Home visits provide certainty

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Halfway to 90-90-90

Three years ago, UNAIDS defined the 90-90-90 targets and set an ambitious agenda to eradicate the global HIV epidemic. By 2020, 90 percent of all people living with HIV will know their HIV status, 90 percent of all people with diagnosed HIV infection will receive vital antiretroviral therapy and 90 percent will have viral suppression, meaning that their treatment is working. With an undetectable viral load, these people have an almost normal life expectancy and are no longer infectious. As a consequence, successful HIV treatment is also prevention.

When UNAIDS postulated these goals in 2014, sub-Saharan Africa stood at 49-68-72. Where do we stand today? The end of 2017 marked the first time that more than half of all people diagnosed with HIV worldwide were receiving treatment. Substantial progress has been made in south-eastern Africa, where SolidarMed is also active. According to UNAIDS estimates for 2017, the figures stand at 76-79-83, so on the right track towards 90-90-90. In Zimbabwe, for example, 75 percent of people now know their HIV status. 87 percent receive life-saving medication and for 87 percent of these people, their treatment is working.

Just a few years ago, this kind of progress would have been unthinkable. This underscores just how much is possible with political will and international support. Yet a closer inspection reveals that this progress has been uneven. Certain regions and certain population groups continue to lag behind. The treatment of children and young people remains way below target and access to vital treatment remains challenging for the rural poor. To truly achieve 90-90-90 for all, we must also reach those patients who struggle to access health services.

Organisations like SolidarMed play a key role here. In 2017, 28'836 patients from rural areas received treatment thanks to SolidarMed. We are well on our way and pleased with that we’ve achieved so far. But the goal has not been reached yet. With your support, we will continue our efforts. Many thanks for your commitment!
A new approach against HIV in the mountains of Lesotho

Lesotho SolidarMed is backing a new strategy to prevent and treat HIV in Lesotho. This effective approach reaches 25 percent more patients.

It is cool and rainy in Rampai, 2'230 metres above sea level. Waiting in front of the hospital are eleven highly motivated SolidarMed team members, including a nurse, seven lay counselors, the local lead investigator Thabo Lejone and two drivers. Climbing into two SolidarMed off-road vehicles, they set off. Today’s goal: the village of Rakotoane, 10 kilometres away, close to the Kao diamond mine.

The SolidarMed crew is part of an ambitious health project. Over a period of several months, the team visits over 100 villages in Butha-Buthe district. SolidarMed offers all inhabitants an HIV test – at home, in their own hut. If the result is positive, they can begin life-saving therapy immediately. This avoids the first arduous journey to the next health centre or hospital.

"We can reach those affected by HIV better at home", says the local project manager Thabo Lejone. "And more people start treatment.”

Lesotho:
Inhabitants 2'135'000
Doctors / 1’000 Inhabitants 0.047
Life expectancy 53 years
A new treatment approach

On arriving in the village, the team divides into small groups. Equipped with tablet computers, HIV tests and information material, the SolidarMed counsellors now visit every house.

Masethothi Phofu heads towards the first stone rondavel. Two puppies play outside the front door. A young woman opens it. Masethothi explains that she is offering the chance to get tested for HIV. Of course this HIV test is voluntary, but the overwhelming majority of people agree to be tested. As does the young woman.

Masethothi disinfects the middle finger of the left hand, pricks it and transfers the drop of blood to a test strip. Now the anxious wait begins.

Whilst they wait, the SolidarMed counsellor records the woman’s health data and information about her household on her tablet computer. Both keep glancing at the test strip. After approximately ten minutes, the tension is released: the test is negative. Relieved, the woman calls for her husband, who is watching over a herd of sheep a couple of hundred meters away. The procedure is repeated. And luckily, he is HIV negative too. Happiness is written in this young couple’s face.

But in other huts, the suffering is tangible. A positive test is upsetting; the need for information is high. The SolidarMed team members explain how the treatment works. After establishing the number of CD4 cells in the blood, an indicator of overall health, the person can start...
An expert opinion

"Treatment is prevention"

Thabo Lejone is an important pillar of the SolidarMed team in Lesotho. As a trained nurse with additional qualifications in international health, he leads the team that carries out home visits in Butha Buthe district.

Lesotho has the second-highest prevalence of HIV worldwide. What does this mean for the country?

HIV influences our daily life in many respects. This includes stigmatisation, discrimination in the workplace and participating in burial weekends that can too often be traced back to HIV. We have many orphans in the country. The virus has the most direct impact on adolescents and young adults. When they fall ill, this is fatal for the productivity of the country. Young people are often forgotten in national efforts.

What are the advantages of commencing therapy immediately after a test?

More people achieve viral suppression. They not only live a longer and healthier life, but also do not infect their babies at birth. Their partners are protected from infection too. Treatment is thus the best form of prevention. That is why we have to treat as many HIV patients as possible.

Why is it important for SolidarMed to carry out research and not just offer direct help?

