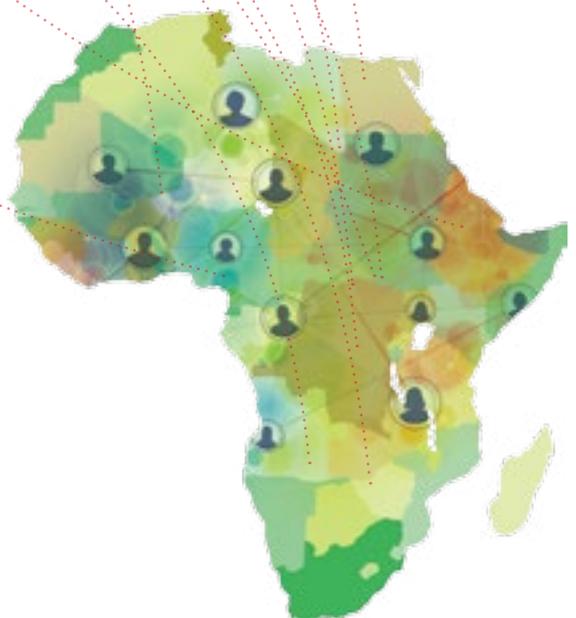
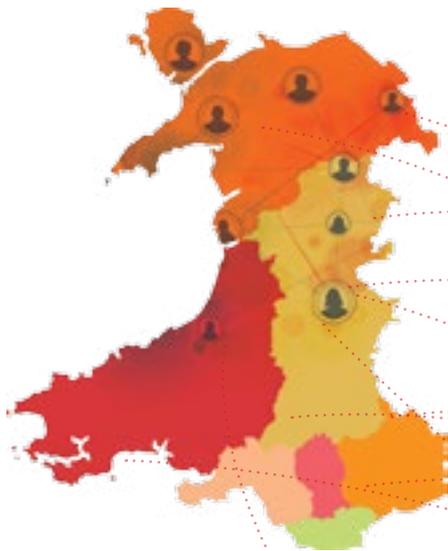




Wales for Africa Health Links

Annual Report 2014-15



Ariennir gan
Lywodraeth Cymru
Funded by
Welsh Government

MAP

Foreword by the First Minister



Rt. Hon. Carwyn Jones AM, First Minister of Wales

This annual report highlights some outstanding work from Wales for Africa Health Links. Those involved continue to make a significant contribution towards improving the health of some of the world's poorest people.

I would first like to acknowledge and thank all of the Welsh people that offered assistance during the devastating Ebola outbreak. Special thanks go to the people that travelled to Ebola regions and offered vital assistance. Thanks also go to those who contributed from Wales through offering support to the families and communities that have become our friends.

I was pleased to present five health links with Gold Star Awards at the Senedd in December 2014. It was a great reflection of the meaningful work of individual links and of the significant support groups get from being part of the network. The network has enabled groups to share and learn from one another and demonstrates how value can be added through coming together.

The last year was yet another of excellent projects funded through the Wales for Africa Health Links grant scheme – from reducing maternal mortality to avoiding blindness to strengthening the capacity of health workers – the projects outlined in this report are both important and inspirational.

Looking to the future, health linking grants and development support will now be provided through the newly formed Hub Cymru Africa. It is testament to the work of the network that health linking is now a core part of the Wales for Africa programme within Hub Cymru Africa. I hope that this transition will continue to drive forward quality, encourage links to grow and more people from Wales to become involved.

Thanks and acknowledgements

This year The Wales for Africa Health Links Network has been funded by the Welsh Government's 'Wales for Africa' programme and supported by Public Health Wales.



The network is hosted by:



This year our work has been delivered in partnership with the Wales International Development Hub, Wales Africa Community Links and the International Health Coordination Centre.



Acknowledgements:

Tony Jewell
Beth Kidd



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Contact details

Wales for Africa Health Links Network
Temple of Peace
King Edward VII Avenue
Cardiff CF10 3AP
Email: wfahln@wcia.org.uk

Registered charity: 1155020

www.walesforafricahealthlinks.wales.nhs.uk

Chairman's Report

Dr. Tony Jewell



This past year has been one of significant achievements for many of our links and organisational change for the network.

It was a proud moment for the network to see five health links be presented with their Gold Star awards at a ceremony in the Senedd in December 2014.

These awards recognise the road that our links have been following to develop their effectiveness and test themselves against their mission and best practice in development. The Effectiveness Framework was developed in collaboration with the Wales Africa Community Links (WACL) and the Wales International Development Hub who did a great job in developing the work locally in line with the UN gold star standards. My congratulations go to Hyaat Womens Trust, Midwives@Ethiopia, Hossana Glan Clywd Link, Care for Uganda and Swansea-Gambia Link for their achievement. Also at the ceremony, hosted by the First Minister, our Vice Chair Dr Zed Sibanda received an individual award for his work with health links and specifically with his connections with Zimbabwe and diaspora work. Well done to all and to our former -Trustee Craig Owen who led the work as part of WACL.

In July we held another successful Annual Conference at Cardiff Metropolitan University. Speakers included the Minister for Health and Social Services, Mark Drakeford AM, Professor Andy Haines from the London School of Hygiene & Tropical Medicine, Sir Eldryd Parry, Founder of the Tropical Health and Education Trust and Chief Nursing Officer Jean White. We also had an excellent presentation from Apollo Mwenyi from Mbale/PONT in Uganda who has led the local NGO Coalition against Poverty for many years.

At the conference we also launched the 2013-14 Annual Report and subsequently shared this with all AMs, NHS Chairs and CEOs and key donors. 2014-15 also saw the successful allocation of £100k of grants to health links, details of which can be found at the end of

this Annual Report. We also strengthened the Trustee board with the addition of board members Duncan Cameron to increase representation from links in North Wales and Judith Hall to ensure closer working with Cardiff University and its flagship Phoenix Project in particular.

Sustainability is one of the key aims of Welsh links in their project work, particularly by encouraging southern leadership. This year Dolen Cymru celebrated 30 years of its existence as a country to country link between Lesotho and Wales. Credit goes to founders such as Dr Carl Clowes who helped design a rationale for choosing Lesotho to invite to link with Wales, testing this with the Welsh population and people in Lesotho as a good fit and maintained over this time despite changing political landscapes in both countries. There is a lot to learn from Dolen's experience about vision and action with leadership able to embrace a range of interests (faith, health and education). I am pleased that the health links are developing in new ways in Lesotho by engaging Betsi Cadwaladr NHS Trust in North Wales to develop links with Quthing District, in Lesotho. This development of health links having strategic partnerships with NHS Wales, as outlined in the Charter for International Partnerships, is something we want to strongly encourage.

