## AFRICAN MOTHERS HEALTH INITIATIVE

## A 2014 Holiday Wish

As I sat down to draft this annual letter I first imagined how it would feel to say that our services were no longer needed in Malawi. Imagine maternal deaths becoming a rarity. Imagine



vulnerable newborns entering a gentle world ready to support their special needs. What a joyous letter that would be to read. What a perfect holiday gift. Unfortunately, I am not writing that letter this year (though I do hope to write such a letter in the future). Today I am writing to thank you for your generosity and fidelity, and to ask for your support in expanding our services. For the past six years we have survived on an annual budget of approximately \$60K, but word about our work is getting out to people in need. In January alone we had 31 new admissions into our programs. We were stretched slightly beyond capacity caring for 132 babies and 57 moms over the past 12 months. Our good reputation is spreading beyond the Lilongwe District Hospital. We never want to turn a needy mother or baby away, but striving to maintain an open enrollment policy means we need more formula and fuel.

This adorable babe is Odala, his mother developed eclampsia, a dangerous disease of pregnancy which can lead to multiorgan damage and bleeding in the brain. We still don't know exactly what causes eclampsia but in the developed world woman are monitored for symptoms and the disease is controlled and/or the baby is delivered before it becomes life threathening. Unfortunately, Odala's mother lost her life. Now it is our job, in partnership with her family, to ensure that Odala survives.



## A Return Trip

This year two nurses from Austin, TX, Dehlia Gonzalez and Gabi Lyles returned to Malawi to volunteer; and they were joined by another nurse, Heather Hall. They brought medical supplies for the nurses' day packs and during their 3-week stay they traveled out to villages accompanying our nurses on their visits. The Austin nurses also led trainings for our Malawian nurses on pre-eclampsia, wound care, cardiopulmonary resuscitation, and neonatal assessment. Dehlia says she will be ready to go again in 2016. Whether you have a medical background or not, please let us know if you are interested in traveling to Malawi to participate.

A Mother in Need by Gabi Lyles, RN We were out in a village finishing a visit with the family of an orphan. The visit went well and we were packing ourselves back into the vehicle when a woman came running toward us pleading for help. We all turned towards her and waited, trying to decipher her story from her tone and body language, while she spoke with Nitta [a Joyful Motherhood nurse] in Chichewa. It turned out that she was a breastfeeding mother. She had three healthy children, all by

uncomplicated deliveries, but she had developed an infection in her breast. She drew back the cloth covering her chest to

reveal a large open wound which penetrated deep into her right breast. We provided wound care and taught her how to care for the wound herself while Nitta collected her contact information in order to follow up with her and her baby. It was stunning to simply stumble upon someone with such a desperate

need for the services of Joyful Motherhood. This speaks both to the existing demand for such services and the difficulty in accessing postpartum support through other means.

A Note on Breastfeeding Breast milk is the ideal food for babies six months and younger. Breastfeeding should continue to age two and beyond, particularly in countries like Malawi where fragile toddlers need the continued immune support and guaranteed nutrition. We firmly believe this. But, we also spend a lot of money on formula and some might construe this as a contradiction. At any moment in time more than half the babies in our case load are on formula. The reason is that our babies on formula are orphans (who have no mother) or multiples (often triplets) whose mothers cannot keep up with the growing demand of their babies. Wet nursing is strongly discouraged due to the prevalence of HIV, so formula in these cases is a life sustaining gift. Our babies could use 500 tins of formula a month but currently we can only afford about 115. A tin of formula in Malawi currently costs about \$5.

A Glance Back and a Glance Forward This year was full of good steady work by our small team in Malawi. Our nurses completed over a thousand visits to villages to check on moms, babies, and their communities. They traveled thousands of miles. Each trip retraced a personal story of a pregnant woman's struggle and hardship to reach a clinic or hospital for urgent care; each trip attempted to restore balance by providing life sustaining care; each trip was possible because of your support.

What we do is simple. We educate. We check on moms' health. We ensure babies are well fed and growing well. We care for our clients' simple needs. The problem is that these simple needs are not met elsewhere.

AMHI's requests for 2015 are funds for formula, fuel (which is over \$8/gallon) and nurse salaries. If you have talents or skills you would like to volunteer, please let us know. We have had donations of beautifully hand-knit baby sweaters and dolls as well as donations of time by varied professionals. All contributions are received with deepest gratitude.

Thank you for your support We appreciate your continued commitment to stand with us and the vulnerable mothers and babies in Malawi. May the blessings you share return to you in bounty. From all of us at AMHI, our board of directors, the Joyful Motherhood staff, and our community of beneficiaries, we wish you a happy and blessed holiday season.

Jehnwaula

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