

## Progress Report for 2010 and Plans for 2011

The Zimbabwe Network for Health in Europe (Zimhealth-Europe) is pleased to bring you an end-of-2010 progress update. First, we would like to summarize for you the latest information on our first two projects, Mbare Polyclinic in Harare and Pelandaba Polyclinic in Bulawayo. This will be followed by a summary of our new projects and some of the various activities carried out by the ZimHealth Executive Committee throughout the year 2010.

### I. Projects 1, 2, 3 & 4

It was towards the end of 2008 that ZimHealth adopted Edith Opperman Maternity Hospital, within Mbare Polyclinic complex in the City of Harare, as its first project. Pelandaba Polyclinic in Bulawayo was adopted as the second project. The Bulawayo city authorities included Thorngrove Infectious Diseases Hospital as part of their request. Subsequently, it was pointed out to us that strengthening the Edith Opperman Maternity Hospital without equipping the main referral centre, the Harare Maternity Hospital, to which complicated deliveries would be referred did not make much sense.

#### Project 1: Edith Opperman Maternity Hospital, Mbare, in Harare

**Mbare Polyclinic** is centrally located in one of the country's highly populated residential suburbs. With a catchment population of approximately 135, 400 the polyclinic provides maternity services at its Edith Opperman Maternity Hospital and other primary health-care needs not only of its Mbare catchment area but also of people from other Harare suburbs and the rural areas. This is primarily because the complex is situated a short distance from the main bus terminus to rural areas and other parts of the city. The Edith Opperman Maternity Hospital is one of the country's longest standing maternity homes in the country. Many Zimbabweans were born there and one can safely say that Edith Opperman has become a household name when it comes to maternity homes. With a bed capacity of 30 the clinic delivers an average of 350 babies per month.



Buses visible from within the Mbare Polyclinic complex

The Mbare project was supplied with both medical and non-medical items in three phases. Funds raised from ZimHealth members in Europe, the United States of America and Africa enabled the first procurement in May 2009 amounting to US\$ 12,441.94, including freight and insurance. The items were

exempt from duty by the authorities in Zimbabwe with the support of the Zimbabwe Ministry of Health and Child Welfare – a feature that has become the standard for all ZimHealth donations. The goods were officially handed over to the City of Harare on 30 July 2009. Some of the people who were present at the ceremony were the Zimbabwe Minister of Health and Child Welfare, the Mayor of the City of Harare, city councillors, the Swiss Ambassador to Zimbabwe, administrators and other officials and nursing staff. Zimhealth-Europe and ZimHealth-USA were represented by Francis Ndowa and Daniel Makuto.

The items donated included a state-of-the-art newborn resuscitator, several blood pressure machines (sphygmomanometers), glucometers, linen, kitchen equipment and bathroom scales. In September 2009, with a donation from the City of Geneva of 15,000 Swiss francs, ZimHealth was able to procure the second consignment worth US\$ 14,837.23, which was delivered in October 2009. Part of a generous donation of US\$ 50,000 from The Oak Foundation in Geneva enabled the procurement of the third, and final, consignment in October 2010 amounting to US\$ 25,840.16. A full list of items procured for the clinic can be viewed on the website, <http://zimhealth.org/projects/mbare-procurement-list/> showing that the total amount spent on this clinic by ZimHealth was US\$ 53,119.33. Of this amount, US\$ 22,837 was from the donation from the Oak Foundation, 15,000 Swiss francs (approximately, US\$ 13,050) from the City of Geneva and the rest, US\$ 17,232.33 (32.4%) was from the regular donations made by the members of ZimHealth in Geneva, USA and Africa.

Throughout the whole process, several visits were made to the clinic by members of Zimhealth-Europe to track progress and make sure the needs were being met (details can be found on the website under the ZimHealth Gallery section, <http://zimhealth.org/gallery/>).

