



# SOCIAL INNOVATION IN HEALTH INITIATIVE MALAWI

## REPORT

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### 2017 - 2019



**SIHI  
MALAWI**

Hosted at University of Malawi,  
College of Medicine



**COLLEGE OF MEDICINE**

*Excellence yesterday, today and tomorrow*

# WHAT WE HAVE ACHIEVED

2017 - 2019

## LEARNING ABOUT SOCIAL INNOVATION IN HEALTH

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Social  
Innovations  
Shortlisted



Eligible Malawian  
Innovations



Research Projects:

- 6 Case Studies
- 1 Thematic Research Study



Student Research Grants  
Awarded



National Social Innovation  
Crowdsourcing Contests

## CONNECTING AND SHARING ON SOCIAL INNOVATION IN HEALTH



40+

People Convened  
from 11 Countries



3 Health  
Implementers  
Connected



8 Gatherings Conducted



7 Universities  
and Colleges  
Connected



3 International and UN  
Agencies Engaged



3 Supported and Engaged  
with Departments in the  
Ministry of Health

## SUPPORT FOR SOCIAL INNOVATION IN HEALTH



20 Social Innovators  
Supported



6 Videos Produced



3 Courses and Tools  
Developed



2 Student Internships  
Hosted



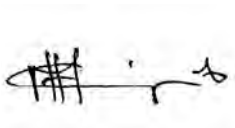
8 Female  
Researchers  
Trained

# WELCOMING ADDRESS

I am pleased to introduce the College of Medicine's (COM) Social Innovation in Health Initiative (SIHI) hub report. This report illustrates College of Medicine's commitment to advancing excellence in education, research and service delivery. Over the last few years, the COM-SIHI Malawi hub has identified and supported promising social innovation projects which were aimed at expanding universal health coverage. The hub has supported these social innovators with research, capacity building and advocacy to create an enabling environment for social innovation in health to flourish. We hope to improve the delivery of health services across marginalized population in Malawi.

At the College of Medicine, we realized that the relationship between universities and social innovators is important. The university is a trusted and credible source of new knowledge. Hence, it can support good innovations with expertise and methodologies to collect credible evidence and link the innovations to policy makers. To support this linking of the College of Medicine to social innovators, the hub has been a grateful recipient of funding from the Special Programme for Research and Training for Tropical Diseases (TDR) and the Swedish International Development Cooperation Agency (SIDA) that has supported the identification of 20 social innovations, 6 research projects and advocated for one of the social innovations all the way to the World Health Assembly. This advocacy has led to a national scale up of innovations in Malawi and across the region.

As a university, we commit to supporting and expanding this initiative. We continue to support our mission of responding to health needs across Malawi and the Southern Africa region.



Dr Mwapatsa Mipando  
College Principal





# WHAT IS SOCIAL INNOVATION IN HEALTH?

The Malawi Health Sector's Strategic Plan II and Community Health Strategy commits to enhancing the quality of primary healthcare and achieve Goal 3 of the Sustainable Development, Universal Health Coverage (UHC) for all. The Ministry of Health is calling for evidence of local human-centred interventions that can increase access, affordability and quality of health services for marginalized communities.

As often the case in Malawi, well-intended programmes and projects fail to sustainably achieve health improvements for all. Programmes are frequently duplicated with limited contextual variations and lack of coherence. In addition, the limited engagement with marginalised communities result in Malawi not reaping the benefits of their invaluable input.

Innovation in Malawi is still a new concept and has largely been focused on technology (eHealth and eMobile) and entrepreneurship. Malawi is currently ranked 118 out of 129 countries on the Global Innovation Index for Healthcare. The Malawian Government recognises innovation as a tool to improve quality of life, however the scope and support of innovation programmes are not well defined. Notable innovation activities have occurred in isolation with limited system's support.

Community-based social innovation is a **bottom-up, citizen-led approach** that results in the development and implementation of creative solutions that solve pressing health system challenges. Adopting this approach can help the goals and strategies laid out by the Ministry of Health be achieved.

At the centre of social innovation is the belief that citizens and communities are capable of competently interpreting their own lives and creating solutions to address their own health problems. This view allows for **inclusive participation in solution-creation by all Malawians**, including students, frontline health workers, community members, academics, policy makers and institutional partnerships across sectors.

As social innovations follow a bottom-up approach, **these solutions are respectful to the contextual, cultural and gender-based dynamics of a specific area or community**. It is as much about the 'how' of implementation as it is about the 'what' of solution creation. Shared implementation, **community participation and agency** ensure that solutions are maintained and sustained over a period of time. In this way, the ownership of people's health is placed back in their own hands.

