



Seed
GLOBAL HEALTH

STRATEGIC PLAN

2030

Health Workers Save Lives





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FOREWORD

Dear friends,

Seed Global Health was founded on the belief that health workers are essential—they are the heart of our health systems. For more than ten years, we have worked with governments and partners in Africa to build strong health systems by educating health workers to provide high-quality care and save lives.

Today, the world needs health workers more than ever before.

Since our founding, we have trained more than 42,000 health workers who are in service to more than 76 million people.

Yet their work is getting harder.

Health workers are confronting rapidly rising rates of infectious and noncommunicable diseases, pandemics, and climate-driven emergencies. Higher levels of malaria mean that where there used to be two patients per bed during the high season, there are now six to eight. And the number of children dying from malaria is at risk of rising again at a time when that number should be dropping. Extreme heat is making pregnancy more dangerous, increasing rates of pre-term birth and stillbirths. The examples are endless.

As we started to witness these challenges at Seed, it became clear that climate change is the greatest threat to human health and to our human survival. We must understand that the climate crisis is, fundamentally, a health crisis. And we must start measuring our progress against this crisis not just in terms of degrees Celsius averted, but in lives saved.

Our 2030 strategic plan is our continued commitment to tackle the challenges we are facing in the world.

At Seed, the solution is simple.

We believe that health workers are our first and most important investment to meet these challenges. Health workers are our roadmap for strengthening health systems, building our responsiveness and resilience, and ensuring better health for all.

As such, our 2030 strategic plan has two overarching goals: 1) Build the health workforce of the future and 2) Advance the health workforce as a global priority.

Health workers are resilient, adaptive, and have their fingers on the pulses of their communities. They are on the frontlines of surveillance and response when a disease outbreak occurs. They tell us when there is no blood in the blood bank or when there's a stockout of essential medicines. They can care for family and address the myriad health needs of a community. They tell us what is the most important investment in their health centers. And when that issue is addressed, they tell us the next most important investment for saving lives in their communities.

At Seed, we believe we can transform countries and communities when we invest in health workers and in health systems.

Investing in health workers saves money and creates jobs. And since 70% of health workforce jobs are occupied by women, this approach also promotes gender equity. At Seed, we believe we can transform countries and communities when we invest in health workers and in health systems.

Since our founding in 2012, Seed has had the great privilege of working with outstanding partners to educate and train the next generation of doctors, nurses, and midwives. We are humbled that they have invited us to work with them to strengthen health education curricula and the quality of care in their countries and institutions. They inspire and motivate us every day.

Over the next six years, we look forward to deepening our commitment and service to them. Our strategic plan is mapped to 2030 in support of our partners' priorities to contribute to achieving universal health coverage and the Sustainable Development Goals, as well as the global urgency to improve health and transform our wellbeing. At Seed, our priorities are guided by our partners' priorities—that's part of what makes us different.

We invite you to join us on the path to 2030 as we build the health workforce of the future to save lives—and our planet.

With gratitude,
Vanessa & Dede



Dr. Vanessa Kerry
CEO and Co-Founder



Dede Orraca-Cecil
Board Chair



Since 2010, less than **7% of global health funding** has been invested in the health workforce.

INTRODUCTION

In 2024, there shouldn't be two standards of health care in the world. It is unacceptable that a woman giving birth in Malawi is 28 times more likely to die than a woman in the United Kingdom, a newborn in Zambia is 24 times more likely to die than a newborn in Norway, and Uganda has four doctors per 100,000 people, while Switzerland has 440.¹ The countries of sub-Saharan Africa manage 24 percent of our global disease burden with just three percent of our global health workforce. And by 2030, Africa's health worker shortage is projected to surpass six million.²

Health workers save lives. Yet since 2010, less than seven percent of global health funding has been invested in the health workforce.

At Seed Global Health, we refuse to accept this status quo. For more than ten years, governments have invited us to work with them to strengthen the heart of our health systems—the nurses, midwives, and doctors who provide life-saving care for our families and communities.

We partner with governments, health professional schools, hospitals, and clinics to educate health workers, strengthen the quality of health services, and support policies that enable health professionals to deliver high-quality services to those in need. To date we've trained more than 42,000 health workers who work in health facilities serving more than 76 million people.

