



Abbreviations

The terms we use to keep things simple!

P&O: prosthetic(s) and orthotic(s)

MoH Malawi: Ministry of Health of Malawi

MoH Zambia: Ministry of Health of Zambia

TATCOT: Tanzania Teaching College of Orthopaedic Technology

CSPO: Cambodia School of Prosthetics and Orthotics

KCH: Kamuzu Central Hospital, Malawi

MCH: Mzuzu Central Hospital, Malawi

UTH P&O: P&O dept. of University Teaching Hospital, Lusaka, Zambia

Flyspec Fellowship

500 miles has always enjoyed a strong link with FlySpec, a fantastic flying surgical service which supports communities all over Zambia. We are delighted to congratulate Goran Jovic, its pilot/plastic surgeon, on his honorary fellowship conferred by the Royal College of Physicians & Surgeons of Glasgow at Glasgow University.



Boring (but important!)

Our accounts and trustees' report for 2017 were approved by OSCR in September. [You can read them both on our website.](#) You can also read our [Privacy Statement on our website](#) and our new Safeguarding Policy will be uploaded as soon as it has been formally adopted.

Dear friends of 500 miles

Thank you for opening this newsletter - and of course, I apologise that it is over 18 months since the last one!

Despite appearances (or lack of them!), 500 miles has been going strong all this time due to the constant support of our regular and one-off donors and the continuing efforts of the majority of our personnel on the ground in Malawi and Zambia. We are extremely grateful to them all.

In Malawi, we continue to fund and run our two prosthetic and orthotic centres for MoH Malawi, one in Lilongwe and the other in Mzuzu. It is just over 10 years since we first opened our doors at KCH in Lilongwe and I am absolutely delighted to highlight that since then, 500 miles has manufactured and fitted over 13,500 devices to more than 8,000 patients. Our average monthly production rate over the 16 months to April 2019 is 102 devices in Lilongwe and 68 in Mzuzu.

In Zambia, we continue to try to support people with disabilities by sponsoring the cost of prosthetic and orthotic devices supplied by UTH P&O and we are slowly developing a service at St Francis Hospital in Katete in Eastern Province.

Part of the reason for my delay in issuing this newsletter is that the last 18 months have been tough for 500 miles. Among other challenges, we have suffered a few instances of theft by a few of our personnel, both from us and from our clients, the unsuccessful appointment of a new Malawian manager in Lilongwe after a long process, and a disappointing lack of cooperation from MoH Zambia over our proposals to escalate our support and recommence outreach.

The biggest challenge - and wake-up call - has been the adoption by MoH Malawi of an alternative system for producing prostheses which is incompatible with its established (but still low cost) system, which 500 miles has adopted. The economic reality is that Malawi can't even afford to meet the prosthetic and orthotic needs of its population using one low-cost system, never mind two incompatible systems.

At the end of 2018, the Indian Government announced a package of support for Malawi,

including 500 prostheses for amputees using the alternative system. We explained to MoH Malawi how detrimental this would be to the comprehensive service we've built up over the last 10 years - in order to hand it over to MoH Malawi. Nevertheless, a camp was erected on our doorstep, our personnel were seconded with two days' notice, and many of the clients we had been looking after, free, for years were invited. We assume this project was only part of a wider initiative between the Malawian and Indian Governments.

In the end, the camp lasted only 6 weeks and no follow-up support has been offered to clients. But the episode has given us useful insight into the complex pressures on MoH Malawi, as well as a reminder that we are guests in Malawi and a further realisation that the time is right to accelerate the transfer of responsibility for our two centres to MoH Malawi.

We can't change the way Malawi operates - nor should we try - but we can change the outcome for a few. And that is exactly what we are going to focus on as we move full steam ahead to make both centres fully fit for purpose and ready for handover - in terms of facilities, quality of service, personnel, training, policies and leadership. It will take a few years yet but we have made a strong start, as you'll read in this newsletter.

Some of the people whose outcomes we want to change are featured in this issue, as is the latest news on our ongoing training programme in both Malawi and Zambia.

