



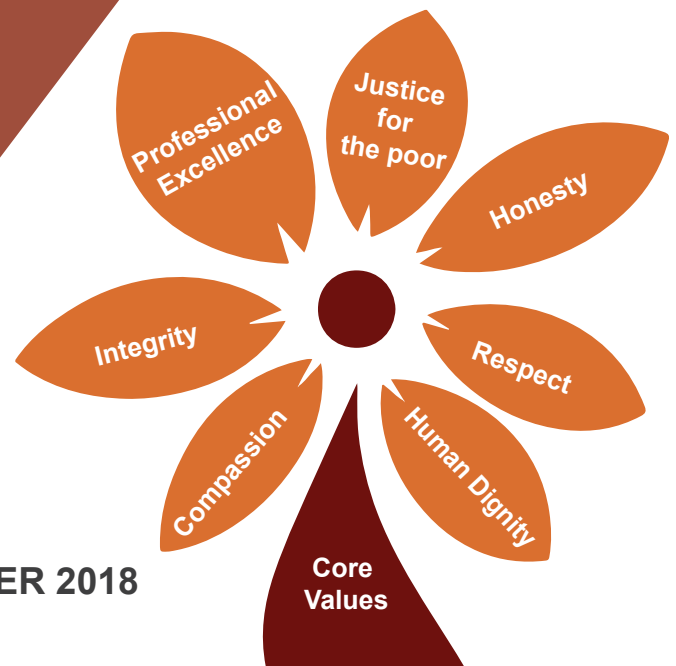
Maternity Africa

Making childbirth safe



ANNUAL REPORT

FOR THE YEAR ENDED 31 DECEMBER 2018



VISION

To make childbirth safe for every woman.
Our prayer is to act justly and to love mercy and to walk humbly with our God



MISSION

Martenity Africa is a Christian-based organization that endeavors to provide fistula treatment and quality maternity care for all marginalized women throughout Tanzania, through clinical excellence and in the example of displaying love, kindness, and compassion regardless of race, religion, or ethnicity.

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Message from the Founder



Dear Friends

It's been a tremendously exciting year for Maternity Africa in Tanzania. It started with a half-finished hospital, no staff apart from a few volunteers and ended with a beautiful and fully functioning hospital with a staff of close to 70. There have been many obstacles and difficulties along the way. At times it has been truly miraculous the way God has smoothed the paths and enabled us to move forward.

Kivulini Maternity Centre was officially opened in June. The opening was highly publicised and the Deputy Minister of Health, Community Development, Gender, Elderly and Children officiated and cut the ribbon. The event was covered with prayer and we gave God thanks for getting us thus far. We began clinical services with a fistula camp – 23 patients in June. I was reminded of the verse from 1 Peter 2:5 “You also like living stones are being built into a spiritual house.” The staff are the living stones that have made the facility, building or shell, into a living, functional hospital that brings care and healing to many. Seeing the joy in the faces of some of the fistula patients as they were cured made me think that the whole project was worth it just for them.

By the end of 2018 we had completed three fistula camps and treated birth related injuries. There have been such heart-warming stories of suffering and then healing. The patients' smiles once they were healed made the work so rewarding. The maternity services started in June, slowly as we established the staff, protocols and work ethic. It's been exciting to see the team grow and develop over the year.

Unfortunately, we have had some turnover of staff. Some staff came with certain expectations of working with an international organization. Some expected large salaries and little work to do. We are now settling with a core group of committed and lovely staff and the patients routinely comment on the quality of care and concern that they receive.

There are many people to thank. We thank our donors of course without whom none of this would be possible. Thank you to Jude Holden who has been leading the project. Thanks are also due to our committed and able staff and volunteers, especially those who have already finished their time at Kivulini. Anna McKee, Babette Gallard, Paul Chinn, Dr Jason, Midwives Celine and Kareena, and Brad have now returned to Australia (although Kareena is planning a three-month cameo early in 2019).

We look forward to growing further in 2019, which again, can only be possible with the efforts of so many people and with God's continued provision.

