

Focus

19/2 05.2019

In the spotlight The television crews move on, SolidarMed stays

SolidarMed makes a difference Digital Health – The African Way

SolidarMed face-to-face: “My time in Zimbabwe was the gift of a lifetime”

Good to know After Cyclone Idai

Mozambique's forgotten hospitals



Partnerships for Health

SOLIDAR
MED

03 A point of view

The television crews move on, SolidarMed stays

04 In the spotlight

The critically ill health centre

Namuno is the poorest district in which SolidarMed works. A visit to Namuno health centre shows this very clearly.

08 Projects

New building materials – less CO₂

Environmentally friendly building in Zambia, football for healthy teenagers and working in partnership to combat tuberculosis.

10 SolidarMed makes a difference

Digital Health – The African Way

Hackathons take place regularly in Zimbabwe. Local medical and tech experts are working on home-grown, effective and long-term eHealth solutions.

12 SolidarMed face-to-face

The gift of a lifetime

Urs Allenspach worked for SolidarMed as a doctor in Zimbabwe and served on the Board for many years. An encounter in Wengen.

14 Get involved

Become a member and have your say

The Country Directors from our project countries will be present at this year's Annual General Meeting. An exciting exchange is coming up in Lucerne.

16 Good to know

Back from Mozambique

Jochen Ehmer visited the projects in Mozambique shortly after Cyclone Idai.

The person on the cover



This village elder in Ujamà expresses his great concern about the health and education situation in his village. *ch*

Impressum «SolidarMed Fokus» 19/2

Publisher and editorial offices: SolidarMed, Obergrundstrasse 97, CH-6005 Lucerne
Phone: +41 41 310 66 60, contact@solidarmed.ch, solidarmed.ch **Texts:** Benjamin Gross (bg)
Christian Heuss (ch) Ursula Schöni (us) **Layout:** Tiziana Pittini **Photos:** Olivier Brandenburg
(ob) Maurice Haas (mh) **Printers:** Brunner AG, Druck und Medien, Kriens
100% recycled paper **Print run:** 13'000 (only in German)

“SolidarMed Fokus” is published four times a year. An annual **print subscription** costs CHF 5.- and is deducted as a one-off from your donation. For members and patrons it is included in the annual fee. Annual membership fee **patron:** CHF 120.- Annual membership fee **individuals:** CHF 50. - Annual membership fee for **families and institutions:** CHF 80.-. **Donations** Postal account 60-1443-9, made out to: SolidarMed, CH-6005 Lucerne. **IBAN:** CH09 0900 0000 6000 1433 9 **BIC:** POFICHBEXXX **Online donations:** solidarmed.ch “Get involved” **Thank you!**

SolidarMed SolidarMed improves health care for 2.5 million people in rural Africa. We systematically improve medical services and sustainably promote local expertise through initial and further training. Our projects are developed in close collaboration with local partners, supported by our health experts on the ground. As a Swiss non-profit organisation with the ZEWO certificate, SolidarMed works in an efficient, conscientious and transparent manner.



The television crews move on, SolidarMed stays



Prof Dr med Niklaus Labhardt
President

Cyclone Idea was one of the heaviest and deadliest tropical storms in history. Two of our project countries were hit: Mozambique and Zimbabwe. In Mozambique alone, around 2 million people are directly affected by the storm. Shortly after it hit on the 14th of March, the first cases of cholera appeared, a direct result of the destruction of the infrastructure. Reducing the risk of epidemics is one of the most important short and medium-term challenges. Mozambique's people, already plagued by poverty, will feel the consequences of Idai for many years to come.

Yet Idai is not the only problem that plagues the people of Mozambique. SolidarMed employees told me about the many malnourished children in the north of the country. Their weakened immune system puts them at acute risk of dying from diarrhoea, pneumonia or malaria. Our staff offer medical care and treatment to the people in three districts.

Mozambique's recovery from 25 years of civil war is halting and the progress of democratisation and economic development is slow. The people in the northern provinces continue to suffer from extreme poverty and the resulting consequences for their health. Since 2017, brutal terrorist gangs have been carrying out killings in the villages to

destabilise the region. These raids take place not far from our project area. Several SolidarMed employees were in the neighbouring district when armed gangs attacked Macomia on the 22nd of March.

