



**2020**

Amref Health Africa Tanzania

**Annual Report**

*Theme: Striding Towards Sustainability*

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## Acronyms

- » ARP-Alternative Rite of Passage
- » ASRHR-Adolescent, Sexual and Reproductive Health and Rights
- » AK- Afya Kamilifu
- » BEmOC- Basic Emergency Obstetric Care
- » CB- Capacity Building
- » CHMTs- Council Health Management Teams
- » CHW- Community Health Worker
- » CLTS-Community Led Total Sanitation
- » CHSS- Community Health Systems Strengthening
- » CSOs-Civil Society Organisations
- » DCP-Disease Control and Prevention
- » CHSS- Community Health System Strengthening
- » EmONC- Emergency Obstetric and New-born Care
- » FGF- Female Genital Cutting
- » FGM- Female Genital Mutilation
- » FP- Family Planning
- » FP/RH-Family Planning and Reproductive Health
- » FY- Financial Year
- » GAC-Global Affairs Canada
- » GF- Global Fund
- » GoT- Government of Tanzania
- » GSK- GlaxoSmithKline
- » HCWs- Health Care Workers
- » HIV/AIDS- Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
- » HRH- Human Resources for Health
- » HSAP- Health Systems Advocacy Partnership
- » HSS- Health Systems Strengthening
- » HTS-HIV Testing Services
- » ICT-Information Communication Technology
- » LGA-Local Government Authorities
- » MCH- Maternal Child Health
- » M&E-Monitoring and Evaluation
- » MNCH- Maternal, New-born and Child Health
- » MOHCDGEC- Ministry of Health, Community Development, Gender, Elderly and Children
- » NCDs- Non-Communicable Diseases
- » NGOs-Non-Governmental Organizations
- » NTDS- Neglected Tropical Diseases
- » NTLD-P National Tuberculosis, Leprosy and Lung Disease Program
- » PEPFAR- President's Emergency Plan for AIDS Relief
- » PITC-Provider-Initiated Testing and Counselling
- » PMTCT-Prevention of mother-to-child transmission
- » PO-RALG-President's Office, Regional Authorities and Local Government
- » RMNCH-Reproductive, Maternal, New-born and Child Health
- » RHMT- Regional Health Management Team
- » SDG- Sustainable Development Goal
- » SGBV- Sexual and Gender-Based Violence
- » SRHR-Sexual Reproductive Health Rights
- » SLT- Senior Leadership Team
- » STIs-Sexually Transmitted Infections
- » TB- Tuberculosis
- » TCDC-Tanzania Communication and Development Centre
- » UHC- Universal Health Coverage
- » UMB-University of Maryland, Baltimore
- » WASH- Water Sanitation and Hygiene



## WHO WE ARE

With the focus to reach and work with the most vulnerable African communities to achieve lasting health change, Amref Health Africa has been active in Tanzania since 1957, and in 1987, Dar es Salaam office was established. Since then, Amref Health Africa Tanzania has been among the major supporters of the Government of Tanzania's health care initiatives, particularly the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) and President's Office, Regional Administration and Local Government Tanzania (PO-RALG). Amref has supported the development of a number of national health policies, strategies and guidelines for equitable health service delivery.

In year 2020 we implemented projects across different regions in Tanzania and Zanzibar Island, with over 45% of the projects implemented in the Lake Zone of Tanzania. Amref's projects are categorized into four main thematic areas: Reproductive, Maternal, Newborn Child and Adolescent Health (RMNCAH); Disease Control and Prevention (DCP); Water, Sanitation and Hygiene (WASH) and HRH Capacity Building (CB).

Amref Health Africa Tanzania's interventions respond to national health priorities and sustainable development goals (SDGs) in addressing the needs of needy communities, mostly women and children. We work to increase the effectiveness, efficiency and sustainability of health services by strengthening health systems; improving access to services; advocating for stronger community health systems; and influencing health policies. With 2018-2022 strategy, Amref Health Africa in Tanzania remains a strong supporter of Universal Health Coverage Agenda in the country.

