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Moçambique

Healthy Babies.



Editorial



Because the good is close at hand.

If we fall ill in Switzerland, we will cover any distance in order to receive the very best treatment. Thanks to high mobility, we don't need to worry about medical assistance. In total contrast: the structurally weak and resource-poor regions of Africa, where people are dependent on the minimal services in their region to safeguard their health.

SolidarMed helps develop locally embedded health structures which make primary healthcare possible. The improved services of hospitals and health centres meet the most important needs and sustainably ensure the survival of newborns and children in the critical first years of life (pages 3-5).

Since the discovery of HIV/Aids at the beginning of the 1980s, the threat posed by the virus has changed considerably. Initially, it also mystified the developed world. But progress was rapid, treatment became possible. In the middle of the last decade, HIV treatments became cheaper and could so be offered in Africa. From the start, SolidarMed was at the very forefront and introduced these therapies even into remote regions of Africa, which saved many lives (page 6).

Be it safe deliveries, HIV therapies or other medical services: it is important to be close to the people, especially in rural parts of Africa. One should trust more in local primary services – also in Switzerland. Modesty conserves resources and is a sign of solidarity. Closeness helps heal!

Thank you for regularly showing your solidarity with the disadvantaged people in southern Africa with a donation

Dr med Sven Capol, President of SolidarMed



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Photo: Nik Hartmann

Babies in Moçambique

Healthy start into life.

Interview with Anita Makins

Birth is one of the most dangerous moments in a person's life. But even after birth, many other dangers await a newborn in Moçambique. The SolidarMed doctor Anita Makins, manager of the MAMA project, explains how she works with local partners to provide better antenatal services, deliveries under professional medical supervision and proper care for babies after birth.

SolidarMed: What dangers do newborns in Moçambique face?

Anita Makins: One can imagine that the standard of living in the mud huts is very poor. Less than 1 percent of the population has access to electricity, 41 percent have no access to a latrine, 46 percent use hand-dug wells as a water source. Around one third of the population is dependent on rivers, which usually run dry for half of the year. In the dry season there is little to eat and manioc is the main and sometimes the only food available. Through a combination of malnutrition, malaria and persistent parasitic infections, anaemia in children is the norm in the project area of Chiúre and Ancuabe.

How can babies survive these first dangerous days?

In the first 7 days of life, it is very important that a midwife examines the baby and the mother regularly. Once a newborn shows symptoms of a disease, it is often already too late to help successfully. That is why regular «baby checks» are important, even if the baby does not seem ill. Previously, mothers only came to the health centre for the first vaccination 30 days after giving birth. SolidarMed has worked hard to break this habit. The health centres were encouraged to keep very young, vulnerable mothers as inpatients for at least three days after giving birth. During this time, they could learn how to breastfeed and properly care for their newborns.

Newborns



→ In addition, each midwife received a bicycle so that especially weak babies can be examined regularly at home.

Isn't a pregnancy frightening to parents, when every 5th child dies in infancy?

On the contrary – this is exactly why they have so many children, because they know that it is very likely that not all will reach adulthood. The many teenage pregnancies pose a big threat. For these very young women, the birth of a child is not the longed for start of a new chapter in life, as is mostly the case here in Europe. Many girls are thrust into motherhood way before they have even left childhood. I see them sitting in their hospital beds, awkwardly holding their baby, wondering what on earth they are supposed to do now with this tiny human being.

What can SolidarMed change with the MAMA project?

The 16 health centres in the districts of Ancuabe and Chiúre, which receive almost no support from the authorities, benefit from the project. The project not only improves the quality of health care, but also promotes a closer relationship between the health sector and the community. Currently, there are many misconceptions about medical assistance, which is why mothers often heed the advice of a traditional healer. As a result, seriously ill babies often reach the health centre too late.

Where do you see the big challenges?

There are still many challenges that SolidarMed tackles with the MAMA project. The health centres lack trained staff to provide appropriate treatment. Also needed is the necessary medical equipment and drugs for emergency care. As still too few women come to the mother waiting homes in time, more transport means are needed to save the life of the woman and the baby, should complications arise.

In the villages, women need to know that not every birth poses a deadly risk and that their child's life is not only decided by fate. Most of the deaths amongst children can be avoided – with prevention and where necessary, with medical help.

Dr med Anita Makins is a Gynaecologist with an additional degree in Public Health. She has been project manager for SolidarMed in Moçambique since October 2011.





In order to find his way back to life after his difficult birth, Valentine needed the knowledge of a midwife and an Ambu-bag.
Photo: Marianne Villaret

Breath is Life – Life's name is Valentine.