The increasing violence in northern Mozambique, the widespread poverty and the fact that too many people are dying of preventable diseases is hardly covered in our media. Cyclone Idai thrust the country into the full glare of media spotlight for a few weeks. Relief organisations collected donations and governments promised financial aid. One of our important concerns is to go beyond acute emergency aid and to strengthen local structures in the long-term.

As you read this issue of our "Focus" magazine, the TV cameras and journalists have already left Mozambique. SolidarMed will stay on the ground, working with our long-standing partners to assist in the reconstruction.

*Editors note: At the time of going to press, the impact of Cyclone Kenneth was not yet known. ■



▲ The grandmother cares for the healthy newborn while her own daughter fights for her life in the bed next door. *nik hartmann*

The critically ill health centre

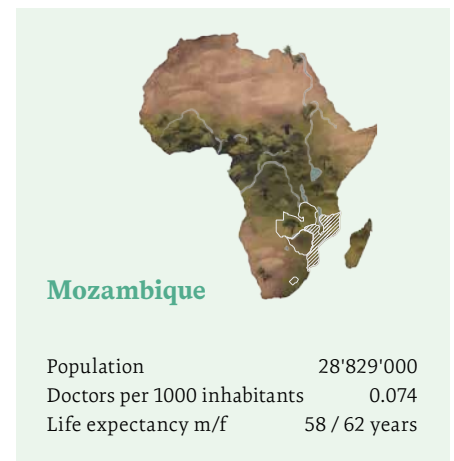
The broken steriliser in the middle of the square in front of the health centre in Namuno is like a monument to failure. Its burst temperature gauge shows that nothing will be sterilised in this device ever again.

Mozambique It is already afternoon when we enter the health centre with the gynaecologist Marielle Jousse. She is SolidarMed's maternal health project manager in Mozambique. The mosquito nets on the windows hang in tatters, a broken rain gutter hangs over the doorway. Patients sit on an outside wall, waiting to be examined.

The largest and most important health centre in Namuno district is close to the SolidarMed doctor's heart. She tells

us that there is no hospital in the whole district – an area about the size of the Swiss canton of Berne. “The smaller facilities refer patients here every day – to a health centre that lacks everything.”

And indeed, there is often no electricity, there is a shortage of medical material and Namuno lacks an operating theatre to perform caesarean sections or simple surgical procedures.



For the past few months, there's at least been running water again. SolidarMed drilled a new well 80 meters into the rocky ground. The groundwater now supplies the entire health centre with clean water.

The Mozambican doctor Helga Lamguana oversees medical care in Namuno. After a warm but brief welcome, she leads Marielle Jousse straight to the farthest

Apparently, there were no nurses on duty when the mother arrived, only the cleaner.

room. A young mother lies unconscious on a plank bed. Her condition is worrying. Helga Lamguana suspects eclampsia. Her blood pressure is alarmingly low. This young mother had a very difficult birth in a small health

centre to the north of Namuno, far from the main dirt road running through the district. Apparently, when she arrived at the health centre, there were no nurses on duty, only the cleaner. The cleaner took matters into her own hands and gave the young woman an infusion. Working to the best of her knowledge, she probably gave her too much magnesium sulphate. The problem is that this is an assumption. The two doctors don't know exactly what happened. This injection was not documented.

Marielle Jousse first checks the young woman's reflexes. Here in the Namuno, the most basic tests must suffice to assess a situation correctly. Maybe she needs an antidote, otherwise she could suffer from respiratory arrest. The grandmother sits impassively on the bed next door, holding the hours-old newborn in her arms. Thankfully, the baby girl is healthy.



▲ Charred bits of firewood below the defective steriliser, evidence of the health workers makeshift attempts to heat the water in the device. *bg*



▲ Marielle Jousse and a nursing assistant discuss a lab result. *nik hartmann*

In the spotlight

Doctors Jousse and Lamguana now act quickly. In all likelihood, it's not eclampsia after all. Maybe the woman has lost too much blood. An ultrasound to check her abdominal cavity would be helpful right now, but there is no power

Here in Namuno, the most basic tests must suffice to assess a situation correctly.

today either. This is only available if paid for in advance and the health centre has already used up its limited electricity budget for this month. After palpating her abdomen, Marielle Jousse allays the suspicion of internal bleeding – for the time being. Nothing else can be done for the moment apart from keeping the patient under observation.

