

# Focus

21/4.11.2021

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**SolidarMed** improves health care for more than 2.5 million people in rural Africa and in Hyderabad, India. We systematically improve medical services and enhance local expertise through basic and further training. Our projects are developed in close collaboration with local partners, supported by our health experts on the ground. As a non-profit organisation with the ZEWO seal, SolidarMed conducts true and fair financial reporting, provides transparent information and has appropriate controls in place.

**SolidarMed is supported by the Swiss Agency for Development and Cooperation SDC, which is part of the Federal Department of Foreign Affairs FDFA.**



## Health care for Lesotho's mountain communities



**Christian Heuss PhD**

Head of Communications and Fundraising | Deputy Director

Looking at the chalets, ski lifts, snow canons, and even the obligatory cosy restaurant with an open fire, you could be forgiven for thinking you were at a small ski resort in Switzerland. But you'd be way off the mark. Because the Afriski Mountain Resort is just below Lesotho's highest pass at 3,050 metres altitude. A South African investment company has been developing it successfully for 20 years and attracting international tourists paying Swiss prices to visit the highest ski resort south of the Sahara. It is now open in the summer too, offering mountain bike trails, paintball and 4x4 excursions.

“Yes, what's wrong with that?”, you might think. Why shouldn't tourism be allowed to develop in the mountains of Lesotho? As economists are keen to argue, the trickle-down effect means that investment projects in the local economy ultimately benefit the poorest in society. But the long-suffering mountain farmer families in the districts of Mokhotlong and Butha-Buthe have felt precious little impact from the ski resort. Just a few kilometres away there is no electricity, no fuel to get through the cold winters, and no work. The added value from the ski resort mainly goes into the pockets of foreign investors.

And this is a problem because the public health service is unable to adequately reach people in these remote areas. A quarter of the population is HIV positive. Child malnutrition and the growing non-communicable diseases burden, e.g. cardiovascular diseases, threaten the Basotho families in this mountain region. In recent years, through activities such as HIV programmes, SolidarMed has learned that health care and treatments are particularly effective when they are

delivered locally. Sick, older people and pregnant women are unable to reach health centres that are several hours away.

This is why we are bringing basic primary health care to mountain areas. SolidarMed all-terrain vehicles are equipped with medical examination equipment, diagnostics instruments and medicines. Our drivers bring local healthcare workers to communities. Locals therefore have the opportunity to undergo screening or get vaccinated on their doorsteps. This has radically improved medical care.

Thanks to our Canadian partner, *Bracelet of Hope*, we were able to expand this approach in 2020. The mobile clinic is a converted all-terrain vehicle, equipped with the necessary instruments and a small treatment room where patients can be examined directly. Find out on page 4 how we are reaching almost inaccessible villages and thus delivering health care to many underserved patients. The communities on the ground are absolutely delighted.

We must continue to pursue this promising approach. Because we believe that basic primary health care that can reach the populations of remote regions in Lesotho's Maloti Mountains is vital – with or without a ski resort.

Thank you so much for supporting this important cause. ■



▲ SolidarMed nurse Manare Jafeta has been working in the mobile clinic in Lesotho since its launch at the beginning of 2020. *my*

## Health care on wheels

The SolidarMed mobile clinic brings health care on four wheels to the most remote villages in Lesotho. This is an enormous step forward for the medically underserved mountain population with the second highest HIV rate worldwide.

**Lesotho** Manthabiseng Monalana, a SolidarMed community health worker, clearly recalls the challenges that people in her community used to face. “Our village is a long way from the nearest health centre,” she explains. In fact, this area has no public transport. If somebody was sick or pregnant or needed medical care, they would have to walk. They had to leave the village

at the crack of dawn. It would take many hours of walking to reach the health centre, then many hours again to return home.

Today, the situation looks very different. A robust all-terrain vehicle with a built-in treatment room is parked outside of Manthabiseng’s home in Phokojoe-Khoaba, a remote

village in the district of Butha-Buthe. This mobile clinic was developed as a joint project between SolidarMed and the Canadian organisation Bracelet of Hope. Against the backdrop of mountain peaks and a clear blue winter sky, people from this and neighbouring villages have gathered and there is the buzz of conversation and laughter in the air. Many of the people waiting are



young mothers dressed in colourful Basotho blankets, carrying babies on their backs. They have not had to travel far today, as health care has come to them.