I don't have the space to tell you about all of the wonderful fundraising activity that has taken place since November 2017 but this newsletter will give you some highlights, principally the Malawi Cycle 2018.

We could not do any of our work without you, our supporters. Thank you for your moral, practical and financial support!



Olivia Giles

Malawi

New quality improvement initiative

From 2011 to 2016, through the FK Norway Exchange programme, 500 miles has benefitted from the almost full-time presence of an experienced prosthetist/orthotist at our centre in Lilongwe – which also offered a beneficial influence on quality in Mzuzu. We have been concerned that, without this strategic presence, the quality of our devices may have slipped, so, in August 2018, 500 miles commissioned Sandra Sexton, a consultant prosthetist/orthotist with rich



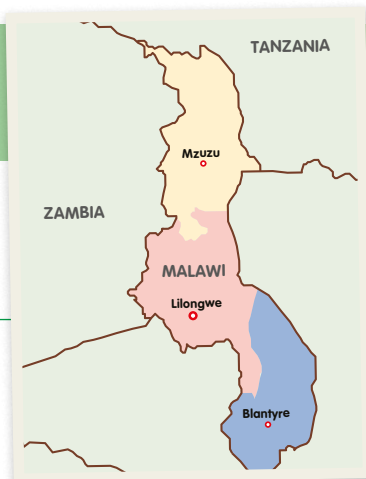
Sandra's influence has been highly beneficial – both for our patients and for the teams in Lilongwe and Mzuzu.



experience in the health, rehabilitation and education spheres, to review the quality of our devices and of our control systems at both of our centres in Malawi. I will just say that we discovered that we have some work to do!

We were so pleased when Sandy agreed to become our new Quality Improvement Consultant because there is nobody on this planet better placed to perform this essential role for us! Not only did she carry out the 2018 assessment, but she worked in our Lilongwe centre for 10 months in 2014/15 as the FK Norway Exchange participant. She is a highly respected professional on the international stage who has been a willing friend and adviser to 500 miles from our early days.

Sandy will put in place a comprehensive quality management system, providing a framework to sustain quality for the future, and she will monitor the quality of our product and the training needs of our personnel. This is a major and expensive undertaking for 500 miles, but our priority is our patients and we simply must ensure we are delivering safe, high quality devices, every time. Sandy has just returned from her second visit.



Burns treatment initiative

In summer 2017, through a connection with the University of North Carolina (UNC), we were fortunate to be introduced to Meghan Lewis, an occupational therapist with a specialism in the treatment of burns with lightweight moldable plastic. She was visiting UNC's work at KCH and suggested that with more sophisticated materials and some training, we might be able to improve what we can offer. For some time we thought we should work more closely with the burns unit at KCH, as a significant proportion of people who have suffered burns need splints to prevent contracture of joints and to support skin grafting, but the majority of them leave hospital without 500 miles even knowing they had been admitted.

We bought and shipped the necessary materials – Performance Health gave us a

nice discount – and in June 2018 Meghan kindly delivered specialised training at both of our centres (as shown, left). In December the 500 miles personnel at KCH held a seminar for the burns nurses and physiotherapists working with burns patients to show them what we can offer and how much better it is for their patients than splints made of Plaster of Paris which are heavy, get dirty easily, and are hard to clean and have to be successively remade – and even compared with the heavy plastic splints we have been making.

Maliwase Munthali, one of our clinicians at KCH, produced a leaflet for patients in English and Chichewa with lots of pictures to show the conditions we can help with – and that has been adapted for Mzuzu. (See page 6 for Maliwase's story of Atupele).



The lightweight plastic splints are more comfortable for patients

With the support of the resident plastic surgeon at KCH, Wone Banda, and with Meghan's advice, we have developed a protocol for liaison between the burns unit, the physiotherapy department and 500 miles at KCH to try to make sure that together we meet the needs of patients with burns in the best way possible, and from our point of view, that patients on the burns ward at least know what we can do for them before they are discharged. There isn't a dedicated burns unit or a plastic surgeon at MCH but our personnel there also held a seminar for all interested and relevant staff at MCH and we hope familiarity with (and confidence in) what we can offer will lead to increased referrals there too.