Márcia Nampipi is a highly motivated, competent midwife and a passionate teacher. She regularly visits remote health centres where she advises and supports the nursing staff.

Last month Márcia arrived in the health centre of Ocua just as a nurse was wrapping a blue baby into cloths. The boy had been born a few minutes before and was not breathing. The nurse had not been able to resuscitate him. Márcia asked how she had gone about this. The answer came promptly: the usual African method – a number of energetic slaps to the back of the baby being held upside-down. Sadly without success. Márcia asked «what about the Ambu-bag? Did you try to use it?» The nurse answered that she had tried it, but she didn't really know how to use it and anyway, it hardly ever really seemed to work.

Márcia told her to unwrap the baby immediately and to pass her the Ambu-bag. She placed it over mouth and nose of the baby, pumped a few times and saw the baby's tiny chest rise. She asked the nurse to look for a heartbeat. The relief was immense – here was a heartbeat, slow and very weak, but it was there! Márcia instructed the nurse to give the child a gentle heart massage and then to use the Ambu-bag again. The newborn's skin – blue just moments ago – began to turn pink. Full of hope, they continued to give the little creature artificial respiration: 20 minutes later the little boy was breathing by himself, a small miracle had occurred.

The mother – overwhelmed with joy – wanted to thank Márcia in some way. As it was Valentine's Day, she suggested naming the little one Valentine. This is how he got his name. ■

The MAMA project in Moçambique:

SolidarMed protects babies in the difficult first weeks.

In close cooperation with the Mozambican NGO Wiwanana, SolidarMed sensitises the population and supports all 16 health centres in the districts of Ancuabe and Chiúre. More than 400,000 people benefit from the MAMA project:

Sensitising the population

- Pregnancy, birth and baby care are core themes of the village health groups.
- Information events on the prevention of infections like malaria and diarrhoea.
- Cooperation with traditional healers and midwives to ensure they refer pregnant women to the health centres at the right time.
- Bicycle ambulances allow for faster medical assistance in case of complications.

Strengthening health centres

- «Baby Packages» motivate expectant mothers to give birth in the health centre.
- Vaccinations, HIV/Aids tests and counselling are carried out.
- The health staff sensitise mothers on infections and malnutrition.
- Initial and further training of health staff.

Making caesarean sections possible

Thanks to SolidarMed's commitment, it will soon be possible to carry out life-saving caesarean sections in the districts of Chiúre and Ancuabe, something which was previously only possible in the provincial hospital, 130kms away.

→ 2005

In a call for donations, SolidarMed used this picture to tell the story of Sr. Gwananya. This was taken one year after her positive HIV-test. Even then, she was working as a nurse at Musiso Hospital in Zimbabwe. SMART therapy was her hope to survive the deadly disease.

Photo: Urs Allenspach



Despite encouraging progress HIV/Aids is not defeated yet.

10 years ago, an unprecedented epidemic befell southern Africa. The weak health systems in SolidarMed's project areas were put to a difficult test. Thanks to SMART, today even nursing staff in remote health centres offer complex HIV/Aids therapy. HIV is no longer a death sentence, yet the fight against the virus must continue.

She probably got infected shortly before falling pregnant. Finally, a baby! She went for antenatal consultations, did the syphilis test. Everything seemed ok. The baby grew, began to move. There were no HIV-tests, no medicines and no lab. Nobody had given a thought to Aids! Whilst pregnant, she began to cough. She gave birth to twins. After the birth, she began having seizures and died of tuberculosis. Her husband left the village; the orphaned twins were taken in by relatives, breastfed by a neighbour. The first child died from diarrhoea after three days, the second shortly afterwards after one week of fever.

HIV was a tsunami

This is not an invented story. Just 10 years ago, this story played out in Moçambique, Zimbabwe, Lesotho and Tanzania, over and over again. What this story doesn't show is the human suffering. The emotions and the pain of mothers and children, their questioning eyes are not an issue. In 2002, HIV swept across southern Africa like a tsunami – a modern plague – and hit people and countries unprepared and with full force.

SMART against HIV/Aids

Early on, SolidarMed recognised that a strong health system was key in the fight against HIV/Aids. It must be able to offer therapy of good quality and over a long period of time. Through SMART, the population in remote areas is sensitised on HIV/Aids, knows how to protect itself and receives help in case of infection. This is what SolidarMed has achieved with SMART:

- Around 115,000 HIV tests are carried out every year..
- At the end of 2012, a total of more than 16,000 patients were receiving antiretroviral therapy.
- 46 per cent of those affected receive their medication in the closest health centre.
- Every year, around 3,800 HIV-positive expectant mothers are supported, in 2012 also 2,500 infants. This prevents the transmission of the virus from mother to child.
- Partner organisations distribute over 110,000 condoms per year.



