



**Scotland Malawi Partnership: Zoom meeting no.5**  
**Wednesday 3<sup>rd</sup> June, 1-3pm UK time / 2-4 Malawi time**  
**SUMMARY OF MEETING**

Around 80 organisations and key individuals across Scotland and Malawi joined this, the fifth in our series of Zoom meetings looking at the impact and response to the Covid-19 crisis. For full details about all the SMP's Covid-19 work, visit: [www.scotland-malawipartnership.org/covid-19/](http://www.scotland-malawipartnership.org/covid-19/)

**You can watch a full recording of this meeting, here: [www.youtube.com/watch?v=GVhHYhaaUiQ](https://www.youtube.com/watch?v=GVhHYhaaUiQ)**  
**There are time stamps to help you quickly find the area you are interested in, just click 'Show More' at the bottom of the page and then click the agenda item of interest.**

The meeting provided a space to:

- listen to our members in Scotland and partners in Malawi,
- give a clear sense of the impact of the virus in Malawi,
- share information and updates about who is doing what,
- support shared learning and future collaborative working,
- support, promote and connect the various fund-raising appeals,
- share information about what the SMP is doing so far and explore what more we can do.

The agenda was designed around requests and submissions made by members when signing-up for the meeting. The meeting was split into five main sections:

**Section 1: High-level Malawi updates: (13.00 - 13.25 UK time / 14.00 - 14.25 Malawi time)**

This section looked to brief members on the situation in Malawi by listening to and asking questions of: Dr Charles Mwansambo (Chair of the Health Cluster of the Government of Malawi's COVID-19 Response & Chief of Health Services), representatives of the College of Medicine, and other key stakeholders actively involved in the Malawian Covid-19 response.

**Section 2: Key topic areas: (13.25 – 14.00 UK time / 14.25 – 15.00 Malawi time)**

This section identified the seven main agenda items proposed by members in booking places: understanding the political context; PPE availability and production; testing; public messaging; how faith links can/are supporting; how those with disabilities, the marginalised or vulnerable are affected; and youth and schools, and safeguarding. Unfortunately, the Deputy Head of DFID Malawi was not able to join, as she had hoped, due to personal circumstances on the day but she hopes to join the next meeting.

**Section 3: Partnership and Practicalities: (14.00 – 14.20 UK time / 15.00 - 15.20 Malawi time)**

Here we will discussed the implementation and promotion of the agreed *Principles of Good Practice*, for both practitioners/NGOs and funders. We discussed practical challenges and heard questions from members, including how to pivot/adapt existing work, what is appropriate to continue, and what support there is for those with funding challenges.

**Section 4: Open Sharing: (14.20 – 14.45 UK time / 15.20 – 15.45 Malawi time)**

This was an open space for organisations who have registered a wish to, to share information about their response to Covid-19, and for those managing fundraising appeals to give the group updates. There was also open time for Q&A.

**Section 5: Next steps: (14.45 – 15.00 UK time / 15.45 –16.00 Malawi time)**

This final section looked to agree three key recommendations the SMP has for its members. It updated members on what the SMP and MaSP have done to date, and asked what else our networks could/should be doing, and it will agree next steps.

## **HIGH-LEVEL MALAWI BRIEFING:**

### **Dr Charles Mwansambo (Chair of the Health Cluster of the Government of Malawi's COVID-19 Response & Chief of Health Services):**

There were 22 new cases yesterday (2<sup>nd</sup> June), with 358 in total. There are 303 active cases, 51 resolved and there have been four known Covid-19 deaths, to date. 5,505 tests have been conducted so far.

There are concerns about a potential spike in cases amongst those returning to Malawi from South Africa, and the government is actively working to manage this.

The Government of Malawi continues to actively promote social distancing (following the WHO's recommended 1-meter distance), hand washing and basic hygiene measures, and the use of face masks.

### **Prof Mwapatsa Mipando, Principal of the College of Medicine:**

There are three sub-committees, beneath the main Task Force, with meetings every evening in the situation room, and daily planning. Research proposals relating to Covid-19 continue to be expedited.