Same place, a day later. The young woman was very lucky. No eclampsia, no internal bleeding which would have required immediate surgery. She lost a lot of blood whilst giving birth and the medication probably intensified her body's reactions to the blood loss. As a



▲ A new mother waiting home being built in Ncumpe. To ensure the pregnant women feel comfortable, it is being built in close collaboration with the villagers. *bg*

result, she suffered a circulatory collapse. “She fainted”, says Marielle Jousse. The young mother was very lucky. It could have turned out very differently. ■ *bg*



“We must not forget the North”

A few short months ago, TV presenter Nik Hartmann visited the health centres of Namuno, Meloco and Ncumpe in his role as goodwill ambassador for SolidarMed. He saw the holes in the roof of Meloco's delivery room with his own eyes. He is greatly concerned that it was Mozambique of all places that was so badly devastated by Cyclone Idai. “Even under normal circumstances, Mozambique faces enormous medical challenges” he says, and worries the people in the North will be forgotten for even longer as a result of this natural disaster. *mh*

Namuno: Forgotten for too long

Namuno, a district in the north of the country, has so far been completely neglected by international aid. Childbirth is life-threatening. In every 200 births, one mother loses her life. One in 40 newborn babies does not survive being born. For the past five years, SolidarMed has been combating the wretched conditions in Namuno's health facilities. The government will finally start building a district hospital this autumn. It is intended to replace the dilapidated health centre. That would be a milestone!

SolidarMed continues to support the three most important health centres in the district.

SolidarMed will continue to support the three most important health centres of Meloco, Ncumpe and Namuno-Village. This is where half of the 11'000 births in the district take place. In weekly visits and intensive training courses, the SolidarMed obstetricians support and train the existing staff in emergency obstetric care.

A functioning blood bank is one of the most important measures to save mothers who lose dangerous amounts of blood whilst giving birth. SolidarMed provides the necessary material and motivates the population to give blood by providing information and raising awareness. SolidarMed also supports the mobile blood donation service. In addition, SolidarMed is improving the electricity and water supply and investing in basic infrastructure measures.

Around 130 babies are born every month in Meloco alone. The 30-year-old health centre only has three steel beds to cater for the mothers and there is a large hole in the ceiling of the delivery room.

A new mother waiting home was recently completed. SolidarMed paid for the construction materials and the villagers built the traditional house next to the health centre. Now mothers can spend their last days of pregnancy living here and can access antenatal care. The goal is to reduce the extremely high rate of maternal and child mortality. ■ *bg*

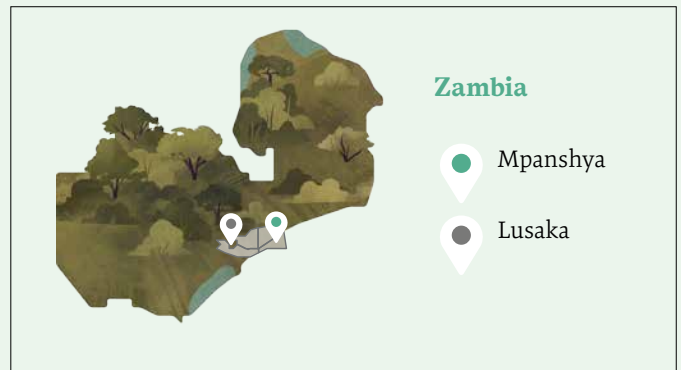
▼ Every day, dozens of pregnant women wait in front of Meloco health centre for their antenatal check-up. *ch*



Environmentally friendly building

Zambia Zambia's population is growing rapidly. In the next 25 years, it will double to almost 27 million people. Official figures suggest that the country will need 1,3 million additional housing units by 2030. Since 2012, SolidarMed has been supporting Zambia in building housing for rural health workers to counter the drastic exodus of qualified staff. High-quality housing is an important incentive for health professionals to work in the rural areas.