At a health systems level, social innovation can contribute to new policy solutions. Successful social innovations can be scaled up to achieve greater impact and the lessons from small-scale social innovations can provide valuable knowledge on how more people-centred health services can be delivered. Through the **adoption and institutionalisation** of social innovations as part of the public health system, the system can become stronger, more resilient and capable of providing all Malawians with the health care they need.



# THE SOCIAL INNOVATION IN HEALTH INITIATIVE IN MALAWI

The Social Innovation in Health Initiative Malawi was founded in 2017 and is hosted at the College of Medicine, University of Malawi.

Our approach and activities have been informed by consultations (2017 – 2018) with diverse stakeholders from across the health system. From this strategic exercise, four ecosystem needs were identified: 1) a better understanding of the concept of social innovation and identification of social innovations in the Malawian context, 2) a neutral platform to connect innovators, policy makers and other health system actors, 3) evidence of social innovation to inform implementation, institutionalisation and scale of social innovation as part of the public health system, 4) support early stage innovations through funding opportunities and advisory services.

## OUR VISION:

To see the achievement of a healthier Malawi through the creation of a citizen-led, equitable, effective, sustainable health system. We believe that social innovation can contribute to the achievement of Universal Health Coverage.

Through our activities, we want to see the creation of an enabling environment for social innovation in Malawi. Everyone has a role to play in this – people and organisations from all sectors, backgrounds and disciplines. Together, we can foster a culture of Malawians solving their own health challenges.

We work in three areas:

### 1. LEARNING

We identify and research local innovations to learn about how these solutions can help strengthen the Malawian health system.

### 2. CONNECTING & SHARING

We provide a platform for all individuals and organisations interested in social innovation in health to network, share, and collaborate.

### 3. SUPPORTING

We recognise, promote, and build skills of innovators to develop, implement and sustain citizen-led ideas to address Malawi's health challenges.



# SIHI GLOBAL NETWORK

The SIHI Malawi is a partner of the SIHI Global. This is a cross-country network of passionate partners advancing research and advocating for social innovation in health, through research, capacity building and advocacy.

SIHI was founded in 2014 on the belief that across low- and middle-income countries (LMICs), actors from different backgrounds and disciplines are active in developing and implementing creative community-based solutions to overcome challenges in health care delivery. Since 2014, SIHI has identified 288 eligible innovations; conducted case research on 40+ social innovations in health across 17 countries and hosted 5 international convenings with 200+ participants from 24 countries.

The network is comprised of universities, research centers, international agencies and foundations. SIHI receives funding from the Special Programme for Research and Training in Tropical Diseases (co-sponsored by UNDP, UNICEF, the World Bank and the World Health Organization) and the Swedish International Development Cooperation Agency (SIDA).

 AFRICALICS	 Ahimsa Fund Making good health contagious	 BERTHA CENTRE LACT GRADUATE SCHOOL OF BUSINESS
 CIDEIM	 FONDATION MERIEUX	 GLOBELICS
 LONDON SCHOOL OF HYGIENE & TROPICAL MEDICINE	 M.A.D. MAKE A DIFFERENCE	 MAKERERE UNIVERSITY
	 Pan American Health Organization	 SESH Crowdsourcing For Health
 Sida	 SCHWAB FOUNDATION FOR SOCIAL ENTREPRENEURSHIP	 TDR For research on diseases of poverty UNICEF · UNDP · World Bank · WHO
 UNAIDS	 UNDP	 unicef
 UNIVERSITAS GADJAH MADA	 UNIVERSITY OF GHANA	 UNIVERSIDAD ICESI
 COLLEGE OF MEDICINE Excellence yesterday, today and tomorrow	 UNAH UNIVERSIDAD NACIONAL AUTONOMA DE HONDURAS	 UNIVERSITY OF RWANDA
 UNITED NATIONS UNIVERSITY UNU-IIGH International Institute for Global Health	 World Health Organization REGIONAL OFFICE FOR Africa	

A photograph of a man with a beard and short dark hair, wearing a red t-shirt and a black vest, riding a bicycle. He is looking towards the camera. The background shows a dirt path, trees, and a stone wall. A large, colorful geometric shape, composed of red, orange, green, and yellow triangles, is overlaid on the left side of the image. The text 'OUR WORK' and '2017 - 2019' is written in white, hand-drawn style letters over the red and orange sections of the overlay.

