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Protecting babies
from HIV

**Effective
treatment.**

→ Binte knows that without treatment, her daughter will die. When she has enough money, she buys some fruit juice to make it easier for her daughter to swallow the pills.

In 2011, Binte fell pregnant again and feared that her second child could also be HIV positive. In Ancuabe's health centre, she received counselling from staff trained by SolidarMed: «They explained to me how the risk of transmission to the baby was very low if I took the antiretroviral medication properly during my entire pregnancy. They also advised me to deliver the child at the health centre, as the hygienic conditions are better, which would also help prevent an infection.» With treatment, the risk that an HIV-positive mother transmits the virus to her children can be reduced from 40 percent to below 2 percent.

Medication protects the baby

Binte followed their advice. She went to all her antenatal appointments and was given medicine against the virus. Binte took it every day. «I didn't forget a single pill. I knew that the medicine helps maintain my health and also protects my child.» This strong woman also asked her husband to get tested for HIV in the health centre. «At first I was just grateful that he did not stop me taking the medication myself. But now I was also scared for him.» In Ancuabe, women do not have a lot of rights. Many are too scared to tell their husbands about their disease because they fear being beaten

or banished from their homes. Binte's husband did not fear stigmatisation from neighbours and began his life-saving therapy shortly after testing positive.

Binte Saide delivered a seemingly healthy baby boy called Valdemiro at Ancuabe health centre. «Immediately after the birth, the health workers gave my baby medicine to build up some protection from the virus. After that, I had to give him a syrup every day for the first six weeks.»

Lab tests give certainty

One month later, Binte and Valdemiro returned to the health centre as his HIV test was due. Diagnosing children is complicated and requires a specialised laboratory. SolidarMed facilitates the weekly transport of samples to a lab 500 kilometres away. It takes two months to receive the results. «I was very nervous during this long waiting period» Binte remembers. «At night, I could not sleep with worry, thinking that my son could also be infected».

Trembling, Binte entered the health centre, her baby on her back. She wept tears of joy when she found out that the test was negative and it had all been worth it. «It felt like I had been carrying a heavy 30 kilogram load on my head and it had finally been lifted off me. But I knew that the risk of infection hadn't been ruled out completely. Because I had to breastfeed, there was a continued risk of transmission». Despite the virus, where there is no formula milk available,

mothers are recommended to breastfeed. Mother's milk protects the babies from life-threatening diarrhoea and infections, a greater risk than the transmission of HIV. «The health workers explained how I could reduce the risk of transmission during breastfeeding. They told me I should give my son nothing but my own milk during the first six months. With my first child, I did not know any of this and only now I realise how important medical care is.»

Today, Valdemiro is 22 months old. A short while ago, he tested negative for HIV a second time. It's certain – Binte's son is starting his life without the virus.

Collated by Dr med. Jara Llenas. She has been working in Ancuabe, Moçambique as a project manager for SolidarMed since 2012.



Photo: Maurice Haas

«I've never seen anything more unjust than a baby with HIV. Help SolidarMed and give babies in Moçambique a fair chance.»
Stephan Lichtsteiner, footballer (Juventus Turin /Swiss national team)

Photo: Jara Llenas



SolidarMed protects babies from HIV

Without proper treatment, around 40 percent of babies with HIV-positive mothers are infected before, during or after birth. A range of preventive measures for the expectant mother and her child reduce the risk of transmission of HIV during pregnancy, birth and breastfeeding to below two percent.

SolidarMed strengthens 19 hospitals and 102 health centres to protect babies from HIV through:

- Antenatal care, family planning and lactation counselling
- HIV/Aids tests and counselling for expectant mothers
- Treatment for HIV-positive expectant mothers, also after giving birth
- Safe deliveries in a health facility with trained staff
- Training nursing staff to prevent mother-to-child transmission

SolidarMed combats HIV/Aids across all programmes in the project countries. Currently, more than 18'900 patients are in lifelong treatment, of which 1'477 are children and 12'600 are women. The goal of the SMART programme (SolidarMed antiretroviral therapy) is to integrate HIV treatment into primary health care. Preventing mother-to-child transmission is one of the principles of the project.

«We continue to make a name for ourselves as specialists on the subject of health in southern Africa».

In the newly published Annual Report, SolidarMed's successes and challenges in 2013 are summarised. A good moment to look back on the achievements with President Dr med. Svend Capol. But also a moment to hazard a look into the future: which challenges require particular attention? Which successes are imminent?

Mr Capol, how is Africa doing?

Ever better! The world is taking Africa more and more seriously. Africa's economic potential is universally recognised by now and opens up new perspectives for Africa's population. Unfortunately, in structurally weak areas, there are still many challenges that need to be overcome.

Nevertheless one often hears that African states are running around in circles.