The fact that some of our links have faith, education and health links as part of their work shows that Welsh Health links take a holistic view of "health and wellbeing". It is recognised for example that climate change is a huge challenge for health and wellbeing in Sub Saharan Africa and this is as big a future risk to forced economic migration as conflict in Africa is today. In the new Hub Cymru Africa (HCA) we are partners with Fair Trade Wales and hope to work more closely in the future recognising the link between trade, the economy and health.

One of the ways that WFAHLN works as a NGO and registered Charity is in partnership with others. We have a MOU with Public Health Wales and work closely



with the International Health Co-ordination Centre (IHCC) as we have mutually agreed objectives and shared principles for joint working. Public Health Wales is an NHS Trust with a national remit and we see them as a key partner to reach across NHS Wales. We hope to continue to develop this relationship in the future. As part of Hub Cymru Africa we also see our partners – the Welsh Centre for International Affairs (WCIA), Fair Trade Wales, the Sub Saharan Advisory Panel (SSAP) and the Wales Council for Voluntary Action (WCVA) as key groups to work with and utilise the Wales Africa Grant from the Welsh Government to best effect. We were grateful to the Welsh Government's Wales Africa team for their support in the past, which funded our Development Officer, as well as making available grants for our links to bid for. The Welsh Governments political leadership in supporting Wales Africa links is to be applauded as in austerity there is always a risk that these commitments are downgraded.

Wales works in the UK political environment too and the Department of Health and DFID are UK departments in respect of international health policy and development. Our health links have in the past benefited from grants that DFID has funded via programmes such as THET's Health Partnership Scheme (HPS). A survey a few years ago of health links across the UK showed that Wales was over represented for a small country and it is a credit to our social and political environment that this is the case. We need to use this good practice to secure funding from schemes such as the HPS grants. Our relationship with the Tropical Health Education Trust (THET) is an important vehicle for joint working as THET have a UK remit and share very similar objectives to WFAHLN. We see ourselves as the THET in Wales!

As an NGO and registered charity the WFAHLN needs to fundraise and we are examining our strategy in the new environment with the creation of Hub Cymru Africa. Our model of course is bilateral partnership links with

Sub Saharan African partners and we are not a Aid organisation needing to donate monies to African partners. We seek to build bilateral links with our partners so that both parties benefit from them. Most of our links are voluntary groups run by a few paid staff and mostly volunteers. People give generously of their time and resources and often using annual leave for visits to Africa. This is a strong characteristic of Welsh Health links.

However to make things happen there is a need for financial resources too. Funding from the Rotary Club to support the motorbike ambulance scheme in Uganda is an example of that. The WFAHLN needs to source some funds from membership fees or corporate donors to ensure that we can fulfil our remit as a registered charity.

A key role that we have as an NGO is advocacy. The needs in Sub Saharan Africa are so great that we need to lend our voice to policies that are fair and which will have a positive impact on the health of the people as well as offer a more sustainable future. We are actively engaged in keeping in touch with and helping to shape the Sustainable Development Goals (SDGs), which will replace the Millennium Development Goals (MDGs) in 2016. Having such international goals is helpful to us and to achieve greater equality across the globe is what we all want to work towards.

Thanks to Welsh Government for their political support and financial grants, Beth Kidd who has been a very successful Development Officer for us and the Trustees for making 2014/15 a successful year. Our Treasurer Stephen Harries is stepping down from the Board this year and has made an enormous contribution to the network. Stephen helped steer through the Charity Commission registration process and the preparation of our first financial report. He has kept a professional eye on our accounts and been an important member of the team- we will miss him. Ros Thomas will also be relinquishing her role as Secretary to the Board but I am pleased will be staying on as a Trustee to which we are grateful in a time of change. We look towards future challenges with confidence that our vision of a two way partnerships between people, communities, organisations and government based on sound principles of fairness and respect will lead to a fairer, healthier and happier world.



CMO's report

Dr Ruth Hussey



I am pleased to contribute to this year's annual report on the work of Wales for Africa Health Links. The report once again identifies the inspirational commitment of professionals and volunteers from Wales working in the field of health internationally.

Wales for Africa is about partnerships – partnerships for support and for learning. In looking to support this type of approach and initiative, in November 2014 the Charter for International Partnerships in Wales was launched by the Minister for Health and Social Services, Professor Mark Drakeford AM.

The Charter looks to strengthen Welsh stakeholders' commitment to evidence-based practice, shared learning and international partnerships based on equality and the pursuit of mutual, tangible benefits.

Pledges of commitment to the Charter were signed and agreed to by all the health boards and trusts here in Wales and I know that many involved in Wales for Africa Health Links have welcomed the charter as further support to the meaningful work that they are doing.

The importance of strong partnerships comes to the fore when we need to work together to deal with challenges. This year the outbreak of Ebola Virus Disease in West Africa was declared a public health emergency of international concern and has had tragic consequences for Sierra Leone, Guinea and Liberia.

The international battle to defeat the virus has been in full force for some time and both the effort and bravery shown in significantly reducing case numbers has been staggering. Wales contributed to the UK led international response in Sierra Leone, including through volunteers from NHS Wales.

Thank you to those involved in Wales for Africa Health Links that assisted with the Ebola outbreak and your continued commitment to support the communities that have been, and continue to be, deeply affected by the disease.

I would also like to express my encouragement for the newly formed Hub Cymru Africa, which presents an exciting opportunity for Wales.

Hub Cymru Africa brings together some of the key groups, including the Wales for Africa Health Links and organisations from Wales' international development sector into one programme. It provides experience, expertise and connections with significant potential. I look forward to following the latest news from Hub Cymru Africa and would like to wish them every success.

I am delighted to write this foreword and continue to support the developments in health work internationally. I also recognise how significant learning can be gained from being involved in international health linkage and how the work of the Wales for Africa Health Links is of genuine mutual benefit to both Wales and to Africa.

Diolch yn fawr

Who are we?



Mission

The promotion and protection of good health in Africa and Wales. In particular but not exclusively by establishing partnerships between health workers in Wales and Africa.