**“The mobile clinic may seem small, but the impact for us is big.”**

**Beile Ntomane, farmer from Liqalaneng village.**

Manthabiseng is busy moving from one person to the next, noting down their details in their medical booklets and ensuring that they are in the right place in the queue. She is assisted by a team of five other community health workers, who are helping with the registration process. One by one, the patients are weighed and have their temperatures taken. Children aged one and over also have to have their height measured. Throughout the process, the community health workers remind people about Covid-19 protocols and the importance of



▲ Women and children wait outside the mobile clinic in Phokojoe-Khoaba, a remote village in the mountains. *my*

keeping a safe physical distance. Pregnant women, mothers, and their children are seen inside the mobile clinic – while other patients step into Manthabiseng’s rondavel hut for their consultation with a SolidarMed nurse.

Launched in March 2020, the mobile health clinic is a one-of-a-kind initiative in Lesotho, a mountainous country in Southern Africa affectionately known as ‘the kingdom in the sky’.

Over 40% of Lesotho’s population live in remote and hard-to-reach villages and 57% live below the poverty line. The country also has the second highest HIV/AIDS prevalence rate in the world. In the face of such challenges, SolidarMed aims to bring health care to the country’s most isolated communities. The robust all-terrain vehicle is furnished with essential medical equipment that is able to deliver a range of vital health services,

## Support for the Covid-19 vaccination campaign



Lesotho received the Covid-19 vaccine from Johnson & Johnson in the summer. The health authorities and district health care team in Butha-Buthe contacted SolidarMed to request support with the rollout of the vaccination campaign. Over several weeks, SolidarMed provided two nurses and two cars with drivers. The mobile clinic was also deployed to achieve blanket vaccination coverage as quickly as possible, including in remote communities. SolidarMed was therefore one of the most important partner organisations in Lesotho’s vaccination campaign.

◀ Twenty-six-year-old Mapolao Sekoenya gets her Covid-19 vaccination in Lehlakaneng. *my*





▲ The robust clinic on four wheels is capable of traversing Lesotho's rugged and mountainous terrain. *my*

including HIV testing and treatment, maternal and neonatal care, including pregnancy check-ups and important vaccinations for children, as well as screening and care for non-communicable diseases such as diabetes and hypertension.

Mareitumetse Monalana, a 20-year-old mother, has come here today with her baby girl, Kananelo. Together, they step into the mobile clinic for Kananelo to receive her vaccinations. The clinic comes here once a month, at the end of every month. "Everything is easier with this clinic," Mareitumetse says afterwards, as she lifts Kananelo onto her back. "The SolidarMed staff are helpful and supportive. Kananelo got her shots today, and I'm able to access family planning services here too."

Waiting in line is 63-year-old Beile Ntomane, who has come for his monthly checkup and to pick up his hypertension medication. Dressed in a thick woollen blanket and gumboots, Ntomane is a farmer who lives in the nearby village of Liqalaneng. He claps his hands and points at the vehicle. "You see that car?" he says, "It may look small to you, but the impact it has on us is big. Our villages are so much healthier because of this."

SolidarMed nurse Manare Jafeta has worked full-time with the mobile clinic since its launch in 2020. She and SolidarMed's skilled driver have to travel for long hours every day to reach the communities they serve, often navigating steep and winding gravel roads, and sometimes having to cross rivers and streams. "We are

currently going to 15 outreach sites on a regular basis," explains Manare, who is talking to us from Lehlakaneng, another remote village in Butha-But-

**“Our patients can rely on us.”**

**Manare Jafeta,  
SolidarMed nurse**

he. "Our patients can depend on us. They are sure that they will get their medication and the care they need every month. We used to try and help these villages by working out of ordinary 4x4 vehicles, but it was very challenging because we didn't have the proper equipment." With the modified vehicle, many more medical services can now be offered. In addition, SolidarMed works closely



with the community health workers to identify patients who need to be visited at home for additional care. Through the mobile clinic, especially disadvantaged people are reached – according to the motto ‘leave no one behind’.