The College and the Government are receiving support from a wide range of sources, including fuel companies and banks. The College is working to provide evidence to inform government decision-making.

Key areas of activity at present include:

- MUST (Malawi University of Science and Technology) is producing hands-free taps and shields.
- Mzuzu University is producing sanitizers.
- The College of Medicine is working with the University of Glasgow on related research, with the University of Edinburgh on mental health impacts, and is producing hand sanitizers for Queen Elizabeth Hospital.
- The Polytechnic is designing and making face shields with the Blantyre DHO.
- The Malawi Bureau of Standards is making sure gowns meet required standards.
- The aim is to have testing in every district.
- An oxygen generation plant has been set-up from South Africa – this is a major development.
- There is increasing IT support on tracking and tracing

Prof Mwapatsa Mipando hopes to have a major virtual academic conference and the College of Medicine is early in the planning for this. He hopes to work closely with Scotland on this.

## **QUESTIONS AND ANSWERS:**

### **Dr Charles Mwansambo and Prof Mwapatsa Mipando were asked about:**

#### **Social distancing in the context of mass rallies in the run up to the 23<sup>rd</sup> June election:**

This is proving a major challenge. They are encouraging political leaders to support social distancing, but this is proving extremely hard. However, they are keen not to give up.

#### **Returnees from South Africa leaving quarantine early:**

This was not a quarantine centre but an area to wait until test results came back. Some choose to leave before their tests were back, but the Government had contact details for most people. A challenge has been when returnees don't have local telephone numbers. The government is looking to increase its surveillance systems.

#### The impact on refugees and those with disabilities:

The Government of Malawi is committed to the principle of leaving no one behind.

#### Challenge of messaging to rural communities:

The court injunction against a national lockdown was a major set-back in terms of messaging. The Government continues to do all it can to get the key messages to rural and remote communities.

#### Schools re-opening:

The date of 13<sup>th</sup> July for schools re-opening is still provisional and will only go ahead if conditions are met. They will need to see what input these new cases from South Africa have had before finalizing this date.

#### Resourcing of hospitals:

No hospital can ever be 100% ready for something like this but there is a high degree of preparedness. There were PPE shipment issues, but these have mostly been resolved. There continue to be HR challenge. Malawi's response is different to the western model, it is less reliant on ventilators

#### Availability of PPE in rural areas:

There is limited formal PPE but home-made PPE is important. Home-made, chitenje face masks have the advantage that they are easy to wash, unlike disposable masks which might be re-used inappropriately.

**Both Dr Charles Mwansambo and Prof Mwapatsa Mipando highlighted their time in Scotland and thanked for the support Malawi continues to receive from its partners in Scotland. Dr Peter West, Malawi Hon consul to Scotland, added the thanks of the Malawi High Commission to the SMP for its work hosting these meetings.**

### **UNDERSTANDING THE POLITICAL CONTEXT:**

Vera Kamtukule, Chief Executive of MaSP, gave a briefing on the political context in Malawi in the run up to the re-run Presidential election, most likely on the 23<sup>rd</sup> June or early July. There continue to be large crowds with no effective social distancing. Covid-19 messaging is often falling on deaf ears.

Prof Mwapatsa Mipando noted there were also mass gatherings at funerals, highlighting cultural factors influencing how the virus will spread. Politicians are not taking the situation seriously. The economic impact is also seeing businesses re-opening as normal.

### **FAITH-BASED LINKS:**

Eve Hartswood gave an update from the SMP's faith-based Covid-19 working group, giving a picture of the challenges faced and how faith-based groups in Scotland are working with their partners in Malawi. Examples were given of:

- Efforts to promote health messages in rural areas
- A radio programme produced with Blantyre synod
- Sharing learning between Scotland and Malawi
- New prayer resources and advice

Rev Connex Ijalasi spoke about J-Life Ministry's work with The Kerusso Trust, working with 22 Chiefs and community leaders to influence community adoption of prevention measures.

Faith-based links allow us to use existing and longstanding relationships, with high degrees of mutual trust and understanding, to help disseminate messaging in Malawi through faith networks.