With prayers,

Dr. Andrew Browning

Founder and Chief Executive Officer

Message from the Country Director



Dear Friends

What a year we have had with Maternity Africa. Firstly, a small team moved onto the construction site here at Kivulini in January. We had already started implementing our recruitment plan and by March had invited 67 new staff to join us in the centre for a six-week orientation programme. This was an opportunity to assess the new recruits, build on their existing knowledge and experience and form a team who would be prepared for our fistula patients to arrive.

Despite all the last minute challenges, we eventually set a date and had our official opening on the 9th of June. It was a day full of joy and anticipation as we surveyed how far Maternity Africa had come and how much more of the journey lay ahead of us on this new venture. We commenced services with a fistula camp and this was quickly followed by opening the doors of the maternity and family planning units. As a team, we set targets of how many patients we felt we could feasibly see each month. This was based on the results of the community outreach programme and the desire to maintain a quality service as we gradually increase the numbers.

Looking back, I am delighted by the results of this approach. We have a robust clinical and administration team who are showing great promise in becoming the leaders of the future. We have a group of 26 midwives and two doctors who are benefiting from on the job training by a small team of international volunteers who work alongside them mentoring and coaching them in evidence-based practice.

The administrative team has grown through developing systems that support the integrity and sustainability of the three programmes which are Fistula, Maternity and Family Planning. We continued to build our profile within the reproductive health sector and this has resulted in much interest and support from the ministerial officials and other stakeholders and partners. It has become clear that Kivulini Maternity Centre is becoming a hub for women's reproductive health services in the Arusha District in northern Tanzania. We have immense potential to make a positive difference to the lives of thousands of women and babies over the years that lie ahead.

The initial objective of developing a centre of excellence for midwifery and fistula care for this nation is on the way to becoming our reality. In these exciting and challenging times I continue to trust that God has plans to bless the poorest and most vulnerable women of this land and he has chosen Maternity Africa as part of this. The other members of our staff and I believe this is a place of hope and an oasis for those women that are in desperate need of compassionate care. We look forward to the future with hope and confidence.

