

**Scottish Government International Development Programme
End-Year Report**

1. General project information		
1.1	Project reference Number	
1.2	Name of organisation	Scotland Malawi Mental Health Education Project
1.3	Lead partner(s) organisation	College of Medicine, University of Malawi
1.4	Project title	Scotland-Malawi Psychiatry Capacity Development Project (SMPCDP)
1.5	Reporting period	From: 01/04/2019 To: 31/03/2020
1.6	Reporting year	5
1.7	Project start date	01/04/2016
1.8	Project end date	31/03/2023
1.9	Total project budget*	£288699
1.10	Total funding from Scottish Government*	£288699
1.11	Provide a brief description of the project's aims, highlighting which of the Sustainable Development Goals (SDGs) your project is working towards? (200 words)	<p>This project will train psychiatrists who will go on to provide vital leadership in training, research and practice of mental health care in Malawi. It provides funding for up to 4 Malawian MBBS graduates to study for the MMed (Psychiatry) qualification at College of Medicine (COM), in collaboration with the University of Cape Town (see Scholarship Programme). Psychiatrists from Scotland/UK will provide support to the Department of Mental Health to deliver the course.</p> <p>The project will also support the 3 MMed (Psych) graduates who were supported by SMMHEP in their training to acquire further professional training and become established in leadership roles in Malawi.</p> <p>SDG goals: Health, Education</p>
2. Project progress and results		
<p><i>Please use this section to give an update on the progress the project has made during this reporting period.</i></p>		

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2.1	<p>Provide an update on the progress your project has made over the past 12 months. Use this space to update us on what has gone well and any challenges you have experienced, detailing how you have overcome these. (Max 500 words)</p> <p>MMed graduates support: 1 graduate was appointed as Head of Mental Health Department in COM in July 2020 and a 2nd now has a 30% clinical lecturer post in COM and is leading a successful QI programme in Zomba Mental Hospital.</p> <p>Scholarship programme: 4 trainees are enrolled to MMed course; 2 appointed as assistant lecturers; 2 as medical officers in MOH.</p> <p>Three trainees have passed part 1 exams (as expected). One moved to UCT in April 2019 (as expected). One was scheduled to go Oct 2019 but has been delayed by administrative and academic issues. The third is making excellent progress with clinical and academic work, and is due to move to Cape Town in September. The fourth will sit part 1 exams in Sept (6 months later than planned)</p> <p>Progress in delivery of weekly teaching and supervision has been as expected. Delivery of weekly academic teaching programme, psychotherapy teaching and supervision are in place. Trainees completing their learning logs.</p> <p>Research component: Progress as expected. 1 trainee has completed his research project. The remaining trainees are in discussion with supervisors re developing their research ideas.</p> <p>[Redacted] the Grant Manager and Head of Department at COM took up a new post with the University of Edinburgh in July 2019. He is based in Malawi and remains available for advice, but is no longer involved in the PG scholarship programme. His roles have been taken up by [Redacted](Grant Manager) in Scotland and [Redacted](Head of Department) in Malawi. COM has advertised [Redacted]post, and SMMHEP has canvassed widely in UK, but no suitable applicants have yet come forward. SMMHEP has recruited a long-term volunteer to assist [Redacted]until June 2020. Another long-term volunteer may be available to assist him for part of the next academic year.</p>
2.2	<p>Has the focus or plans for delivery changed significantly during the last year? Please highlight what issues or challenges prompted this change and how you anticipate any changes in focus will impact on the previously agreed outcomes (Max 500 words)</p> <p>Focus remains unchanged. Some issues affecting delivery:</p> <p>1. One trainee was scheduled to go to UCT in Oct 2019 but but has been delayed by administrative and academic issues. Another trainee has yet sit the part 1 exams. He will sit the exams in September.</p> <p>There is another able and interested Malawian doctor working in mental health who would be available to take up a scholarship place if one became available.</p>