1 <https://data.worldbank.org/indicator/SH.STA.MMRT?locations=MW-US>; [https://www.bmj.com/content/384/bmj.q62#:~:text=In%202020%2D22%20there%20were,\(13.95%20per%20100%20000\)](https://www.bmj.com/content/384/bmj.q62#:~:text=In%202020%2D22%20there%20were,(13.95%20per%20100%20000)); <https://data.who.int/indicators/i/A4C49D3>; <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7533609/>

2 <https://www.afro.who.int/news/chronic-staff-shortfalls-stifle-africas-health-systems-who-study>

Working side-by-side with our partners, we have experienced first-hand how *long-term, locally-driven* investments in the health workforce can and do improve health outcomes in any setting—from urban Zambia, to rural Sierra Leone, to mid-Ebola outbreak Uganda, to post-cyclone Malawi.

The solution is long-term, but the problem is immediate. From the COVID-19 pandemic to the intensifying health effects of climate change, the gap in healthcare standards has been widening in recent years, not narrowing. We must act now to reverse this trend.

At Seed, we are powered by both the urgency of the moment and the belief that, collectively, we have the knowledge and tools to turn the tide.

We need to build a strong, resilient, and skilled health workforce to transform health systems, prepare for the future, and save lives.

The cost of inaction profoundly threatens all of us—no matter where we live. And investing in health has powerful multiplier effects: improving health, economic growth, national security, social cohesion, and even gender equality, as 70 percent of health workers are women.³

This 2030 strategic plan leverages our track record, builds on our strengths, and deepens our commitment to long-term investment in the health workforce as the most effective way to close the equity gap in health care, address the effects of climate change on health, and guard against future pandemics.



**Long-term,
locally-driven
investments in the
health workforce
improve health
outcomes.**



Together with our partners, Seed Global Health is addressing an urgent need for bold, long-term investments that will save lives today while educating and expanding tomorrow's global health workforce.

What makes us different? Read on to discover how we create shared value and impact with our partners.

³ <https://www.who.int/news-room/commentaries/detail/female-health-workers-drive-global-health>

The Seed Difference

✧ **Our partners choose us (not the other way around).**

Government, academic, and health leaders invite Seed to help solve their most pressing health workforce challenges. Because we know that the people most proximal to the challenges are in the best position to identify solutions, we listen closely to our partners, center their expertise and experience, and collaborate in a spirit of shared learning. Our role is to support and place our resources and experience alongside theirs to catalyze lasting change.

✧ **We are one of just a few organizations focused on strengthening the professional health workforce.** Every health system needs a resilient, responsive, and skilled health workforce to deliver high quality care and save lives. Together with our partners, we increase the quality and quantity of doctors, nurses, and midwives to ensure an effective **referral chain**, improve the quality of care, and strengthen resilience in the face of climate change and other threats to human health.

✧ **Our commitment is long-term.** We build long-term relationships with our partners. The focus and length of our partnerships are determined by our partners' goals, not by a predetermined time limit. We collaboratively define what success and sustainability mean to ensure we are working towards a common agenda.

✧ **Our work produces lasting change.** We support doctors, nurses, and midwives by enhancing their skills, knowledge, and teaching and mentoring abilities. When they enter clinical practice, not only do they share knowledge with their peers, but many also go on to become faculty in the institutions where they received their training. This creates a ripple effect that benefits generations to come.

✧ **We leverage our position as a globally-engaged NGO** to advocate for more funding and investments for everyone working on these issues—not just Seed. We connect our country-level partners with global decision makers, leading international training institutions, donors and philanthropists, and media, enabling them to advocate for and make progress on their health priorities.

REFERRAL CHAIN

Seed Global Health educates and trains doctors, nurses, and midwives. While we do not train community health workers (CHWs), we do strengthen the referral chain that links communities to the formal health system and ensures health care for those in need. Health clinics and hospitals must be staffed with qualified doctors, nurses, and midwives who can receive and provide health services to patients referred by CHWs.





VISION AND MISSION

Our vision is a just, equitable, and healthy world.

Our mission is to expand access to quality care and improve health outcomes for all.

We achieve our mission by partnering deeply to strengthen the health systems in the countries where we work, with a special focus on strengthening the professional health workforce.