Maliwase showing off her leaflet

Malawi: Lilongwe

Thank you Beth and hello Bernard

When we realised during the summer of 2018 that our recruitment of a new Malawian manager was not working out, we were extremely fortunate that Beth Sheehan, a former manager at 500 miles, was willing to come and "bridge" for us for six months whilst we looked for a replacement. What an outstanding job Beth did for us! It is no exaggeration to say that, with the welcome help of another former manager Evelyn Huizinga, Beth whipped the place into shape, got us back on track and inducted our new Malawian manager, Bernard Madziatayika, who started with us on the 5th of March.

Beth will be moving to Scotland in July and is looking for a job in the central belt. If anyone needs a brilliant manager for anything, Olivia could not recommend her highly enough!

So we are now looking forward to a new era with Bernard at the helm as our administrative manager. He has retired after 26 years with MACOHA (a large Malawian organization which supports people with disabilities), the last eight of which have been in the role of programme coordinator. 500 miles has worked with MACOHA, through Bernard, since 2009. We have joined their regular outreaches to six destinations in central region and two in northern region – so we already know Bernard. He is a well-respected member of the community, by both Malawians and our friends in Scotland who work in Malawi.

We feel extremely fortunate to be benefitting from his experience and skills and welcome him warmly. This is a major and positive step for the full integration of our centre at KCH into the



Beth handing over management duties to Bernard outside our centre at Lilongwe

Malawi national health service whilst we plan for a Malawian prosthetist/orthotist manager to take over in a few years.



Personnel changes

Our work force at KCH is depleted due to the loss of three members of staff over misconduct – but, on the upside, we have an excellent new receptionist, Maggie Kamwendo, who is employed by MoH Malawi, and one of our four bench workers positions has been assumed into MoH Malawi. This is an important step towards handover when all personnel at our centres will have to be employed by the Malawi government.

We are about to recruit two new bench workers, one to replace a retiree and one to replace a recent leaver.



Radical facelift on the way

Our centre at KCH was built for us in September 2010 by Glasgow City Building, led by Scott McEwan and organized/part funded by Brian Kelly (a volunteer) and Gillian Walsh of the Lord Provost's International Department of Glasgow City Council (pictured above at the centre's opening). Naturally, after nine years our premises are looking tired and shabby, and unfortunately quite raddled with holes cut for the treatment of a chronic termite infestation. So we are thrilled to tell you that Scott, Brian and Gillian have persuaded their organisations to let them come and refurbish our building this September – and we are also looking forward to an overhaul of our IT and other office equipment courtesy of the team of volunteers from the Lord Provost's department.

Project updates

Malawi: Mzuzu

In contrast with the revolving door on the manager's office in Lilongwe, at 500 miles in Mzuzu, Samantha Burgio and Charlie Freeman clocked up two full years with 500 miles as joint managers in February this year. It has been wonderful to have consistent leadership for 29 months. Long may it continue! Olivia encourages you to [enjoy a personal account of their time in Malawi by Sam and Charlie via our website.](#)

Our patient numbers in Mzuzu (which increased from an average of 60 to 68 devices a month over the last 18 months) very much depend on relentless implementation of our outreach programme. We have Charlie to thank for that. With over two years of experience of the backwoods and backwaters (and much else besides!) of Mzimba, Rumphu and Nkhata Bay, Charlie is an expert on planning our outreaches, visits and revisits, ensuring we have a steady stream of appointments. We are really pleased to have re-engaged recently with MAP (another Malawian organisation supporting people with disabilities) through a one-off outreach in Rumphu and hope to attract more patients from that district this year.