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	<p>2. Trainees on the previous scholarship programme reported that they struggled financially and socially while living in Cape Town. We anticipate that the current trainees will require more support and are considering how to provide this.</p> <p>3. The recent declaration of a coronavirus pandemic has affected the delivery of the teaching programme. Malawi has imposed mandatory quarantine on visitors from the UK; this means that UK lecturers will be unable to carry out teaching in person, and the Programme Manager will be unable to visit colleagues, staff and trainees. The trainee in South Africa has had to return to Malawi, because of restrictions on travel in South Africa. In addition, SMMHEP has had to cancel the volunteer psychiatrists who were due to deliver the undergraduate teaching in April and May 2020. This will cause significantly extra work for the Department staff and the postgraduate teaching is likely to be temporarily disrupted. SMMHEP trustees will endeavour to provide online supervision and teaching for the postgraduate trainees.</p>
2.3	<p>Taking into consideration what you have achieved during the last 12 months, along with any challenges you have experienced, please highlight to us what lessons you have learned, and how these will be applied in the project in the future. (Max 500 words)</p> <p>1. The project has gone well and the basic teaching model has proved sound. We have recruited UK volunteers to provide additional mentoring and support for one of the MMed trainees. In the past, we have had a small pool of applicants for MMed degrees, but this has improved as the interest in mental health has grown among medical staff and students in Malawi (as a result of SMMHEP's activities and influence). We are therefore now in a position where we can apply more stringent criteria in selecting trainees for any future MMed scholarships.</p> <p>2. We have increased the support for trainees in Cape Town by visiting the current trainee there and liaising with the UCT course organiser and by compiling written guidance for future trainees.</p> <p>3. The coronavirus pandemic has made us more aware of the need for flexibility in teaching, particularly the need for distance forms of teaching. We have recently embarked on a Curriculum Redevelopment exercise coupled with a review and overhaul of our e-learning material, which will help if such a situation recurs. Unfortunately, electricity disruption inconsistent internet availability in Malawi makes online/Skype teaching unreliable. We therefore hope to develop an off-line version of the e learning modules.</p>
<p>2. Partnerships and collaboration</p> <p><i>This section allows you to discuss how partnership working is progressing on the project, as well as wider collaboration and sharing of learning.</i></p>	
3.1	<p>Provide an update on how partnership working has gone in the past 12 months. Let us know about any highlights, challenges or changes to roles and responsibilities. (Max 350 words)</p>

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	<p>It has gone well at an academic level. [Redacted] departure has been a challenge, but COM and SMMHEP have worked well together to: (a) try to fill his post; (b) find a suitable long-term volunteer to be appointed as a hon. assistant lecturer to help [Redacted] with the Head of Department responsibilities. We are fortunate to have recruited a very able long-term volunteer ([Redacted]) to support [Redacted] during this academic year.</p> <p>COM's grant management has caused problems for SMMHEP, in obtaining relevant financial information and making timely payments. This is due to problems within COM's financial department, which are being addressed.</p>	
3.2	<p>Have any Scotland-based staff visited the project in the past 12 months? Give details including key activities and outputs of these visits.</p>	
Date of visit	Key achievements / outputs of visit	Follow-up actions
May 2019. Monitoring and evaluation visit: [Redacted] lead, grant management and teaching responsibilities with COM.	[Redacted] appointed as HoD; [Redacted] recruited as hon assistant lecturer	Another long-term volunteer/assistant lecturer has been recruited
October 2019. Monitoring and evaluation visit: [Redacted]. Discussed teaching responsibilities within CoM and progress of MMed trainees. Attended Curriculum Development Workshop with [Redacted] and discussed structure of e learning review. Discussed ongoing QI project. Discussed problems of financial reporting with CoM. Met with [Redacted] to review progress of project.	Curriculum Development under way. Structure of e learning review agreed with [Redacted] leading. QI workshop and expert input from UK arranged.	Financial reporting within CoM still to be resolved. Progress of trainees GK to be monitored and contingency. Handover of e learning redevelopment to be arranged when [Redacted] returns to UK.
3.3	<p>Please tell us about any dissemination and learning throughout this reporting period. How have you promoted effective learning across the project? Please explain what processes you have used both internally and externally to share learning from the project so far, and how this learning is being used. (Max 500 words)</p>	
	<p>The experience of running the MMed programme and delivering teaching using web based resources has been shared with colleagues in Zambia through the linked CPMZ project.</p>	
3.4	<p>Has the project completed a mid-term project evaluation in the past 12 months (or is one planned for the next 12 months)? Please provide detail of the outcome of the evaluation. (Max 500 words)</p>	

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	Yes. See report
3.5	Please highlight how you are maintaining an awareness of others working in this region, giving details of collaboration, joint working or partnerships with others. (Max 500 words)
	<p>Liaison with organisations in Malawi and Southern Africa via formal and informal academic and research links. [Redacted]has taken up an MRC senior research fellowship and is working closely with the Malawi Epidemiological Research Unit (MEIRU) and with clinical colleagues in Lilongwe.</p> <p>Liaison with Scottish organisations via Global Citizenship Network</p> <p>SMMHEP is working with the Department of Clinical Psychology in COM to help with their plan to set up a MMed course in clinical psychology</p>
4. Safeguarding and fraud	
<i>Please ensure you complete questions 4.1 and 4.2 even if you have no incidents to report.</i>	
4.1	Have there been any safeguarding incidents, either relating to staff/volunteers or beneficiaries of the Grant or the Project, in the last 12 months?
	No
4.2	Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?
	N/A
4.3	Describe what action has been taken, and highlight any lessons learned.
	N/A
4.4	Have there been any incidents in the last 12 months of financial mismanagement, theft, fraud etc, either relating to the Grant or the Project or which affects the organisation?
	No
4.5	Have these incidents reported at 4.1 been reported to relevant authorities, and if so, to whom?
	N/A

