**2017 MASP NATIONAL SYMPOSIUM: STRAND DISCUSSION NOTES FOR HEALTH**

**Projects Success**

**Malawi Liverpool Welcome Trust**

They have been able to interpret their intervention research results and translate the findings into policy recommendations that have been adopted by the government-Ministry of Health.

Nkhoma Hospital: They are now able to treat patients with cancer lesions the same day un like at the start of the project . The cancer project that they implemented started from primary care and were able to upgrade it to tertiary care.

Thermo-coagulation (an alternative to Cryotherapy for treating cancer )that Nkhoma synod was and is still using for the cancer project has now been scaled up, accepted and is being used across the SADC region in countries such as Zambia, Tanzania Nkhoma being a learning center for these countries.

Scotland Chikwawa Health Initiative: They have been involved in the development of the Health Sector Strategic plan using the projects outputs and findings and that their project has been taken up by Concern Universal in Dedza as a way of Scaling it up to other areas.

**Questions**

Usually it is not easy in Malawi to move from research conclusion to policy. How did Malawi Liverpool Welcome Trust (MLWT) manage to do this?

The setup of the project was that it is actually the ministry of health that was doing the work and that MLWT were merely supporting and coordinating as a result the results of the research were owned by the ministry.

**Challenges**

In project implementation the turnout of relevant bodies such as the Medical Council is not good as a result to use research results is usually a challenge before such bodies give a go ahead. what are projects doing to manage this situation?

The most important thing to do is to ensure that the relevant authorities are engaged at the earliest stage. At times it is about who do we contact for the work in the Ministry as other individuals are very reliable than others but the best scenario is one where the ministry should be forthcoming and not relying on individuals who can move out any time.

Staff turnover is also a very big problem affecting hospitals, ultimately projects delivery.

The culture of allowances is also disturbing projects implementation-Here good salaries and staff welfare were considered as possible solution as well as engaging government through the Ministry on how to tackle the allowance syndrome.

There are also a great deal of governance challenges at the local level with no skills across the systems as well as communication challenges associated with such systems due to lack of capacity.

Nkhoma Synod Hospital: Ministry of Health was backtracking on the use of Thermo-coagulation when it had initially given them a go ahead on the same. The reason was that thermos-coagulation had not yet been approved by WHO. Later on this was sorted out after making a presentation at the safe motherhood Technical Working Group where it was approved.

**Recommendations**

Research recommends the use of the Health Committee in Parliament to get things work and this applies even for all the strands. MaSP should take the initiative to move on with this recommendation.

It is important that all projects should be developed along government strategy.