



We normally try to do a summer and winter newsletter 6 months apart...with that in mind this newsletter is a little late! Many apologies to the donors that are awaiting letters and receipts from us (you know who you are). A massive thanks for your patience. A great thing about being volunteers is that donations are used maximally towards our charitable activities and not on salaries for international staff, but the reverse is sometimes administration can be delayed whilst we coordinate Medic to Medic activities between our full time jobs. I promise I haven't forgotten about any of you! My list is transcribed and re-scribed and more items get added! WhatsApp has also become an extreme sport which should release daily activity reports. If this were a marker of cardiac fitness I think I'd qualify for the Olympics. There is always encouraging progress at Medic to Medic. Our organization is growing with new initiatives, projects and opportunities. But, our work is never done. On the last count we have over 200 scholarship applications. This goes some way to demonstrate the huge need in Malawi where in recent weeks there was a 25% devaluation of the Malawi Kwacha. Many students are suffering. We hope we can start supporting more students very soon. We are *always* in need of team members, so if you can help in any way (big or small, long or short term) we'd love to hear from you. Above all, thank you for helping us do what we do. It couldn't be done without you.

Tamsin

"Being the first young person in my community who is in college and pursuing a medical profession has been a blessing to the young ones as they look up to me. It is an inspiration to them, they now believe that they can become whoever they want in life provided they work hard and trust the process."

What's the long term impact of Medic to Medic scholarships in Malawi?

Every year, we conduct a survey to assess the status of our graduates. We currently have 163 alumni. The 2022 survey had a 98% response rate.

The professional breakdown of our alumni include 76 (47%) doctors, 24 (15%) physiotherapists, 20 (12%) pharmacists, 21 (13%) mental health workers, 10 (6%) nurse midwives, five (3%) clinical officers, and one (1%) optometrist and one (1%) medical laboratory scientist. Three graduates (2%) did not complete the survey.

93% of graduates currently reside in their country of training (Malawi or Uganda). Twelve graduates reside outside their country of training with most pursuing further qualifications. These graduates reported that they are expecting to return home in the future.

32% of graduates have been involved in health promotion in a professional capacity via media outlets including newspapers, radio and television. 88% of graduates provide financial support in the form of school fees to their children or other relatives in secondary or tertiary education. 10% of graduates own a house and 46% own a car. 77% of graduates have financial responsibilities which include taking care of extended families.

The 2022 survey results demonstrate the wide-ranging effect our graduates have on their local communities through health promotion & financial support. Our alumni are involved in local fundraising and make regular contributions to enable Medic to Medic to support more students. Most importantly, 93% remain in the country in which they trained, strengthening human resources for health where they are needed most.

Bryony Hamel



Graduates Lawrence, Ireen, Eden, Patience, Patricia.

My Life at University

Education is vital to every individual as it helps one to change their past behaviour. When one gets educated, their family and community too are educated. This is so when it comes to decision making on particular developmental project in the community the one gets educated is relied much on to make well informed decisions. In the family, for example when one gets educated, other family members look at her/ him as already to help them in time of need. Members believe that they can ask advice and even any other present help from him/ her. They also think that with education it is easy for the person to secure any job he or she may wish.

Here in Malawi mainly in remote areas for one to get educated, the probability is very low. There are a number of reasons accompanying the development. First one, most people living in these areas are illiterate, hence they do not encourage their children to attend even primary education although in Malawi primary education is for free of charge. Second one, majority of people living in these areas are economically challenged. They say when their child gets secondary education they can not pay for his/her school fees, hence they force their children to quit school early and join them in local farming. Third reason is that most parents force a girl child to get marriage earlier when a man who has money shows interest of marrying her even if the man is older than the girl so that they can get a little in return.

When one gets secondary education in these areas it is considered as a great achievement. Rarely you find one gets tertiary education from remote areas. If you happen to get one, assess him/ her, they will surely tell you that they have their relatives working and living in urban areas and it is where they did their both primary and secondary education and proceeded to tertiary one.