Asante sana,

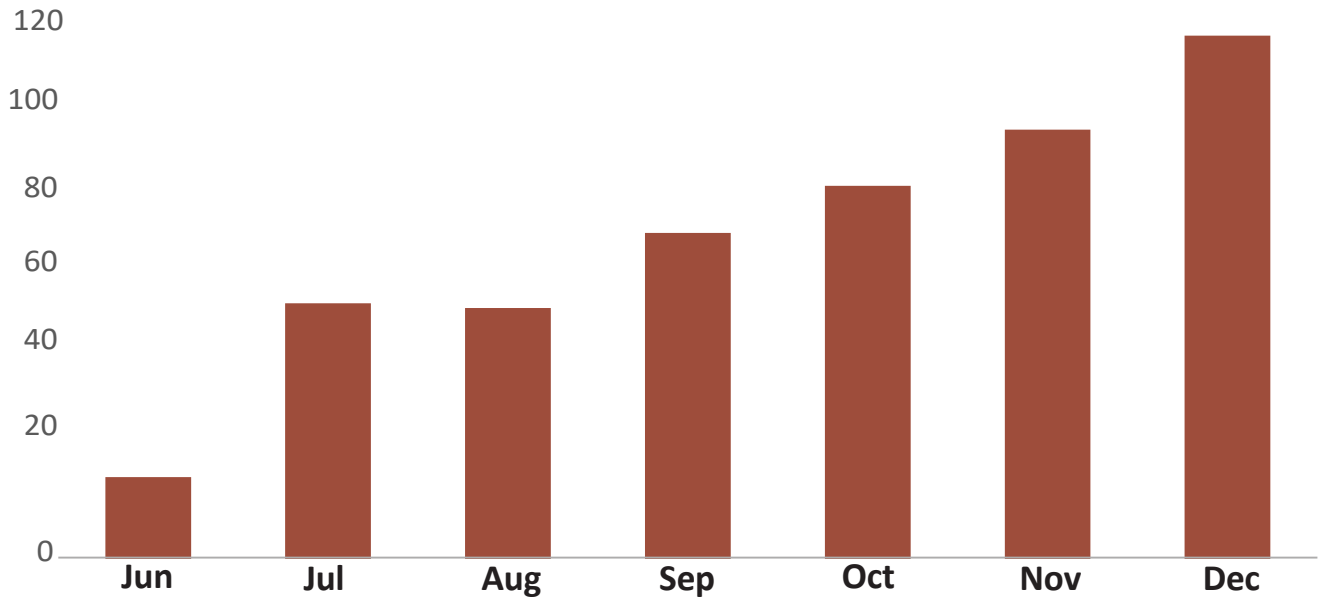


Ms. Jude Holden
Country Director

2018 Year in Review



Total Deliveries by Month in 2018

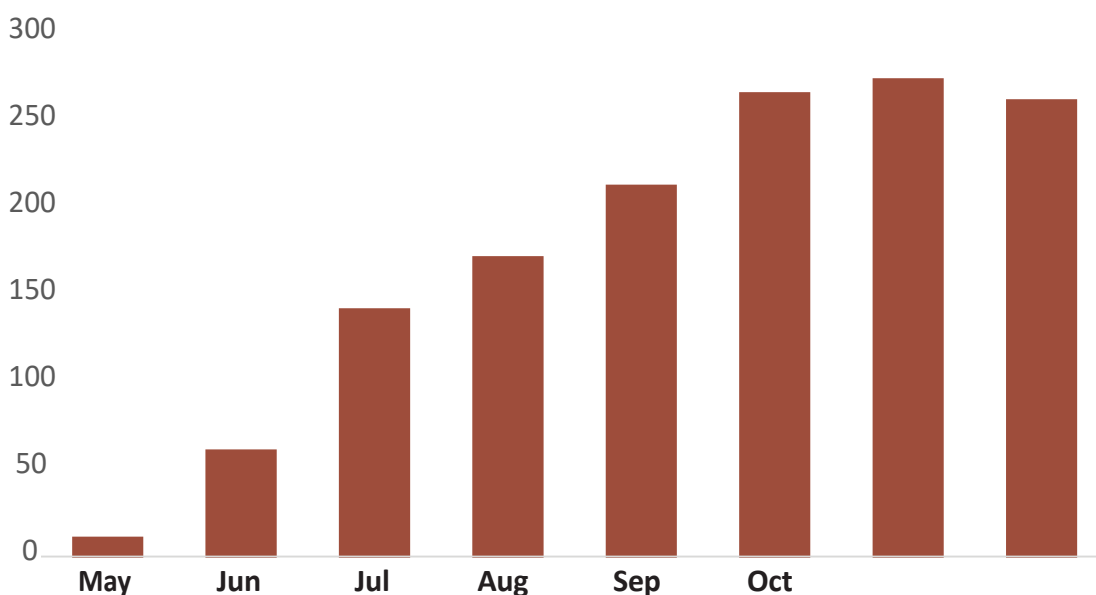


The number of deliveries in Kivulini has risen steadily since we started offering maternity care in the centre. This is because of the successful community outreach programme that the national staff engaged in with the rural communities around the centre. In the first six months the aim was to achieve a target of 100 deliveries per month which is half of our final monthly goal. Once this target has been achieved and we have ensured that the services are robust enough to maintain a high standard of care, we will conduct follow-up community visits to ensure a larger population is made aware of the free health care provided the centre. All patients are screened at admission to ensure that they meet the strict criteria set out to be able to access free health care given to most vulnerable and marginalised women.

2018 Year in Review



Total Antenatal Care visits by month in 2018



The antenatal visits within the centre gradually increased since the doors to the clinic were opened in May. Initial figures relate to the project being new and unknown within the community we are serving. An outreach maternity programme was implemented to allow for relationships to be forged and the message of the project to be shared with the target population. Initially this was established through working alongside the Aga Khan University agricultural programme which is serving in the same villages as we were trying to reach. As consumer confidence increased, there was a corresponding increase in those accessing antenatal care.

2018 Year in Review Transformation

MATERNITY AFRICA'S STAFF IN 2018



47

*Midwives
and Doctors*



14

*Programmes /
Administration*



25

Support

TRANSFORMATION THROUGH NUMBERS

This year, we have supported...