Our Partners

Global

- International organizations
- Governments
- Philanthropic foundations
- Private sector companies
- Think tanks
- International NGOs
- Advocates

National

- Government
- Health professional schools
- Health clinics and hospitals
- Community-based organizations
- Health professional associations

Health Worker Cadres

We Train

- Family medicine doctors
- Emergency medicine doctors
- Obstetricians and gynecologists
- Midwives
- Community health nurses
- Mental health providers
- Pediatricians
- Pediatric critical care nurses



WHAT WE DO

We partner and invest deeply in the health workforce and health systems in four countries: Malawi, Sierra Leone, Uganda, and Zambia. We educate and train health workers across a variety of cadres and specialties, strengthen the quality of care in our partner health facilities, and improve the national and global policy environments to support health workers.

Our priorities are driven by the priorities of our partners. As such, our work currently focuses on educating doctors, nurses, and midwives to meet the most critical needs in our partner countries. We work across specialties spanning primary health care, emergency care, and reproductive, maternal, newborn, and child health.

We focus on health workers because we believe that people are the leading levers of change in a health system. It's the people who identify infectious disease outbreaks when they first occur, who use innovations in medical technology to diagnose disease, who detect when medicines and supplies in a clinic are low, and who hang the bag of blood when a woman is experiencing postpartum hemorrhage.

We educate doctors, nurses, and midwives across specialties spanning primary health care, emergency care, and reproductive, maternal, newborn, and child health.



Health workers know best what interventions and investments are needed to save the most lives in the fastest way possible. Health workers can not only triage patient care, but also the requirements of the health system. Simply put, there is no health system without health workers.

Educating and training skilled, practice-ready health workers has the power to upend the status quo, transform health systems, and save lives.

HOW WE WORK

Seed has established deep, long lasting relationships with ministries, universities, hospitals, and other partners in Malawi, Uganda, Sierra Leone, and Zambia based on trust and responsiveness.

Our partners approach Seed to help them solve complex health workforce challenges that, in many cases, they have recognized, put resources toward, and grappled with for years. Our partners are extremely capable and accomplished health sector and community leaders, advocates, and academics. They face unique structural barriers, including historically under-resourced health systems, that often slow and undermine their work. They invite Seed to partner with them when they decide it is time to engage a trusted partner able to bring tailored resources—technical, human, financial, and material—to catalyze their efforts and drive results.

Together, our work not only saves lives, but also serves as a model for deeply partnering in a context-driven, country-led way to strengthen sustainable and responsive health systems.

Our Approach

Our approach is context-driven and country-led. We partner deeply with students, faculty, clinical providers, health institutions, and national and global policy-makers across three core, interrelated pillars (education, practice, policy) to drive results and impact.



Our Approach In Action:



Education

We develop and strengthen education and training programs at health professional schools

ILLUSTRATIVE ACTIVITIES

- Develop or strengthen academic specialties or subspecialties, e.g., family medicine, critical care nursing, midwifery
- Develop or strengthen curricula and teaching resources
- Establish or refurbish skills labs where students practice before beginning clinical rotations
- Support learner-centered teaching and training practices



Practice

We support evidence-based, patient-centered clinical training & service delivery in health facilities

ILLUSTRATIVE ACTIVITIES

- Train in-service health workers & faculty to coach & mentor students as they learn to deliver care in clinical settings
- Introduce quality improvement initiatives in health facilities to improve patient care
- Provide low-dose, high-frequency training to in-service health workers
- Promote cross-learning through supporting health worker communities of practice



Policy

We advocate globally & nationally to create an enabling environment for health workers to deliver high-quality care

ILLUSTRATIVE ACTIVITIES

- Support development & rollout of national human resources for health strategies and plans & health worker-focused standard operating procedures
- Support development & rollout of national climate change & health strategies & plans
- Support professional health worker associations with advocacy & mobilization initiatives

Seed brings appropriate and tailored resources—**technical, human, financial, and material**—to catalyze the efforts of our in-country partners and drive results.



Working with our philanthropic partners, Seed ensures we bring appropriate and tailored technical, human, financial, and material resources and place them alongside our in-country partners' expertise, resources, and contextual knowledge. Our shared, complementary inputs drive our impact.



Technical assistance is the cornerstone of our support to partners. As we work together to strengthen health worker education, practice, and policy, we provide or connect our partners with the tailored clinical and health systems expertise they require. This can include evidence-based quality improvement practices, internationally-accredited curricula and teaching resources, proven policy tools, evaluation approaches, and much more.