New housing should not only be cost-effective, but also as environmentally friendly as possible. That is why from this summer, SolidarMed is committed to using new building materials. Instead of the usual concrete blocks or bricks, whose production is resource intensive and damages the environment, SolidarMed will now start using bricks made of compacted earth. Compared to concrete blocks or bricks, making these bricks produces eight times less CO₂ and requires ten to fifteen times less energy. Greener building materials will help Zambia reduce its energy deficit. ■ *us*



▲ A new staff house under construction. *ob*



▲ Together with his flatmate, the nurse Bartholomew Kamlewe lives right next to the rural hospital in Katondwe. *ob*



▲ Football attracts many young people. They are precisely who should learn more about the risks of an early pregnancy. *sm*

Valuable sex education

Tanzania Last year, SolidarMed supported sex education in the villages of the Tanzanian district of Ulanga as a response to the many teenage pregnancies. Around 5'000 young people were reached with important information about contraception, the risks and consequences of pregnancy and about sexually transmitted diseases. SolidarMed worked in schools and organised a sports bonanza, an event combining sex education with sports. During a football match, a quiz or sack races, young people trained as Peer

Educators by SolidarMed shared this valuable information with their age mates. Services like HIV tests, gynaecological screening and family planning were also offered. More than 700 adolescents took part in this event. ■ *us*



Stop tuberculosis

Switzerland SolidarMed has recently become a member of the StopTB Partnership, confirming its commitment to combating tuberculosis in its programmes. Tuberculosis is an infectious disease that kills the most people worldwide: 5'000 people every day. It is the most common cause of death among people

with HIV. By joining the StopTB Partnership, SolidarMed will benefit from a global network. This will create opportunities for new partnerships and provide access to additional knowledge and effective methods. ■ *kp*



Digital Health – The African Way

Electronic patient files or medical diagnosis via smartphone are new realities in Zimbabwe. SolidarMed supports the eHealth efforts of the Ministry of the Health with a very distinct approach.



▲ eHealth has the potential to massively improve health services even in remote regions. SolidarMed promotes local solutions through hackathons. *ob*

Zimbabwe There are rapid technological developments taking place in the health sector worldwide. eHealth aims to make health systems more effective and efficient. Health apps on smartphones or tablets for hospitals and patients are sprouting everywhere. But what good are these applications in an African context? In Zimbabwe, SolidarMed is taking a different approach: developing home-grown eHealth solutions for local problems.

Learning and developing ideas together

Zimbabwe not only has a wealth of health challenges; it is also rich in medical and technological expertise. Using this knowledge more effectively was one of the primary goals of Gertjan van Stam, who took up the hackathon concept almost two years ago. Once a month, SolidarMed opens its premises and hosts local specialists from the

Together, they work on IT solutions for health problems in hospitals and health centres.

region: midwives, programmers, network specialists, students and doctors.

Together, they work on IT solutions for health problems in hospitals and health

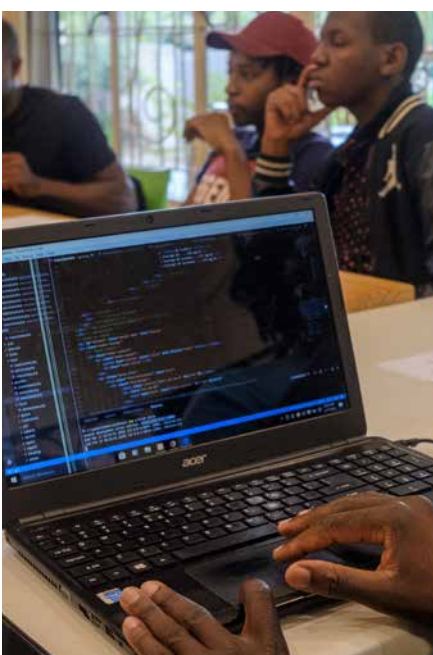
centres. These meetings take place on a Saturday. All participants meet in their free time and receive no payment for these efforts. SolidarMed only provides snacks and refreshments.