This is not the case with me as I grew in one of the remote areas and got selected to one of the urban secondary school sponsored by Anglican church bursary and by the grace of God finally got selected to one of the public universities here in Malawi. I was enrolled as university student in the year 2019. Here life to me was unbearable because of high cost of living and tertiary education demands a lot. I had to pay for my school fees, rent and buy food. My mother who is parenting six of us was unable to manage even one. I had to do some pieces of work for my survival like cultivating in other people's agricultural fields and washing clothes for my fellow students to give me a tablet of soap in return. I could often miss classes in order to complete my hand outs. My performance at school started to decline. One day I thought to quit school, but something came in my mind that I am a head of my family, not only my



Above: Edward on clinical practicals

family but also my community as I am only the one in my community who made it to university. Still more things were not going well for me. I continued missing classes in search for hand outs. I started feeling like I am not going to meet my goal of being a professional nurse. Till in the year 2021 end when I received a call from Dr.Tamsin, CEO for M2M that I had been taken as one of the beneficiaries of M2M scholarship. It was when my life changed completely. Now I can see the possibility of meeting of my dream. I thank God for your timely coming to rescue me. My family is also rescued and my community too.

Edward Chimenya

Student Quotes

"I am really grateful to Medic to Medic for it has changed my primitive life into the very hopeful one."

"Since I got this sponsorship my story has changed, I was once a great friend of differed examinations. I'm currently doing better because panic and dread are now far from me."

"You've brightened up my life and I regard you as charming gardeners who make my soul blossom."

A Shared Vision

We sat by the dining table one evening. Slowly sipping our tea. The “awkward” silences between conversations were no longer awkward at this point. We both just welcomed them as part of us. We are both introverts, and so we both like to be left alone. We were alone. Together. I had just finished writing my final years exams, anxiously awaiting my results.

“So much goes on when exam papers are being marked, you know” He broke the silence. He chuckled by himself, as he would always do. The chuckle slowly graduated into a convulsion of laughter. Accompanied by amazing contortions on his face, you would think he was in agony. All the while I would just sit there, clueless, impatient to hear the joke that never landed, jealous at the unshared humor. A couple of minutes later, with tears rolling down his cheeks, he would conclude his session. Naturally I would be indignant at this point. My uncle was unbothered.

He finally then went on to tell the “joke”. He started sharing about all the things that happen when students’ papers get marked. He explained how sometimes when an examiner is tired, they would just skim through the paper and determine a grade. He then also explained how some students would pass exams purely out of luck; perhaps the examiner was in such a good mood that day that he or she decided to make everyone pass. The factors influencing a grade were one too many. But just like most of my uncle’s stories, this story did not deserve the amount of laughter it got. Not even close.

Having been involved in marking papers for the Hurst Essay Competition this year, I got to experience some of the things my uncle talked about. It felt like such a sacred role determining another person’s fate. It probably wasn’t this profound, but it felt great, nonetheless.

I learnt a lot through marking those papers. I learnt about the writers as well as about myself. I learnt about my own personal biases. I understood the importance of having at least more than one marker to offer alternate perspectives. I was generally impressed with amount of work the students had put into their essays. Naturally, some had done more than others.

Ultimately, it comes down to one winner in each of the categories. Felix Oriono, the overall winner for this year in the category that I marked, offered a comprehensive explanation of the definition, followed by a well-structured body, that gave a detailed discussion including relevant examples. The following is an excerpt from Felix’s essay:

“The health of an individual entirely depends on the health of the whole world. This is because the increased interconnectivity and ease of travel has led to easier cross-border interactions, hence perpetuating the spread of contagious diseases. The general health of the human race is also dependent on the climate of the whole world at large. Global warming alone is a great threat to the health of all people everywhere. Due to the increasing dependence of people’s health on general global health, the WHO and the world at large are therefore called upon to ensure that global health is uplifted. Many measures are already in place to make sure that the world is healthy, for example, the COP26 climate change summit package of decisions consists of a range of agreed items including strengthened efforts to build resilience to climate change, curb greenhouse gas emissions, and provide the necessary finance for both. With all these in place, the world can do more to protect all people from the devastating effects of global problems on their health.”

As a graduate, I was also challenged to improve my own writing skills by learning not only from the students, but also from my fellow marker. I encourage more people to participate in these essays, either by contesting, or by being markers. As contesters, students not only get to win a prize, but they also get to exercise their writing skills. As for the markers, not only do they help with the task of determining a winner, but they take part in the noble duty of sharing their knowledge and expertise in academic writing with those less experienced. Let us all share this vision and help improve our students’ writing skills.

