K4Health Malawi

June 2010

Postnatal care poster from the Malawi Maternal and Neonatal Toolkit

Summary:

- *K4Health to host World Population Day event on July 15.*
- *Salima DLC reporting an average of 7 Health Service Provider visitors per day and the HEO and HMIS Officers integrated into DLC.*
- *Nkhotakota DLC reporting an average of 4 visitors per day. Plans made for increasing use and integration during the LDP coaching visit.*
- *LDP coaching sessions completed in both districts.*
- *SMS in Salima: 91 messages from front line health workers were sent to the district hospital through the hub. 43 messages were on HIV/AIDs and 47 were on family planning, with one question on measles outbreak.*
- *SMS in Nkhotakota: 20 messages were sent through the system.*
- *Support for HIV/AIDS and FP/RH toolkit development continues.*

National Level Activities

Malawi Toolkits

During the month of June, content for three toolkits on Reproductive Health was organized and uploaded on the K4Health website. Examples of materials include: National policies and strategies, Ministry of Health Guidelines, Facilitators guides, and educational posters. Most of the materials are in English with a few in Chichewa. The draft toolkits are currently under final review by the Reproductive Health Toolkit Development Taskforce and will go live prior to World Population Day in July.

Repeated efforts were made to formalize the HIV/AIDS Toolkit Development Taskforce. A series of four planning meetings were conducted by MSH with the National AIDS Commission (NAC) and HIV/AIDS Unit to encourage their leadership in the formation of an HIV/AIDS Toolkit Development Taskforce. However these efforts to have NAC host the first official taskforce meeting remain futile as dates have shifted repeatedly.

Despite problems with meeting as a complete taskforce, K4Health has remained in touch with the organizations that participated in the Leadership Development Program (LDP) workshop in February. Many of these organizations including NAC have contributed significant data towards building toolkit content. Moving forward there is another meeting set for July 2nd to attempt to formalize the taskforce and start building the HIV/AIDS toolkit.

World Population Day

K4Health Malawi plans to hold a one day seminar to acknowledge World Population Day on July 15th. All stakeholders (UNFPA, USAID, National Youth Council of Malawi, C-CHANGE, Universities of Malawi, INGOS, National AIDS Commission, Government Ministries, District Health Officers and Traditional leaders) will be invited and extensive media coverage will promote K4Health Interventions in relation to Family Planning and Population. Planning meetings were held in June with the MOH Reproductive Health Unit, UNFPA and the Ministry of Population and Development Cooperation to

agree on event details. The objectives of the WPD event are as follows:

1. To highlight the contribution that appropriate RH/FP knowledge can provide towards controlling population growth.

2. To bring into light the value of the roles being played by Community Based Distribution Agents (CBDAs) and Health Service Agents (HSAs) in the provision of Family planning methods

3. To popularize methodologies that support more effective exchange and use of Reproductive Health/Family Planning knowledge among Policy makers, Program Managers and Service Providers in Malawi

District Level Activities

District Learning Centers

In June, the **Salima** District Learning Center (DLC) had on average 7 Health Service providers visit per day, either accessing web-based information resources, or learning basic computer skills. The district hospital has morning sensitization meetings, during which the DLC coordinator presented the DLC use and benefits. Presentations were given at three meetings (June 7th, 16th, and 23rd) with 25 staff present on average.

Photo of Salima
District Learning Center

Many nurses in the reproductive health unit have shown interest in learning basic computer skills and a daily timetable of trainings has been established. DHO staff are facilitating these sessions with support from DLC Coordinator. Special effort has been made in Salima to include junior staff in DLC and reinforcing the link between access to information and their daily work.

The DLC in Salima has received unexpected early support from the Ministry of Health staff. The District Health Management Team has dedicated both the HMIS and HEO Officers to work close to full time in the DLC. The DLC Coordinator works closely with the HMIS and HEO Officers to build their capacity to manage all aspects of the DLC: manage the register, help health workers learn basic computer skills, ensure DLC is cleaned daily, ensure equipment is secure, link with DHMT on any problems, direct questions to relevant coordinators for response etc. The DHMT has also reinforced the DLC by installing burglar bars in all windows and the door.

In **Nkhotakota**, the DLC has received less than five visitors per day. We attribute this to:

- Only one computer with access to internet, which is very slow and increases waiting time and discourages visitors;
- Inadequate mobilization as not all health workers know the DLC is open to everyone; and
- No MOH staff member assigned to the DLC.

Strengths in Nkhotakota:

- Adequate space for DLC
- Adequate computers
- Availability of Printers
- Provision of Airtime for Internet
- Availability of the DLC coordinator

LDP Coaching Session
June 10, 2010

LDP Coaching Session

On June 10th, a LDP for Knowledge Management coaching session was held for both districts. The objective of the coaching session was to look at the K4H Challenge model and subsequent action plans as they were developed in the February workshop. The group revisited the developed vision, mission and measurable results to agree whether they were still realistic and that the Demonstration project was moving in the right direction towards achieving these goals. The group relooked at the weaknesses in both Districts in RH and HIV and AIDS information management and the existing opportunities to mitigate them. Examples of challenges and suggested solutions from the LDP Coaching Session are in the table to the right.