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4.6	Describe what action has been taken, and highlight any lessons learned.
	N/A

5. Risk assessment

5.1	<p>Have any issues materialised during this reporting period? If so, how were they addressed?</p> <p><i>Please refer to risk assessment provided at application stage.</i></p>
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Assumption	Risk	Action taken	Was this included in the Risk Assessment Table in your application?
Volunteer teachers may fall ill while in Malawi	Coronavirus pandemic	No-one has become ill. Cancellation of short-term volunteers; long-term volunteers offered repatriation. Discussion with [Redacted] about how to best provide PG teaching using MMed trainees and graduates of previous MMed programme	We anticipated individual illness, not the threat posed by the current pandemic.

6. Inclusion & accountability

Thinking specifically about the past 12 months, please use this section to tell us how you are mainstreaming through your project, ensuring that you are aware of and actively working to reach vulnerable and marginalised groups.

6.1	Is the project still relevant for the beneficiaries you are working with? Please highlight how you ensure accountability on the project, ensuring beneficiaries have the opportunity to feedback on the project and influence its development? (max 350 words)
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It is highly relevant. We work closely with the 4 MMed trainees to monitor their progress and obtain feedback on the PG programme and associated clinical experience offered to them. How relevant it is for the people of Malawi who are the wider beneficiaries remains to be seen. We believe that having well trained mental health practitioners will benefit a country which had a very limited mental health service and yet has the same range and prevalence of mental disorder as western countries.

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6.2	Do you have an awareness of particularly vulnerable or marginalised groups within the community in which your project is working? Please give details on how you are disaggregating data to recognise these groups across the project. (Max 350 words)
	People with mental disorder are marginalised and vulnerable within Malawi. The whole aim of this project is to begin to address their mental health needs. However, this is a long-term outcome, the full effect of which is likely to extend well beyond the life of this project.
6.3	How is your project working to actively meet the needs of these vulnerable and marginalised groups, ensuring they are benefiting from the project? Please outline any mechanisms you are using. (Max 350 words)
	See previous sections
6.4	Taking into consideration some of the challenges of mainstreaming, please describe any challenges you have faced in reaching vulnerable and marginalised groups, how you have overcome these or plans you have developed to support inclusion on the project. (Max 350 words)
	See previous sections
<p>7. Financial information</p> <p><i>This section will be reviewed alongside your budget report, which should be included alongside your narrative and logframe. Please ensure this spreadsheet is completed with both a detailed breakdown of expenditure for this financial year, along with your projected spend for the next financial year.</i></p> <p><i>Please note carry-over of funds to the next financial year should have been agreed with the Scottish Government by January 31st of the current financial year.</i></p>	
7.1	With reference to your budget spreadsheet, please give a detailed explanation of any variances between planned and actual expenditure, including reasons for the variances and whether these are as a result of timing issues, price achieved, quantity etc. If these are temporary variances, please outline plans for expenditure. (Max 500 words)
	<p>From 2018/19 we had a cumulative underspend of approximately £23000 in international travel over the 3 years to date. This has come about as some of the expert lecturers have not claimed expenses as a donation to the project, and we did not have a second lecturer in post in 2018. We were given permission to use this underspend to support the SMMHEP longterm volunteer in 2019/20, to support a new lecturer (to replace [Redacted]) if appointed, and to provide some extra teaching visits for the current MMed trainees.</p> <p>We had 2 lecturers in place for academic year 2019/20 ([Redacted]) and supported them. We also an overspend in COM tuition fees for the trainees as these were unexpectedly increased by University of Malawi</p>

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	<p>We had some extra teaching visits planned but these were cancelled due to volunteer illness and the onset of the COVID19 pandemic so did not spend full cumulative underspend in this financial year. Total amount of true underspend £ 6441.52</p> <p>Again we would like permission to use this underspend to support the SMMHEP long-term volunteer in 2020/21, to support a new lecturer if appointed, and to provide some extra teaching visits for the current MMed trainees. This plan is dependent on impact of the COVID 19 situation on whether COM opens for new academic year, and safety/feasibility of volunteers travelling. We keep this under regular review and will discuss with SG as needed.</p>
7.2	<p>Please give details of any capital expenditure in this reporting period. (Max 350 words)</p> <p>none</p>
7.3	<p>Please explain how you have worked to ensure cost effectiveness on the project in the past 12 months, whilst maintaining the quality of delivery. (Max 350 words)</p> <p>SMMHEP has no employed UK staff. The long term volunteers living in Malawi working within COM are also unpaid on this project. This keeps costs low and offers excellent value.</p>
8. Any other information	
<p>Use this section to tell us any other relevant information regarding your project. (Max 500 words)</p>	
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