Human resources. Seed recruits and hires professionals with the right expertise to accompany our partners as they strengthen the health workforce.

- **Educators.** Seed recruits experienced, highly-skilled doctors, nurses, and midwives from around the world, a growing majority of whom are from countries in Africa, who embed with our partner institutions for at least one year. Known as Seed “educators,” they partner with faculty at health professional schools to develop and strengthen curricula, train and mentor emerging doctors, nurses, and midwives, and move learners from theory to practice using a competency-based bedside teaching model, in which they work together with trainees not only in the classroom, but also in clinical settings, caring for patients.

- **Preceptors.** Preceptors are experienced doctors, nurses, and midwives who provide supervision during clinical practice and facilitate the application of theory to practice for students. While preceptors are an important component of clinical training in higher-resourced health systems, they are less common in the countries where Seed works. We train in-service doctors, nurses, and midwives in competency-based clinical education principles. Once trained, these preceptors coach and mentor students to apply their classroom knowledge and skills in clinical settings.

- **Ministry embeds.** Upon request from our ministry of health partners, Seed hires staff who embed with the ministries to help achieve specific goals, for example advancing national policy efforts.



✧ **Financial resources.** Seed provides financial resources to support our partners' efforts to improve the quality of education, health, and other services. This can include financial support for scholarships to boost student enrollment in health professional schools, learning exchange programs with other Seed partnerships, professional conference attendance for partner staff, and more.

✧ **Material resources.** Seed provides material resources to our partners to support our joint education and training efforts in classrooms and clinics. This can include providing classroom equipment and supplies; skills lab supplies, e.g., mannequins; clinical supplies, e.g., EKG machines, point-of-care ultrasound equipment; telecommunications equipment; and more.

✧ **Emergency support.** When national emergencies occur, such as cholera in Zambia, Ebola in Uganda, and Tropical Cyclone Freddy in Malawi, Seed is often asked by our ministry of health partners to provide rapid training for health workers on topics such as case management, infection prevention and control, and more. Seed also provides material and other resources as needed, including personal protective equipment, clinical and cleaning supplies, transportation, and more.



OUR 2030 GOALS

The governments of Malawi, Uganda, Sierra Leone, and Zambia have asked Seed to deepen, replicate, scale, and grow our partnerships because the results we've achieved together have increased the number of skilled health workers, strengthened the quality of care, and improved health outcomes. To respond to the priorities of our government partners, over the next six years Seed Global Health will work towards two goals:

Goal 1. Build the Health Workforce of the Future



Country Partnership

- Continue and deepen our partnerships with the governments of Malawi, Sierra Leone, Uganda, and Zambia to build and strengthen their national health workforces to close human resource gaps, expand access and improve patient quality of care, and save lives.
- Support our government partners to scale, replicate, and expand proven approaches and interventions to additional sites when and where appropriate.

Climate and Pandemic Resilience

- Educate, train, and mentor health workers to recognize and confront the health threats created by climate change, provide high-quality care and advise patients how to take care of their health during climate and other emergencies, and problem solve when challenges and emergencies arise.
- Integrate the health effects of climate change into health professional school curricula when and where appropriate.

Goal 2. Advance the Health Workforce as a Global Priority



Policy

- Advocate for new and strengthened global, regional, and national policies to educate, support, protect, absorb, and sustain the health workforce.