We’re in close contact with the population and gather a lot of valuable data. This data allows us to find solutions that ultimately help people. In cooperation with policy makers, this knowledge and the results of our research can enable better health care on a national and even an international level.

treatment immediately, right in their own home. On an average day, the SolidarMed team tests around 200 villagers. If someone is not at home, they return to the village a couple of days later for a second attempt.

Pioneering work with international impact

In the course of this project, the SolidarMed team does more than carry out tests and advise on treatment. The experiences and results flow into a scientific study that could be ground-breaking for the treatment and containment of HIV in Africa.

The first results were published in March in the renowned Journal of the American Medical Association (JAMA). They clearly showed that thanks to a test at home and immediate therapy initiation, 25 percent more patients access treatment.

SolidarMed is carrying out pioneering work with this study that could help combat HIV in other African countries.

Thabo Lejone, Nursing Expert and Team Leader
Water from 120 metres below ground

**Moçambique** Namuno is the most remote and underserved district in which SolidarMed works. There is no hospital and only three of the nine health centres have running water. To supply the largest clinic with running water, a 120 metre deep borehole had to be drilled through the bedrock. As of a few weeks ago, Namuno has running water! Hygienic births are not possible without water and 150 babies are born in Namuno every month. In future, staff will no longer have to fetch the necessary water in buckets. Maternal mortality in Namuno is high. Together with the local authorities, SolidarMed is also constructing an operating theatre to ensure that fewer women die from childbirth complications.

Electricity for the children’s ward in Mahenge

**Tanzania** Mahenge district hospital was built in 1904 and is in a pitiful state. Electricity cuts are very common. Often, emergency surgeries have to be cancelled and the patient ventilators stop working. Frequently, this means that patients die. Over the past year, SolidarMed renovated the walls, the roof, the floors and the sanitary facilities. In addition, a separate room was set up to treat severely ill children. This year, SolidarMed will install a solar power system. This will allow life-saving machines to continue working - even during a power outage. Every year, 12'000 children are treated in Mahenge’s outpatient department, 2'500 are admitted.

“My roles as nurse, male midwife and trainer mean a lot of work. But it’s worth every effort when a healthy baby is born.”

Bartholomew Kamlewe, Katondwe, Zambia

Photos: Olivier Brandenberg

Photo above right
Staff houses next to the hospital offer employees a place to retreat from their hectic working day.

Photo above middle
Bartholomew at work at the hospital’s reception, where he started his career.

Photo below left
Bartholomew at work as a male midwife, washing a newborn baby with a nursing student.

Photo below right
As trainer and clinical instructor, Bartholomew supports and examines nurses in training.
Bartholomew Kamlewe could grace posters advertising a career as male midwife. With his charming smile, he is a radiant example of how a profession can be much more than simply a job to earn money.

On the banks of the Luangwa, the river separating Zambia and Moçambique, lies Katondwe hospital. Lusaka, Zambia's capital, is many hours drive away. The lives of the people in this region are shaped by the river. The river also shapes the work at the hospital. Frequently, fishermen seek medical help here after an unpleasant encounter with a hippo or a crocodile. The Luangwa swarms with both.

Bartholomew grew up in this region. After completing school, he found a job at the hospital's reception, where his mother worked as a cleaner. This inquisitive young man quickly showed a keen interest in medical work. With financial support from the hospital, he was given the opportunity to train as a nurse at Mansa School of Nursing. But that was only the first step. Today, Bartholomew is a pillar of the hospital. One year ago, he even gained an additional qualification as a male midwife.

The 26-year-old is the first occupant of one of the staff houses that SolidarMed built together with the Hilti Foundation from Liechtenstein. The simple duplexes belong to a housing association and offer space for two families. For a rural location, this duplex is very comfortable and is an important reason why the hospital is able to retain their well-trained employee.

Bartholomew is grateful for his training and his position. Over his many years of work, he gladly gives back as much as he can. Especially as a male midwife, he can make a big difference. There are still far too few experts on safe childbirth working in rural Zambia. But Bartholomew's goals are far from achieved. He is already planning to pursue a diploma in midwifery at the University of Lusaka. If everything goes well, this diploma will soon allow him to become a midwifery instructor. He can then train more of the midwives that Zambia so urgently needs.
Swiss cooperation

The motor for the e-bike ambulance in Moçambique was sponsored by the firm maxon motor from Obwalden. Their energy efficient, high endurance and high quality electric motors are strong enough to tackle the conditions on Mozambican dust roads.

On a wintry March afternoon, maxon motor invited six interested SolidarMed donors for a tour around the factory in Sachseln. Christian Heuss from SolidarMed accompanied them and used this opportunity to thank the Head of maxon motor, Eugen Elmiger, for the straightforward partnership.

From the Annual Report 2017

Our Annual Report 2017 is currently being published. Reviewing the achievements of a whole year is impressive. In cooperation with our 31 rural partner hospitals, 87 health centres and 7 training institutions, over 1.5 million people received better medical care. Treatment and care were decisively improved. The Annual Report also delivers a transparent insight into the source of our funds and how the donations were used.

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