For the medical staff delivering treatment, the journeys to remote valleys are often very arduous. But their motivation is very high. Improving healthcare directly helps patients. “For example, I helped a young woman during her pregnancy once, and we still meet now, and she says her baby is also my baby. Such moments make me love my work and make me feel proud!” says Manare, with pride.

Dr Ravi Shankar Gupta, the responsible project manager from SolidarMed, says that the initiative has carried on smoothly in spite of the challenges posed by the Covid-19 pandemic. They only had to pause for a few weeks last year when a strict lockdown was imposed in Lesotho and all gatherings were banned. Gord Riddle, Chair of Bracelet of Hope, is equally enthusiastic about the potential for scaling up the project and continuing to partner with SolidarMed. “The impact of this



▲ Twenty-nine-year-old Masechaba Thabo and her 9-month-old Malekhoa in Lehlakaneng in front of the mobile clinic. *my*

project has been even greater than we’d anticipated,” he says. “We’re able to provide basic healthcare to thousands of people through the mobile clinic, and we’ve been especially happy to see how many children and women of child-bearing age are being helped through this service.”

■ *Leila Hall*

More photos of the mobile clinic:

 [solidarmed.ch/en/mobileclinic](https://solidarmed.ch/en/mobileclinic)

Our partner *Bracelet of Hope*:

 [braceletofhope.ca](https://braceletofhope.ca)

## “We need funds to reach more people”



The mobile clinic has been very well received by the public but also by the health ministry in Lesotho and the responsible health teams in the district, says project manager, Dr Ravi Shankar Gupta.

“We really must be able to reach more people in remote villages,” he says, “but that will require more funding.”

Many mountain farmer families in Lesotho’s Maloti Mountains do not have access to health care. With an expanded fleet of vehicles and teams in the districts of Butha-Buthe and Mokhotlong, they could be reached.

SolidarMed is seeking additional partners as donors to expand the mobile clinic. Donations from our members, donors and supporters also go to this important initiative.

# Digital health care in Africa

Mobile communication is growing rapidly in Africa. Even in the remotest regions, mobile phone masts provide people with mobile internet access. And according to a study by the World Bank, this is nothing new. As far back as ten years ago, mobile payment systems, such as m-Pesa, which allow you to transfer money via SMS, were already taking root. The reason is simple: conventional payment systems (such as bank transfers and postal payments) are lacking. In the field of mobile payment systems, Africa is some way ahead of Switzerland.

Digitalisation in healthcare is evolving at a similarly rapid pace. Under the term eHealth, smartphones, mobile phones and tablets are revolutionising healthcare. SolidarMed supports eHealth projects to reinforce prevention, healthcare and treatment in health centres. On this double-page spread, we present some examples of eHealth projects.

## eHealth: Is it needed in Africa?

- ▶ Yes, because eHealth supports medical services for people in remote regions.
- ▶ eHealth improves the quality of diagnosis and treatment to support healthcare workers.
- ▶ eHealth makes it possible to train healthcare workers, even in remote regions.
- ▶ eHealth guarantees access to the latest knowledge: timely and informed responses can mean the difference between life and death.
- ▶ eHealth can enhance efficiency and cut costs for the health system.

**eHealth helps our partners deliver on the UN's Sustainable Development Goal number 3, which seeks to ensure healthy lives and promote well-being for all at all ages.**

**SM** works **Community with patients**

HIV therapies require the a...  
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## SolidarMed's eHealth strategy

SolidarMed relies on a bottom-up strategy. We do not copy eHealth strategies from Switzerland, but seek local solutions and work with the experts on the ground. For example, in Rwanda, SolidarMed brings together midwives, programme managers, specialists, students and doctors every month for a hackathon to develop local digital solutions to address their needs. This always centres on patients and their needs. The approach serves as a model and has attracted great interest from NGOs, but also government bodies.

### Advantages of this approach:

- ▶ it empowers people on the ground
- ▶ it strengthens local expertise
- ▶ the approaches are developed locally and reflect the local context
- ▶ shared learning promotes development and sustainability



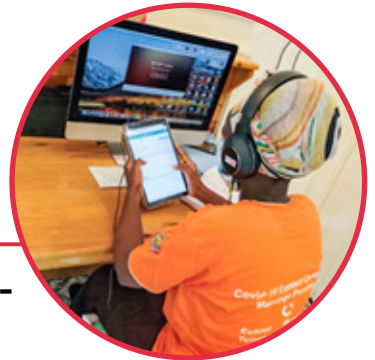
## Communication incentives

amount of virus in  
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when the result is  
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patients are saved  
centre, which may be  
s money and time for  
improves adherence.