**OUR WORK**  
2017 - 2019



Credit: Lindi van Niekerk, Malawi (2017)

1

# LEARNING ABOUT SOCIAL INNOVATION
















Credit: Lindi van Niekerk, Malawi (2017)

Since 2017, we have been conducting research to gain a deeper understanding of social innovation within the context of Malawi and its potential value for the health system. Our research has focused primarily on identifying and studying specific social innovation cases, and on studying the processes by which these innovations can be adopted as part of the health system.

The evidence gathered on social innovation has helped to demystify what social innovation is and provide guidance to our policy makers. It has also assisted in identifying areas where deeper investigation is required.

In conducting research, we have extended beyond narrow academic silos and adopted a more interdisciplinary approach by fostering collaborations across the College of Medicine and other academic institutions in Malawi.

## SIHI MALAWI PARTNERS

	 <p>Malawi University of Science and Technology</p>	 <p>Medical Students Organization</p>	 <p>MICHIGAN STATE UNIVERSITY</p>
 <p>Ministry of Health and Population</p>	 <p>National Council of Science and Technology</p>	 <p>NATION PUBLICATIONS LIMITED</p>	 <p>UNIVERSITY OF MALAWI</p>
 <p>USAID FROM THE AMERICAN PEOPLE HP+ HEALTH POLICY PLUS</p>	 <p>SOCIAL INNOVATION IN HEALTH INITIATIVE</p>	 <p>TDR For research on diseases of poverty UNICEF • UNDP • World Bank • WHO</p>	 <p>UN DP</p>
 <p>unicef</p>			

# WHAT WE HAVE ACHIEVED

## INNOVATION REPOSITORY



**Social  
Innovations  
Shortlisted**



**Eligible  
Malawian  
Innovations**

We have conducted 3 national crowdsourcing contests to identify locally developed and implemented health solutions to Malawi's key health challenges.

	2017	2018	2019
<b>FOCUS</b>	Improving maternal and child health	Improving healthcare delivery	Contributing to health-related SDGs

From these contests, 80 health projects were identified, following an independent expert review process, 20 of these were shortlisted as potentially high-value social innovations. All identified and eligible innovations become part of our national repository.

## CASE STUDIES



**Case  
Studies**

From the shortlisted innovations, 6 case studies were selected and research case studies were conducted for these. These case studies had:

- 4 Cross-sectoral partnerships
- 1 For-profit company
- 1 Social Enterprise
- 4 Focus on primary care services

All case studies are available for free download at:

[www.socialinnovationinhealth.org/case-studies](http://www.socialinnovationinhealth.org/case-studies)

## POLICY RESEARCH

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### Thematic Research Study

We have been conducting a collaborative research study with the London School of Hygiene and Tropical Medicine's Department of Global Health to investigate how social innovation can be adopted and institutionalised into the public health system. We collected longitudinal case data (June 2018 to July 2019) from Chipatala Cha Pa Foni, a social innovation and Malawi Ministry of Health supported project. The findings of this research will be published in 2020-2021.

## STUDENT GRANTS

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### Student Research Grants Awarded

To build greater capacity for research in social innovation in health, we have been supporting students at the School of Public Health, University of Malawi. In 2018-19, 3 research grants were awarded. Grantees receive support and mentorship from senior public health researchers.



Credit: Lindi van Niekerk, Malawi (2017)

# 2

# CONNECTING AND SHARING ON SOCIAL INNOVATION





Our hub has served as a platform to connect underserved communities, academia, private sector, innovators, organizations and government (Ministry of Health) and other national institutions (National Commission of Science and Technology). We believe in sharing our knowledge of social innovation in health with our partners. Sharing lessons learned and evidence, allows for other social innovation projects to be implemented more effectively and increase the chance of success.

## SIHI MALAWI TEAM



**Don P. Mathanga**  
SIHI Malawi  
Director



**Barwani Msiska**  
SIHI Malawi  
Manager



**Atupele Kapito-Tembo**  
SIHI Malawi Advisor



**Vincent Jumbe**  
SIHI Malawi  
Researcher



**Chikondi Khofi**  
SIHI Malawi Admin  
& Finance



Credit: SIHI Malawi, Malawi (2019)

# WHAT WE HAVE ACHIEVED

## ENGAGEMENT WITH INNOVATORS

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Gatherings  
Conducted

In 2018 and 2019, we hosted gatherings with all shortlisted innovators to share lessons from our research, to network and to explore areas for support and collaboration. We also used these gatherings to ask for input on how our hub activities could better serve the needs of our innovators and our country. We identified areas for capacity building and integrated these into our activities.