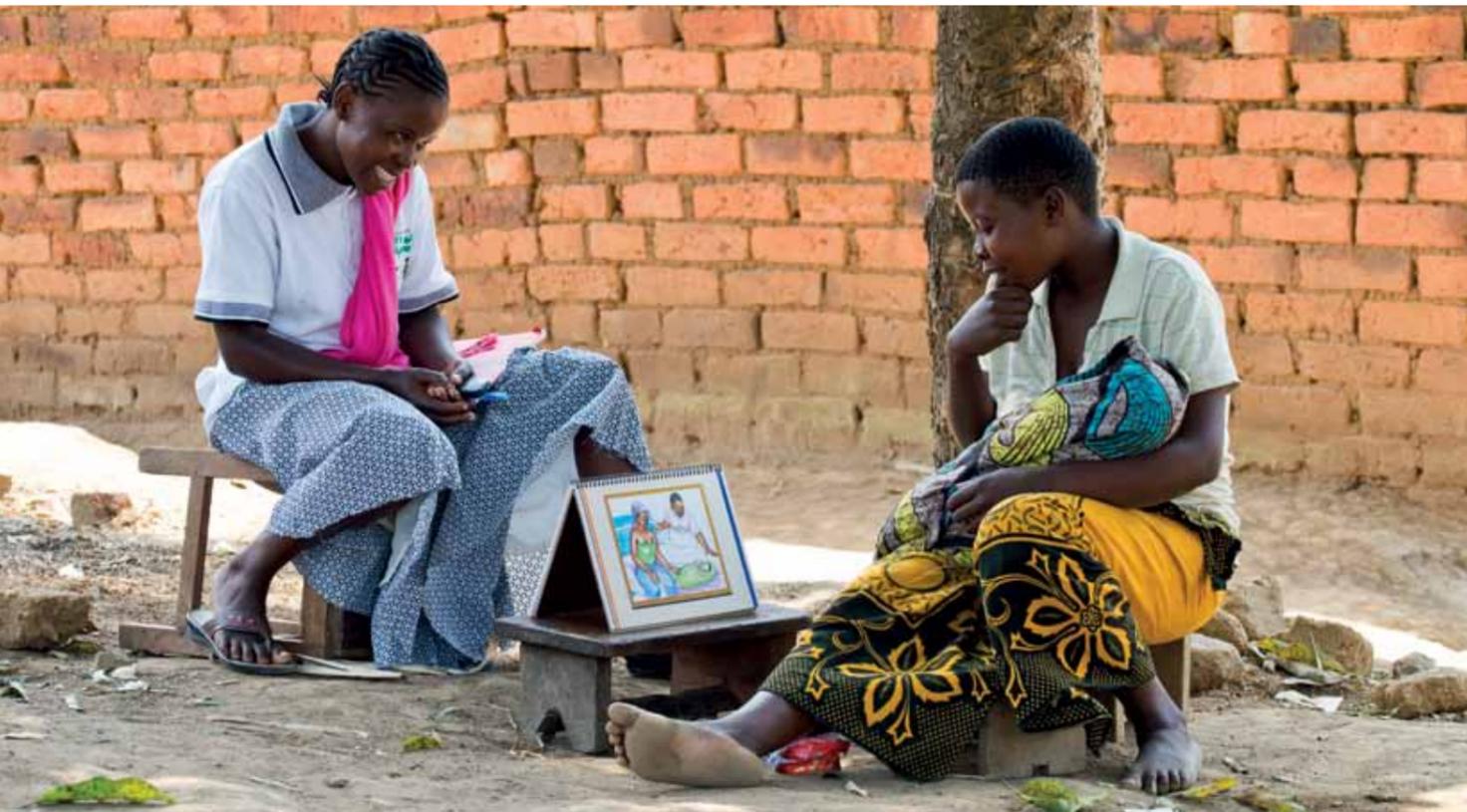
That is a typically western perspective! In African culture, issues are passed around in a circle until a joint and accepted

solution is found. In such situations, we tend to become impatient and want fast and visible successes. Yet often solutions which are imposed from the outside are not sustainable and prove unsuitable in the African context. It is important not to forget that most African states are very young. It took hundreds of years until our states were stable.

To what extent is SolidarMed's work affected by this?

From the many years of experience with local partners, SolidarMed has learnt to develop participative approaches. Thanks to this, project implementation in the field is quite successful. But sadly, weaknesses in the state system also make themselves noticed for SolidarMed: health facilities receive hardly any support, training possibilities for health workers or medical equipment are missing.

Photo: Marten Brill



How does one recognise progress in a health system?

10 years ago when I travelled through Ulanga district in Tanzania to Lugala Hospital, there was hardly anything, apart from single bananas or sugar cane, to buy along the side of the road. On my last visit, the offerings were much more colourful. You can also see it in the people. Only the healthy can plant their fields, harvest and sell their produce. And once the daily food needs are covered, it becomes possible to pay attention when it comes to topics such as malaria, tuberculosis or HIV.