82

Fistula Cases



466

Babies born



916

**Family Planning
Consultations**



6373

**Number of People
Sensitized through outreach**

TOP FIVE MOMENTS OF 2018

Occupying the Land

Moving the project set-up team onto the building site

Orientation

First week in April we brought the newly recruited staff on site at the start of a six weeks orientation programme

Operational

At the end of May we had our first fistula camp, second week in June we opened the maternity and family planning services

Offering Jobs

Interviewing commenced for 67 national staff positions to run all 3 programmes

Opening

On the 9th of June we had our official opening ceremony

Occupying the land

In January, a team of nine staff joined together and made their base at Kivulini Maternity Centre. At that time, the structure was nearing completion, although it still resembled a building site with a full team of contractors working on the land. Since then, in only one year, we completed the building, ensuring that all environmentally-friendly systems were in place – including solar electricity and a biogas generation systems – fit out and decorate the hospital, recruit 67 staff, develop and deliver a 6-week orientation programme and commence operations.



When we reach capacity, Kivulini Maternity Centre will offer the following services, free of charge, to the poor and marginalized women of the region:



Maternity Care

2,500 safe and healthy deliveries, care for up to **500** women suffering from early pregnancy complications, and oversee **10,000** antenatal care visits every year



Family Planning

1,200 family planning consultations each year



Fistula Treatment

Conduct surgical interventions for **150** women with fistula and birth related injuries annually



Training

Train up to **60** local midwives per year





Offering Jobs & Orientation

In April, following a very successful recruitment programme, all the newly employed clinical staff arrived at Kivulini Maternity Centre for the start of their orientation course.

The 32 recruits included doctors, midwives, theatre staff, nurse anaesthetists, laboratory technicians and a pharmacist.

The training developed existing clinical skills, provided updates on evidence-based practice and prepared the staff for the arrival of patients and the onset of obstetric emergencies.

Staff from the administration and support services (laundry, kitchen and maternity assistance) departments joined us two weeks later.

Spotlight

Bariki, Facilities Maintenance Manager

"I arrived on the team in Kivulini in March as the maintenance officer. In July I was joined by Brad Baker, an Australian volunteer who worked alongside me for five months. When he left I was promoted to the facilities manager. My role is to look after the functioning of the whole centre which includes ensuring a safe, organised and well maintained environment, ensuring the power and IT system is on 24/7 and that there is always water available. I supervise the guards and security system. We are running an emergency service so I am also responsible for the vehicles and drivers. Because of this I am able to ensure that the women get the care they deserve."