Primary Drivers

- 1 Excellent Governance
- 2 Financial Sustainability
- 3 High Quality, Sustainable Partnerships
- 4 Undertaking Best Practice
- 5 Demonstrating Impact

Values

- 1 Partnership
- 2 Co-leadership
- 3 Humility
- 4 Needs-based

Vision

A world where people live a happier, healthier and fairer life.



Trustee board members

Tony Jewell – Chair
 Zedekiah Sibanda – Vice Chair and Zimbabwe Health Training Support
 Stephen Harries – Treasurer
 Ros Thomas – Secretary
 Cath Taylor - PONT
 Kathrin Thomas – Quthing Link
 Tei Sheraton – Mothers of Africa
 Veronica German – Dolen Cymru
 Wynne Roberts – Quthing Link

Observers to the board

Andrew Jones, representing THET
 Duncan Cameron – Glan Clwyd Hossana Link
 Judith Hall, representing the Phoenix Project and Cardiff University
 Paul Lindoewood, representing Disability Wales Africa
 Su Mably, representing Public Health Wales and the IHCC

Staff Team

Beth Kidd – Development Officer

Links Map

All Wales

- 1 International Health Coordination Centre (All Wales/ Global) <http://www.internationalhealth.wales.nhs.uk/home>
- 2 Dolen Cymru/ Wales-Lesotho link (Wales – Lesotho)
- 3 Zimbabwe Health Training Support (Cardiff – Harare, Zimbabwe)

Abertawe Bro Morgannwg University Health Board

- 4 FLOW - Wales/Uganda health link (Neath – Lowero, Uganda)
- 5 Gambia-Swansea Vision 2020 Link (Swansea – Kanifing, The Gambia)
- 6 Interburns (Swansea – Accra, Ghana)
- 7 Swansea Gambia Link (Swansea – Banjul, The Gambia)

Aneurin Bevan Health Board

- 8 midwives@ethiopia (Abergavenny – Hawassa, Ethiopia)

Betsi Cadwaladr University Health Board

- 9 Abergele/Hawassa Eye link (Abergele – Hawassa, Ethiopia)
- 10 Glan Clwyd Hossana link (Rhyl – Hossana, Ethiopia)
- 11 Quthing Link (Bangor – Quthing, Lesotho)
- 12 Wrexham Maelor Yirga Alem / Hawassa University Hospital Health Link (Wrexham – Yirga Alem and Hawassa, Ethiopia)

Cwm Taff Health Board

- 13 Gulu Mission Initiative (Dinas Powys – Gulu, Uganda)
- 14 PONT-Mbale health links (Rhondda Cynon Taff – Mbale, Uganda)

Cardiff and Vale Health Board

- 15 Africa Partnership Initiative (Cardiff – Yaounde, Cameroon; Accra, Ghana; Nairobi, Kenya; Butare, Rwanda and Kampala, Uganda)
- 16 Cardiff-Maroodijeh, Somaliland Health Link (Cardiff- Maroodijeh, Somaliland)
- 17 University of Sierra Leone/Cardiff University Partnership (Cardiff - Freetown, Sierra Leone)
- 18 Vale for Africa (Vale of Glamorgan – Tororo, Uganda)
- 19 Zambia Wales Health Collaboration (Cardiff – Chongwe, Zambia)

Powys Teaching Health Board

- 20 Medics4Timbuktu (Hay-on-Wye – Timbuktu, Mali)
- 21 Powys Molo Health Link (Powys – Molo, Kenya)

Public Health Wales NHS Trust

- 22 Uganda Wales Health Protection Partnership (All Wales/ Uganda)