Not only was Zimhealth successful in meeting almost all of the clinic’s clinical requirements, but it also acted as a catalyst for other social humanitarian organizations to act and support the clinic, including extensive renovations by the City of Harare itself. Thus, a synergetic outcome ensued where the City of Harare renovated the clinic’s flooring, walls, ceilings, toilets and bathrooms and ZimHealth and other donors supplied equipment and medicines. During the visits by representatives from ZimHealth, reports were received of donations from others such as the Red Cross and Red Crescent Society in Zimbabwe which supplied hospital bedside cabinets for inpatients, among other things. There were other benefactors already as well providing the clinic with medicines and safe drinking water, which meant ZimHealth did not have to worry about these areas of commodities for the clinic.

The image of the clinic has changed dramatically; it has turned into a pleasant clinic to see and such an attraction for users that when visited in October 2010, the number of deliveries per month had increased in 2010 as follows, 309 in January, 315 in February, 322 in March, 359 in April, 352 in May and jumped to 442 in June 2010. The ambiance of the clinic and the warmth and smiles of welcome from staff and clients alike are often attributed to the donations and renovations. This project has become a

good reflection of how important it is for everyone to play their part however small or big – when pooled together, the resources go a long way to make an impact!

## **Project 2: Pelandaba Polyclinic, in Bulawayo**

**Pelandaba Polyclinic** provides primary health and maternity care services to a catchment population of about 37,500. It is situated in the south-western Zimbabwe city of Bulawayo. This Polyclinic plays such a big role in providing health services that the authorities in the City of Bulawayo identified it as the priority project for ZimHealth.

This project was responded to in four phases. The first shipment of clinical materials dispatched in October 2009 was worth US\$ 9, 653.12. The funding for this consignment was from the contributions made by the members of ZimHealth, supplemented by a very successful first ZimHealth fundraising event held in Geneva on 3 October 2009. The supplies included, dental syringes, gloves, sphygmomanometers, an autoclave, wheelchairs, linen for the maternity unit, an electric generator and laundry equipment. A full list can be seen on the website, <http://zimhealth.org/projects/pelandaba-procurement-list/>. The second shipment worth US\$ 11, 712.03 followed in April 2010. This one contained items such as medicine trolleys, kitchen equipment, suction machines and fluid resistant mattresses. One of the special items in this consignment was a baby resuscitator sponsored specifically by Arjuna Sivakumaran who raised 2,095 Swiss francs (approximately US\$ 1,976) in support of ZimHealth-Europe by successfully running a half marathon in Edinburgh in March 2010. The third shipment was in May 2010, valued at US\$ 15, 423.31. This shipment was of a state-of-the-art Belmont Economy Clesta II dental chair with a 4-way foot switch for chair operation and other dental accessories. Part of the funding for the dental chair was from a donation of US\$ 5,000 made by the Assistance Abroad Committee at John XXIII Parish in Geneva. Also included in the third consignment was an Adec Doctor's stool at US\$ 1,171.60 funded through the grant made by the Oak Foundation. The fourth shipment was done two months later in July 2010, worth US\$ 24,177.13, enabled entirely by a grant from the Oak Foundation. The items in this final consignment included HB meters, counterpanes (bedspreads), latex gloves, glucometers, dental syringes, gauze rolls, linen, X-ray films, rechargeable torches, wheelchairs, a television and DVD player, as well as tearoom chairs for staff and patients.

Again, throughout the process, visits were made to Pelandaba clinic by members of ZimHealth, including the first one on 13 January 2010 when the handover ceremony was held at the Pelandaba Clinic, attended by the Mayor of the city of Bulawayo, city councillors and a representative of the Minister for Health and Child Welfare. The Zimbabwe Network for Health in Europe (ZimHealth-Europe) and ZimHealth-USA were represented by Lorraine Mangwiro.

Although ZimHealth has now concluded the procurements for Mbare and Pelandaba Polyclinics, we remain cognisant of the fact that there may be a need to return to these clinics from time to time to reassure ourselves that what has been provided continues to provide the people with quality health

services. For now, ZimHealth would like to thank all its supporters who have made this milestone possible. Mbare and Pelandaba Polyclinics will be a solid demonstration of what Zimbabweans and friends of Zimbabwe can achieve with both small and large donations. ZimHealth members and supporters can draw confidence from this achievement to keep moving forward towards our goal of a better, efficient, high quality and easily accessible health-care system for Zimbabweans.