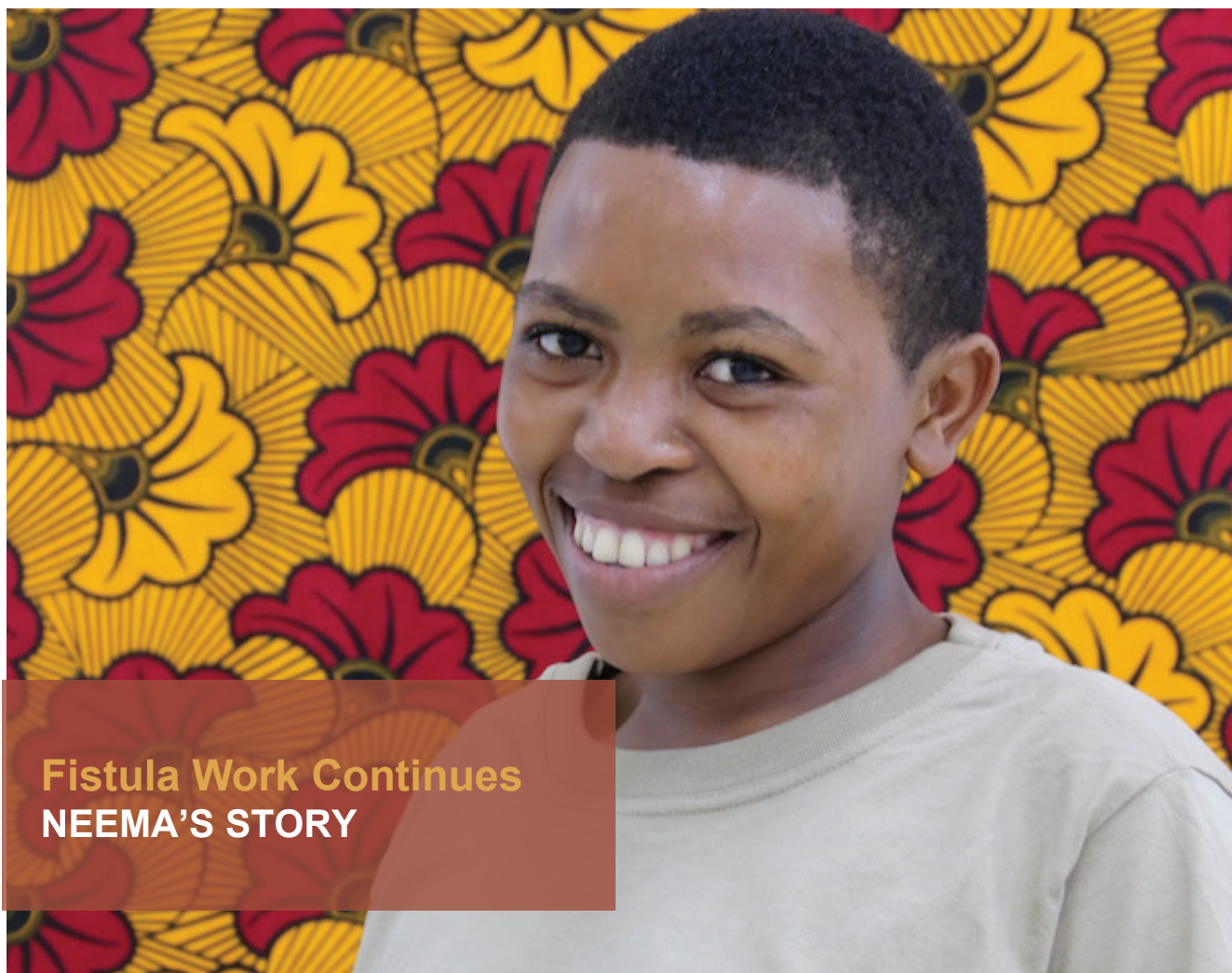
Opening

On the 9th June, the Honorable Dr. Faustine Evelbert Ndugulile (MP) Deputy Minister of Health, Community Development, Gender, Elderly and Children officially opened Kivulini Maternity Centre. Our founder and CEO Dr Andrew Browning also returned from Australia to be with us. It was a day of celebration with over 300 guests who represented staff, partners, donors and supporters who journeyed with Maternity Africa over the last few years and remained faithful through many difficult and challenging situations to get to this day. The highlight was the presence of a number of current and former fistula patients. They represented those from northern and central Tanzania who have been treated by Maternity Africa over the last seven years. They sang a number of songs that they wrote together to celebrate how the project changed their lives.



Spotlight Namyaki, Midwife in Charge

“My role as a midwife started in April when I joined the clinical team for six weeks of orientation at Kivulini Maternity Centre. I had previously worked with Maternity Africa for two years at Selian Lutheran Hospital in Arusha. I wanted to continue to work for Maternity Africa because of the high standards of care and safe deliveries that it promotes. My role within the centre is to assess the holistic care that the women and babies receive. This includes monitoring the flow of antenatal patients, those in labour and those who have delivered. It’s not only the direct clinical care that matters. I also make sure that there are good standards in each of hospital support services, such as the kitchen, the laundry and the cleaning. These are very important when we are giving quality care. My role also includes liaising with health officials to build and maintain healthy relationships within the community. The words that describe Maternity Africa for me are TRUTH and CONFIDENCE.”



There are some remarkable stories of healing and restoration in the lives of patients who received treatment for devastating obstetric fistula. Neema's story evolved over a number of years. Initially found by Lucas Toroya, our Maasai Fistula Outreach Coordinator, Neema was suffering from severe nerve injuries caused by being in labour for five days. Sadly, this resulted in a stillborn baby – a common outcome for patients suffering from fistula. It also led to severe tissue loss in Neema's bladder, bowels, and birth canal – some of the worst fistula injuries that Dr Browning had ever seen. Neema's treatment included three major operations and physiotherapy, which enabled her to walk again with a stick after a year. Dr Browning wrote "If Neema is ever cured it would be a gift from God." Neema attended Kivulini for one of the camps this year for a final attempt, when we found that she was completely cured. What a victorious celebration for Neema. Dr Browning reminds us "God heals and the doctors get paid for it." Truly a miracle happened before our very eyes.