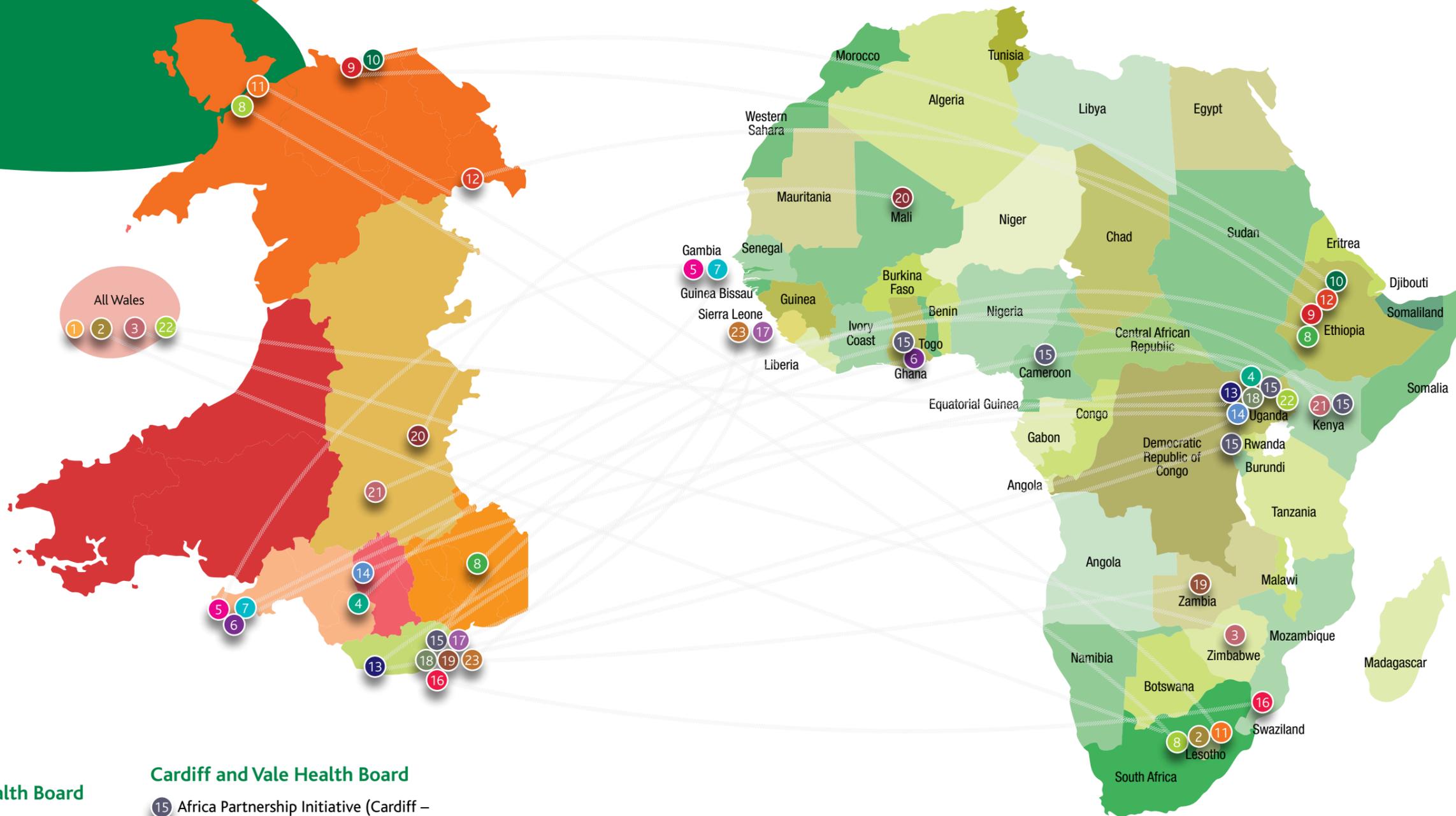
Velindre NHS Trust

- 23 South Wales Sierra Leone Cancer Care (Cardiff - Freetown and Lunsar, Sierra Leone)

Welsh Ambulance Service Trust

- 14 PONT-Mbale health links (Rhondda Cynon Taff – Mbale, Uganda)

Wales for Africa Health Links Network has in the past supported additional groups whose links have been inactive this year.



Ebola

One of the most significant global health events of 2014-15 was the Ebola outbreak in West Africa which affected many countries that Wales has longstanding links with.

The Ebola outbreak in West Africa was the largest documented outbreak of the disease, with 10,907 deaths (probable, confirmed and suspected) including one in the US and six in Mali to date. This includes 4,608 in Liberia, 3,901 in Sierra Leone, 2,383 in Guinea and 8 in Nigeria (BBC News). The outbreak had a very damaging effect on the economies and welfare of the communities in the affected countries, and many of the reported cases have been among healthcare workers.



We would like to offer our condolences to all partners who have lost friends and colleagues to this virus and wish them strength to continue their activities in countries that need Wales' support, now more than ever.

WfAHLN ensured that people in Wales wishing to travel to affected areas were prepared and informed by the best advice on travel, Ebola infection and best practice to prevent transmission. We felt it was important to prevent misinformation and ill-informed over reaction. We voiced support to our partners in these countries during this difficult time, and stood in solidarity with them to fight the outbreak.

In memory



It is with great sadness that we announce that Mrs Nance M'jamtu-Sie, long term friend and partner in the University of Sierra Leone/ Cardiff University Partnership, passed away in Freetown, Sierra Leone on 15th March 2015 after a long illness. It would be difficult to overestimate her contribution to social, spiritual and academic life in Sierra Leone, and the huge bonds of love and friendship that she shared with friends and family in Sierra Leone, Wales and beyond.

Impact

In 2014-2015:



Participation

22

health links in the network of which 15 are registered charities

300

involving over 300 volunteers in Wales

1700

and over 1700 volunteers in Africa



Beneficiaries

13

Projects in 13 sub-Saharan African countries

2000

reaching over 2000 beneficiaries directly

342,000

and over 342,000 beneficiaries indirectly



Knowledge

38

38 skills exchange visits from Wales to Africa

13

13 skills exchange visits from Africa to Wales



Resources

£100,000

of funds from Welsh Government dispersed

13

to 13 Health Links

£500,000

Enabling a further £500,000 of matched funding to be raised from communities and other donors



Organisational development

4

4 partnership agreements signed this year

8

8 needs assessments conducted this year

12

12 Memoranda of Understanding signed with Health Boards

5

5 Health Links achieving a Gold Star Award

Media and Communications

The work of the health links has increased its profile in the media and through other communications over the past year. The health links website (www.walesforafricahealthlinks.wales.nhs.uk) has had over 2900 views.

Here are some examples of the press coverage that health links have received.



Health Links



Education & learning



We have supported **15 links** in the network to undertake projects which aim to exchange knowledge and skills with partners in Sub-Saharan Africa. These links are supporting partners in Africa to improve their care of patients by training them to increase their knowledge and skills in many different areas.

Sibongile (in purple) is a senior mental health nurse based at Ingutsheni Psychiatry Hospital in Bulawayo Zimbabwe.

An example of our education and learning work comes from Zimbabwe Health Training Support.

Sibongile is based at this large referral hospital with significant overcrowding, major nursing shortages and a part time qualified psychiatrist. Most of the care is delivered by junior nurses who look up to Sibongile for guidance and leadership. She herself feels very unsupported and has not had a update refresher course for more than ten years. She got in touch with Zimbabwe Health Training Support (ZHTS) as she was aware we had done courses for other health professionals in the area.

ZHTS supports health professional training and continuing education in Zimbabwe through leveraging the commitment and skills of UK based Zimbabwe diaspora as well as mobilising a wider support base within the UK, including facilitating the establishment of sustainable institutional links between Zimbabwe, Wales and the rest of the UK. ZHTS maintains a multidisciplinary focus, aiming to support community health workers, nurses, dentists, physiotherapists, radiographers, doctors, pharmacists and any other health care workers. The WHO has highlighted that mental, neurological and substance disorders have become the second biggest cause of disease burden in Africa and their relative importance will grow as demographic transition proceeds.

Improving mental health improves quality of life, reduces disability and improves physical health as well

as reducing poverty and social exclusion. Treatment for mental health disorders is highly cost-effective. In Zimbabwe rates of depression and other common mental disorders are high with estimates between 30-50% of the population being affected. Poor mental health is associated with poverty and stigma and also increases risk of HIV acquisition a big problem in Zimbabwe. Zimbabwe has very limited capacity to manage this emerging epidemic. Zimbabwe has only got 12 qualified psychiatrists for a population of just over 12 million.

ZHTS ran a week update course for Sibongile and her nursing colleagues and Sibongile led in some of the courses with our support. There is a large number of Zimbabwe mental health nurses based in Wales and the rest of the UK. Chris Dziki and Dorcas Gwata who are specialist mental health nurses led the courses.