### **Project 3: Thorngrove Infectious Diseases Hospital, in Bulawayo**

**The Thorngrove Hospital** in the city of Bulawayo is an isolation hospital for the accommodation and treatment of people suffering from infectious diseases. It caters not only for residents of the city, but also provides care for patients from the southern region of the country. Built in 1941, it holds 200 inpatient beds. The hospital, however, is in need of refurbishment, clinical materials and equipment. A request received from the authorities in Bulawayo listed items such as bed sheets, pillows, blankets, hospital gowns, an autoclave, television sets and DVD players, and an industrial washing machine.

ZimHealth took on this project at the same time as the Pelandaba Polyclinic in 2009, but was not able to procure the items until December 2010. The items which have just been procured make up almost the entire list of items requested and amounted to US\$ 34,104.60. This procurement was enabled by a grant of 40,000 Swiss francs (approximately US\$ 39,870) made by the City of Geneva to ZimHealth-Europe, split between Thorngrove Hospital and Harare Central Hospital (see below). The items are due for delivery in Bulawayo soon.

### **Project 4: Harare Maternity Hospital, Harare Central Hospital, in Harare**

**Harare Maternity Hospital** is situated in the suburb of Southerton in Harare. It is the largest referral maternity unit in the country and forms part of the largest referral hospital in the country, the Harare Central Hospital. The Harare Maternity Hospital caters mostly for low income patients and has had severe shortages of equipment and supplies in the last few years.

The Maternity Hospital has 80 beds and handles approximately 1,200 deliveries per month and sees about 120 women per month for postnatal care. The maternity hospital also has 50 beds for gynaecological emergencies and other elective procedures.

In view of its central role as a major referral hospital, ZimHealth agreed to take it on board as one of its projects following requests from the authorities at the hospital. One of the major arguments put forward by the officials at the hospital was that ZimHealth should note that even the Edith Opperman Maternity Hospital has to refer its complicated maternity cases to Harare Maternity Hospital, and it would not be prudent not to equip such a centre to handle the referrals!

ZimHealth received the official request from the Harare Maternity Hospital in November 2010. The list of items requested consisted of a *Dilatation and Curettage Set*, *Vesico-vaginal fistula instruments* and other obstetric and gynaecological items. The items requested were quoted at US\$ 15,236.58.

ZimHealth has processed the procurement and the goods should be delivered soon to the Harare Maternity Hospital. Funding for this consignment was made possible by a recent grant of 40,000 Swiss francs (approximately US\$ 39,870) made to ZimHealth by the City of Geneva (see under Thorngrove above).

The items for Harare Maternity Hospital and Thorngrove Hospital came to a total of US\$ 49,341.18. The grant received from the City of Geneva was approximately US\$ 39,870. The remainder of the funds, about US\$ 9,471, came from the regular donations made by ZimHealth members (Table 1).

The other items requested by the Harare Maternity Hospital included a gynaecological laparoscopy set. Laparoscopy is a type of surgery that uses a thin, lighted tube put through a cut in the abdomen to look

**Table 1. Indicative totals of contributions and grants made and spent on ZimHealth Projects 2009-2010<sup>1</sup>**

Funding Source	Edith Opperman	Pelandaba	Harare Maternity Hospital	Thorngrove Hospital	Total spent per contributor US\$	Balance
ZimHealth Members	17,232.33	32,336.86	5,366.58	4,104.60	59,040.37	Treasurer's report 2010
City of Geneva	13,050.00	-	9,870.00	30,000.00	52,920	0
Oak Foundation	22,837.00	25,348.73	-	-	48,185.73	1,814.27
St John XIII Parish, Geneva	-	5,000.00	-	-	5,000	0
<b>Project Total Costs US\$</b>	53,119.33	62,685.59	15,236.58	34,104.60	<b>165,146.10</b>	

at the internal abdominal organs or the female pelvic organs. Laparoscopy is used to find problems such as cysts, adhesions, fibroids and infection without having to open up the abdomen. Tissue samples

<sup>1</sup> Please note that Table 1 only gives an approximate breakdown of contributions made by ZimHealth members globally and grants received from major supporters of ZimHealth from 2009 to the end of 2010. The figures are based on invoices of procurements and purchases. These figures will be subject to some adjustments in the process of compilation of the Treasurer 2010 financial report. More accurate and audited figures will be made only from the Treasurer's report which will be presented at the AGM in February 2011.