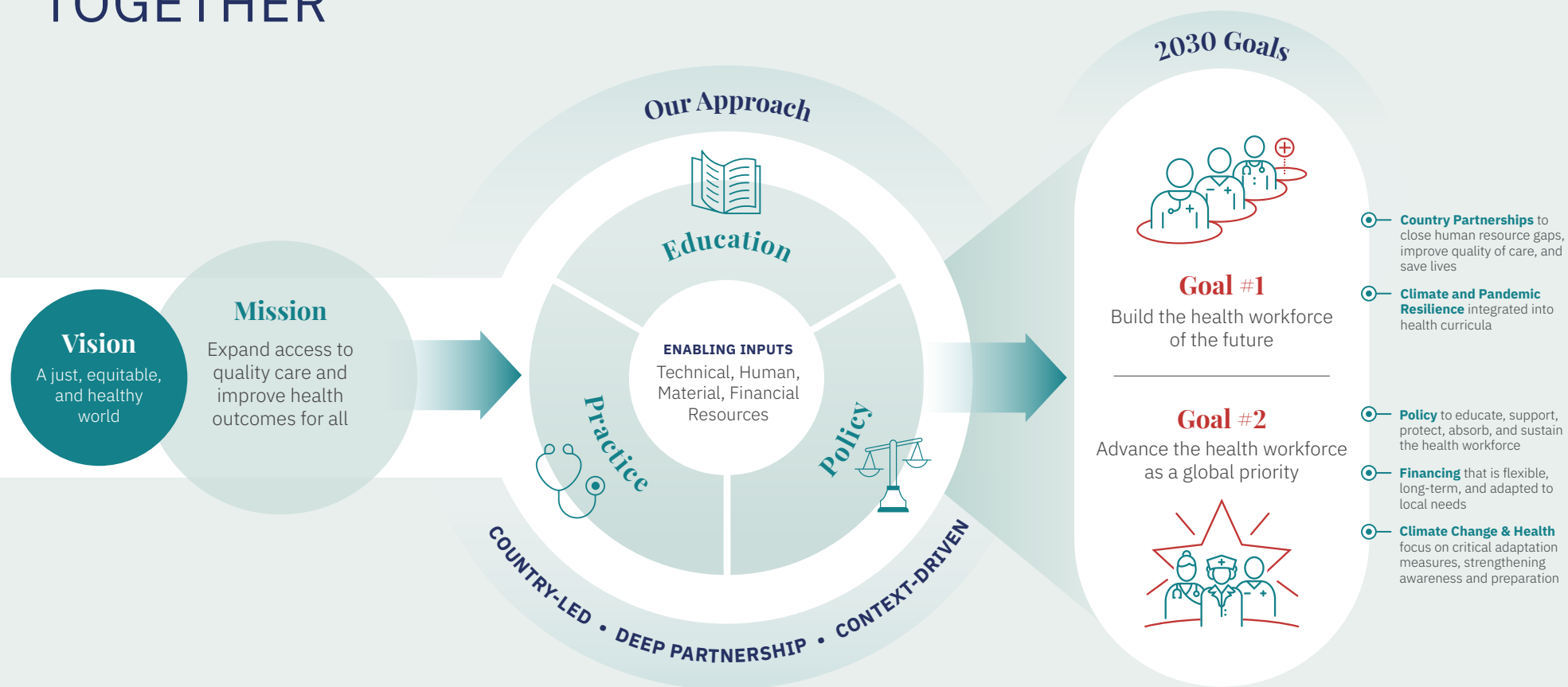
Financing

- Advocate for increased international and domestic investments, development funding, and philanthropic giving to strengthen the global health workforce, especially across Africa.
- Champion the need for financing to be flexible, long-term, and adapted to local needs.

Climate Change and Health

- Raise awareness about the effects of climate change on human health and wellbeing and the need to strengthen health systems and the health workforce as critical adaptation measures.
- Work across our four partner countries to support them to address and prepare for the impact of climate change on their health systems.

HOW IT ALL COMES TOGETHER



HOW WE MEASURE SUCCESS

Our measures of success provide a framework for how we will assess progress toward our 2030 goals in the short, medium, and long term.

Seed Global Health will work to:

- **Close the gap.** Increase the quantity of qualified and practice-ready health workers to achieve our partner country goals.
- **Bolster health systems.** Strengthen sustainable and resilient institutions that transform care and save lives.
- **Catalyze investment.** Increase and optimize global, national, and local allocation of resources for the health workforce.
- **Save lives.** Improve health outcomes for the populations we serve.

These measures of success will become the foundation of our organizational monitoring, evaluation, and learning strategy. Within each measure of success, Seed will develop partnership-level metrics, country-level metrics, and organizational “roll-up” metrics to assess progress and impact.

For example, a partnership-level metric might measure the number of practice-ready family medicine doctors who graduated from a Seed-supported partnership in Malawi and their impact on health outcomes. An organizational-level metric might look more broadly at what percentage of government-aligned goals for graduating and absorbing practice-ready health workers the organization helped meet over the course of a year.