## SM works eHealth as an information platform

The beginning of the Covid-19 pandemic also brought a great deal of uncertainty in Africa. What information can I trust? Can I still come to a health centre if I feel unwell or is it too risky? What do I need to look out for? SolidarMed worked with the health ministry in Zimbabwe to develop a digital platform to provide people with free advice on health matters.



## Strategy

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## SM works Artificial intelligence (AI) in remote areas

In collaboration with scientists, SolidarMed developed an AI-based system to diagnose Covid-19 in Lesotho. Digital chest x-rays allow Covid-19 infections to be automatically distinguished from other diseases. This means that Covid-19 patients with non-specific symptoms such as a cough can be identified in good time, even in remote communities.



t the cultural  
tainability

## SM works Assisting with birth complications

In the Silveira hospital in Zimbabwe, SolidarMed set up what is known as an e-partograph. This is a tool to monitor the progress of labour and to detect complications at an early stage. Any alarms can be digitally transmitted to the birth attendant's mobile phone, making births safer.



Interview with Josephine Among Muhairwe

# “We need to tackle the root cause of problems”



▲ Josephine Among Muhairwe with Research Assistant Thabo Lejone in front of the mobile clinic that brings healthcare to remote villages in Lesotho. *pma*

Josephine Among Muhairwe (43), born in Uganda and originally trained as a medical doctor, became Country Director in Lesotho in early 2016. Before leaving the organisation at the end of October, Pierina Maibach took the opportunity to talk to her about her work and how she has contributed to SolidarMed’s success in Lesotho.

**Josephine, you have lived and worked in many different countries – the UK, USA, Uganda, Sierra Leone, Lesotho – how important is this experience?**

I would say the most important experience is my Ugandan background. I was born there and got my medical training including first work experience there. Additionally, I have travelled to many other African countries. This gives me a clear understanding of the

African culture and context although there are differences. Working in Sierra Leone during the Ebola outbreak made me very resilient. And this is crucial in many contexts. And finally, living in the UK and the USA enabled me to understand the Western world. I think this is a very good and important mix to be successful in my job, especially in terms of partnerships.

**Tell me more about your time in Sierra Leone.**

My main aim there was to start a malaria prevention campaign with a focus on pregnant women, breastfeeding mothers and children under five. But then came the Ebola epidemic, and we shifted our focus away from malaria. When people die from something else – as in recent months because of Covid-19 – other diseases take a back seat.

We implemented prevention programmes and approached people through community and faith leaders but also provided clinical and humanitarian work. It was a hard time seeing people – and even colleagues – dying.

**The role of country director at SolidarMed includes many different fields: clinical work, academic research and designing and managing the country programme in Lesotho. What attracted you to this?**

My father was an orthopaedic surgeon and my mother a public health nurse, so I came from a health and medically oriented family. I went into medicine with a passion. The reason I was interested in the role at SolidarMed was because there were all these components combined in one position. I could still see patients. I think clinical practice keeps you grounded in reality. It is very important to understand the real context. You can only design and lead impactful and high-quality programmes if you understand the root causes of problems and engage with individuals from communities. This aspect of the work also gives me an extra portion of personal motivation. Furthermore, being involved in research means generating evidence which again can make a difference for individuals and public health more broadly. The three areas are interlinked. In terms of my personal life, I could have dropped one of these areas to achieve a better work-life-balance [laughs].

**Which are your biggest successes in Lesotho?**

Of course, I cannot take the full credit for the successes of recent years. But as the person leading, I am proud to say that we managed to put SolidarMed in a very strong position at the Ministry of Health. We are very respected for our work and support and have a direct influence on guidelines for HIV, tuberculosis, and Covid-19 and even for

strategic projects concerning the health system. We are a strong partner both at district and national level. In addition, I have managed to meaningfully expand the team and thematic areas. SolidarMed implements a much bigger range of impactful projects in Lesotho than

**“The mobile clinic which reaches the most vulnerable communities, is very close to my heart.”**

Josephine Among Murhairwe

when I started, when only two projects were running. With the mobile clinic in collaboration with the Bracelet of Hope we deliver basic primary health care to the most vulnerable people in society. This is a project that is close to my heart.

