its first patient data management system for the health center. The system will help nurses and clinicians generate reports that provide useful figures, patient count, and tracking patients and medications.

PARTNERSHIPS

We are excited that Vibrant Villages and David Weekley Family Foundation have joined our partner list this quarter. The two partners provide unrestricted funding to our programs.







STORIES OF HOPE:

Yankho's Story

When Yankho's mother arrived at Wandikweza center, Yankho was too weak to suck and her mother carried her in her arms rushing for help. The seven month-old was extremely lethargic and had been suffering from diarrhea for two days. She was quickly diagnosed with moderate dehydration, a condition that can turn deadly if not treated properly.

Diarrhea is easy to prevent and treat. Yet it is the leading killer of children in Malawi. Diarrhea kills over 600 children under 5 years old annually. Before Wandikweza interventions in the community, few mothers understood how dangerous this illness could be. Dehydration is the main reason children die from diarrhea. At the time, most children were treated with traditional herbs, salt and sugar solutions.

At that time, Yankho would have probably been taken to a witch doctor. "We had a lot of babies with diarrhea been taken to witch doctors before I was trained as a Community Health Worker, but now things have changed," says Masa. She has been a CHW for two years. On average, she sees 10 children each day. About 30 percent of them have diarrhea.

Diarrhea is a real burden. It is a very sad situation because a lot of resources are spent to manage the complications of the condition if identified late and if mothers do not have the right information. Wandikweza trains CHWs like Masa to administer oral rehydration salts (ORS) at home and make referrals accordingly. They also focus on closing knowledge gaps for mothers and caregivers.

When it comes to diarrhea, ORS and zinc sulphate are the most effective treatments. Zinc strengthens the gut lining and reduces the severity and duration of episodes as well as prevents future ones. ORS can be a life-saver. It replenishes electrolytes and quickly rehydrates a dehydrated child. But, Wandikweza found that less than 40 percent of under five children with diarrhea used ORS and less than 10 percent used zinc. Wandikweza helps make these medicines easier to access at a community level by refilling CHW back bags.

The CHWs are trained to use the Integrated Management of Childhood Illnesses (IMCI) strategy. This is a systematic approach to child health, developed and updated by the World Health Organization. IMCI equips health workers with the skills needed to screen sick children for signs and symptoms that might indicate they have a life-threatening condition that requires immediate action.

The IMCI strategy stresses that in case of diarrhea, children should receive onsite rehydration therapy. Wandikweza set up an oral rehydration therapy corner at its center where children like Yankho get treated. "We witness 'miracles' happening every day thanks to this corner", said Masa. A triage nurse usually identifies children with diarrhea when mothers arrive at the center and immediately initiates oral rehydration in the therapy corner before the family even sees a clinician or is referred.

When Yanko arrived at the center and dehydration was observed, Masa prepared the ORS treatment herself. Yankho gulped the drink down and within 40 minutes, she was smiling and playing again.

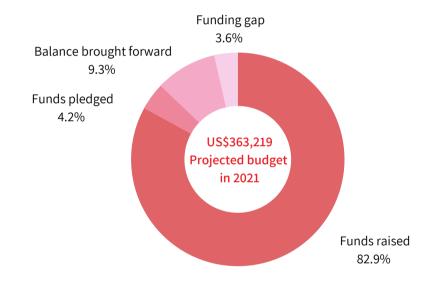
"Such a transformation!" says Masa. "We see this every day."

FUNDRAISING & EXPENSES

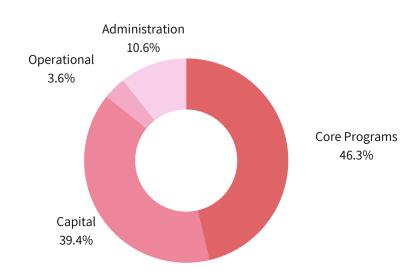
For the three months reported, ending 30 September 2021,

- income received was US\$ 239,196
- total expenses were US\$ 168,735

REVENUE



EXPENSES





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- www.wandikweza.org
- info@uplifthealthmw.org
- Mobile phone: +265 980844404