

Our trip to Malawi with AMECA was a fantastic opportunity to gain insight into the culture, challenges and health needs of a country very different to the UK. In the two weeks we spent in the country we had the chance to meet a range of local people as well as other ex pat volunteers and charity workers. I have definitely come away with my eyes opened to the incredibly different, sometimes unbelievable way of life that is the norm for so many Malawian people.

I have also had some incredibly enriching and challenging experiences ranging from seeing elephants on a safari boat ride to being caught up the highest mountain in central Africa as a huge lightening storm marked the start of the wet season. The most striking memories however, come from meeting the people of Malawi. They are in general some of the friendliest and most hospitable people I have ever met, and seem to be enviably happy and cheerful despite the obvious poverty many of them have to contend with.

Meeting the rural people required driving on bumpy dust roads, past mud houses with straw roofs in villages with no access to shops, no electricity and clean water only possible through a manual pump to a bore hole underground. The standard welcome however was being waved to by villagers with beaming smiles, and children genuinely so happy and excited to see us that they would come flocking after the cars so they could chant "you are welcome" to us in unison.

Since our project focused on access to health care during pregnancy, I had 5 days of meeting pregnant women in 5 different villages. AMECA also arranged a meeting with the chiefs of the villages who provided us with their intimate knowledge of the problems and challenges faced by their people. They also efficiently set up meetings with the village women for the coming week. I was humbled by the hearing about the unbelievably tough reality for many a woman living in rural Malawi, especially with regards to pregnancy and childbirth. This difficult process often started with dropping out of school and having to marry young due to accidental pregnancy, and continued through to having to walk 5 kilometers in the baking African sun while heavily pregnant, unwell or in labour to have any hope of contact with a health professional. This was generally a relatively poorly trained clinical officer, who would have to refer to the central hospital in the capital if the woman had any hope of seeing a doctor.

The information and experiences we took away from our meetings with pregnant women as well as the village chiefs demonstrated the clear need for a health facility to serve the area, which the clinic AMECA is building will provide. One of the most important conclusions our research drew is the need for suitable maternity services for the local women. The fact that the clinic does not currently have the funding for this service highlights the importance of the further work to be done by AMECA and the need for fund RAISING efforts by those people in the UK and around the world who are fortunate enough to be in a position to do so.

Gavin Stead, Junior Doctor.