Operational

To address fully the devastating effects of obstetric fistula, Maternity Africa adopts a three-pronged approach to service delivery. This comprises surgical treatment for those already suffering from fistula, prevention of the condition by offering quality maternity services and by providing comprehensive family planning services. The latter empowers women to choose for themselves when it is most appropriate for them to have a family.

Between our official opening in June and the end of the year, Kivulini Maternity Centre successfully ran three fistula ‘camps’ – periods of intense fistula surgery activity – making great progress towards our annual aim of hosting four such events.

Maternity services also commenced following the official opening in June. This was initially through an outreach programme that marketed our services to the local rural health facilities. By the end of the year we had achieved our interim target – a run-rate of 100 deliveries per month. This growth also resulted in increased attendance at our antenatal and postnatal clinics.

We plan to increase the number of deliveries throughout 2019, so that we achieve our next target of 200 deliveries each month.

Starting in July we also developed our in-house neonatal services. This helps us to ensure that we can provide a high level of care to vulnerable pre-term and sick new-born babies. For those babies who require a higher level of care, Maternity Africa has a relationship with nearby Arusha Lutheran Medical Centre, which has a Neonatal Intensive Care Unit.

A significant focus for Kivulini Maternity Centre is to increase the knowledge, skills, experience and confidence of our national clinical staff. This will help them to become highly competent practitioners, able to provide excellent compassionate midwifery care and appropriate 24-hour obstetric emergency support.

Kivulini Maternity Centre also developed comprehensive family planning services. These are offered to all our in-patients. The service will extend to outreach programmes during 2019.

Kivulini Maternity Centre is quickly becoming a hub of activity for reproductive health care. We achieve this through building relationships and collaborating with other stakeholders who share similar goals, serving the poorest and most vulnerable women within the same locality. In this way, our influence and reach increases and the profile of Maternity Africa is enhanced. In a short space of time, we formed mutually beneficial associations with Aga Khan University, Girls Foundation of Tanzania, Unite The World With Africa Foundation, Ace Africa, Flying Medical Service, Mission Aviation Fellowship, EDU Africa and Rotaract Arusha.

As Maternity Africa further establishes itself in the health sector, we are developing another initiative to train, mentor and empower local midwives from other health facilities. We plan to do this through a six-week midwifery training programme at Kivulini Maternity Centre. After returning to their base facilities, these midwives will be able to take the “Make One Change” challenge: to bring an evidence-based improvement to their own environment. This programme will also contribute towards the national goal of increasing standards of maternal health care throughout Tanzania, and saving lives.



Photo by Hannah Swanson

Forging New Relationships

Outreach is an important aspect of what we do at Maternity Africa. It allows us to find patients in need of treatment while educating communities on what an obstetric fistula is and some of the key factors in fistula prevention.

Outreach Across Tanzania

Lucas Toroya, our Maasai Fistula Outreach Coordinator, continued to travel across Tanzania this year to educate communities about what a fistula is, the importance of antenatal care, the danger signs of pregnancy, the value of family planning, and why we advocate for delivery in a health care facility. We reached almost 20 regions and engaged with community leaders and health care workers about obstetric fistula and related birth injuries and what services Maternity Africa offers. Through our outreach this year, we were able to reach 6,373 people directly and recruit 82 fistula patients and others suffering from birth injuries.

