

MEDICAL **IMPACT** SIERRA LEONE



MONTHLY

RESULTS

REPORT

NOVEMBER 2024

NOVEMBER MONTHLY RESULT

Purpose and function of the MISL monthly review meeting reporting is an important management tool which is used to inform executive officials about the results being achieved on individual projects activities.

October review meeting held on the 7th November, 2024 at the MISL Headquarters, Freetown at 12:00 Noon. Reviewed and approval of minutes. The review meeting scope is tailored to discussions on matters not limited to:

- Rap up the partnership with the DHMT
- Status of the organization MISL in national Policy Health Plan
- Putting the Role of MISL in the Sierra Leone Health System on the agenda
- Resource Mobilization (budgetary aspects)
- Outreach Medical Brigade

Partnership Review: The likelihood of not reaching Kono and Moyamba District Health Management Team (DHMT) is high as members raised the risk of not meeting target. Already, 80% DHMT and Local council partnership success.

Financial Update: The issue of volunteerism and pay monthly package has been trivial but resolved by reaching a dialog that by January 2025 executive members will start earning monthly pay through individual's bank account. Sustainability requires robust mobilization of funding, accountability and responsiveness were expressed as watch words key to MISL existence. Much effort is required to close the budget gap. Therefore, strategies were outlined as to so mobilize more resources both financial and in kind.

Operations update: Schedules for November monthly activities proposed include Zoom meeting with MIXCO, outreach to six communities all of which beneficiaries converge at the Sea-side amidst interventions in Malaria, worms infestation, diabetes, and hypertension BP.

Main Activity: - COMMUNITY-BASED OUTREAH PROGRAMME IN PREVENTION, CONTROL AND TREATMENT OF MALARIA, WORM INFESTATION, HYPERTENTION AND DIABETES

Action Plan/points:

Meeting resolved that marking the end of 2024 project activities require executive resilience and ensure that the 2025 project proposal is submitted for renewal and the project annual report is documented and submitted to Mexico against 15th December, 2024.

Conclusion:

Monthly review meetings give executive members the opportunity to assess, evaluate and make adjustment with respect to activities carried out within the month. Updates on key aspects of project activities such as the finance, operations, partnership and alliance were discussed. Also, weaknesses identified and remedies outlined.

EMPOWERING COMMUNITIES-BASED OUTREAH PROGRAMME IN PREVENTION, CONTROL AND TREATMENT OF MALARIA, WORM INFESTATION, HYPERTENTION AND DIABETES IN 6 HILL-TOP AND SLUM COMMUNITIES IN FREETOWN MUNICIPALITY

In light of increasing complexity of identifying and treating malaria cases in mountain top communities and the Seaside slum areas which are high transmission settings .The outreach is such an operational solutions needed to increase effective delivery of health outreach is at the fore front of interventions by given the shift towards creating local and site-specific solutions.

STRATEGY /APPROACH ADOPTED IN THE OUTREACH

Community stakeholders were identified such as youth groups and responsibility transferred to mobilize the sick and to the tent/site of meeting. About 100 people were targeted and first catered for healthcare delivery service.

Personnel Involved:

-MISL Executive 7, volunteers 3.

**-Expert /Professionals: Community Health Officers (CHO)-2; Lab Technitian-1
Assembly of attendees/clients at the tent of meeting.**

As MISL Country Manager, I'm proud to partner with healthcare leaders, Commercial leaders and Agency leaders from around the country Sierra Leone who are redefining care during these times of great challenges. Thank you to Executive members in attendance for perseverance, collaboration, and all you do to deliver safe and equitable care to patients and to advance the health of vulnerable and deprived communities.

In many ways, November, 2024 is a month in which we strived to strengthen ourselves and our field – both now and for the future. As part of that, MISL took significant steps to prioritize sustainability and effort resilience in support of quality healthcare delivery.