“

Usually, impact is seen after the long term, but with Seed’s [maternal health] interventions at the Makeni Regional Hospital, we have seen impact in less than two years.”

School of Midwifery Makeni Head of School, Sierra Leone

OUR PEOPLE

Seed Global Health is a people-centered organization and we acknowledge that to achieve our mission, we must put our people—our dedicated and talented staff—first. We are a dynamic group of doctors, nurses, midwives, social scientists, public health leaders, drivers, evaluators, communicators, finance experts, and administrators who hail from more than 15 countries.

We believe that our strength and ability to challenge the status quo is rooted in the diversity of our experiences and perspectives; in our commitment to learn from each other, from our partners, and from the work we do together. Our strength also stems from the power of people to upend and change systems and power structures that impede progress and drive inequities.

Principles of decolonization, equity, and inclusion (DEI) a part of everything we do, including our day to day work, organizational strengthening efforts and the program and policy work we do with our partners at national and global levels. For this reason, DEI principles are integrated directly into our strategic plan as opposed to being placed in a separate, parallel strategy.





Investing in health workers and in the health systems that support them is one of the smartest ways to ensure resilience and readiness when the next pandemic or climate-driven emergency strikes.

What does this look like in practice?

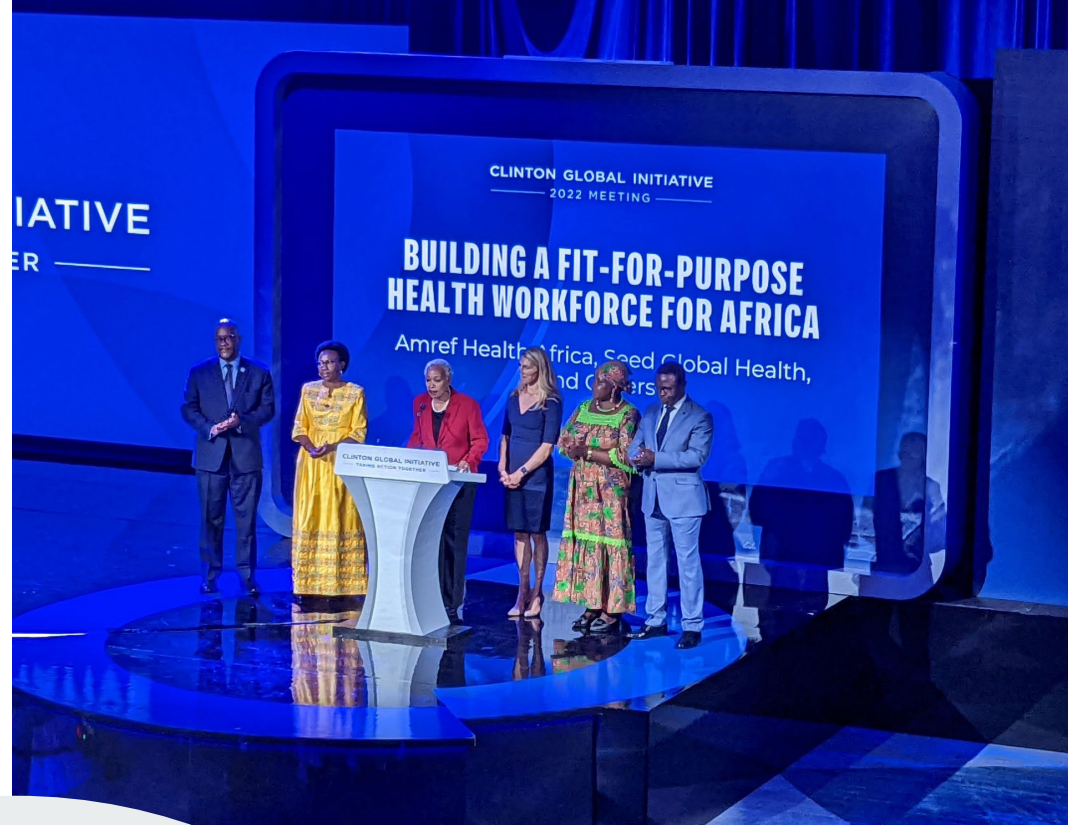
- ✧ **We believe our staff's national origins or places of residence should not solely determine how they are compensated.** We will advance equity through a transparent revision to Seed's compensation and benefits strategy.
- ✧ **We believe that staff closest in proximity to where we work have the context, responsibility, and authority** to make key programmatic and operational decisions. We commit to decentralizing decision making, strengthening country-based programs and operations, and increasing leadership from and based in the countries where we work.
- ✧ **Our work is driven by the priorities of our government and institutional partners**—not by what we think should be done—and this encompasses how we define and measure success and how we tell stories about our work. We commit to ethical and inclusive monitoring, evaluation, learning, and storytelling practices.