Despite all the successes, for millions of people in remote areas, there is still no adequate medical care. In 2013, SolidarMed was able to improve this situation for women and their children in particular.

What is SolidarMed's contribution here?

SolidarMed opened up new perspectives for the population in the project regions. On the one hand, by imparting knowledge and through sensitisation work directly in the villages on important topics like maternal and child health or hygiene. And at the same time, SolidarMed improved primary health care in rural health centres and hospitals.

In the Annual Report, which has just been published, you describe SolidarMed's impact. How does one measure the success of a project?

Measurement systems for health projects are not always easy to develop. We work with measurable indicators, such as the proportion of medically attended births or the number of people who regularly take HIV medication. It becomes more difficult when comparative data is missing or statistics like population size are unreliable. For this reason, SolidarMed has started collecting its own data.

What did SolidarMed do particularly well in 2013?

We supported over 2'000 community health workers who are particularly important for their villages. Thanks to SolidarMed, 11'700 people discovered they are HIV positive. As tragic as this is, only with this information do they now have a chance to get treated and so escape certain death. You can learn about such achievements best from the many numbers in the Annual Report. One unquantifiable highlight was the disengagement of Wiwanana in Moçambique. This local NGO could be placed into African hands. Basically, we have continued to make a name for ourselves as specialists for health in southern Africa. The trust placed in our work is evidenced not only by government support from the Swiss Agency for Development and Cooperation (SDC) or the LED (Liechtenstein Development Service) but also the loyalty of our donors.

What do you think, how long will SolidarMed still be needed?

That is indeed a difficult question! It would be nice if I could still experience SolidarMed withdrawing completely from the projects and programmes and see locals in a position to carry on the work undiminished. As yet, the relatively young health systems still face significant challenges. First, ways have to be found to ensure proper quality health care close to the patients, with much more modest means than we have available here. Only once the people in southern Africa can exercise their right to health is SolidarMed no longer needed.

You can find an excerpt from the Annual Report on the following page. The complete Annual Report is ready for download at www.solidarmed.ch. You can also order a copy by phone on 041 41 310 66 60.

SolidarMed in numbers

Just one year after its introduction, SolidarMed's newly adapted strategy has made a clear mark. The health of mothers and children took centre stage. Over 52'000 women delivered their babies under better medical conditions.

Training and professional development of health staff

- 5 training institutions supported
- 874 medical staff received initial or further training
- 7 staff houses built
- 2 classrooms constructed
- 1 student hostel completed
- 874'000 people receive professional medical care when needed ¹

Improving health care

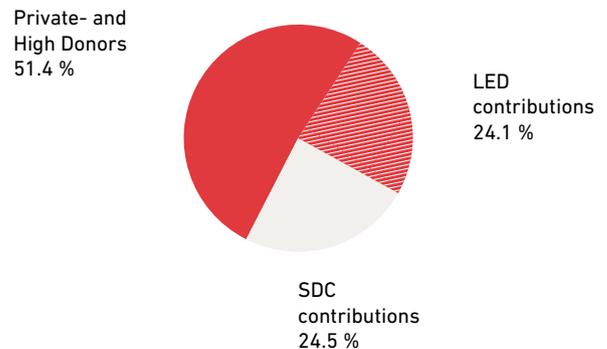
- 19 hospitals supported
- 102 health centres supported
- 1'500'000 people with improved primary health care
- 611'184 children, women and men receive out-patient care
- 52'493 deliveries under enhanced conditions
- 18'947 people receive HIV medication

Strengthened village communities

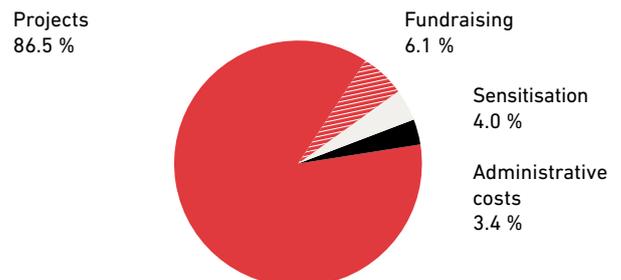
- 604 community health workers supported
- 247 health centres supported
- 15'000 mosquito nets distributed
- 192'000 condoms handed out
- 135'089 HIV tests carried out
- 51 bicycle ambulances supported
- 494'000 people given a voice at community level
- 30'200 mothers and children supported in the villages

SolidarMed stepped up its support for the training of new health workers. In total, 10 districts, 19 hospitals and 102 health centres received support, which further improved primary health care for 1.5 million people. SolidarMed promoted various complementary health initiatives in the villages. Committed groups in the population took up health topics and so carried valuable knowledge directly into the everyday life of their fellow men and women. These numbers mean health for those living under precarious conditions. They are possible only thanks to the generous commitment of our donors. Many thanks for your support!

Sources of funds in 2013



Use of funds in 2013



¹ According to the WHO, one well-trained nurse will see to the health needs of around 1000 people.