## ENGAGEMENT ACROSS SECTORS

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People Convened  
from  
11 Countries

In 2018, SIHI Malawi co-hosted a 2-day workshop with TDR to create a guide for researching social innovations. Over 40-participants attended from 11-countries.

For our local stakeholders, we also hosted a Social Innovation in Health Lunch Symposium which provided key health system actors, innovators and the hub an opportunity to connect and network.

## ENGAGEMENT WITH PRIVATE SECTOR

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We regularly engage with the private sector to nurture relationships and build greater momentum for social innovation. The hub has also received advisory services from its private sector partners and together, we work to foster a culture of innovation in Malawi.

## BUILDING CROSS-COUNTRY PARTNERSHIP - MALAWI & RWANDA

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We have initiated a collaborative-learning partnership with the University of Rwanda's School of Public Health. Starting in 2020, we will be conducting research, identifying social innovations in each country and engage students from each institution to build local and national capacity for social innovation.

## ENGAGEMENT WITH GOVERNMENT

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We have engaged with 3 departments of the Ministry of Health and Population (MOHP): The Department of Community Health, Clinical Services, Quality Improvement and Digital Health. These departments have served in an advisory capacity to the hub and as research collaborators. For a gap analysis, Ministry of Health officials and officers opportunities identified needs for social innovation in the public health system. This analysis guided us on how the hub and others in our ecosystem can collaborate effectively with MOHP.

Through our engagement with the National Commission for Science and Technology (NCST), social innovation in health will be recognised as a subtheme in future NCST conferences. In partnership with the hub, the NCST identify and recognise innovators in order to strengthen awareness and information on local innovations.

## ENGAGEMENT WITH UNIVERSITIES AND COLLEGES

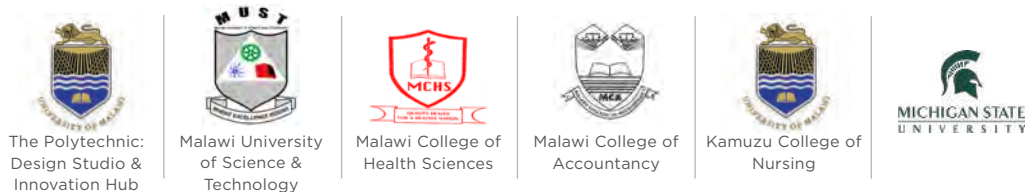
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In 2018, we hosted the first Social Innovation in Health Case Competition in Malawi and 45-students from 5 colleges participated. Students had the opportunity to gain hands-on experience in developing innovative solutions to real healthcare challenges. This event was hosted in collaboration with Youth Net and Counselling (innovator) and the Medical Students' Association of Malawi.

In November 2019, the College of Medicine hosted its 23rd Annual Research Dissemination Conference. Social innovation was incorporated in the conference through the Science Café, named Social Innovation in Health - Using Local Resources to Solve Healthcare Related Problems in Malawi.

The hub has a partnership with the following universities and colleges:



# 3

# SUPPORTING SOCIAL INNOVATION



Since inception, the hub has championed social innovation in the Malawi's health system – in academic, government and private arenas. We have actively promoted social innovations through media channels, produced case videos for our selected innovations and have provided innovators with an opportunity to present their work at key local and global conferences.

To strengthen existing social innovations, while also stimulating further citizen-led ideas, we have conducted training workshops, provided advisory services and been active in providing linkages to new opportunities and networks.

We have contributed to the local innovation eco-system by fostering collaboration among social innovators and other health system actors at community, district and national levels. Additionally, the hub is now leveraging for advocacy with the government in support of scaling up some of the promising innovations in Malawi.



Credit: SIHI Malawi, Malawi (2019)

# WHAT WE HAVE ACHIEVED

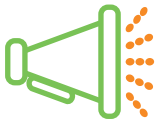
## SUPPORT FOR INNOVATORS

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### **TRAINING & NETWORKING: COMMUNICATION FOR SOCIAL AND POLICY**

In May 2019, we hosted 2 training workshops. The first, trained 12 innovators on how to effectively communicate with stakeholders to drive social and political change. This was hosted in partnership with Health Policy Plus, the Palladium Group. The second, was held with innovators and media representatives. Here, the focus was to discuss and understand how media can be leveraged to promote participation and recognition of social innovation. Subsequently, the hub and innovators have been featured in print and television segments.