There was very positive feedback from all those that were on the course. Sibongile felt supported and her knowledge updated. We also provided her with books and electronic teaching resources from the UK.

Sibongile tells us things remain very difficult at her hospital because of the economic situation in the country but is still very positive about what she can offer to her job. We have kept e mail contact and there is plans for us to go back for another course to involve medical and nursing staff.

Eye Health

We have supported **3 links** in the network which primarily focus on improving eye health in sub-Saharan Africa. These links are helping partners to diagnose and treat patients with sight problems and therefore improve their quality of life.



Kehabtimer is a second year Health officer student at Wachemo University in Southern Ethiopia.

Abergele/ Hawassa Eye link is one of these groups and this is an example of the work they do.

He did well at school and secured a place at Wachemo to train over 4 years as a Health Officer. Health officers are essential staff in the Ethiopian Health service. They work both in hospital and Health Centres undertaking work that would be done in the UK by senior nurse practitioners or Staff grade doctors.

One of Ethiopia's main problems is the departure of its trained medical staff. This does not happen with Health Officers as the qualification is not internationally recognised. Therefore it has been said if you want to help the country 'train the health officers'. The University is only 3 years old and has a desperate shortage of clinical and basic science teachers.

The Abergele/Hawassa Eye link were asked this year by the Dean of Wachemo to provide a 1 week ophthalmology course similar to one we delivered to nurses and Health officers last year. Two of the link members Claire Morton, Consultant Ophthalmologist and Trainee Ophthalmologist Dr EuLee Seow prepared and delivered an intensive 4 days ophthalmology course, with lectures, practical sessions and end of course test. They were presented with prizes and certificates.

Kehabtimer is one of the enthusiastic students who expressed to us his heartfelt appreciation for the teaching.

When he is qualified and works in a health centre in a rural location or in hospital we are hopeful that Kehabtimer will be better placed to diagnose and treat the many eye conditions he will encounter. Blindness levels are very high in Ethiopia but 80% of this blindness is avoidable.

Maternal Child Health

We have supported **8 links** in the network to help improve maternal and child health. These groups are supporting partners across Africa to improve knowledge and skills in maternal and child health issues and giving them tools to help improve the health of mothers and their children.



One example of where this is happening is in Quthing, Lesotho through the Quthing Link.

During the Quthing Link's last visit to Lesotho which was in November 2014, their task was to access as many of the 8 outlying clinics as possible to deliver update training and to assess what training may be needed in the surrounding area of Quthing. They took an infant model with them to demonstrate and practise infant resuscitation. Between them, they also developed a training pack before travelling which demonstrated emergency skills such as managing a post-partum haemorrhage. They had been unable to make any arrangements before travelling due to the poor means of communication but on arrival were able to meet with the public health nurse who managed all the 8 clinics. She kindly contacted each clinic and provided the link with an itinerary for the week to enable them to use our time most efficiently.

The locations of the clinics was somewhat of a challenge as all the roads leading to the clinics were unmade and quite treacherous in places, however they relied on a road map we had and directions from locals. The group travelled approximately 650 miles in one week to access 7 out of 8 clinics and received a warm welcome in all. The aim was to provide skills updates to colleagues as opposed to new training as the majority were trained nurses and midwives although they also delivered the training to nursing assistants who play a vital role in the outlying clinics due to their location.

Each of the clinics visited was extremely busy, but the staff made every effort to attend the training sessions. The most welcomed was the infant resuscitation, as

each clinic had an ambu bag for resuscitation purposes but were not aware of how to use it, especially on an infant.

As the infant model was available, each member of staff was able to actually attempt resuscitation which they all found extremely useful.

Instructions on how to resuscitate in laminated poster form were left behind so they could access this quickly when necessary.

The training pack provided a quiz on estimating blood loss, using pictures of differing amounts of blood. This was also very well received and with the quiz being pictorial we were able to cross potential language barriers. All the items in the training pack could be used over and over and at least one pack was left in each clinic. This proved extremely useful as due to the clinics being so busy, they were unable to teach every session included in the pack.

The training delivered in each clinic was well received and it is hoped will prove helpful. Due to fund raising before the visit the infant model was purchased specifically to leave it with colleagues in Lesotho for further training purposes. It is with the public health nurse in the Hospital in Quthing for each clinic to request when they want to do their own training session.



NCDs

We have supported **1 link** to improve the treatment of Non-Communicable Diseases.



Unfortunately, due to the outbreak of Ebola in West Africa, the South Wales Sierra Leone Cancer Care link have been unable to undertake any activities this year. Here is an example of the work they were doing before the outbreak.

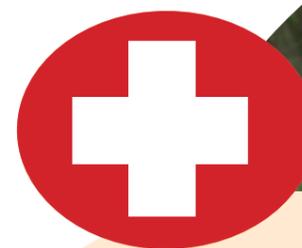
Treatment for children with Burkitt's lymphoma in Sierra Leone about to become reality.

There is currently no cancer care treatment for children in Sierra Leone. Burkitt's lymphoma is a potentially curable (but otherwise fatal) cancer common in this region of Africa. The South Wales multidisciplinary group have established close links to St John of God Hospital, SJOG in Lunsar with the aim to build up a centre of excellence. The semi-rural hospital is situated approximately 50 miles east of Freetown with good transport links between Freetown and other main towns in the region. The South Wales group are also working closely with paediatricians and oncologists from St Joan de Deu Hospital in Barcelona who support other initiatives at SJOG Hospital, Lunsar.

Two visits have resulted in detailed need assessments and clear plans for the establishment of a cancer care programme initially aimed at children with Burkitt's lymphoma over the next 18 months. The next visit of the group will be to consolidate need assessments. Treatment of cancers in other African countries has highlighted the importance of ensuring the foundations of care for patients are solid before treating with chemotherapy. Visits to date have also provided training in assessment, observation, and care of paediatric patients. The group in March will be focusing on providing training in symptom control, palliation and ways to ensure reliable drug supplies.

The cancer registry initiated in 2010 received recognition from the WHO in 2012 and was officially opened by the Sierra Leone MoHS in 2013. To date records have been from patients within the Freetown area. The South Wales group have been working with the only pathologist in Sierra Leone to train two more technicians in accurate diagnosis and staging. This is crucial to direct resources and ensure appropriate care for cancer patients. A follow up visit is planned in March 2014 where we will deliver a reconditioned microscope with a digital camera to the cancer registry to allow images to be discussed between the experts in Sierra Leone, South Wales and Barcelona. The group is looking to fund a second microscope for the technician in SJOG, Lunsar to allow timely diagnosis and staging.