	Nkhotakota CHALLENGE	WAY FORWARD	RESPONSIBLE PERSONS
1	Absence of a MOH staff to understudy the DLC SC in Nkhotakota	Consider relocation of HMIS Officer to make sure he is located in the DLC (To be discussed with DMMT)	Taskforce /DHMT
2	Inadequate mobilization of staff	- Go department by department to sensitize people on DLCs -Use departmental meetings to sensitize people on DLC -Pasting posters for awareness	Taskforce
	Salima CHALLENGE	WAY FORWARD	RESPONSIBLE PERSONS
1	Weak antivirus for computers	To Discuss with MSH IT person	Thoko

Strengths in Salima:

- Reliable Internet connectivity
- Supportive DHMT i.e. installed Burglar Bars for reinforcement of security
- Good patronage of the DLC i.e. 5+ Health workers per day
- Enough Office space for now
- Adequate number of computers
- Availability of DLC coordinator
- Availability of full time MOH staff to understudy the DLCSC
- Most officers have computer knowledge

LDP Coaching Session
June 10, 2010

SMS

In June, the Front line SMS system went live and messages from CBDAs and HSAs were received at the DLC. The number of messages received at the DLC was lower than hoped for, in part because of a delay in receiving the solar chargers. By June 18th, all of the solar chargers were distributed to those who received phones and training. Details by district are as follows;

In **Salima**, 91 messages from front line health workers were sent to the district hospital through the hub in the learning center. 43 messages were on HIV/AIDs and 47 were on family planning, with one question on measles outbreak. Examples of types of messages received at hub:

- Reporting low/no stock of FP supplies (DEPO and condoms)
- Request for Report forms
- Asking for technical information (client on DEPO has developed complications, is it okay to administer pills?)

Of particular interest, is the **Salima Family Planning Coordinator,** who now visits the DLC every single day to view all of the questions that have come in from the field via SMS and responds to each and every question. This is particularly impressive, given that prior to the DLC set up and receiving training from DLC Coordinator, she had never used a computer.

In **Nkhotakota**, 20 messages were received and responded to through the SMS system. Possible reasons for the low number are as follows: malfunctioning of the modem in the hub, no MOH officer routinely providing the answers, and CBDAs sending messages were discouraged since they did not receive replies.

SMS....continued...

These challenges in Nkhotakota were discussed in the LDP coaching session and steps are being taken to improve the situation. DLC Coordinators have hung posters on notice boards around the hospital on the DLC and FLSMS, and they are planning a meeting with District Coordinators for RH and HIV and AIDS to discuss the value of FLSMS.

Examples of types of messages received at the hub in Nkhotakota:

- Reporting Traditional Birth Attendants (TBAs) conducting deliveries in the communities
- Booking appointment for CD4 count
- Requests for DMPA register

In addition, training on the SMS application was completed for 1 HSA and 2 CBDAs from hard to reach areas who were missed in the initial training sessions.

K4Health Visitors

Visit from USAID

On June 17th, K4H Malawi hosted Todd Koppenhaver from USAID. Todd is the Researcher and Program Advisor (with focus on HIV Prevention) for Southern Africa based in Pretoria. He was exploring projects and opportunities for countries in Southern Africa to be involved in an HIV Prevention evaluation and possibly lead to some HIV Prevention efforts. In particular, he was exploring how USAID could expand HIV prevention work through the K4Health intervention. The visit was focused on the DLCs and Frontline SMS, with a visit to a community in Salima to meet with HSAs and CBDAs who received mobile phones and were trained in Frontline SMS. Mr. Koppenhaver received a comprehensive overview of K4Health interventions in the Districts and requested future updates on the project.

Upcoming Activities for JULY

- K4Health presentation at the National Reproductive Health Dissemination Conference on July 7th
- World Population Day Event hosted by K4Health, July 15th
- Visit from MSH home office, Piers Bocock July 19-30
- Recruitment of Malawi-based M&E Advisor and orientation
- HIV/AIDS Toolkit taskforce meetings to finalize toolkit building process
- RH/FP Taskforce to publish 3 toolkits
- Mobilization for DLC and FLSMS utilization
- Further discussions on Internet for Nkhotakota Learning center with DHMT
- Review of SMS approach and consideration of making communication with District Hospital a toll free number to encourage usage.

Meet the K4Health Malawi Staff

Thokozani Bema is the Knowledge for Health Network Coordinator at Management Sciences for Health (MSH) in Lilongwe, Malawi. He has extensive experience in Maternal Newborn Child Health, Reproductive Health and HIV&AIDS programming, with both theoretical and practical clinical and non-clinical knowledge gained from a background of working with government and non-governmental organizations.

Isaac Sangweni is the District Learning Center Start Up Coordinator at District Hospital in **Nkhotakota**, Malawi. He has a diploma in Public Health and another in Emergency Preparedness Management. Isaac has in-depth theoretical and practical experience in project management which has been amassed through working with various non-governmental organizations.

Chimwemwe Limani is the District Learning Center Start Up Coordinator at District Hospital in **Salima**, Malawi. He has vast experience in Maternal and Neonatal Health, Reproductive Health and HIV&AIDS programming, with both theoretical and practical knowledge obtained from a background of working with government and non-governmental organizations. Chimwemwe Limani has bachelors of Social Science and Arts plus Advanced Diploma in Community Development

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Greater health impact.

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See us at:
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