

African Mothers Health Initiative and its sister organization, **Chimwemwe mu'berek** , translated as *“Joyful Motherhood”*, were founded in 2007 to focus on maternal and child health issues in Malawi. Malawi faces some of the highest maternal, infant, and childhood mortality rates in the world. Its health sector - crippled by extreme staff shortages and inadequate resources - struggles to provide basic health care services. In this environment, our organization strives to provide life-giving support to high risk mothers and children.

African Mothers Health Initiative (AMHI) is a registered non-profit in the United States, created to fund and oversee Chimwemwe mu'berek as well as increase awareness abroad about maternal and child health issues in Malawi. **Chimwemwe mu'berek** (CU) is a registered non-profit organization with CONGOMA in Malawi and provides direct assistance to Malawian families in need.

Our Approach:

Our aim is to support high risk mothers and children. However, we understand that mothers and children cannot thrive within unhealthy family environments. We strive to offer high quality support to families, build relationships, and work not only towards survival but also towards healthy family environments. Our interventions include: home visits to high risk mothers and infants. Our approach is “client individualized”. We believe that mutual understanding, communication, and trust are essential for support to have its greatest impact. We trust families to care for themselves to the best of their ability.

Our Interventions:

1. Home based nursing care to high risk infants. Infants who do not have access to breastmilk are enrolled by nurses in the newborn nursery at Bwaila Hospital. The majority are infants whose mothers died in childbirth, or infants whose mothers are critically ill during the perinatal period and are unable to breastfeed. Multiples (most frequently triplets) born to women whose meager resources make it difficult to support the growth of healthy children are also enrolled. Nurses at Bwaila care for these babies during their hospital stays and instruct the guardians in formula preparation. At the time of discharge, a physical address is taken so the nurse from CU may visit the family within 72 hours. The CU nurse supplies the guardians with formula as needed and conducts regular home visits to closely monitor the growth and health of the children. She also instructs the family in age related nutritional needs and food preparation. When crises within the family environment threaten the child's health, the CU nurse and family work together to find appropriate solutions. Currently, CU is following 112 infants. Our goal is to follow all infant orphans and high risk babies born at Bwaila up to five years of age, including: premature infants, infants with disabilities, triplets, and infants whose mothers are critically ill at the time of birth.

2. Home based nursing care to high risk women after birth. CU reaches out to mothers once they have experienced a health crises. Every month several women in Lilongwe are hospitalized for extended periods due to complications following childbirth. When they are finally discharged from the hospital the struggle to regain their health and to maintain the health of their children does not end. Most of them no longer have a supply of breast milk many of them are not able to resume their responsibilities of caring for their children due to their continued convalescence. CU identifies these women during their hospitalization, visits their

homes, to assess the needs of their children, works with their communities to provide needed support.

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