We also owe a lot to Master Mabaso and Mary Shani for the success of our outreaches. Master has been our "sensitiser" for the last 5 years and Mary has been our principal user/ambassador. Master is a lay preacher and brings his oratory skills to bear to great effect when convincing the movers and shakers of each community to have confidence in us and in phase one of our outreach process, to recommend 500 miles to their communities. In phase 2, he encourages engagement by the people who work hands-on with people with disabilities, convincing



Samantha and Charlie consulting the outreach map

Mary Shani demonstrating her ability to tackle stairs



them to bring those people we can assist to our outreach clinics (phase 3). To assist with this, Mary tells her own story, revealing that this functional woman who has been walking around organising them all day, is wearing two prosthetic legs! What could be more convincing than that?! You can see a [short film about Mary on our website.](#)

Our personnel at MCH in Mzuzu is stable. All three of our clinicians are on the payroll of MoH Malawi and our two bench workers were also absorbed in the autumn. Our escalating production at MCH means we are currently recruiting a third bench worker.

All of these positive factors confirm that the 500 miles P&O service in Mzuzu is getting ripe for handover to MCH and MoH Malawi. We have agreed in principle with the director of MCH to give a year's notice of handover on 1st July 2020. Of course, we will continue to support after handover in 2021, but we would like to make the centre as self-sufficient as possible by then.



Outreach: Master Mabaso in action (left), and Eviness Nkumba talking to a Phase 3 group (right)



Maxwell, Benadeta and Tiwonge at work at MCH.

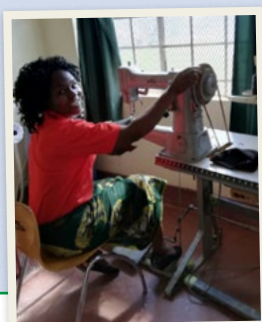
Links with Scottish charities

500 miles has been extremely fortunate to receive a large, powerful, classic industrial sewing machine from [The Global Concerns Trust](#) (GCT). GCT have worked in Malawi for 11 years to provide vocational training and start up tools to hundreds of adults with disabilities, helping them to start up small businesses and generate an income. Their partners MACOHA and KODO provide vocational training in carpentry, tailoring and cane furniture. Graduate trainees

are provided with start up tools or sewing machines, some materials, a solar panel and continued support to help them in the early stages of setting up their businesses.

All the sewing machines and start up tools are donated in Scotland and Northern Ireland and refurbished by groups of volunteers, many of whom have learning disabilities or mental health difficulties.

In another happy link up with a charity based in Scotland, Maxwell Goliath, who won 1st prize at the Malawi Orthopaedic Association conference in September, will be presenting at Smileawi's conference in Mzuzu in June. [Smileawi](#) is a Scottish registered charity which provides and supports basic and safe dentistry in areas of northern Malawi where people have very limited access to dental services. Smileawi has kindly assisted us with the transporting some donated items to Mzuzu.



Eviness at work with the sewing machine



Violet, one of our patients at UTH P&O

Project update

Zambia

UTH P&O

Almost nothing has changed since our last newsletter! Our proposal to MoH Zambia is that 500 miles will pay for devices for all Zambians who can't afford to buy their own with the understanding that MoH ringfences the income generated to buy the next lot of 'low cost' stock. Believing this to be agreed in principle in 2016, we have supported UTH P&O with manpower (having sponsored the training of most of their technicians), with a large supply of 'low-cost' stock and with funding for UTH P&O to go on outreach missions to Chitokoloi, Monze, Mongu and Katete. We were really building up the productivity, capacity and activity level here, but MoH Zambia has neither ringfenced any money nor bought any stock.

Consequently, we have reduced our role to operating as a gateway to the government service at UTH P&O. We do sponsor several devices a month for poor people under an approval system which operates well, but this is not sustainable without the buy-in and commitment of MoH Zambia – and we can't justify the expense of outreach without that.



Timothy and Agness at SFH

SFH lacks the equipment – but he has a small space next to the physiotherapy department and can make simple devices and carry out repairs and refer the people he cannot treat to UTH P&O. He has done a great job for 500 miles even though the planned outreach to SFH has not materialised.