Isaac Yiwombe

Kamuzu University of Health Science Students

“There is no health without global health. Discuss.”

- 1st Prize: Felix Oriono Ugandan MBBS Student
- 2nd Prize: Grace Chawinga Pharmacy Year 4
- 3rd Prize: Kumbukani Kamwanda Physiotherapy Year 4
- Highly Commended: Moses White Pharmacy Year 3

Allied Health Students

“How can modern technology improve the health of Malawi? Give examples to support your arguments.”

- 1st Prize: Peter Samuel - NMT Nkhoma Nursing College
- 2nd Prize: Yohane Nyirenda - Mzuni nursing year 4
- 3rd Prize: Gift Khonje - Clinical officer Ekwendeni year 3
- Highly Commended: Lucius Gerrald - Mzuni nursing year 4

SJOG Students

“Why are mental health problems on the rise in Malawi and what can be done about it?”

- 1st Prize: Brighton Lupeska - Psychosocial counsellor
- 2nd Prize: Joseph Kumwenda - Psychosocial counsellor
- 3rd Prize: Bertha Kasambala - Psychosocial counsellor
- Highly Commended: Diana Ligoma - Psychosocial counsellor

Thank you to our markers: Robin, Helen, Richard, Cathy and to M2M graduates Samuel & Isaac.



Email: info@medictomedic.org.uk

For comments, questions and errata regarding this newsletter, please contact the editor at the email address above. Every effort has been made to credit contributors to this newsletter. Where omissions have occurred, please advise and they will be rectified at the earliest possible opportunity.



Medic to Medic



@MedictoMedic



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Medic to Medic was founded in 2007 to address the problems of training and retaining medical students in some of the world's poorest countries.

For our first country, we chose Malawi. Like so many sub-Saharan countries, Malawi is desperately short of doctors. It has just two doctors per 100 000 people. The UK has over 230 per 100 000.

Medic to Medic helps by supporting poor but bright students through medical school, who might otherwise drop out. We cover their tuition fees and give them allowances for equipment and books. We can link students to mentors, who provide holistic support.

Our scheme to support medical students has been so successful that we now also support physiotherapists, pharmacists, nurses, mental health workers and clinical officers in Malawi.

Most of our donors give just £5—20 per month. If you feel you can support a student, please visit www.medictomedic.org.uk to set up a direct debit online.

You will be linked with an individual student and receive regular updates from them on their progress. You are welcome to enter into email correspondence with them and many of our students find this very motivating. Please note that although you will be allocated a particular student, our donations are pooled so that no one student is disadvantaged if a donor needs to withdraw.

Future Fundraising

Nominate Medic to Medic to win £1000 through Ecclesiastical. Our charity number is 1149904. <https://www.movementforgood.com/12days/#nominateACharity>

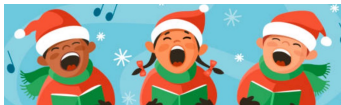


guineapig

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Email for more info: info@medictomedic.org.uk

Carol Singing at Tube Stations



3rd December 7-2pm Pimlico ; 10th December 3-10pm London Bridge ; 17th Dec 3-10pm Archway



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Donate using Pledjar

The free app that uses the latest technology to round up your total daily transactions to donate to a charity of your choice.

Environmental Action

In January we embarked on an environmental action initiative. We asked students to get involved in tree planting within their villages. 15 students came forward. They were asked to identify an area for reforestation; discuss projects with the village chief and submit a proposal. Trees provide shade, reduce soil erosion and prevent flooding as well as being important tools in reducing carbon dioxide from the atmosphere.

Climate change is already having a detrimental impact on health outcomes for people globally, but more so in countries such as Malawi that are already vulnerable to climate injustice.

As of August 2022 over 1000 trees have been planted by Medic to Medic students in Malawi. These projects have enabled us to work with students developing leadership skills ensuring that forests are community owned and supported.

Would you like to sponsor a student forest? We hope to run this again during the planting season in December 2022. It doesn't cost as much as you'd think. Email info@medictomedic.org.uk for further information.