The group is also working with oncologists at the main hospital in Freetown, Connaught, Sierra Leone cancer charity and the only hospice in the country, Shepherds hospice with support palliation and symptom control for all cancer patients within Connaught hospital.



Public health

We have supported **5 links** in the network to address public health issues and support communities to become stronger and healthier.



This is the Pomedu Primary school in Tororo district in Uganda. It has a roll call of 1300 children and is growing by about 10% per year.

Vale for Africa have been helping improve public health in Uganda by providing clean water supply.

The children are in school all day; their lunch is provided by the parents who can afford a little extra meal for making a porridge dish for their own child and a few other children who cannot afford the food.

Water is of course essential, both for the children to drink and for cooking the midday meal. It is also needed to dampen the floors of some of the unfinished classrooms, which consist only of dried mud and therefore create a lot of dust. As a result of constantly breathing the dust, many of the children have chest problems.

This water is carried in plastic jerry cans for 2km on the heads of a dozen young girls aged 7 to 10 years old and it is carried in a constant procession throughout the day. It seems that boys are not required to do this work. These girls therefore regularly miss classes and their education is compromised. We know from the "Girl Effect" studies that educated girls will contribute up to 20 times more to their family and village community than educated boys who often move further afield to use their new skills. 80% of girls drop out of education before it is completed.

Earlier this year, Vale for Africa working closely with Cowbridge Rotary, managed to fund the Ugandan Water Authority to supply piped water into the Pomedu Primary school and as an extra bonus we were able to fund an offshoot pipe to the Gwarragwarra Primary school along the way.

This has raised morale among the teachers, the ancillary staff and the pupils and has freed up time for the pupils previously on water duty to continue their studies. It has also eased the problem of the classroom dust as the piped water can be used for this purpose more readily than the precious, carried in water. It has also raised the status of these rural schools, which are now seen to be using modern technology and being progressive in the pursuit of education, and this therefore makes it easier for them to convince local rural families about the value of educating their children. Vale for Africa places the highest value on education, as the fundamental building block of a sustainable effort to alleviate poverty in Tororo.

Primary and Community Health

We have supported **6 links** in the network to address community health issues. This has been through supporting partners to strengthen the training of community health workers and providing them with the basic tools to do their jobs.



This is Esther (aged 32) and her baby Arthur from the Wanale sub-county of Mbale region, Uganda.

PONT is an example of this important work.

When Esther went into labour she planned, as with her past 6 children, to stay and deliver at home. But things did not go smoothly. She said: "The final moment caught me unaware. I was fully dilated and my child was ready but I could not push...I was so tired and weak.

I called for the (PONT trained) Community Health Worker and she was kind enough to call for a motorcycle ambulance to take me to hospital."

Esther then delivered successfully with the help of qualified medical staff at the hospital and was examined for complications. Everything turned out well for Esther and Arthur, and when they went home the Community Health Worker talked to Esther and her husband about family planning, which they were considering.

This is the vital role that Community Health Workers undertake – being there for their own communities, encouraging them to seek healthcare, and liaising with formal health services and emergency transport (now being provided by PONT/Rotary motorbike ambulances).

Clinical Skills and Support



We have supported **5 links** in the network to skill share clinical expertise with doctors and nurses in sub-Saharan Africa.

Alberta Rockson is a physiotherapist working at the national Reconstructive Plastic Surgery and Burn unit (RPSB), based at Korle-Bu Teaching Hospital in Accra, Ghana.

Interburns have a recent example of this through their work in Ghana.

This is the main government burn service for the country and it treats burn patients from all over Ghana and the wider West African region. Korle-Bu has 22 beds for inpatients, which are frequently over-capacity, and it treats over 500 inpatients a year in addition to several thousand outpatients.

In Ghana, as in many low and middle income countries globally, there are very few opportunities for clinical staff to receive training in burn care. This can lead to a huge burden of preventable disability and death due to inappropriate first aid and conservative treatment. As a result, national centres like Korle-Bu often receive patients who have suffered numerous complications resulting from a lack of effective treatment at smaller health centres, including the formation of disabling burn 'contractures' and infection of their wounds. Effective physiotherapy and rehabilitation for burn patients is often severely lacking in Asia and Africa, with a huge long-term impact on the lives of patients.

Interburns is working in partnership with Korle-Bu Teaching Hospital to improve burn care and prevention in Ghana, in a project funded by the Wales for Africa Health Links programme. As part of this project, Interburns funded Alberta to attend the first Advanced Burn Care Rehabilitation training workshop. Interburns ran this training in partnership with Sunshine Social Welfare Foundation over 5 days from 15-19th March 2015, at the National Institute of Burns and Plastic Surgery in Dhaka, Bangladesh. This was a highly practical, hands-on course designed to teach

physiotherapists and occupational therapists a range of key skills for effective rehabilitation. Participants in the training included 26 therapists from Bangladesh, Ghana, India, Nepal, Sri Lanka and Tanzania. Prior to the training, Alberta identified additional training in splinting, emergency care of burns patients, and physiotherapy's role in contracture prevention as specific areas where she would like to learn more.

Alberta was one of the best therapists at the training programme, achieving the second-highest score overall in the post-course evaluation and demonstrating both strong leadership potential and excellent clinical skills.