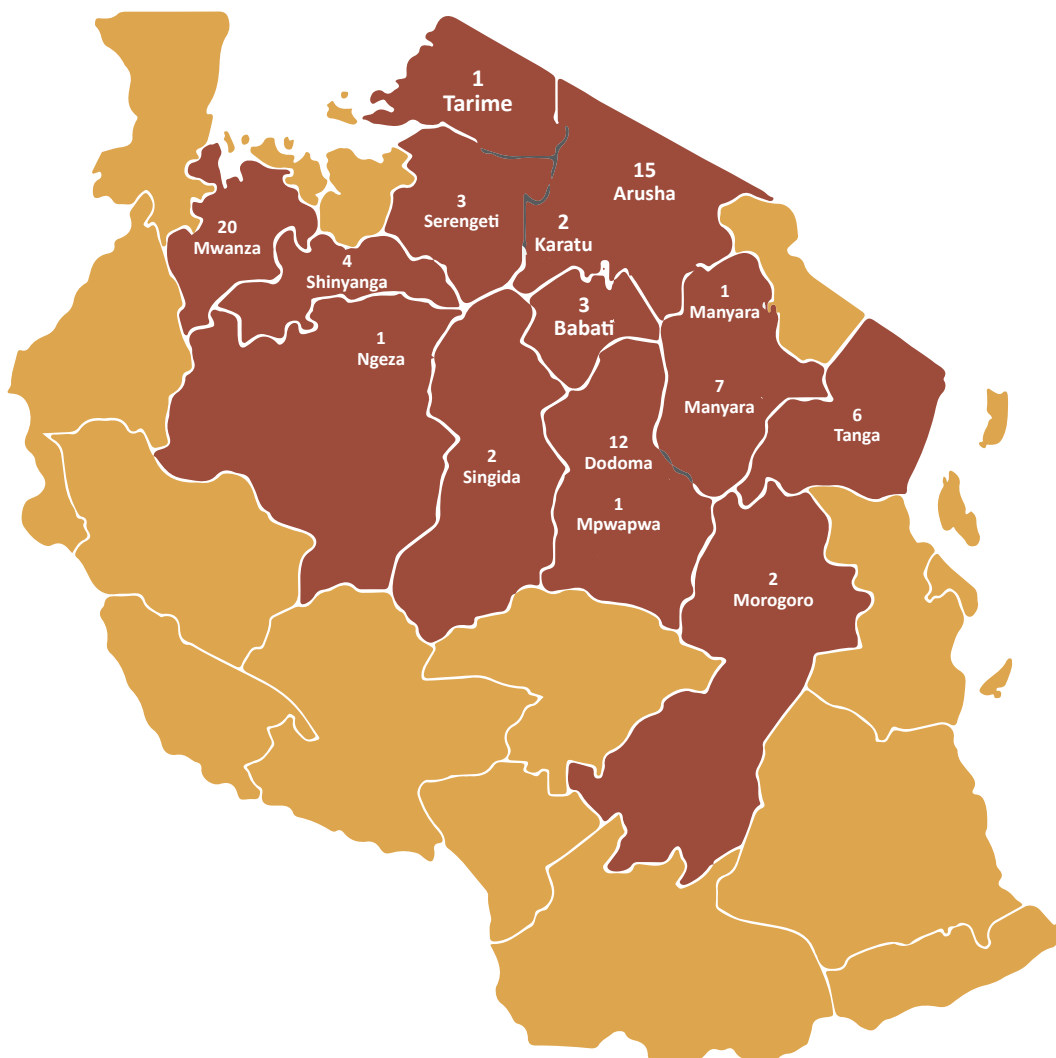
The team at Maternity Africa continues to analyse the accomplishments of the outreach strategy as well as to identify any areas for improvement in the outreach programme. We regularly review data and progress of outreach trips, which gives us greater contextual learning of what works well among our target populations.

Patient Spotlight

Maternity Patient Spotlight

Sara has had a difficult past. She had one child then had seven still births one after another all around term. Her family blamed her for the stillbirths and not being able to give the family another live child. Just as we opened Kivulini Maternity Centre, Sara was referred to us as she was suffering from a potentially life threatening condition. She went on to be one of our first ever deliveries and Caesarean Section patients. She delivered a small, premature, but live baby boy called Baraka. He was weak and had difficulty breathing so we sent her to our partner hospital, Arusha Lutheran Medical Centre which has a neonatal intensive care unit. Sara continued to be sick and needed High Dependency Care in Kivulini. Her baby boy was skilfully cared for, over a month and we were delighted that mother and baby were able to go home together, all well and thriving. We were delighted that all our staff were able to apply their learning so early with such a wonderful outcome.

Where our fistula patients came from



Maternity Africa outreach team works with other partners and healthcare facilities as well as on their own initiative, to conduct screening trips and sensitisation programs in rural communities across the country.