PHILANTHROPIC PARTNERSHIPS

Seed's work would not be possible without the loyal and generous philanthropic partners who support us.

[Our philanthropic partners](#) include foundations, corporations, and generous individuals and families who believe in quality health care for all people. Together we share a common vision of a just, equitable, and healthy world.

Between 2024 and 2030 Seed will raise \$100 million to advance the health workforce so that we can complement the investments of our partner countries to achieve even greater impact. In addition to continuing to work with our current philanthropic partners, we will explore working with bilateral and multilateral donors when we see opportunities that align with the priorities of our ministry of health partners.



Amref Health Africa and Seed Global Health announced a historic commitment to strengthening the health workforce in Africa at the 2022 Clinton Global Initiative (CGI), alongside Health Ministers from Malawi, Sierra Leone, Uganda and Zambia, and representatives from Africa CDC.

“Seed Global Health provides unique value to the Ministry of Health in that it emphasizes long-term investments in the health facilities rather than short-term trainings and workshops.”

Permanent Secretary from the Ministry of Health of Zambia

OUR WORK IN ACTION



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Zambia's First Family Medicine Doctors



The Ministry of Health and The University of Zambia invited Seed Global Health to launch a partnership in 2019 to grow Zambia's first [family medicine Master of Medicine \(MMed\) program](#). The program's aim is to strengthen family medicine training and increase the number of practice-ready family doctors who are able to deliver high-quality primary care to patients of all ages throughout Zambia.

Seed and our partners focus on family medicine because research shows that countries with strong primary health care systems centered on skilled family medicine doctors have better patient outcomes, increased patient satisfaction, and lower costs.



Seed Global Health staff and UNZA family medicine students at Chilenje hospital in Lusaka, Zambia.

The family medicine MMed program at UNZA has **graduated its first family medicine doctors** and enrollment continues to grow rapidly.



Family medicine doctors are an incredibly versatile investment for health systems facing human and financial resource challenges.

A family medicine doctor is trained to diagnose and treat about 70 percent of patient cases that might present in a community health clinic, and to refer only the more advanced cases to specialists in referral hospitals. Family medicine doctors provide comprehensive care close to patients' homes and create greater efficiency in overstretched health systems.

The family medicine MMed program at UNZA has graduated two family medicine doctors and enrollment continues to grow rapidly. UNZA created two full time faculty positions—staffed by two of the first graduates of the program—and is exploring creating two additional part time faculty positions. This is a big step towards sustainability as more graduates take on new faculty positions.

Two Ways We're Strengthening Emergency Care in Uganda



In the wake of the COVID-19 pandemic, the government of Uganda prioritized strengthening emergency care, a decision that was further reinforced after the 2022 Ebola outbreak. A new National Emergency Medical Services Policy and Strategy commits to educating 400 emergency medicine doctors over the next ten years.



A newly trained ReACT team based at a small rural hospital receives an emergency medicine kit provided by Seed Global Health.

The Ministry of Health invited Seed to join forces with the Ministry of Education and two local universities to educate emergency medicine doctors and faculty. Together, we created two post-graduate Master of Medicine (MMed) emergency medicine programs at Mbarara University of Science and Technology (MUST) and Makerere University, currently the only two emergency medicine programs

in the country. To date, MUST and Makerere have graduated 20 emergency medicine doctors, with many more in the pipeline. Several graduates also have been trained as faculty, which will sustain the MMed programs into the future.

Additionally, Seed and our partners are training hospital-based rapid response teams across the country. Also known as ReACT teams, they are made up of in-service health workers, including doctors, nurses, midwives, anesthetists, clinical officers, and more. The teams are trained to stabilize and manage a range of emergencies, including obstetric, both within and outside of hospital emergency departments.