**Which have been your biggest challenges?**

SolidarMed aims to fill in the gaps in health systems and not duplicate existing programmes or introduce overlapping interventions. But filling gaps means establishing a good partnership with the Ministry of Health and officials at district levels. Projects run by other organisations also need to be complementary to ours. This was not always easy in the beginning, when the priorities of other partners were constantly changing, but now we have very good partnerships and collaborations.

**What sets the work of SolidarMed apart from that of other organisations?**

The long-term strategic planning, partner engagement in planning and generating evidence for new projects. Mainly, what we talked about before: combining research with project design and management and engaging with

patients and communities. It is also a context-driven organisation – for example in a context with a humanitarian crisis like now in Mozambique, you need to provide humanitarian aid rather than designing big research projects. Programmes are designed to be sustainable and to foster the participation of local partners like the district management teams and ministries of health, for example.

**How can universal health coverage be reached in Lesotho?**

Universal health coverage has a lot to do with quality and access to basic primary health care – this should be at the centre of every project. If we continue to focus on mothers and children, we can reach whole families and a big portion of the vulnerable in communities. Additionally, through the new project called ComBaCaL that targets non-communicable diseases, we tackle the double-burden of disease. Last but not least, health system strengthening more broadly needs to be the core aspect of SolidarMed’s work.

**Josephine Among Muhairwe** is a Ugandan-trained physician with a master’s in public health from the London School of Hygiene and Tropical Medicine in the UK and is currently pursuing a PhD in global health from the University of Geneva. Before joining SolidarMed in 2016 she held various positions in foundations, organisations and health institutions in Uganda, Sierra Leone, the UK, and the USA. Among others, her interests and experience lie in the areas of maternal and child health, HIV/AIDS, malaria prevention, and health system strengthening. Josephine is married and has two children. In 2019, together with her SolidarMed colleague Isaac K. Ringera, she won the prestigious *Pfizer Award for Infectious Diseases*.





### Partnerships for health.

**Switzerland/Tanzania** As an accredited programme partner of the Swiss Agency for Development and Cooperation (SDC), SolidarMed entered into an alliance with the Geneva-based organisation Enfants du Monde at the beginning of 2021. Through such alliances, the SDC intends to promote cooperation between different actors in the area of development cooperation. Enfants du Monde is a strong partner, particularly in the area of education for children and young people with a focus on Western Africa and South America. Thanks to the alliance and partnership, new and effective programmes can be developed jointly. An initial joint project is currently being planned in Tanzania, where young people are often insufficiently informed about issues relating to sexuality, contraception and pregnancy due to a lack of relevant health services. A frequent consequence of this is teenage pregnancy. From 2022, the project aims to promote sexual and reproductive health and the associated rights of young people in the Ulanga district, through better knowledge and high-quality health services. For this project, SolidarMed brings experience and expertise in delivering medical services in Tanzania, while Enfants du Monde facilitates quality education programmes for young people on sexual and reproductive health. ■ *pm*



▲ Staff being trained on the use of steam sterilisers. *rs*

### Preventing antibiotic resistance

**Mozambique** Over 20% of infections in Mozambique are spread in healthcare settings and hospitals. Hygiene and infection prevention are therefore important elements in containing epidemics, but also the spread of antibiotic resistance. SolidarMed is therefore focussing on this issue in the Cabo Delgado Province in the north of the country. The aim is to reduce the number of infections through increased efforts in hospital hygiene, the use of protective equipment, hand hygiene and the sterilisation of medical devices. This also includes correct disposal of infectious waste, as well as the recycling or composting of certain waste. Various groups of health workers are being trained and educated about the proper management of healthcare waste and safe disposal as part of the project. The lessons learned from the project will be incorporated in follow-up projects, but also in the discussions on the issue with political decision-makers at the ministry of health ■ *pm*

## Become a part of SolidarMed

As a member, you will be part of the growing SolidarMed community. You will receive voting rights at the general meeting, the magazine 'Focus' four times a year and the annual report. At exclusive events you will also meet the people behind the projects. The annual membership fee is CHF 50 for individuals and CHF 80 for families and companies.