### **ADVOCACY: VIDEO STORYTELLING**

Six short professional videos have been produced on identified social innovations and on our work. As part of case study research, these videos have been an effective tool in advocating for social innovation in health at national and international health platforms.



### **NETWORKING: LINKING INNOVATORS TO INTERNATIONAL ACTORS, 2017 - 2019**

SIHI Malawi helped to foster connections between local innovators and key international agencies like the World Health Organization (WHO), Centre for Disease Control Africa, the UNAIDS Innovation Exchange to provide them with international opportunities for visibility and potential partnerships. In 2019, Chipatala Cha Pa Foni (a project of the Ministry of Health and VillageReach) had the opportunity to present their work at the World Health Assembly. The project has also been included in the WHO's SDG Global Action Plan. In 2019-2020, two shortlisted innovations were invited to exhibit at UNAIDS Innovation Exchange Forum.



## **STRATEGIC PLANNING: SOCIAL INNOVATION IN HEALTH MALAWI ACTION PLAN**

In 2019, a strategic plan was created to support SIHI Malawi's position as a facilitator of social innovation across Malawi. In consultation with various social innovators, the plan guides implementation activities for the benefit of innovators, academics, communities and government alike.

## **SUPPORT FOR ACADEMICS AND STUDENTS**

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### **TRAINING: EFFECTIVE PROJECT MANAGEMENT AND EVALUATION COURSE**

In collaboration with TDR and CIDEM, SIHI Malawi hosted a 4-day project management training course in 2017. The course equipped researchers and academics from the College of Medicine, with the skills needed to help innovators implement their solutions more effectively.



### **PRACTICE-BASED LEARNING: SIHI STUDENT INTERNSHIPS**

Student internships are offered as part of social innovation research education at undergraduate and graduate level. Students provided valuable inputs to the hubs strategic activities and were introduced to concepts of social innovation, research approaches and its application. They were able to gain hands on experience and engage with ecosystem actors.



Credit: SIHI Malawi, Malawi (2019)



# MALAWIAN SOCIAL INNOVATIONS IN HEALTH





# MALAWIAN INNOVATIONS RESEARCHED

## 2017 - 2019



### **Sustainable Integrated Rural Healthcare Model**



Child Legacy International



Not for Profit NGO



Facility-based Innovation



Primary Healthcare,  
Maternal & Child Health



Lilongwe, Msudwe



### **Online Clinic Yathu (OCLIYA)**



OCLIYA



Hybrid Social Enterprise



Community-based innovation



Non-Communicable Diseases



Lilongwe



### **Kaundu Community Based Health Insurance**



Kaundu Health Centre - Christian Health  
Association of Malawi, Community



Partnership



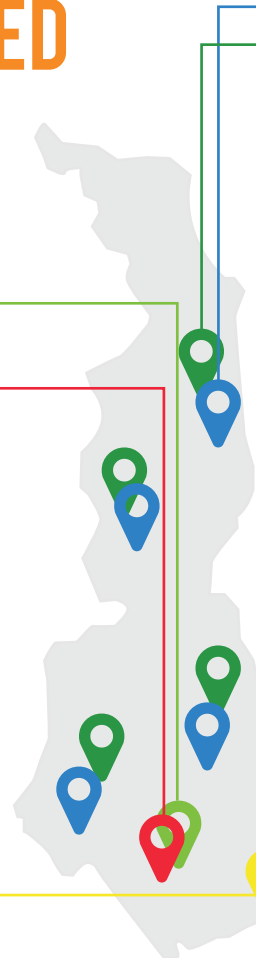
Facility-based Innovation



Primary Healthcare



Dedza East





### Chipatala Cha Pa Foni



Ministry of Health, VillageReach



Partnership



Community-based Innovation



Primary Healthcare, Sexual Reproductive Health



All 28 Districts



### Mother's Fun Run



Nation Publications Limited



For Profit



Community and Facility-based Innovation



Maternal & Child Health



All 28 Districts



### Learner Treatment Kit



Save the Children, Malawi Government - Ministries of Education & Health



Partnership



Community-based Innovation



Malaria



Zomba, Machinga



### Managed Surgical Network through WhatsApp Group Forum



Scaling Up Surgery for Rural Populations in Africa (SURG Africa) Project - College of Medicine, Ministry of Health



Partnership



Facility-based Innovation



Surgical Care, Training & Mentorship



13 Districts, Southern Region

# CHIPATALA CHA PA FONI (CCPF)

**INNOVATORS:** Ministry of Health, VillageReach and Partners

**OPERATIONS:** Nationwide



## CHALLENGE

84% of Malawians live in rural areas and have limited access to quality healthcare. Lack of access to appropriate, timely and accurate health information by communities increase the risk of illness and avoidable death from preventable causes.