### **Our Vision:**

Amref Health Africa's vision is for lasting health change in Africa.

### **Our Mission:**

Amref Health Africa is committed to increase sustainable health access to communities in Africa through solutions in human resources for health, health service delivery, and investments in health.





## WORD FROM THE BOARD CHAIRMAN



With great pleasure, I present to you Amref Health Africa Tanzania's 2020 Annual Report. As a chairman of the board of directors of Amref Health Africa, Tanzania, I would like to extend my sincere appreciations to my fellow board members, Senior Leadership Team and staff for their determination and commitment towards achieving Amref's vision and mission.

I recognize the efforts that has been put in place to make things happen through the great leadership of the Country Director, Dr. Florence Temu, who has always been an icon to her team, empowering staff, mentoring, encouraging and leading by example.

In fulfilling Amref Health Africa's current strategic plan for 2018-2022, the organization continues to play its major role in creating lasting health change for communities, while sustaining the organization's values of UBUNTU, Integrity, Quality with exemplary Leadership.

Amref will continue to ensure its alignment with the Sustainable Development Goals on zero hunger, good health, gender equality, clean water, sanitation, and partnerships for long term social-economic impact.

A very sincere appreciation to our donors, partners, various supporters and individuals, your support helps to further our mission through number of interventions which contributes to creating Lasting Health Change in Africa.

Dr. Eric Van Praag  
**Chairman, Board of Directors, Amref Tanzania**



## MESSAGE FROM THE COUNTRY DIRECTOR

Welcome and enjoy reading our Amref Health Africa in Tanzania 2020 Annual report. This report highlights organizations' major achievements over the year from our major programs, operations and various partnership.

In 2020, Amref Health Africa in Tanzania focused on four main programmatic areas namely Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCAH), Water, Hygiene and Sanitation (WASH), Human Resources for Health (HRH) and Diseases Control and Prevention (DCP) Program; as well as cross cutting Monitoring and Evaluation, Research, Gender, Policy and Advocacy.

We have our footprints in 29 out of 31 Regions in Tanzania whereby our strategic focus is well aligned with the thematic pillars: Human Resources for Health, Innovative Health Services and Solutions, and Investments in Health. We are thriving to develop and sustain human resources for health (HRH) to catalyze the attainment of Universal Health Coverage, develop and deliver sustainable health services and solutions for improved access and utilization of quality preventive and curative, health services and contribute to increased investments in health to achieve Universal Health Coverage in Tanzania.

Throughout the period, we attained a range of achievements through various interventions across the country. I recognize the commitment and dedication demonstrated by our staff, partners and various stakeholders in the implementation of various health projects. Despite the challenging moment of the global pandemic, teams managed to sail through with renewed thinking with creativity to ensure programs continue to deliver.

We acknowledge the generous support and donations from our donors, partners, and individuals who have immensely contributed in ongoing efforts for bridging the gap between communities and the formal health systems. Milestones achieved would have not been reached without your trust and support.

We promise to continue to work with communities in addressing health challenges of the needy groups of young people, children and women until we attain the results we want. We continue to aim at ZERO deaths from preventable maternal and neonatal deaths. We want to see every youth, especially girls, having access to friendly Sexual and Reproductive Health(SRH) while promoting gender and rights to health for all.

Friends and partner, we will continue to build on each other's strengths and grow together.

Dr. Florence Temu  
Country Director,  
Amref Health Africa -Tanzania



“ We acknowledge the generous support and funding from our donors, partners, and individuals who have immensely contributed in bridging the gap between communities and the formal health systems. Milestones achieved would have not been reached without your trust and support.”