When we come together for this outreach healthcare delivery in the Seaside Slum communities, our activities will focus on testing for malaria and diabetes, deworm and provide adequate medication, give health advice and referral on these areas and others to help us redefine care delivery for all we serve.

We will support our communities and nation to successfully navigate the future, Alieu Badara Sesay (Country Manager) assured the audience.



CHO Mariatu Bangura

Team lead of medical professionals welcomed the people in attendance and expressed a big thank you for high turnout. A disproportionately high proportion of diabetics are elderly, She disclosed and explained how individuals, blood sugar level is constantly maintained all day long. Adding that good dietary with low-fat to mention but few ways of lowering blood sugar. She cited many variety of foods that are tasty-sugar free dishes to choose from such as but limited to eggs, fish, beans, vegetables.

Today's health care service is delivered at your door step she continued. She assured the people that with high cooperation and commitment in seeking quality health service early will yield massive benefit to individuals and the community as a whole. Supporting MISL and cooperation with its activities would ensure the deprived; disadvantage and the poor will continue to have free access to credible and reliable information to social development.

Other effective ways of controlling blood sugar naturally are mentioned and understanding Blood Sugar and its importance was emphasized. She added that people tested positive for blood sugar should focus on Low Glycemic Index foods, increase dietary fiber intake, stay hydrated with water, and choose healthy fats regular quality sleep.

She however, said that controlling blood sugar naturally involves a holistic approach to lifestyle and diet.

In the address speech of **CHO Stevens** he consider malaria an acute febrile illness caused by Plasmodium parasites, which are spread to people through the bites of infected female anopheles mosquitoes.(this was demonstrated and translated in local language-mende, temne and krio). It is preventable, he paused. Mention made about what malaria disease is persons at risk, symptoms and diagnostic approaches, and treatments available for malaria and places to access treatment services in the community, minimizing barriers to access and affordability.

Project Manager II, Martin Ibrahim Bangura told the audience the importance of health talk laying emphasis on the use of clean and safe water, adopting good sanitation and hygiene practices. He further explains the setting and procedural stages of screening from one desk to the other from registration to post counseling desk.

Below is a description of procedures, nature of medications and counseling was identified.



Provide primary and specialized medical care to six communities ranging from mountain top clustered communities to the city municipality slum areas.

-provide administration of medications, after the consultation and comprehensive diagnosis such as testing, psychology and physical examination.

-Carry out population screenings regarding malaria, and diabetes that prevent risk to these vulnerable populations.

DRUGS DISPENCED:



Malaria drug dispensed- Paracetamol comprime BP 500mg, Artemether 20 mg and Lumefantrine 120 mg Tablets

Malaria Test kits-Rapid Diagnostic Test (RDT) not Microscopic See. Malaria Ag P.f/P.vs



Diabetes Test kit- Rapid Diagnostic Test (RDT) used because already suspected and vulnerable clients must have taken their breakfast.

Treatment-Metformin/Metformine tablet/Comprime BP drug administration and pieces of counseling service and referrals rendered.

Hypertension- blood pressure readings using electronic and manual kits
Treatment-administered or dispensed amlodipine and 75%/10% aspirin drug.

Worm remedy-No lab testing but client must have been screen of taking worm remedy over minimum of 3months

Drug administered Albendazole Tablets USP 400mg

Attendees shared similar concerns and challenges and overall, the event clearly demonstrated that healthcare delivery close to the less privileged is a top priority at global level. Pa. Momoh Kamara thanked and express appreciation to MISL for

initiating medical prevention campaign, encourage good dispensing and distribution of medicines, provide preventive measures aimed at reducing the prevalence of diseases such as malaria, worm infestation, and diabetes and provide quality humanitarian medical care to our communities, he concluded.



BENEFICIALRIES: 100 direct beneficiaries.