## SOLUTION

A toll-free hotline, staffed by qualified nurses, providing clients with MOH approved health information. Clients displaying “danger signs” are referred to their closest health facility. Hotline staff perform call backs to ensure linkage to care is successful. Complimented by tips and reminders, clients receive health information on reproductive, maternal, and newborn health topics and nutrition to their mobile phone via text messages.



## IMPACT

Indicators relative to non-users of the hotline:

- CC PF users are significantly more likely to have a planned pregnancy.
- CC PF users are significantly more likely to start Antenatal Care (ANC) attendance in the first trimester of pregnancy.

- CC PF users are more likely to be tested for HIV.
- CC PF users are significantly more likely to consume fats/oils, and also vegetables and fruits.
- CC PF users are more likely to have used (modern) contraceptive methods.



## LESSONS FOR HEALTH SYSTEM

- Innovators should engage and cooperate with government from the beginning to build mutual trust and a strong working relationship.
- Creating a joint long-term vision, nurtured and championed by government, innovators and key stakeholders is imperative to take an idea from pilot to scale.
- Reimagining the role of the private sector in Malawi is important as a catalyst for local innovation. Since 2015, Airtel has made CC PF possible by ensuring all calls made to the hotline are free of charge to users.



Credit: Lindi van Niekerk, Malawi (2017)

# KAUNDU COMMUNITY BASED HEALTH INSURANCE INITIATIVE

**INNOVATORS:** Kaundu Health Centre (Christian Health Association of Malawi) and Community

**OPERATIONS:** Dedza East



## CHALLENGE

Out of pocket costs are a barrier to accessing health services; especially in rural communities where only fee-for-service health facilities exists. In Malawi, 29 % of all health services are provided by the non-profit Christian Health Association of Malawi who charge a service fee.



## SOLUTION

A community-initiated and owned health insurance scheme to reduce out of pocket expenditure associated with seeking health services at Kaundu Health Centre. The scheme provides financial protection against the unforeseen cost of illness. Community members contribute \$0.28 each month, which is saved towards reducing the out of pocket costs when seeking care.



## IMPACT

- From 2014 to 2017, facility-based deliveries increased 10-fold and utilisation of health services by children under-5 years and adult outpatient services have nearly doubled.
- Since 2016, the health facility has been able to employ and retain two nurses and procure essential drugs due to the scheme.

- Community involvement has improved by setting up structures for enhanced through the engagement in local governance structures for accountability and having well-defined community roles that support the delivery and maintenance of the solution.



## LESSONS FOR HEALTH SYSTEM

- Traditional leadership, informal networks and community volunteers are effective resources that can be leveraged to increase ownership, accountability and sustainability of community programmes.
- Long-term community sensitisation and regular facility-community feedback enhances participation, agency and active involvement, even in communities to are hard to reach or have low-literacy levels.
- Underserved rural communities can contribute to their own healthcare through creative financing models such as village saving and loans groups. innovation.



Credit: Lindi van Niekerk, Malawi (2017)

# SUSTAINABLE INTEGRATED RURAL HEALTHCARE MODEL

**INNOVATORS:** Child Legacy International

**OPERATIONS:** Lilongwe, Msundwe



## CHALLENGE

84% of the Malawian population resides in rural areas with limited access to basic healthcare services, clean water and electricity. These low socio-economic conditions, coupled with unemployment, negatively impact the health and wellbeing of rural populations.



## SOLUTION

A sustainable, people-centred rural healthcare model integrates health service provision, renewable energy and agriculture to holistically address the causes responsible for poor health and wellbeing among Malawians.

- **Renewable energy** - using wind and solar generated energy, Child Legacy delivers continuous uninterrupted health services in a rural setting, separate from the national electricity and water supply grid.
- **Community hospital services** - the delivery of the Essential Healthcare Package (EPH) and specialised secondary care provision including obstetric and gynecological ophthalmology services, and surgeries.
- **Agriculture and vocational training** - a large-scale agriculture and animal farm adjoins the hospital. The farm generates employment for the local community; 300+ permanent and 100+ seasonal workers. The farm off sets 18% of the hospital operating costs.