Register at  
[solidarmed.ch/en/member](https://solidarmed.ch/en/member)



We look forward to hearing from you!

## Preventing cervical cancer

**Mozambique** Globally, one woman dies of cervical cancer – which is largely preventable – every two minutes. Ninety-nine per cent of cases are caused by an infection with the human papilloma virus (HPV). The virus is very widespread and is mainly transmitted through sexual contact. Effective vaccination protects people from infection. In Switzerland, HPV vaccination is part of the national vaccination plan for adolescent boys and girls. In addition, gynaecological screening and treatment can prevent serious cancers. The situation in sub-Saharan Africa is different. 19 of the 20 countries with the highest rates of cervical cancer worldwide are in this region due to the lack of vaccination and preventive initiatives. In Mozambique, the health ministry has made tackling cervical cancer a priority, also because HIV-positive women have a higher risk of disease. In Mozambique, more than 13% of the population is HIV positive.

SolidarMed worked with local partners, the Swiss Tropical and Public Health Institute and the University of Bern's Institute of Social and Preventive Medicine to carry out a prevention project with HIV-positive women receiving antiretroviral therapy at the Chiúre hospital. A total of 91.9% of HIV-positive women agreed to a cervical examination. This is a remarkable success as previously only 15.5% of this target group were reached. The key lies in supporting women and empowering them by providing information. SolidarMed recruited and trained a nurse for the HIV clinic, who advises and supports patients. SolidarMed also

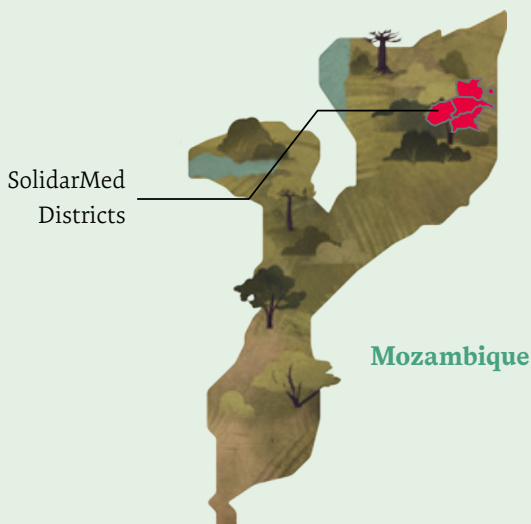
helped set up a gynaecological examination room, which contributed to an increase in the number of examinations carried out. In 84% of women with cervical disease, the cancer was treated successfully.

SolidarMed will continue to campaign for the health of women in rural areas of Mozambique because HPV tests are still not routinely carried out. Dialogue with the health authorities will remain important. SolidarMed is also planning to extend the project to Zimbabwe and Tanzania.

■ pm



▲ A nurse in a gynaecological examination room set up by SolidarMed. pma



# Vaccines for Africa – putting solidarity into action

A group of GPs from Lucerne came up with a fundraising campaign idea: to make a donation towards Covid-19 treatment in Africa for every patient vaccinated in their surgeries. This was a great initiative, which saw them raise a total of almost CHF 30,000.

**Lucerne** Last spring, as tens of thousands of people were being vaccinated against Covid-19 every day here in Switzerland, no vaccines were available in many African countries. Even today, the wider population in southern Africa still cannot get vaccinated. Two Lucerne-based GPs, Martina Buchmann and Roland Dürig,

decided to take a stand and launched a donation campaign for SolidarMed in collaboration with board member Markus Frei. Together they called on more than 300 GPs in the canton of Lucerne to donate the proceeds from vaccinations in their surgeries to SolidarMed. Thanks to the CHF 30,000 collected, SolidarMed can

support more projects to strengthen basic primary healthcare and to tackle Covid-19 in Africa.

SolidarMed would like to thank those behind the campaign and the GPs for their important commitment to the cause. ■ *pm*

## Obituary: Asante\* Elisa Rotzetter



As Kirkegaard said: “Life can only be understood backwards, but it must be lived forwards.” Elisa Rotzetter studied politics at the University of Lausanne and spent 16 years working for the Swiss tax authority, before making the brave decision in 2002 to give up her comfortable existence and get on a plane bound for Tanzania to go and support the development of the local ‘HakiElimu’ organisation.