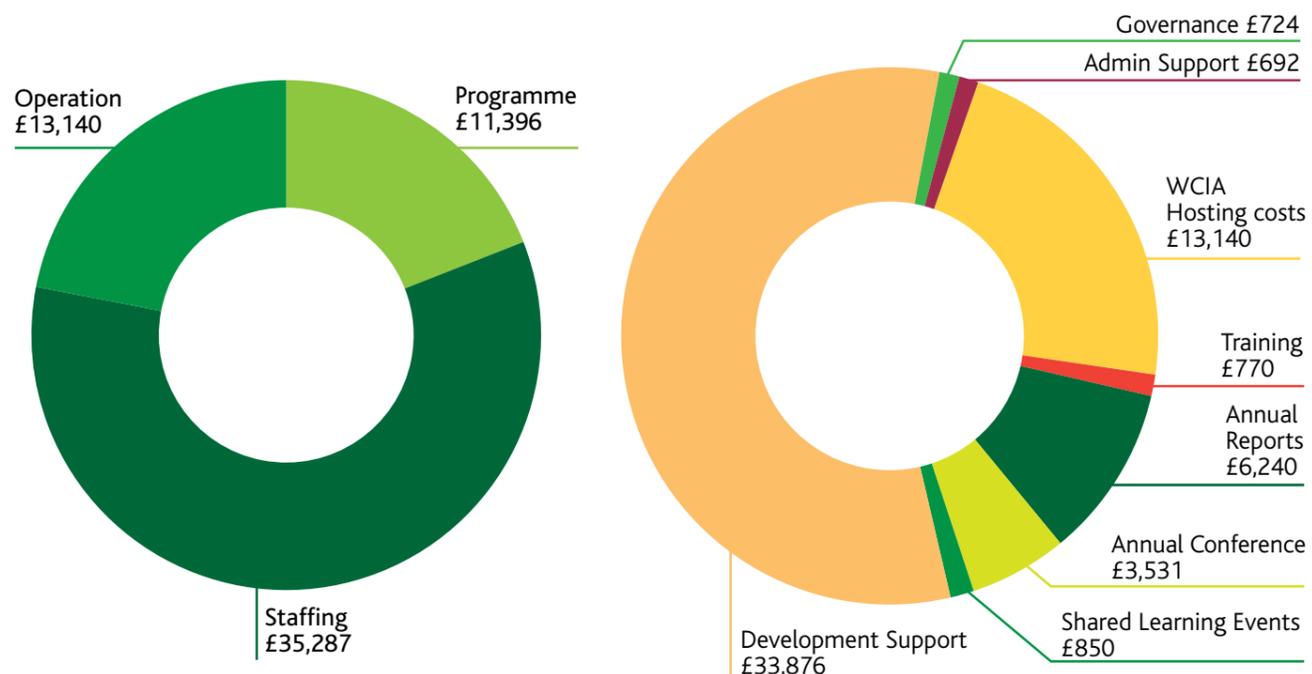
As a result of the training, she is now well-placed to improve the rehabilitation services to patients at Korle-Bu, as well as disseminate her learning to other therapists in Ghana and West Africa.

Korle-Bu will become an Interburns Training Centre this year and offer fellowships to burn professionals from across sub-Saharan Africa. Alberta will be the key individual leading the therapy fellowships at Korle-Bu, as well as acting as a member of faculty for rehab and therapy in other training programmes in Ghana, including our multi-disciplinary Essential Burn Care course. She will no doubt also be invited to participate in future Interburns programmes in other countries on the basis of her strong commitment and ability.

Funding and resources

Programme expenditure

Against an income of **£62,000** for 2014-15 the Wales for Africa Health Links Network strive to maximise value for money



Health Link Grants dispersed by Welsh Government 2014-2015

Total funding dispersed - **£100,000**

WG ref.	Organisation	Wales	Africa	Amount
W4A-10	Zambia Wales Health Collaboration	Cardiff	Zambia	£6,000
W4A-14	Glan Clwyd – Hossana Link	Glan Clwyd	Ethiopia	£5,000
W4A13(04)	Yirga Alem/ Stanley Eye Unit Vision 2020 link	Abergele	Ethiopia	£6,718
W4A13(09)	Powys Molo Health Link	Powys	Kenya	£10,000
W4A-19	Hay2Timbuktu	Hay-on-Wye	Timbuktu	£8,525
W4A201314 -03	PONT	Rhondda Cynon Taff	Uganda	£5,200
W4A201314 -04	Care for Uganda	Neath	Uganda	£15,000
W4A201314 -11	Uganda Wales Health Protection Partnership	Wales	Uganda	£5,500
W4A201314 -12	Quthing Health Link	Betsi Cadwaladr UHB	Lesotho	£11,790
W4A201314 -13	National Health Training Centre-Bangor Uni	Bangor	Lesotho	£2,500
W4A201314 -14	Velindre Sierra Leone Cancer Care	Cardiff	Sierra Leone	£12,500
W4A201415 - 02	Interburns Training Centre (ITC) Africa	Swansea	Ghana	£6,267
W4A201415 - 08	Midwives@Ethiopia	Swansea	Ethiopia	£5,000

Key contacts



Link name	Contact in Wales	Contact in Africa	Website
Abergele/ Hawassa Eye link	Claire Morton E: claire.betsi@hotmail.co.uk	Emebet Tigeneh E: emukigirma@yahoo.com	www.glanclwyd-hossana.org.uk
	Objective: To reduce avoidable blindness in Ethiopia by providing education to those delivering eye care especially optometrists and health care workers		
Africa Partnership Initiative	Prof George Karani E: gkarani@ cardiffmet.ac.uk	David Musoke E: sokidavi@yahoo.com	
	Objective: The aim of API is to provide opportunities through collaboration to further develop the use of appropriate and relevant technology and community resources as a basis to promote and develop projects with Africa.		
Cardiff-Maroodijeh, Somaliland Health Link	Hayaat Women Trust E: info@hayaatwomentrust.org	Fowzia Ali E: fowzia@hayaatwomentrust.org	www.hayaatwomentrust.org
	Objective: To reduce infant, maternal, morbidity and mortality rates in Somaliland through training of midwives, other skilled health providers, and village lay health promoters. Also to promote maternal health education with young girls and encourage the government to provide better health provision in Somaliland		
Dolen Cymru Wales-Lesotho link	Veronica German E: veronica@dolencymru.org	Bahlakoana Manyanye E: manyanye@dolencymru.org	www.dolencymru.org
	Objective: Dolen Cymru's role is to act as a conduit, an enabler and a promoter of the partnership between Wales and Lesotho reacting to specific needs. By sustaining and developing the linking activities of schools, churches, health organisations and others, it can leverage its resources to achieve maximum impact.		
FLOW - Wales/ Uganda health link	Andy Pilcher E: andy@careforuganda.org	Lawrence Mbalire E: lawrencemalire2@hotmail.com	www.careforuganda.org
	Objective: Training and sustaining Village Health Teams Reducing infant and maternal mortality Increase health promotion		
Gambia-Swansea Vision 2020 Link	Stella Elliott E: stellainwa@gmail.com	Mr Sarjo Kanyi E: sarjo.kanyi@yahoo.com	www.gambia-swansea-eye-link.org
	Objective: We aim to provide training and education to the staff of SZRECC and follow three yearly activity cycles which are regularly reviewed. MDG's include reducing global blindness		
Glan Clwyd – Hossana link	Duncan Cameron E: duncan.cameron@wales.nhs.uk	Dr Endale Feleke E: jimsalluke2012@gmail.com	www.glanclwyd-hossana.org.uk
	Objective: A long term & productive relationship between our hospitals Fostering friendship and mutual understanding Sharing education Helping to build health care capacity in Hossana		
Gulu Mission Initiative	Steve Lock E: steve@gulumission.org	Ochan James E: jamesochan40@yahoo.com	www.gulumission.org
	Objective: Working to the aims of the PONT model in Mbale we are aiming to train 30 VHT + TBRA's		
Interburns	Richard Bendell E: richard@interburns.org	Dr Opoku Ware Ampomah E: pe_ware@yahoo.com	www.interburns.org
	Objective: Quality improvement of key government burn services in Ghana. Development of national strategy for burn care and prevention		
Medics4Timbuktu	Mary Hughes E: hughesatclyro@tiscali.co.uk	El Mehdi Wakina E: elmehdw@yahoo.fr	www.hay2timbuktu.org.uk
	Objective: To increase understanding between the communities of Hay-on-Wye and Timbuktu relating specifically to health issues. To help raise awareness of health issues in both communities. Specific projects are related to maternal health awareness and early child health.		
midwives@ethiopia	Brydon Williams E: midwifecharity@gmail.com	Debrework Getachew E: debrgeta@gmail.com	www.midwives-ethiopia.org.uk
	Objective: To improve maternal and neonatal morbidity and mortality figures through training courses for Midwives and health Extension Workers.		