(biopsies) can also be taken through the tube at the same time. The equipment used to perform such a procedure is a laparoscope. However, a laparoscope is a very expensive item estimated to cost well over US\$ 150,000. ZimHealth has put this request on hold on account of its limited budget, but will actively explore other channels for the hospital to acquire it.

## II. ZimHealth – the next phase: Projects 5, 6 & 7

ZimHealth has received requests from three more institutions in Zimbabwe. One is from the city of Mutare, in the eastern border of Zimbabwe. The other request is from Masvingo, a town in south-eastern Zimbabwe, close to Great Zimbabwe, the national monuments from which the country takes its name, and the last request comes from Gweru city, situated almost in central Zimbabwe.



As a visual aid, the map above indicates the location of the projects being supported by ZimHealth, or for which plans for support are under way. The two projects in Harare city, namely Edith Opperman Maternity Hospital and Harare Maternity Hospital, have already received support, as have the two institutions in Bulawayo (Pelandaba Polyclinic and Thorngrove Infectious Diseases Hospital). ZimHealth will embark on Sakubva Polyclinic in Mutare, three clinics (Mucheke, Rujeko and Runyararo) in Masvingo and Mkoba Polyclinic in Gweru in that order as resources become available during 2011.

Summary profiles of the new clinics are as follows.

### **Project 5: Sakubva Polyclinic, in Mutare**

**Sakubva Polyclinic** is situated in one of the oldest, densely populated suburb of Sakubva and provides an impressive array of health services to its inhabitants. The polyclinic also provides key services to the population of the city of Mutare as a whole. For example, this clinic provides *Provider Initiated Testing and Counselling of HIV infection*, and the complex also houses the central pharmacy for all the clinics in the city. Most importantly, all patients on antiretroviral (AIDS) treatment collect their medicines from this central pharmacy. The pharmacy is also responsible for procurement of all medicines, including antiretroviral (ARV) drugs. ARVs are offered free of charge to patients as the government of Zimbabwe has received funding for AIDS treatment through The Global Fund to Fight AIDS, Tuberculosis and Malaria. In addition, all patients confirmed with tuberculosis (TB) are referred to this polyclinic, from private and public institutions alike, including private general practitioners, for registration and notification to the Ministry of Health and Child Welfare. Patients are then sent to their local clinics to receive directly observed treatment (DOTS) and at the end of 2 months intensive phase of TB treatment, as well as at the end of the intensive phase treatment, they come for review at this clinic. There are other services, too, provided at this clinic, including maternity and family planning services as well as the provision of outpatient care for both minor and serious ailments which do not need admission into hospital. The full range of services provided at this clinic can be viewed on the ZimHealth website under “Clinic Profiles” which can be found under Projects, <http://zimhealth.org/projects/>.

### **Project 6: Mucheke Mazoredze, Rujeko, Runyararo clinics, in Masvingo**

The City of **Masvingo** has a fascinating history. Although not the subject of this report, suffice it to say that it is the oldest urban settlement in Zimbabwe! It has a population of approximately 100,000 people. Due to its location, where it is equidistant from Zimbabwe’s major cities of Harare, Bulawayo, Mutare and Beitbridge, it has grown to be an important distribution and communication centre in Zimbabwe. Its major economic base is mining, cattle ranching and agriculture.

It is not surprising, therefore, that the Masvingo City Health Department authorities have asked for assistance to cover three clinics of the *Curative Section* of the Health Department, consisting of two primary health care clinics, namely **Rujeko** clinic and **Runyararo** clinic and one polyclinic, the **Mucheke Mazoredze Polyclinic**. The Polyclinic has an establishment of 12 trained nurses, 14 auxiliary staff and five ambulance drivers, and it houses 40 inpatient beds. The three clinics together process approximately 2,400 patients per month.