The smell of the red earth, the light in people’s eyes and the clouds on the edge of the Usambara Mountains never left her. What was intended to be a short stay turned into 15 years of commitment. In 2006 Elisa moved to SolidarMed as director of the country programme and set up an office in the provincial town of Ifakara. ‘Mama Elisa’ as the locals called her, led her team with commitment and understanding, a demanding boss, but always supportive of her staff.

“The European in Africa usually sees only the continent’s exterior coating. Their gaze glides over the surface, penetrating no deeper, and refusing to imagine that behind every thing a mystery may be hidden.” This is how writer Ryszard Kapuscinski described his experiences in Tanzania. Elisa succeeded in looking beneath the surface on a daily basis. She understood what poverty meant and she grasped the foundations of Tanzania:

culture, tradition, freedom (uhuro) and unity (ujama). Fluent in Swahili, she looked after mothers with malaria, undernourished children, workers with tuberculosis. She wanted to make a difference and to bring hope. And that is exactly what she did. In 2017, Elisa had to give up her work unexpectedly due to illness and return to Switzerland for treatment. Throughout these last difficult years she always kept in touch with her friends in Tanzania and our office in Lucerne.

Elisabeth Rotzetter died on Saturday 2 October 2021 at the Fondation Rive-Neuve de Blonay care home in Lausanne. She was a remarkable woman. As we look back on the good times we had together, our thoughts are with her and her family.

■ *Jochen Ehmer, Director*

*\*Thank you in Swahili*



# Meaningful Christmas gift ideas

Christmas is just around the corner, but there's still time to think about gifts for your nearest and dearest. SolidarMed also has a few gift ideas that are sure to put a smile on someone's face.



## Elegant carafes for basic primary healthcare

Whether for yourself, as a gift, or for special occasions, the attractive and timeless SolidarMed water jugs always look good on the dining table. In the spirit of 'no health without water', by purchasing one of these carafes you are supporting SolidarMed's projects to improve basic healthcare for over 2.5 million people in southern and eastern Africa. The carafe is available in two sizes: 0.5 litre and 1 litre, while stocks last.

 [solidarmed.ch/en/carafe](https://solidarmed.ch/en/carafe)

## SolidarMed gift certificates

Our gift certificates are extremely popular. Choose a project and make someone's day with a personalised gift. Corporate customers can also use gift certificates to highlight the values they care about: making an important donation to support healthcare in Africa rather than giving unnecessary consumer goods. Do you want to give a meaningful gift? We'd be happy to advise you and can also provide bespoke certificates.

 [solidarmed.ch/en/certificate](https://solidarmed.ch/en/certificate)



## A Shona fairy tale from the south of Africa

Hansruedi Fehr, author of the picture book 'Shingi and the Old Blind Man', was in charge of the Musiso Hospital in Zimbabwe for SolidarMed in 1996 and lived with his family in Masvingo Province. Now, having recently become a grandfather himself, he has published an enchanting picture book with a traditional African fairy tale. The author is donating a fixed share of the proceeds as well as the net profit to SolidarMed. We are very grateful for this support. (Exclusively in German.)

 [solidarmed.ch/en/fairytale](https://solidarmed.ch/en/fairytale)



Good to know

## “We don’t enable miracles ...



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keine Wunder.  
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Zusammenarbeit, die wirkt.

Prägnanzmutter Mkonja Mohammed im Mahenge-Spital, Tansania

**SOLIDAR  
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▲ “We don't enable miracles but medical standards. Support us in our goal of making primary health care the norm. Partnerships for Health.”

... but medical standards.” You might have noticed our slogan in stations, on screens in post offices, on public transport or online. The current awareness campaign features Mkonja Mohammed, a nurse at the Mahenge hospital in Tanzania, together with a pregnant patient.

Through this campaign, SolidarMed is campaigning for greater health equity and for basic primary health care as is standard here in Switzerland to become the norm everywhere. ■

Have you got any input, ideas or suggestions related to our Focus magazine?  
We look forward to your feedback.  
Just email us at: [contact@solidarmed.ch](mailto:contact@solidarmed.ch)

## Your donation makes a difference.

**SolidarMed**

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