Link name	Contact in Wales	Contact in Africa	Website
PONT-Mbale health links	Dr Cath Taylor E: cath.taylor@pont-mbale.org.uk	Mr Fred Chemuko E: chemukfred@yahoo.com	www.pont-mbale.org.uk
	Objective: Multidisciplinary training of community volunteers and professional health workers; integrated systems development to improve access to health within a community link addressing all the MDGs.		
Powys Molo Health Link	Dr Rachel Lindoewood E: rachel.lindoewood@wales.nhs.uk	Dr Magdalene Itumbi E: mimimush2004@gmail.cpm	https://www.facebook.com/BreconMoloLink
	Objective: The reduction in Child and Maternal Mortality and Morbidity in Molo, Njoro and Kuresoi districts in the Rift Valley Province of Kenya through training of community health volunteers, health extension workers and birth referral agents.		
Quthing Link	Kathrin Thomas E: kathrin.thomas@wales.nhs.uk	Likeleli Nkhatpetla E: phnquthing@gmail.com	
	Objective: To strengthen the capacity and capability of the District Health Management Team in Quthing District with a strong focus on primary health care strengthening, maternal health and public health.		
South Wales Sierra Leone Cancer Care	Richard Adams E: richard.adams@wales.nhs.uk	Michael Koroma & Dr Simeon Koroma E: koromamichael@gmail.com; owizzkoroma2008@yahoo.com	
	Objective: To develop affordable cancer care in Sierra Leone. Initial focus on Burkitt's lymphoma, a curable cancer prevalent in children; cancer registry; embedding palliative care and; cancer prevention.		
Swansea Gambia Link	Dr S Capey & Mr P K Jones E: capey@swansea.ac.uk p.k.jones@swansea.ac.uk	Kalifa Bojang & Ousman Nyan E: kbojang@mrc.gm onyan@utg.edu.gm	http://sgl.swanhi.org/
	Objective: Form working partnerships between staff and students in Swansea and The Gambia to improve health care outcomes, Establish a broad partnership in health – including clinical care, health service delivery, teaching and research, Emphasise capacity development of staff and students involved in the Link by including education and training as part of activities wherever possible, Identify key areas of common interest that can be developed as stand-alone projects, Focus on facilitating improved health care delivery (i.e. use teaching and training as part of broader projects to improve service delivery.		
Uganda Wales Health Protection Partnership	Rhiannon Beaumont-Wood E: rhiannon.beaumont-wood2@wales.nhs.uk		
	Objective: To undertake a scoping exercise of current Health Protection systems and immunisation programmes in Uganda identifying opportunities for Welsh health link support. To increase the knowledge and understanding of Health Protection systems, approaches in reducing preventable disease and increasing individual and herd immunity. Scope potential opportunities to develop links with Makerere University nursing departments and nursing regulators within Uganda with a view to increasing systems awareness to actively increase uptake of vaccinations and improve skills and knowledge in the management of communicable disease outbreaks.		
University of Sierra Leone/ Cardiff University Partnership	Dr Alison Weightman E: WeightmanAL@cardiff.ac.uk		
	Objective: Exchange programmes and support for Community Health Projects to enhance access to information and community understanding of preventable public health risks, Educational support for schools students via the charity Educational Awards in Sierra Leone (EASL).		
Vale for Africa	Sue Bowyer E: info@valeforafrica.co.uk	Mary Owor E: mfowor@yahoo.com	www.valeforafrica.org.uk
	Objective: Improving eye health in the rural poor especially in schools. Providing library services, motorcycle ambulances, assistance in schools, water to schools, student sponsorship.		
Wrexham Maelor Yirga Alem / Hawassa University Hospital Health Link	Mr A. da Silva E: tony.dasilva@wales.nhs.uk	Dr Malede Mersha E: maledemer@gmail.com	
	Objective: Surgical teaching and limited equipment support		
Zambia Wales Health Collaboration	Professor Judith Hall E: Hallje@cf.ac.uk	Dr Job Mwanza	http://blogs.cardiff.ac.uk/hallje/category/mothers-of-africa/
	Objective: Reduction in maternal mortality through education. Increase in skill level in Chongwe District Hospital and broadening in clinical practice.		
Zimbabwe Health Training Support	Zed Sibanda E: zedsibanda@gmail.com	Dr Wedu Ndebele E: wndebele@yahoo.co.uk	http://zhts.org.uk/
	Objective: The group supports health professional training and continuing education in Zimbabwe through leveraging the commitment and skills of UK based Zimbabwe Diaspora as well as mobilising a wider support base within the UK, including facilitating the establishment of sustainable institutional links between Zimbabwe, the UK and elsewhere.		