It wasn't our plan, but we can now see scope for building up a P&O service at SFH, a government hospital with good leadership. It will take skill/training for that to succeed and so, as reported below, we are sending Timothy to India for 3 years to study for a diploma and have recruited a young woman called Agness to take Timothy's place at SFH. Like Timothy, Agness has a good school certificate and has a genuine sense of vocation for this work – possibly because she is an amputee herself. She volunteered for a few months at UTH P&O, so has some relevant training already. She started shadowing Timothy in March, and will work with him every day until he leaves in July and she takes over. We will then have three years to discuss with SFH what we can build there with its cooperation.

Eastern Province

There is a bright spot! In April 2016, when UTH P&O was looking for a bench worker to support its clinicians we agreed to pay the salary of a young man called Timothy Miti because he was recommended to us by the manager of UTH P&O, he had a good school certificate and he seemed genuinely interested in this field. He did well, so in January 2017 we moved him up to St Francis Hospital (SFH) in Katete in Eastern Province, with a view to him providing a low-level P&O service and an administrative base for the regular outreach to Katete that we were planning. Timothy is not qualified to make limbs or complex orthoses – and

Training

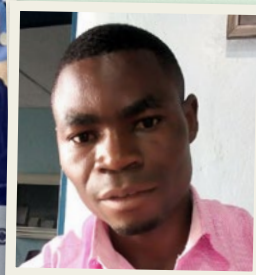
Samuel Mkomera from Malawi joined 500 miles in Lilongwe as a bench worker in December 2014, having been the standout applicant in our recruitment process. We had no plans to sponsor his training, but we couldn't ignore his potential. Since he started his three-year diploma at CSPO in Phnom Penh he has made us proud, achieving consistently above average scores and earning glowing reports from his tutors. He's on track to graduate next March and return to KCH, where his training, experience, natural enthusiasm and work ethic will be very welcome.

This month, **Benadeta Singini** will travel to Mahidol University in Thailand to sit her final practical exams for a degree in P&O. With our sponsorship, Benadeta achieved her 3-year diploma from TATCOT in July 2013. Her current 3-year course is a blended distance-learning upgrade programme run by Human Study e.V. She has performed very well throughout the course, despite being the only person in her cohort from Malawi.

We are congratulating **Kein Chabene** this month! 500 miles has sponsored him for a 2-year accelerated diploma course in orthopaedic technology with Mobility India, upgrading his 1-year certificate from TATCOT which we sponsored in 2012. He has just graduated in Bangalore with a first class qualification and will now



Left: Kein gives a speech at his graduation. Below: Timothy, who is setting off for India this year.



return to Lusaka to work at UTH P&O – and to rejoin his very patient wife and their son and baby daughter.

Also from Zambia – and following in Kein's footsteps to Mobility India – is **Timothy Miti** who sets off for India in July to start a 3-year diploma in orthopaedic technology. As you can read above, Timothy has worked well for 500 miles for over three years, exceeding our expectations in Katete. It makes sense to give him this chance, partly because we can't further develop our low-level P&O service at St Francis Hospital without specialist skills and partly because we owe this to Timothy for his faithful and reliable service.

Patient stories

We are here for our patients – to try to improve the quality of their lives, to broaden their opportunities and in some cases to prolong their lives. Here are the stories of some of them from Malawi, written by a variety of contributors.

Jenipher

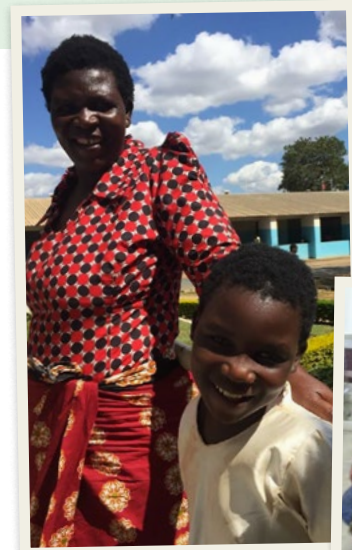
by Sandra Sexton - our new Quality Improvement Consultant (see p2)

On first meeting Jenipher again she is sitting in the waiting area with her mother. I say "hello Jenipher" and make a fuss of her, telling her how tall and how beautiful she is now. She smiles and shyly turns her face away, but we sit together and chat for a while with Maggie, the receptionist, and her Mum.