IMPACT

By re-imagining, strategizing and strengthening community engagement at this stage of malaria and diabetes fight, Seaside communities are better prepared to ensure community support for MISL activities as they intensify malaria, hypertension and diabetes prevention, treatment and control and begin prevention of reintroduction activities. It is observed that this programme have been satisfactory and appreciative with active an as it is a much higher level of community participation because community and individual knowledge of

malaria, diabetes, hypertension and worm infestation is increased. Early medication seeking at health facility is initiated with little or no fear.

CHALLENGES:

-People overwhelm attended the outreach healthcare delivery beyond the targeted beneficiaries. This challenge occurs as a result of clients with invited cards Marshall or sneaks in with their relatives to the site after taking their quota of medication. And as a result pressure mounts; stretching the professionals and the resources available at the time. Tension was reduce by calling pharmacy drug dealer for additional procurement package.







Medical Impact Sierra Leone – Monthly Results Report – November 2024

MISL participated in the annual Roll Back Malaria Partnership Meeting held on Thursday 28th November 2024.

The meeting was designed to include the following:

Update from National Malaria Control Programme (NMCP) this involves:

- Review of policy documents
- Brief update on SBD
- Malaria Research agenda
- SBC Strategy update
- Update of SLACK Channel
- Update from Partners (52)

In attendance Medical Impact Sierra Leone Executive Manage Alieu Badara Sesay and Project Manager II Martin Ibrahim Bangura gave a synopsis of project activities carried out in 2024 and their impact in the control and elimination of malaria in Sierra Leone.

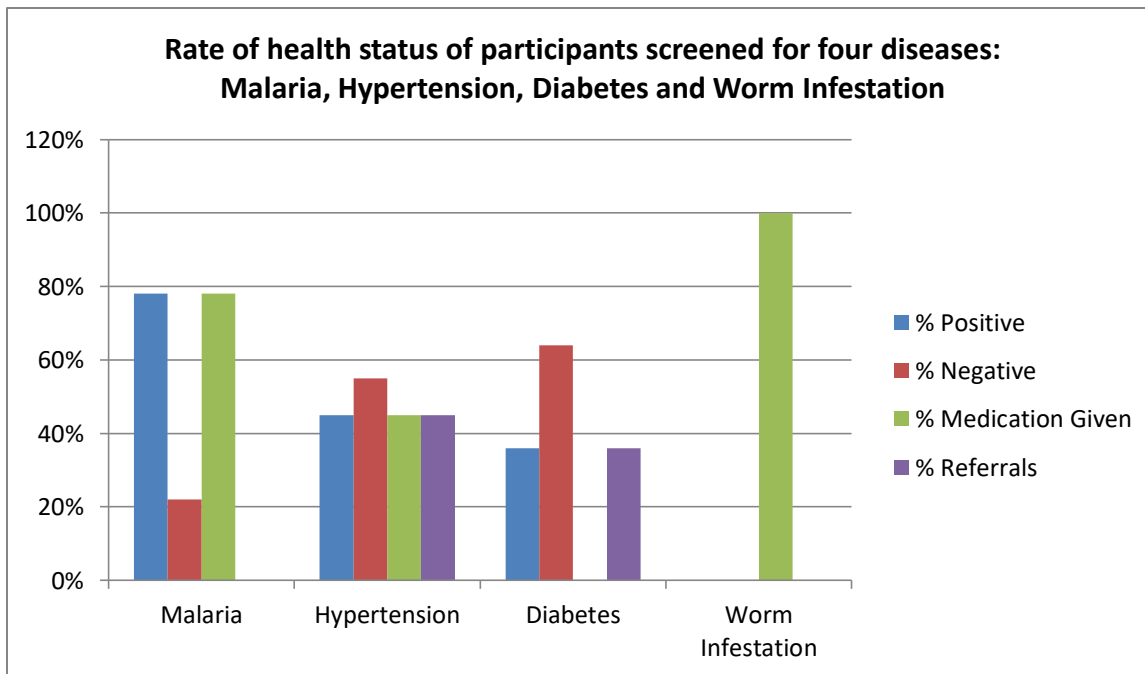




*The MEDICAL **IMPACT** SIERRA LEONE PROJECT MANGER II making a presentation at the annual Roll Back Malaria Partnership meeting 2024.*