The results are overwhelming. After just a few meetings, these hackathons became *the* meeting point in Zimbabwe for the cross-disciplinary design of eHealth applications. Even experts and political decision makers from the capital Harare are making the 300-kilometre journey to benefit from this concentrated eHealth know-how.

Today, the roughly 40 hackathon participants are working on over 50 projects. For example, two apps are currently in the testing phase: An SMS-app that automatically reminds patients of their next doctor's appointment and an app that helps health professionals diagnose and treat patients. Developing a secure database for patient data is another project.



▲ Ronald Manhibi (1st from the left) is SolidarMed project manager for eHealth and organises the Saturday hackathons. *ch*



▲ A programmer at the hackathon in Masvingo. *ch*

eHealth the Zimbabwean way

These activities aroused great interest in the Ministry of Health and its IT department. Within the shortest time, SolidarMed became one of the most important partners for Zimbabwe's eHealth efforts. This bottom-up approach, which takes theories and models of African research into account, has met with an enthusiastic response. For SolidarMed, this project combines local know-how, modern technologies and trends that are unstoppable even in a country like Zimbabwe. SolidarMed now plans to launch hackathons in other project countries as well.

■ *michael hobbins*

Photos of the hackathons at:

 solidarmed.ch

“My time in Zimbabwe was the gift of a lifetime”



▲ Dr med Urs Allenspach in his home in Wengen in the Bernese highlands. *us*

Urs Allenspach worked for SolidarMed as a doctor in Zimbabwe and served on the Board for many years. An encounter in Wengen.

He loves French and Belgian comics. His favourite series is “Les Aventures de Blake et Mortimer”. He enjoys reading whenever he has time. But time is often a rare commodity in Urs Allenspach’s life. Especially in the winter months, on perfect sunny days in the mountains. And in January, when the European and World Skiing Championships take place at the Lauberhorn summit. Then his practice is often overcrowded, and sporting injuries characterise everyday life. “We’ve provided first aid to many an Olympic and World Champion” says Urs Allenspach, not without admiration for

those who plunge down the steep slopes on fast skis. He is a general practitioner in Wengen, 1’274 meters above sea level. This small mountain village at the foot of the famous Jungfrau peak can only be reached by train. Unlike his colleagues in the lowlands, he cannot simply call an ambulance. “The colleagues from Interlaken and Bern are sometimes very far away when things get urgent.”

He faced completely different challenges as a young doctor at Musiso Hospital in Zimbabwe. At the end of the 1980s and the early 1990s, he worked here for

« **The people live in the tension between tradition and modernity.** »

SolidarMed. “We lacked everything. Electricity, water, consumables. We often had to improvise.” Despite all this, he feels that this time enriched him. “It was the gift of a lifetime.” At that time, he was more than “just” a doctor at the hospital in Musiso. Social work, pastoral care and counselling were also part of his duties.

A deserving member of the Board

After his return from Zimbabwe, Urs Allenspach served on the SolidarMed Board for over two decades. During this time, he travelled back to Musiso in 2001 and 2008 for several months. It was different. The mood no longer as hopeful as it was 20 years ago, the suffering in midst the HIV epidemic great. During this time, he did sometimes wonder whether his commitment still had a point. And yet he always carried on. He took his time, listened to Aids patients on their deathbeds. "I was deeply touched by the letters the mothers left for their little children when they knew that they didn't have long to live."

Urs Allenspach knows SolidarMed both as an organisation that sent medical doctors and as an organisation that today pursues a programmatic approach. Before, the person was the programme. Now, the focus is on specific topics. Although he likes to look back on his deployment as a SolidarMed doctor, Allenspach is an advocate of the programmatic approach.



▲ Allenspach as a young doctor in Zimbabwe. *sm*

Once Zimbabwe, always Zimbabwe

Even today, Allenspach regularly travels south. He leads interested people through Zimbabwe and brings them closer to the country and its people. And he always visits SolidarMed projects with the aim of attracting new donors. The difference between then and now? "The people of Zimbabwe live in the tension between tradition and modernity. They're disillusioned, their view of the world has been turned upside down. Because they've discovered that it's not only their former

colonial rulers who put their own interests first."