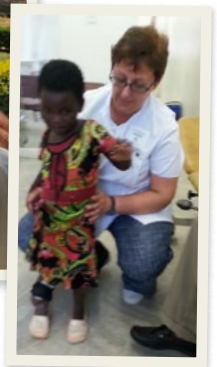
Although it has been 5 years since I last met Jenipher, I remember her well: partly because she has had a complex limb deformity since birth and partly because I had the privilege of watching her take her first "toddle" – I clearly remember trying to encourage her to walk and chase a yellow football. Since then she has had a replacement prosthetic leg every year from the 500 miles team and has been supported to attend 500 miles by Landirani Trust.

Jenipher's shyness soon evaporates and although Maggie helps with translation, Jenipher understands a lot of my English questions and answers in Chichewa. She is nearly 10 years old and in Standard 3 at school, after all! Her favourite subjects at school are mathematics and Chichewa. Jennifer says she likes to play with dolls and play netball. I ask what position she plays, and she says shooter.

Jenipher is being attended to by Maliwase and Kambuye for the repair of her foot today. I remember a photograph I have of Jenipher and I and look it out and find Jenipher and her Mum sitting on the top of the ramp outside. I show Jenipher the photograph on my laptop and she laughs at seeing herself so young – a lovely moment.



Jenipher with her mother, left, and with Sandra, below.



Later, I am sitting in the workshop having lunch and Jenipher appears at the door waving at me. "Give me a ball", she says. This girl will go far!



Ileas by Teneil Jayne, a partner of 500 miles in northern region

The first words Ileas ever heard were spoken in a serious but hushed hatred. "You have to choose. Either she goes or I do" Her father had taken one look at Ileas and was filled with disgust and contempt. Both of Ileas' feet and the majority of one hand were missing. Living on the edge of a massive lake is generally the cure for most children who are born with disabilities in central Africa. Her father intended to drop the baby girl to the bottom of the lake. Her mother faced a difficult decision. A widow with several other children she knew that finding a husband to take care of her would be more than difficult. She

already looked after a teenage son, who was blind and mentally disabled. How could she manage? Then again, how could she throw away her beautiful baby? In a tremendous leap of faith, Ileas's mother chose life. Her father ran away, saying no child of his could be this grotesque.

It wasn't easy, living in a mud hut with a grass roof and reeds for doors and window coverings. The days are hot and the nights cold, but survive they have. Until one day an American woman showed up at their house. She had heard about this family and wanted to help. "What can I do for you? How can I assist you?" Teneil Jayne, a missionary in the area had asked. "A roof." Was the only request. The rains were coming and with them long wet nights. Teneil smiled, knowing there was so much more in store for this mother and her beautiful family.

The 500 miles clinic was around an hour and a half away, and Teneil knew they could find help there. After installing proper windows, doors, a metal roof and a solar package – turning their house into a cell phone charging station, a small business that allowed the mother to stay home with all of her children – Teneil escorted Ileas to the 500 miles clinic.

Ileas was given a pair of feet, but so much more than that. Ileas had always had it in her mind that she was cursed, after all if it hadn't been for her missing parts, her mother would still have a husband and she would have a dad. Ileas believed she was unworthy of love, nothing more than a burden. When she looked down and saw feet it healed something within her. Suddenly she was whole. Not just outside, but inside. She had feet. The curse was broken. She didn't smile, she simply stared in awe. The smile came afterward when she RAN to show her siblings! With the help of Teneil and the new small business, Ileas was also enrolled into school, and with the help of the 500 miles clinic, she can walk there for the first time.

So much more than feet.