The items requested for these clinics are being processed and quotations obtained. As soon as they are available, the profile of the services and the requirements will be available under projects on the website.

## **Project 7: Mkoba Polyclinic, in Gweru**

The City of **Gweru** serves a population of approximately 158,000 people according to the 2002 population census. Gweru City Council runs 10 health facilities, including four polyclinics, three primary health care clinics, one Infections Diseases Hospital as well as two centres for pre- and post-test counselling for HIV infection. The biggest of the health facilities is **Mkoba Polyclinic** which is situated in the high density residential area of Mkoba 13. The polyclinic offers primary health care services, including treatment of minor and serious outpatient diseases and conditions, immunisation, family planning services, maternity care, mental health care and youth health services.

Of significance is that since 2007 Mkoba Polyclinic has been providing maternity services for other residential areas, such as Mkoba 1 catchment area, following closure of Mkoba 1 maternity unit due to a shortage of resources, particularly midwives. The extra population served from Mkoba 1 catchment area means that Mkoba Polyclinic grapples with a cumulative population of approximately 86,000 instead of its usual catchment population of about 48,000. The burden of HIV infections has also meant that the clinic is overstretched in terms of medicines and facilities to provide adequate health care. This has impacted negatively on the motivation of nurses who are working without basic resources.

The Mkoba Polyclinic handles 3,000 attendances per month and 110 mothers are delivered per month, with approximately 114 monthly postnatal attendances. The clinic has approximately 7,000 people collecting ARVs per month and 200 collecting treatment for tuberculosis. The clinic also sees about 160 people per month for sexually transmitted infections other than HIV infection.

The requirements for the Mkoba Polyclinic are being processed and will be made available soon on the ZimHealth website.

## II. The ZimHealth Executive Committee

The ZimHealth Executive Committee has been busy throughout 2010. It has held planning meetings regularly once every month, alternating between a weekday evening and a Saturday afternoon to



ZimHealth Executive Committee meeting in Versoix

enable members further away from Geneva to attend during the day time at times. Various sub-committees, such as the fundraising sub-committee, the procurement sub-committee, the publicity and entertainments sub-committee and the secretariat, have met in between these monthly meetings for further planning of specific activities and events, report writing and mobilising resources. The main



January 2010: Visit to Pelandaba Polyclinic and attending handover ceremony by Lorraine Mangwiro

Executive Committee meetings are held in Versoix in the meeting room offered at no charge by the Geneva Foundation for Medical Education and Research (GFMER).

Additionally, throughout the year, some members of the Executive Committee have visited the projects in Harare and Bulawayo, taking some time off either their vacation or travel on other business. On



January 2010: Visit to Mbare Polyclinic/Edith Opperman by Lorraine Mangwiro

December 14, 2009 and 17 January 2010 Shiva Murugasampillay and Elizabeth Mason visited Mbare Polyclinic and also held meetings with the City of Harare Director of Health services and administrators. On December 21, they visited Bulawayo and met with the Assistant Director of Health services and the Chief Nursing Officer and other staff at Pelandaba Polyclinic.

In January 2010, Lorraine Mangwiro was at Pelandaba clinic for the official handover of the first consignment to the clinic. Lorraine interacted with officials in the city, including the Mayor of the City of Bulawayo. Lorraine also paid a visit to the Edith Opperman Maternity Hospital in Harare at the same time.

In April 2010 Ian Menzies was at the Mbare/Edith Opperman complex in Harare and discussed future plans for the clinic with the City of Harare Director of Health Services, and delivered the stencils to be used to brand the items donated by ZimHealth. He noted at that time that the Edith Opperman Maternity Hospital had been temporarily closed as structural renovations to the complex by the City of Harare had commenced.



April 2010: Visit to Mbare Polyclinic/Edith Opperman by Ian Menzies

In July 2010, Francis Ndowa called on Mbare Polyclinic/Edith Opperman and witnessed the ongoing structural renovations of the clinic which had been embarked on by the City of Harare. Another opportunistic visit was made by Francis in September 2010 during which time the renovations were almost completed and the hot water geysers donated by ZimHealth had been mounted.