Overview of Our Finances

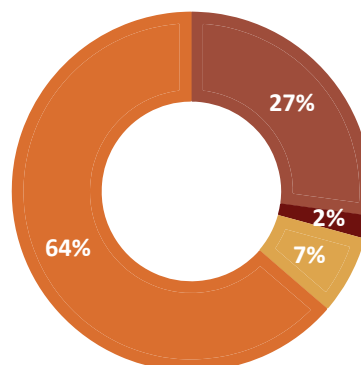
Unaudited Financial Information For the Year Ended December 31, 2018

Donations

	USD
US	368,000
Australia	157,000
UK	41,000
Tanzania	12,000
Other	1,000
	<u>579,000</u>

DONATIONS BY SOURCE COMPANY

Australia Tanzania UK US

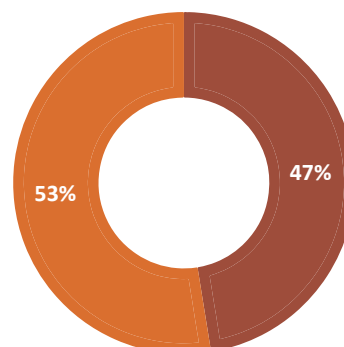


Total and Expenditure

	USD
Project Services	599,000
Building and other assets	541,000
	<u>1,140,000</u>

TOTAL & EXPENDITURE

Building and other assets Project Services

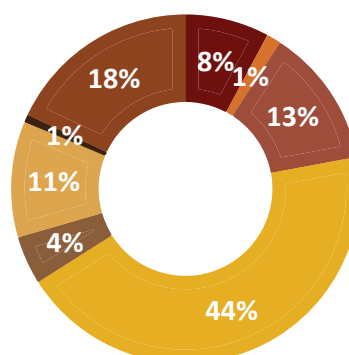


Expenditure on Project Services

	USD
Employment	263,000
Volunteers	108,000
Direct Patient Care	77,000
Property Maintenance	65,000
Administration	47,000
Outreach	27,000
Bursary/Scholarships	8,000
Registrations and Licences	4,000
	<u>599,000</u>

EXPENDITURE OF PROJECT SERVICES

Administration Registrations and Licences Outreach
Employment Bursary/scholarships Volunteers
Direct Patient Care Property Maintenance



Our Generous Supporters and Partners: Thank you!

- ❖ Arusha District Council
- ❖ Arusha Lutheran Medical Centre
School of Midwifery
- ❖ Arusha Lutheran Medical Centre
Neonatal Intensive Care Unit
- ❖ Barbara May Foundation
- ❖ CRDB Bank PLC
- ❖ Comprehensive Community Based
Rehabilitation in Tanzania (CCBRT)
- ❖ DAK Foundation
- ❖ Days for Girls
- ❖ Fistula Foundation
- ❖ Fulmer Charitable Trust
- ❖ Flying Medical Services
- ❖ Friends of Ben McDonald
- ❖ Gloag Foundation
- ❖ Hannah Swanson Photography
- ❖ IMPACT Foundation
- ❖ Ministry of Health, Community Development,
Gender, Elderly and Children
- ❖ Maisha Matters
- ❖ Planet Wheeler
- ❖ Rotaract (Arusha)
- ❖ Sonic Healthcare
- ❖ Selian Lutheran Hospital
- ❖ Segal Family Foundation
- ❖ Unite the World with Africa



How You Can Support Maternity Africa

Fundraise

Start your own fundraising campaign to help make a difference by supporting Maternity Africa. For more information, please feel free to contact us for further assistance at: maternityafrica.org/get-involved

Volunteer

Maternity Africa relies on its volunteers to support its work helping mothers and babies. For information about how you can help, visit: maternityafrica.org/get-involved

Donate

Any donations, whether great or small, are very much appreciated and will help us deliver care to the many women who need it. You can make a direct donation to Maternity Africa at: maternityafrica.org/get-involved

As a Christian organisation, Maternity Africa appreciates God's hand in what we do. To find out about how you can pray for our work, visit: maternityafrica.org/get-involved



www.facebook.com/maternityafrica/



MaternityAfrica



Maternity Africa Leadership Team.

Dr. Andrew Browning

Founder, CEO, Board Member

Jude Holden

Country Director, Secretary, Board Member

Monica Nedge

Board Member

Professor Esther Mwaikambo

Board Member

Professor Wilfred Mlay

Board Chairman

Happiness Mwamasika

Board Member

Godwin Kimaro

Board Member

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**Maternity
Africa**

Making childbirth safe

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