## IMPACT

- Since 2017, there has been no recorded facility maternal deaths.
- Annually delivered EHP to 79,000 beneficiaries in the catchment area and a reduction of the burden of care to other facilities.
- Established the “Eyes of Africa Centre of Excellence” which provides both training and ophthalmology services including laser eye surgery.



## LESSONS FOR HEALTH SYSTEM

- To address rural under-development and suboptimal health outcomes, health and environmental strategies need to be combined coupled with community engagement.
- Renewable energy can be leveraged to stimulate sustainable rural development and increase access to improved quality rural healthcare services for underserved population.
- A business approach, with diversified sources of revenue supports sustainability for innovative models.





Credit: Child Legacy International, Malawi (2019)



Credit: Lindi van Niekerk, Malawi (2017)

# LEARNER TREATMENT KIT

**INNOVATORS:** Save the Children, Ministries of Education and Health (Department of Community Health)

**OPERATIONS:** Zomba, Machinga



## CHALLENGE

Malaria is a major contributor to school absenteeism in Malawi. School children are most commonly infected, but least likely to have access to treatment. Most malaria cases in school age children are under-treated due to distance and cost.



## SOLUTION

The Learner Treatment Kit is a box containing rapid diagnostic tests and other basic health supplies. Teachers are trained to test and diagnose school-age children for Malaria and provide treatment right in the classroom.



## IMPACT

- School absenteeism has reduced.
- School children show high demand for school-based health care.
- Teachers competently use rapid diagnostic tests & artemisinin-based combined therapy to conduct malaria case management in children.



## LESSONS FOR HEALTH SYSTEM

- Community members (such as teachers) are under-recognised resources in the diagnosis and treatment of malaria.
- Multisectoral collaboration between the health and education sector creates effective interventions and leverages new resources.
- Evidence is an important facilitator to support an innovation being institutionalised.

**"MANY PEOPLE THOUGHT  
MAYBE IT WOULD NOT  
WORK. BUT THE PROBLEM  
OF MALARIA NOW, IT'S  
GOING DOWN."**

Lewis Kabeta  
School Teacher, Namiyala School



Credit: Lindi van Niekerk, Malawi (2017)

# MOTHERS' FUN RUN (MFR)

**INNOVATORS:** Nation Publications Limited

**OPERATIONS:** Nationwide



## CHALLENGE

Malawi intends to significantly reduce its maternal and neonatal mortality rate by 2035. However, about half of all hospitals and only 5% of health centers are capable of providing comprehensive and basic emergency obstetric and neonatal care.



## SOLUTION

A national platform was created to consolidate efforts to improve maternal and neonatal health (MNH) outcomes by identifying citizen-led solutions, mobilizing communities and lobbying policymakers. Each year, on rotational basis two districts are chosen based on need. Utilising a crowdfunding resource mechanism, MFR mobilises resources in support of MNH service improvement. Strategic partnerships with NGOs and the private sector provide avenues for integrating multi-year district level MNH related programme interventions. A dedicated media news section for articles related to MNH is set aside to facilitate public debate, networking and lobbying for improved conditions and greater awareness.



## IMPACT

- For over 15 years, MFR has mobilized over half a billion Malawi Kwacha (USD\$ 600,000), supported 16 districts and more than 70 health facilities.
- 7 out of 12 Ntchisi District Health Centres have clean water and enhanced hygiene facilities through WaterAid as part of this intervention.



## LESSONS FOR HEALTH SYSTEM

- A well-positioned and accountable private sector institution can use its positioning to stimulate actions across sectors to address local health priorities and support solutions.
- Sustained long term local financing for health priorities is possible using localized crowdfunding strategies coupled with partnerships across sectors.
- Advocacy efforts through first-person storytelling is effective for enhancing public awareness and understanding of issues and promoting effective actions through collaboration.



# MANAGED SURGICAL NETWORK THROUGH WHATSAPP GROUP FORUM (WGF)

**INNOVATORS:** Scaling up Safe Surgery for District and Rural Populations in Africa (SURG-Africa), Ministry of Health

**OPERATIONS:** 13 Districts, Southern Region



## CHALLENGE

Malawi has shortage of trained surgeons and anesthetists and they all work at central hospitals. Surgical services at district level are provided by non-physician clinicians known as clinical officers without specialists' guidance.