Ileas with Teneil outside our clinic

Atupele

by **Maliwase Munthali, a 500 miles clinician specialising in burns**

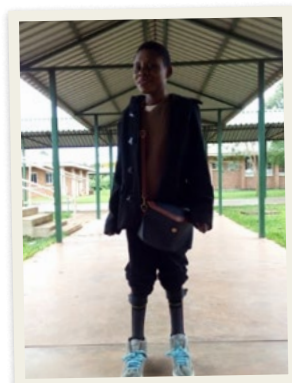
Atupele, who is now 2, was playing in the kitchen as his mum was boiling water, when disaster struck – the water fell on his hands. He was taken to KCH where the damaged finger joints were immobilised. Clinicians from 500 miles went to the burns ward and, together with the surgeon and the physiotherapist, decided to make a splint for Atupele to stretch the joints in the left ring and little finger to avoid further contracture. It leaves the other three fingers free so he can keep using the hand. The Aqualite plastic was



an ideal solution – fast, light and effective for the little boy.

The plan is that Atupele wears it during the day and removes it at night, and does exercises with his parents three times a day. He likes to play with a ball and toy cars, and can still do so to some extent with the device.

It was inspiring to see the parents happy after fitting the device. We hope that when Atupele comes back, the two joints will be stretched and more functional, able to flex and extend.



Debra by **Benadeta Singini, our senior 500 miles clinician at MCH**

Debra, a waitress from Mzimba, was 26 when she contracted Tuberculosis, which paralysed her extremities. She spent four months at MCH, where she was diagnosed as quadriplegic. She started physiotherapy in July 2018 and was then referred to 500 miles. I first prescribed hand splints then, as her ankles were in equinus contractures (pointing inwards and downward) and her knees were going backwards, I decided to give her ankle foot orthoses (AFOs) – first in November 2018 and again in March 2019.

Debra was wheelchair bound and nobody even contemplated that she might walk again. But she has been a proactive patient, coming regularly for repairs and reviews, and walking daily to improve her strength. At her last review, I barely recognised her – she was able to walk without the support of crutches or side bars.

She's due back this July, when I plan to make new hand splints for the night, together with new AFOs. The angles of the ankles and knees are improving and I hope to see her walk longer distances with improved speed. 500 miles has changed her life and given her hope. Who knows what condition she'd be in without these devices.

Innocent

by **Rabeca Mangani, a 500 miles rehabilitation technician at KCH**

The first few months of Innocent's life were completely normal, until he contracted malaria at a year old. After treatment he developed gangrene in his left leg and he had to have it amputated below the knee in April 2018.

Before Maliwase fitted a below-knee prosthesis, I prescribed exercises to improve the strength and range of motion in his left leg, and taught his mother how to apply the bandages to the stump so that he'd be ready for fitting as soon as possible.

After he got his prosthesis, I gave Innocent weight-bearing exercises, and balance and gait training. Again, his mother was involved



in all stages of treatment to ensure the safe and efficient use of the prosthesis at home.

With the prosthesis and his exercises, Innocent is able to walk and play around the house with his siblings. His mother is very happy that she will be able to leave Innocent to play with his friends while she works both at home and at the farm. Most importantly, she will be able to send her son to school as she dreamed.

Patients in Zambia

Our role is more limited in Zambia, we don't receive so much information about the patients for whom we sponsor devices but here is a selection of patients referred by Timothy and Agness based at SFH to UTH P&O with their fitted devices.



Clockwise from top left: Nathaniel Mbewe (6, male), bi-lateral ankle foot orthoses. Joyce Mwanza (54, female), right below-knee prosthesis. Blessings Thole (4, male), right below knee prosthesis. Pingilani Banda (22, male), left below-elbow prosthesis. Gloria Mwale (14, female), left above-knee prosthesis. Chikumbuso Banda (33, male), right below-knee prosthesis.



This month a video of David Miti's story was [published in National Geographic](#). 500 miles sponsored the cost of David's two above-knee prostheses.