In summer 2020, Allenspach will turn 65 years old. "Maybe I'll apply to become a ski instructor" he says, grinning. He plans to continue his trips to Zimbabwe too. But maybe there will be other projects as well. In any case, it's difficult to imagine the busy doctor enjoying his well-deserved retirement with a Blake and Mortimer comic in his hands. ■ *us*

▼ Many of the long-term employees know and appreciate the doctor from Switzerland. *ob*



Hint:

Urs Allenspach regularly organises private trips to Zimbabwe. For 10 days, he and other former SolidarMed doctors leads travellers to breathtaking places that are normally hidden from tourists. In addition to discovering the beauty of Zimbabwe, participants gain an insight into the lives of the people, visit Musiso Hospital and get to know SolidarMed's current programmes and the staff.

For further information visit

 solidarmed.ch

Get involved

“O nosso maior valor é a vida. Nothing is more precious than life.”

◀ The Olympic mountain bike champion Nino Schurter in second place for once. In a friendly race, he showed real sportsmanship and let his local competitor win. Nino Schurter visited Mozambique as goodwill ambassador for SolidarMed.

adrian bretscher



Have your say and become a member of SolidarMed

Our members are the foundation of SolidarMed and all our activities. Many once worked for SolidarMed themselves, others use their membership to express their solidarity with the organisation.

On the 24th of May 2019, the association will meet for its Annual General Meeting in Lucerne.

As a member of SolidarMed, you can get to know the people behind the organisation at the Annual General Meeting. Our Country Directors give insights into their daily work, report on their successes and the challenges they face. You'll have the opportunity to speak to SolidarMed employees and ask questions. As a member, you have the right to vote and you'll receive our printed Annual Report in May.

Get involved and write to us at contact@solidarmed.ch or make a

bank transfer with the reference "Membership 2019". Fees are:

50 Swiss Francs for an individual membership

80 Swiss Francs for a family membership

80 Swiss Francs for corporate membership

Following the Annual General Meeting, there'll be a lecture by our Country Director Janneke van Dijk. Afterwards, Ruedi Küng, the former Africa correspondent of Radio SRF, will lead a panel discussion. You are all cordially invited, and we look forward to welcoming you to the Neubad Luzern in the Bireggstrasse 36. ■ *bg*

Excerpt from this year's programme

17:30 **Start of the 93rd Annual General Meeting** followed by a drinks reception

20:00 **Turbulent Africa**

First-hand insights from Dr Janneke van Dijk (SolidarMed Zimbabwe)

Panel discussion – Health projects in crisis regions

Violence in Mozambique. Autocratic government in Tanzania. Political crisis in Zimbabwe. What does this mean for health care on the ground?

Barbara Kruspan
SolidarMed Mozambique

Dr Sabine Renggli
SolidarMed Tanzania

Jochen Ehmer MD
Executive Director of SolidarMed

Mozambique after the cyclone

Jochen Ehmer, you were in Mozambique shortly after Cyclone Idai. What was the situation like?

The solidarity was great, as was the dismay. Idai has affected the whole country, including the north, where we work. The emergency is consuming critical resources that are now missing elsewhere.

What does this natural disaster mean for SolidarMed's work?

In consultation with the authorities, we carried out a fact-finding mission to the centre of the country to understand how we could help. At the same time, we are supporting the hospitals in the north so that they can continue to provide basic medical services.

How can SolidarMed help with the reconstruction efforts?

We could invest in infrastructure, provide training, offer clinical support or support technology transfer. We always work closely with the affected population.

How exactly will you use the donations?

If enough funds are available, we will help renovate the most urgently needed health centres. If the donations are lower, we'll help selectively, for example with mosquito nets or medication. But one thing is certain - the need of Mozambique's people is very great. ■ us



Jochen Ehmer
Executive Director

 solidarmed.ch



▲ In mid-March, Cyclone Idai destroyed and flooded large parts of central Mozambique. *keystone*

Your donation makes a difference.



SolidarMed

Obergrundstrasse 97 | CH-6005 Lucerne

contact@solidarmed.ch | +41 41 310 66 60 | solidarmed.ch   

Postal account: 60-1433-9 | IBAN: CH09 0900 0000 6000 1433 9 | BIC: POFICHBEXXX