## SOLUTION

WGF is an effective, real time consultation and support network across the southern region of Malawi. It facilitates more responsive case management and referral feedback mechanisms between district health facilities and central hospitals. Through case discussions and feedback from specialists, multiple clinicians and district teams become competent on case management protocols.



## IMPACT

Between May - December 2019, 259 cases were posted and assessed using the forum:

- Specialists commented on 96% of cases posted and 75% of the cases posted received response within an hour. Appropriateness of referral and timeliness of response facilitated cost savings.

- Each district team/clinicians with working theatres posted between 5 to 50 cases on the forum seeking guidance.



## LESSONS FOR HEALTH SYSTEM

- Collaboration of different cadres of medical professionals improves understanding of conditions in health facilities and development of working relationships based on mutual goals.
- Efficient application of a low-cost social media platform that is adopted and utilised by health care providers can facilitate the institutionalisation of a functional referral and case management system mechanism.
- WhatsApp can be used to provide on job real time skills training and knowledge building led by different cadres of health workers.



Credit: Antonio Jaén, SURG-AFRICA, Malawi (2020)

# ONLINE CLINIC YATHU (OCLIYA)

**INNOVATORS:** Online Clinic Yathu

**OPERATIONS:** Lilongwe



## CHALLENGE

Non-Communicable Diseases (NCDs) are the second leading cause of deaths in adults accounting for 16% of all deaths with 17% in males and 14% in females in Malawi.



## SOLUTION

Online Clinic Yathu is an online platform that provides health services and care for a wide range of NCDs and general conditions through online (website, email) and mobile (WhatsApp) tools. They use a home-based care approach. The main functionalities include: Home-based services appointment booking (eg. physiotherapy); a directory of medical and allied health professionals in Malawi and electronic medical consultations. Clients visit the OCLIYA website, select their service and consultation type, and pay a weekly fee.



## IMPACT

■ Over 250 people have accessed health care from their homes through home-based physiotherapy rehabilitation sessions, online consultations with the doctors and nurses for long-term care placement support.

- The provision of home-based physiotherapy services has enabled the transferring of skills of caregiving and maintenance to family members of patients.
- Time reduction for patients in finding a relevant and accessible health professional.



## LESSONS FOR HEALTH SYSTEM

- Targeted interventions bridge the gap between a growing population and demands on healthcare services.
- Young people can proactively create jobs for medical and allied health workers and other fields while offering critical solutions to health challenges.
- Local citizen-led initiatives can reduce the burden of care from government service provision.





Credit: OCLiYA, Malawi (2020)

Credit: Lindi van Niekerk, Malawi (2017)

# KEY INSIGHTS

- In Malawi, social innovations are not the creation of external practitioners but the communities themselves. These innovations are responsive to context and systems changes.
- Social innovations expand access to primary healthcare, specially to underserved rural populations.
- Social innovations redefine the relationships for health and enhance social accountability at community, facility, district level and influence how private and public sectors collaborate.
- Identified solutions have an impact beyond health to other areas of sustainable development.
- Non-traditional health actors working cross-sectorally are crucial in stimulating, initiating, implementing and sustaining collective actions for social innovation.
- Social innovations require measurement through traditional and non-traditional research methods.



Credit: Lindi van Niekerk, Malawi (2017)

# OTHER SHORTLISTED INNOVATIONS

NO.	PROJECT NAME	ORGANISATION/S	HEALTH FOCUS
1	Inclusive WASH Facilities in Health Centres (deliver life)	WaterAid	Water, Sanitation and Hygiene
2	National ART Electronic Medical Record System	Baobab Health Trust	HIV / AIDS
3	Domiciliary Mental Health Care Program in Community Settings	St John of God Hospitaller Services	Mental Health
4	eHealth for community intervention	Ministry of Health - National TB Control Programme iMoSyS Limited	TB
5	Helpline Service APP - Innovation Challenge	Youth Net and Counseling	Sexual Reproductive Health
6	Breast Care Malawi	Breast care Malawi	Breast Cancer
7	Teen Support Line	Baylor College of Medicine Children's Foundation Malawi	HIV / AIDS
8	ACT Alliance	Dan Church Aid, Faith Institutions and Associations	Sexual Reproductive Health
9	Improving quality health services	Ministry of Health	Primary Healthcare
10	Maternal -Child Health Leadership Academy	Kamuzu College of Medicine, by Sigma Theta tau International	Maternal and Child Health
11	Sexual Reproductive Health and Rights Information to Youth via WhataApp	Plan Malawi, Ministry of Health	Sexual Reproductive Health

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