July 2010: Visit by Francis Ndowa to Mbare Polyclinic/Edith Opperman; Right: Albert Ndowa (local ZimHealth supporter) starts branding the items donated by ZimHealth



Left: July 2010 Nursing Sister Sakupwanya demonstrates the branded baby resuscitator;  
Right: October 2010 Francis showing the branded, mounted hot water geyser

In August 2010 Bianca Mathe visited the Pelandaba Polyclinic in Bulawayo where she met the staff at the clinic and she was able to confirm use of the donated items. With the help of staff, she started branding the large items and linen with the ZimHealth logo. Bianca also identified a local ZimHealth supporter willing to follow up on issues on behalf of ZimHealth.

The Executive Committee is compiling a calendar of visits to Zimbabwe for 2011 to enable it to continue monitoring the progress being made at the clinics that are supported by ZimHealth.



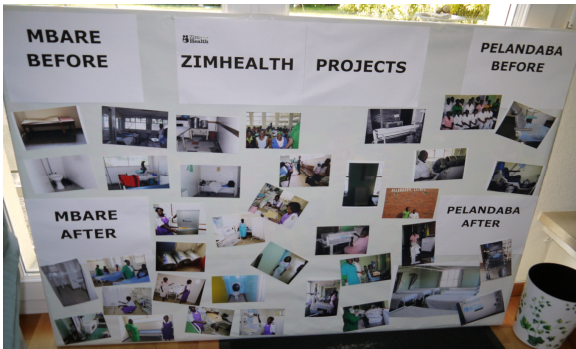
August 2010: Bianca and staff at Pelandaba clinic in Bulawayo



August 2010: Visit by Bianca with photos of Roller iron in use (above) and one of the 4 wheelchairs donated (right)



On 2 October 2010, the Executive Committee, with the help of a number of volunteers, organised a fundraising event in Geneva. The event served not only to inform the supporters that came to the event, but also served to show the ZimHealth supporters the difference made to the health facilities in Mbare and Pelandaba by the contributions from ZimHealth. A display of the situation before and after the interventions by ZimHealth at each of the two projects was mounted and proved to be popular with people.



The fundraising event, as depicted pictorially above, informed people of the difference being made on the ground, supplied a bar (top right) and conducted an auction of Zimbabwean arts and crafts and fielded a Zimbabwean musician (centre left and right, respectively). The evening was concluded by some serious dancing (bottom left and right).

The Executive Committee wishes to thank all its members and other supporters and well wishers for the trust and confidence bestowed upon it. ZimHealth wishes to bring to the attention of its members that February 26, 2011 is the date of the Third Annual General Meeting of the Zimbabwe Network for Health in Europe (ZimHealth-Europe). At the AGM, a progress report and the treasurer’s report will be delivered to the audience. The new projects mentioned above will be presented for discussion in more detail and advice and endorsement will be sought from the AGM. At the same time, the portfolios of the entire Executive Committee will be open for election of new members. The Committee invites all its members to attend and elect the next Executive Committee to carry this worthy cause forward.

The Executive Committee looks forward to seeing you at the AGM. The venue will be announced with the official invitation to the AGM.

Report prepared by Francis Ndowa and Vicky Chabarika, January 6, 2011.

The Zimbabwe Network for Health (ZimHealth) in Europe is a non-governmental association registered in Geneva, founded by Zimbabweans as a non-profit organisation. It seeks to mobilise the support of Zimbabweans living in Europe, as well as other interested individuals, agencies and development agencies to strengthen health-care services in Zimbabwe.

ZimHealth seeks to make a difference in Zimbabwe primarily through the following:

- Raise funds directly from Zimbabweans in the Diaspora, in Zimbabwe and from friends of Zimbabwe all over the world.
- Through a transparent and highly targeted system, procure and distribute drugs, diagnostics, vaccines and other medical and non- medical commodities and essential equipment to rehabilitate the health facilities in Zimbabwe.
- Inform and engage interested stakeholders about the needs, successes and impact of the support to the health-care system in Zimbabwe.

**Check out the website and the Photo gallery and see what a difference we have made so far!**