ReACT teams are trained in two ways: 1) virtually through an evidence-based online training platform known as [ECHO](#), and 2) in-person through emergency care, basic life support, trauma, and other courses. The multidisciplinary ReACT teams have reduced emergency response times.

To date, Seed and our partners have trained more than 11,000 Ugandan health workers in emergency medicine via the ECHO platform, several of whom are working in emergency response teams at 19 hospitals across the country. The Ministry of Health plans to scale ReACT teams to all high-volume facilities in Uganda as resources become available.

Saving Mothers' Lives through Midwifery in Sierra Leone



Our partnerships with the Ministry of Health and Sanitation (MOHS) and two schools of midwifery in Sierra Leone are strengthening midwife education and saving mothers' lives. In 2020, Sierra Leone's MOHS asked Seed Global Health to join forces to reach their goal of graduating 4,000 practice-ready midwives by 2030.

Together we conducted a national needs assessment to identify challenges and gaps in midwifery clinical training at health facilities in Sierra Leone. Armed with this knowledge, we established partnerships with the [School of Midwifery Makeni](#) and the [School of Midwifery Bo](#) and their associated clinical practice hospitals. The regions served by these schools and hospitals have some of the highest maternal mortality rates in the country.

Seed and our partners provide competency-based education for student midwives, ensuring they learn theory in the classroom and clinical practice in the hospitals. Key to this approach is training preceptors, who are practicing midwives trained

Between 2021 to 2022, Seed and our partners observed a **60% decline in absolute maternal deaths at the hospital.**



A midwifery student practices listening for a fetal heartbeat in a clinical skills lab.

to coach and guide student learning during clinical practice rounds. Seed also has introduced evidence-based midwifery practices at the hospitals, including daily all-maternity unit meetings to improve communication, triage protocols, patient charting, and checklist tools for managing obstetric hemorrhage and other emergencies, to name a few.

At Makeni Regional Hospital, there has been a positive downward trend of maternal deaths since Seed began our training and support to student midwives and preceptors. Between 2021 to 2022, Seed and our partners observed a 60% decline in absolute maternal deaths at the hospital.

Tackling the Health Effects of Climate Change in Malawi



A mother and her safely-delivered newborn.

In March 2023, amidst a cholera outbreak of already historic proportions, Malawi was hit by Tropical Cyclone Freddy, a storm that shattered cyclone records and killed hundreds. The government declared a state of disaster, landslides destroyed villages, vital water and electricity sources were incapacitated for weeks, and cholera continued to spread.

To support the government of Malawi, Seed Global Health joined with partners to respond and provide essential health services, including training nearly 200 health workers on cholera case management.

Seed also supported Kalembe Community Hospital, located in Nsanje district, to become a comprehensive emergency obstetric and newborn care (CEmONC) site, which means health providers were able to perform interventions for pregnant women and newborns experiencing life-threatening complications, including severe bleeding, obstructed labor, eclampsia, and newborn asphyxia.

Seed support enabled smooth implementation of CEmONC services at the hospital while construction crews worked to restore roads and bridges. The support also helped save lives. During this time, the CEmONC team performed seven cesarean sections and treated one case of postpartum hemorrhage and two cases of severe newborn asphyxia. All mothers and newborns, many of whom were referred from smaller health centers in Nsanje, were promptly managed and discharged safely.

In other districts, Seed ensured the provision of emergency care by providing fuel for generators and materials for sterilizing surgical sets and ensured the continuation of routine health services by providing medical supplies, WASH equipment, fuel, and a vehicle to transport patients and supplies.



ABOUT OUR NAME

Seed Global Health was founded on the belief that sharing knowledge saves lives. The doctors, nurses, and midwives who have been educated and trained with support from Seed and our partners go on to share their learnings with colleagues old and new, helping to grow and strengthen the health workforce around them. They are the “seeds” of change for transforming health systems over time.

SeedGlobalHealth.org



Malawi

Area 10, Plot 10/185, Off Zomba Street, Bua Road,
P.O. Box 30111, Capital City, Lilongwe 3

Sierra Leone

97c Wilkinson Road, Freetown

Uganda

Plot 31, Bukoto Crescent, Kampala, Naguru

United States

50 Milk Street, 16th floor, Boston, MA 02109

Zambia

Zambia Plot 15584/1 Katimamulilo Road,
Sunshare Tower, 8th Floor Suite 804, Lusaka