## **IMPACT ON THOSE WITH DISABILITIES:**

Action Amos of Epilepsy Movers in Malawi gave an update on the impact of Covid-19 on those with disabilities in Malawi. He highlighted there was very poor messaging to those with disabilities, with no sign language or braille being used. Those with disabilities were very reluctant to visit health centres as a result of Covid-19.

Longstanding issues in Malawi, such as the lack of medication, are being exacerbated by Covid. Social distancing is especially hard for those with disabilities.

The partnership with the University of Edinburgh is proving very supportive to help address some of these issues.

Olivia Giles of 500 Miles was not able to join the call but gave a written input. 500 Miles was determined to keep their clinics open if possible but two-thirds of those they would have been supporting have not been able to visit. Everything is being made more difficult by Covid. The restrictions are compounded for those with disabilities.

## **SAFEGUARDING:**

Vera Kamtukule gave an update on MaSP's safeguarding work, highlighting the course they are offering, 15-18 June in Malawi, to help Malawian organisations understand safeguarding good practice. Full details are available on the Malawi Scotland Partnership website and Facebook page, and further resources are available on the website.

Philippa Ramsden, of Scotland's International Development Alliance, highlighted Safeguarding resources now available and expressed concern that Covid might be causing safeguarding, which has been such a high priority for so many in recent years, to slip down the agenda.

## **PRINCIPLES OF GOOD PRACTICE:**

David Hope-Jones, Chief Executive of the SMP, reminded stakeholders of the [Principles of Good Practice](#) in responding to Covid-19, which were agreed by this group after extensive consultation. David highlighted that there has been support for these principles from a number of funders. DFID and the Corra Foundation are to be congratulated for working within these principles, helping funded organisations adapt to the new environment in an agile and supportive manner.

Mike Beresford emphasized the need for two-way sharing and help; Dr Anne Phoya emphasized the importance of flexibility and understanding from funders; and Tim Eden highlighted the extremely serious financial challenges many charities are under.

## **RESILIENCE AND ADAPTATION:**

Examples of resilience, adaptation and pivoting were shared between stakeholders. Prof Heather Cubie highlighted how their cervical cancer screening programme has responded. Susan Flynn of Chifundo UK expressed concern at the lack of support for international charities compared to domestic charities and shared the new methods of fundraising they are adopting. Daisy Belfield Santos of Rare Charity highlighted the success they have had making direct asks for funding from previous supporters – there has been a willingness to help.

### **SMP RECOMMENDED THREE ACTIONS:**

David Hope-Jones explained the SMP was keen to offer, particularly its small and medium members, clear advice about what they could be doing with to support their partners in Malawi. The Principles of Good Practice give more detailed steers, particularly aimed at those already involved, but the SMP is keen to have three simple, sharable things all members can do: a clear and compelling call to action.

Having spoken with stakeholders and DFID Malawi, the SMP is currently considering the below three recommended actions:

- 1) **Support the dissemination of key messaging:** supporting partners in Malawi to put up posters in busy areas relating to social distancing and hand washing.
- 2) **Support the distribution, production and use of PPE**
- 3) **Support access to, and use of, practical hygiene equipment,** including buckets, soap and water access

Everyone was invited to feed in to these points by emailing [David@scotland-malawipartnership.org](mailto:David@scotland-malawipartnership.org).

### **OPERATIONAL UPDATES:**

- Operational updates from NGOs and appeals were given from:
- Mike Beresford of the Zambesi Trust
- Ruthie Marcus of AMECA
- Susan Flynn of Chifundo UK
- Mary Popple of JTS

Dr Anne Phoya asked that all those involved in helping source and distribute PPE share details with MaSP, as she sits on the national Covid-19 Task Force, and it is important to receive this information to help coordinate and prioritize.

### **THANKS:**

Stuart Brown, SMP Deputy Chief Executive, was thanked for Chairing the meeting so admirably; Dr Charles Mwansambo and Prof Mwapatsa Mipando was thanked for their extremely useful updates; and all participants were thanked for making the time and sharing so openly.