## OUR AREAS AT A GLANCE



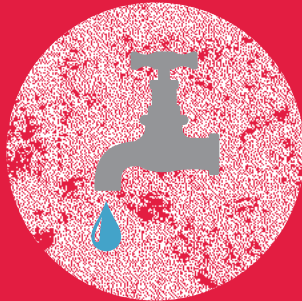
DCP



RMNCAH

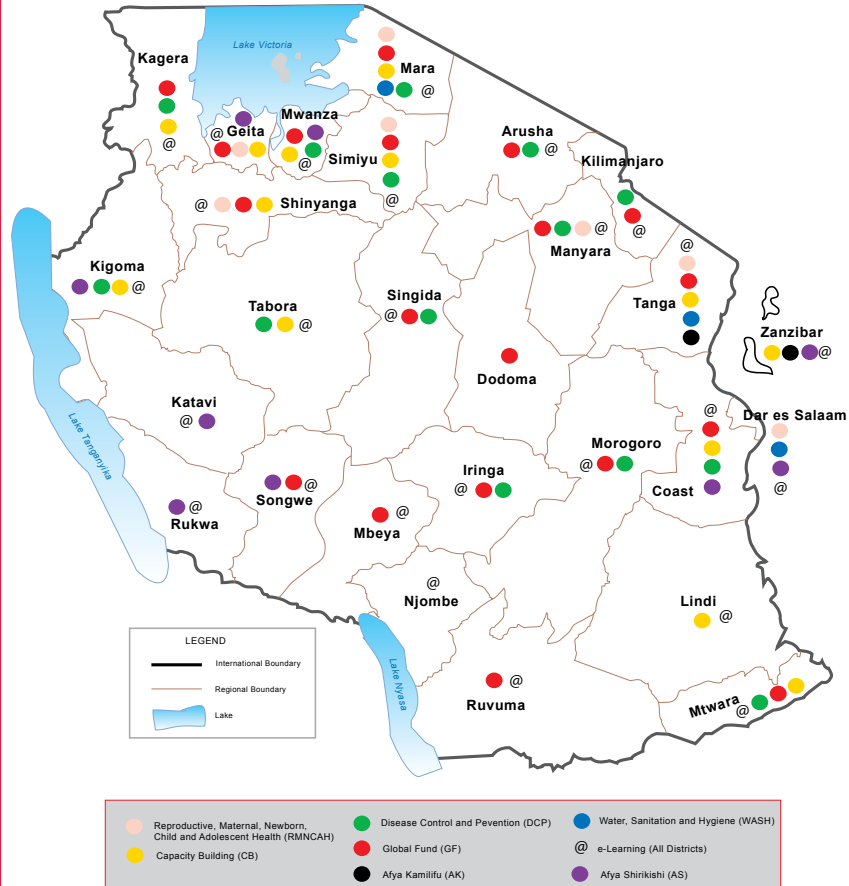


HRH



WASH

## WHERE WE WORK





## BENEFICIARIES REACHED

We **directly** reached

**3,346,051**

People, of whom

**1,677,812**

Were women and

**709,344**

Were men and

**955,895**

Were children

We **indirectly** reached

**6,031,439**

We trained

**9,012**



# Financial Highlights

Total income generated & spent for the year 2020:

**\$ 28,358,088.88**

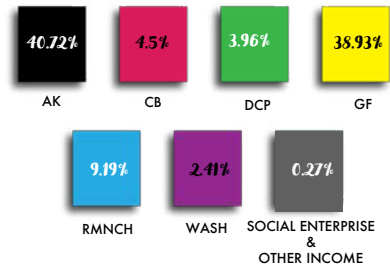
Institutional grants

**\$ 28,282,025.52**

Social enterprise & other income

**\$ 76.063.36**

**% INCOME DISTRIBUTION PER PROGRAM AREA**





## 2020 Programmatic Performance

### Pillar 1 – Human Resources for Health



In all programs, Amref Health Africa Tanzania continued to increasing skills of health care workers, community health workers and other community platforms around sexual, reproductive health, maternal and child health, HIV care and treatment, medical specialties, quality improvement and hygiene and sanitation. Of all the 9,012 trainings conducted in 2020, 23% of the beneficiaries were health care workers (including 4% on Leadership, Governance and Management (LGM) targeted to regional and council health management teams). Twelve percent (12%) were community health workers (CHW) of which 5% were new cohort of CHWs while the remaining was directed towards other community platforms e.g., in and out of school peers and community leaders.