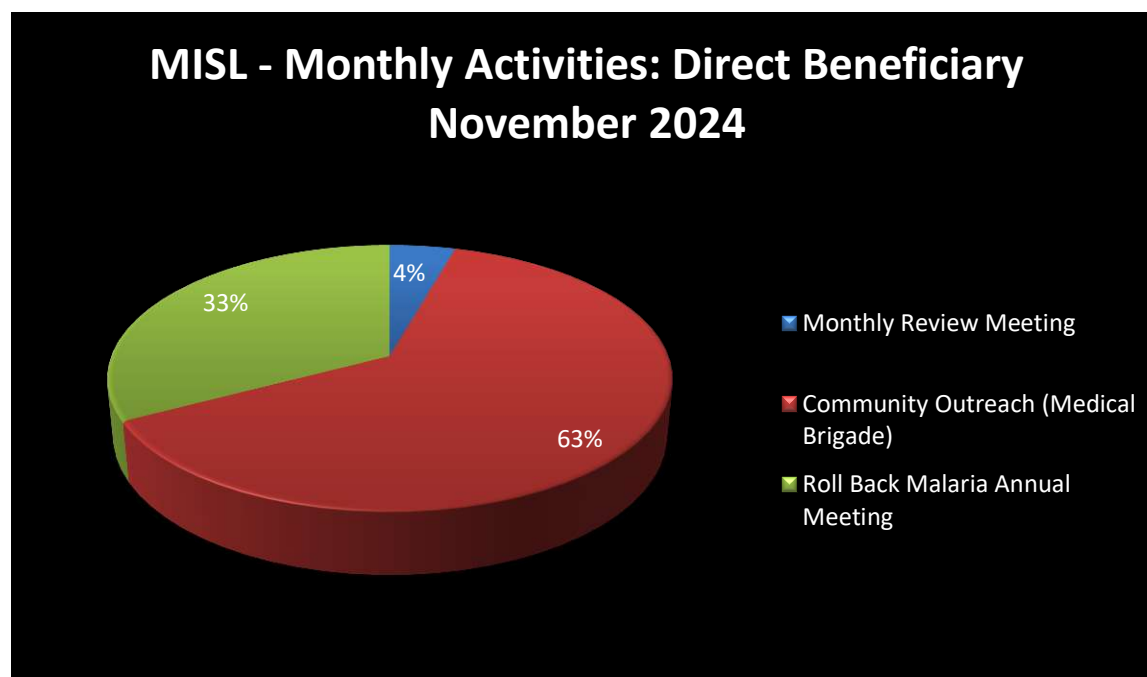
The Rate of health status of participants screened for the four (4) diseases Malaria, Hypertension, Diabetes and Worm infestation.

Disease	% Positive	% Negative	% Medication given	% Referrals
Malaria	78%	22%	78%	0
Hypertension	45%	55%	45%	45%
Diabetes	36%	64%	0%	36%
Worm infestation	-	-	100%	0%



MISL – Monthly activities Direct and Indirect beneficiaries for November 2024.

NO	ACTIVITY	DIRECT BENEFICIARY	INDIRECT BENEFICIARY	TOTAL
1	Monthly Review Meeting	7	35	42
2	OUTREAH PROGRAMME IN PREVENTION, CONTROL AND TREATMENT OF MALARIA, WORM INFESTATION, HYPERTENTION AND DIABETES	100	325	425
3	MISL participated in the annual Roll Back Malaria Meeting	52	156	208
	Total	159	516	675



DIRECT BENEFICAIARY: 107

INDIRECT BENEFICIARY: 360