2013 →

Today, Sr. Gwananya is nurse-in-charge at Musiso Hospital in Zimbabwe. Thanks to the SMART programme, this mother of five children continues – despite HIV – to care for her family and has offered countless patients support on their paths to treatment. Sr. Gwananya knows how to control the virus with medication. Thanks to SMART, for her, HIV/Aids has become a chronic rather than a deadly disease.

Photo: Beatrice Ammann

- Whole villages died out and an entire generation was swept away. An army of orphans grew up. 10 years ago, Aids was a certain death sentence for 25 million infected people in Africa.

Successful in the hospitals

With this background, SolidarMed and its local partners began a programme in 2004 to offer HIV positive people in rural Africa a perspective. Actively supported by the SDC, the Liechtenstein Development Service, Swiss medical experts and the University of Bern, the foundations were laid in a first phase: making confidential HIV tests possible, enabling the examination of blood samples in a lab, treating patients with antiretroviral medication, offering health advice in health centres and villages, counselling expectant mothers. To achieve this, many buildings were renovated, medical personnel and volunteers were trained, equipment was purchased, registers developed and medication was made available. The programme was highly recognised as well as successful, and made it possible for thousands of people to live, despite their disease.

To the patients in remote areas

But patients far from the large hospitals could not reach the treatment centres, the distances were too great. In a second phase, SolidarMed thus worked to bring prevention, treatment and care closer to the patients. Finally, the treatment of women and small children – the pillars and future of the community – became the main focus. In all activities, SolidarMed always supported and strengthened the health system as a whole.

The glass is half full

Today, thanks to SolidarMed, more than 16,000 patients receive life-saving HIV medication. This is already nearly half of all those who need treatment in the remote programme areas. The opportunity to bring prevention and treatment to the remaining HIV-positive people has never been bigger: technical, scientific and medical developments have resulted in fast and fundamental changes. Today, HIV can be effectively treated and the transmission of the disease can be successfully prevented. This is SolidarMed's goal: prevention, quality, improvement and innovation are at the core of the programmes.

Consistently following the path

SMART has given thousands of people in rural Africa the chance to live – despite HIV – a normal and productive life and to have healthy children. This commitment has to remain, so that all patients can receive the treatment they require. In the fight against HIV/Aids, one is close to bringing a once overpowering disease – the worst epidemic in human memory – under control. But this requires consistency and continued progress on the chosen path. For millions of people in the very poorest circumstances, this is crucial. ■

* SMART: SolidarMed antiretroviral therapy. Regional programme for HIV/Aids prevention and treatment in hospitals, rural health centres and villages.

Nik Hartman presents photos of his Zambia trip in three slideshows:

13th November 2013:
19th November 2013:
27th November 2013:

TAK in Schaan FL, 8pm
Paulusheim in Lucerne, 8pm
Alte Oele in Thun, 8pm

More on this at:

www.solidarmed.ch

Slideshow with Nik Hartmann

Some months ago, Nik Hartmann travelled to Zambia, where he visited a rural hospital. The radio and TV-presenter would like to share his encounters, experiences and impressions with people here in Switzerland and in Liechtenstein. There is a chance to meet Nik Hartmann close up – in Schaan, Lucerne and Thun (see above). His photographic journey takes us from Zambia's capital to the most remote corners of the SolidarMed projects.



Nik Hartmann in Aktion.

Bild: Benjamin Gross

Malaria in Liechtenstein

Sting Day! This time in Liechtenstein. Early in the morning, the SolidarMed mosquitos swarmed through the «Ländle» and infected passers-by with «malaria». The renewed outbreak of the SolidarMed epidemic was not dangerous and very informative.

In Africa, anopheles mosquitos carry deadly malaria in their bodies and transmit the parasite to humans. The SolidarMed mosquitos in Liechtenstein secretly stuck stickers (photo right). In this way, nearly 900 people in Liechtenstein experienced how quickly one can get infected with malaria.



Pepo Frick, doctor and politician from Liechtenstein as ambassador against malaria in Vaduz.

Photo: Benjamin Gross

Photos and videos from the Sting Day in Liechtenstein:

www.facebook.com/SolidarMed/photos
www.youtube.com/solidarmed

More information on malaria and the campaign:
www.stichtage.ch

Agenda

→ 25th and 27th September 2013: SolidarMed street action: Wednesday 25th September 2013 in Zürich and Friday, 27th September 2013 in Lucerne → 13th, 19th and 27th of November 2013: Slideshow by and with Nik Hartmann: Project visit Zambia