Fundraising

Malawi Cycle 2018 by Robin Garrett, Trustee

On the evening of 16 September 2018, I was part of a group of 18 people of varying ages and cycling expertise who met up at the Sunbird Hotel in Mzuzu. The following morning, we were to embark on what for some of us would be the challenge of a lifetime.

The Malawi Cycle was the brainchild of Millar Graham. Thanks to his determination and organisational skills, we were all going to cycle the 250 miles between the 500 miles centres in Mzuzu and Lilongwe in 6 days, enjoying the beautiful Malawian scenery while raising funds for 500 miles.

After a great send off from the 500 miles team in Mzuzu, we navigated the considerably steeper than promised first leg to Nkhata Bay, where we had our first glimpse of Lake Malawi, our companion for the rest of the cycle. As we worked our way down the Lake, we were able to enjoy the stunning

surroundings, while acting as a constant source of interest and amusement to the locals who we met on the way.

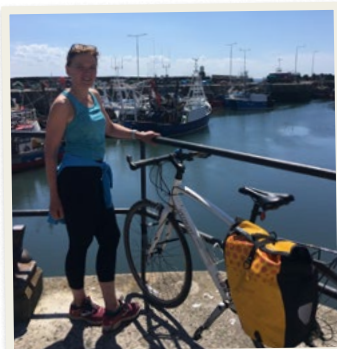
All too soon we reached our final destination and enjoyed a celebratory dinner in Lilongwe on our final night before going our different ways the following morning. We will all remember for a long time the beauty and friendliness of the country, but as importantly we will carry with us a sense of pride that together we raised a magnificent £65,000 which will help 500 miles to deliver its vital service to Malawian people with disabilities.

See also Jeremy Watson's [article in the Times Scotland on 1st Oct 2018](#).



Lorna rides again

Lorna Drummond, who took part in the Malawi Cycle 2018, has already run the Brighton Marathon for 500 miles in April this year but she will also get back on her bike for the charity in September and cycle from Land's End to John O'Groats in the RAB Deloitte Ride across Britain in September. You can [visit her Virgin Money Giving page here](#).



A capital perspective

At Stills Gallery in Edinburgh this October, you can see a series of evocative poems about classic landmarks and places in Edinburgh illustrated by stunning black and white photographs, all of which is compiled into a beautiful coffee table book. Gordon Hunter is the photographer and Don Ledingham is the poet. These two talented men from the Scottish Borders have kindly chosen 500 miles and [Leuchie House in North Berwick](#) to benefit from this inspired and inspiring project which sees them take a new look at the City of Edinburgh. We will be hosting an evening, for which we will send you details soon.

Amazing donations

Olivia has spoken twice St Paul's Parish Church in Milngavie in the last 18 months, once to the Guild which, through **Jean Scott**, donated the superb sum of **£1,400** from the watch night service at Christmas 2017 and again in March this year, to the **Antonine Probus Club** whose members donated a wonderful total of **£2,695.95**.

Over the last 6 years, **Lyz Leatham** has raised **£1,150** through the sale of her hand made greetings cards (pictured). What's more she has nominated 500 miles to be the beneficiary of three donations from **Duddingston Kirk**, of which she is a member, totaling **£1,077.50**.



Longtime supporters, **Dorothy and Alastair MacKenzie**, very generously used the occasion of their Golden Wedding last year to host a fellowship lunch in September at their church, **St Andrew's and St George's West** in Edinburgh, asking for donations to 500 miles instead of gifts. They raised **£985** and a lot of smiles!

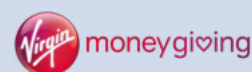


Very recently the **Ladies Section of Kilmacolm Golf Club** has astonished us with a donation of just over **£1,400** raised mainly at their charity day.

Aileen O'Hagan (pictured) ran the Edinburgh Half Marathon in June last year – her first! – raising a fat **£620** from friends and family for her efforts.

How to support us

If you would like to support us please see the How to support us page on our website. You can donate through PayPal, Virgin Money Giving and Just Giving. For online giving, we encourage you to use Virgin Money Giving over Just Giving as it charges considerably less.



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