



CENTRAL AFRICA MEDICAL MISSION – MALAWI

February 2020



Here in Malawi, it's another rainy season. I wake up on clinic days and if I hear rain on our metal roof, or see threatening clouds, I wonder what our commute to the village will be like on mainly dirt roads. Thankfully we have our amazing Landcruiser, a great driver and today the rain didn't start until we were nearly on the paved road again. I was able to watch the scenes on our way to Thunga- the amazing green of the hills and fields with maize growing high, a small boy herding nervous goats, men riding bicycles carrying heavy loads of firewood, women in bright zitenje with baskets on their heads and babies on their backs walking to market, and little children smiling and waving at us. What struck me on the drive was three different adults, who were going about their work outdoors, stopping to give us a smile and thumbs up. They know the Lutheran vehicle and where we are headed. They know that our staff will soon be caring for the sick in their rural community, as well as seeing that women and children receive preventive healthcare. They count on us.

We arrive at clinic where dozens of men, women and children were sitting in the shade, or getting weighed by our village staff. As our maintenance worker helps to unload all of our supplies from the ambulance, a church elder, Moses, starts a devotion with singing a hymn with the crowd, then shares scripture and preaches a short sermon in Chichewa. I listen while checking over the crowd to look for anyone who might need immediate medical attention. We sing another hymn and he ends with a blessing. One of our RNs then gives a health talk on scabies, a very common skin infection.

Our registrar then finishes the task of registering the outpatients. The new pregnant women (antenatals) come to my station to have their hemoglobin levels checked. The lines for malaria testing form, as we identify those with symptoms including fever. Our nurse-midwives begin organizing the antenatal, family planning and under-fives' lines. Nurses in the pharmacy prepare all of the medicines to dispense. Our Health Surveillance Assistants (government employees) start giving tetanus vaccine to pregnant women, and soon there is a constant cry of well babies getting their vaccines in under-fives' clinic. The outpatients are then seen by our clinician, treated for illnesses including malaria, respiratory illnesses, arthritis, skin conditions, diarrhea, anemia, hypertension, asthma and epilepsy. A baby is diagnosed with pneumonia, receives antibiotic injections and is referred to the hospital. Our nutritionist identifies moms with underweight children and enrolls them in our nutrition program where they will have instruction and receive supplemental maize and soya. Clients are tested for HIV, receive counseling and are referred to receive treatment as needed.

All of this happens at each of our four village clinics on a regular basis. We saw 46,141 patients in 2019. So much goes into making it all happen. My husband Gary, as administrator, is behind the scenes making sure our staff is paid, vehicles and buildings are maintained and the budget balances. As nurse in charge, I must ensure we have adequate supply of medicines, test kits, food supplements, and vaccines. This includes what we buy and what we receive free from the government, such as the malaria treatment medication we refer to as LA. Recently, there has been shortages of this, and we are thankful we still have enough to treat our patients. It involves a lot of driving, careful planning and communication. But it also involves trusting God, asking him to provide for our needs in serving his children here in Malawi. It involves all of your prayers and donations which allow this work to continue with the Lutheran Mobile Clinic, for which we are sincerely thankful.

“And my God will meet all your needs according to his glorious riches in Christ Jesus”. Phil. 4:19

Your sister in Christ,

Beth Evans