Amref Tanzania contribute in increasing the numbers of frontline workers through the More and Better Midwives, eLearning and Stand Up for African Mothers (SU4AM) projects. With the eLearning project, we increased enrollment from 833 in 2017 to 1787 in 2020. We capacitated 24 nursing schools to provide elearning from four in 2017. This results in completion rate increasing from 15% to 65%.

In 2020, we continued to focus on health worker deployment and retention to promote increasing the numbers of frontline health workers.

Amref's fostered volunteerism in addressing the human resources for health (HRH) needs, we have observed a decline of 14% in nurse midwife gap in Lake and Western Zones. Additionally, the Stand Up for African Mothers (SU4AM) project continued to support 26 nurses and midwives now working in Ruvuma, Lindi, Mtwara, Geita, Shinyanga, Simiyu and Mara – areas notably known for poor maternal and child health outcomes.



Amref Health Africa Tanzania reached 3,346,051 as direct beneficiaries with various health interventions with women and girls making up 71% of the beneficiaries. Services provided included preventive and promotive health education through community sensitization. Specific services like HIV care and treatment, TB and nutrition counselling were provided to 82% of the beneficiaries. Notably this year some beneficiaries benefited from cervical cancer screening (0.15%) and specialized medical and surgical outreach (0.04%).

Several innovative approaches worth mentioning have been implemented in 2020 within Amref Tanzania projects. Through index testing and optimized provider-initiated testing and counselling (PITC) testing modalities, we managed to avoid over testing while increasing positivity yield to 36% which has consequently led to the improvement in early initiation to treatment. Additionally, in HIV care and treat project our designated front desk initiative has contributed to the surpassing multi-month dispensing and hence lead to improved retention rates. Importantly, our viral load coverage and viral load suppression rate have both remained above 90%.

In empowering TB groups and supporting of TB CHW/V, traditional healers, sputum fixers and Ex-TB patients' groups in fostering community TB early detection, Amref's contribution in the number of notified TB cases (all forms) through community referrals has remained above 100% in the performance framework. Additionally, through intensified campaigns and extended working hours we managed to identify 4,319 presumptive TB from mining areas, of which 236 (5%) were diagnosed with TB and initiated treatment. Community referrals by 275 traditional healers resulted in confirming 2.6% with TB whom all were initiated on TB treatment.

Sanitation activities were implemented using three main innovative approaches including waste management social enterprise. We recorded highly successful results of increasing monthly revenue collection by 150% to women and vulnerable youth group as used as accelerated solid waste separation and removal from households by 80% through Taka Ni Mali project in 2019. We anticipate similar results for the same initiative in Mwanza in 2021. Secondly, sanitation social marketing has seen a total of 2,579 toilets been constructed through loans from small and local financial institutions covering about 30% of the supported wards and 13% of the Serengeti population. Also implementation of Community Led Total Sanitation (CLTS) has increased the number and use of sanitation facilities in Mara and Tanga Regions. In the year 2020 Amref supported the construction of 16 boreholes, 22 rain water harvesting and 44 institutional latrines which has reached 352,980 people in different areas of Tanzania.

Within the RMNCH program, 2020, Amref supported the Government with construction of 15 maternity wards and four new theatres in Simiyu Region under the support of Government of Canada. These facilities shall be accessible to 76,920 expected mothers and will significantly result into lowering preventable maternal deaths.

In most project implementation we have embraced project integration in efforts to avoid duplication and inefficient use of resources. Global Fund HIV/ TB project integrated HTS with other services including family planning, cervical cancer screening and access to gender-based violation services. SRH services integrated access to water and sanitation facilities in ARP/WASH and Usafi Kwa Afya projects.





### Pillar 3 – Investment in Health



The Health System Advocacy project in 2020 continued with its advocacy engagement in the area of family planning budgeting with the CHMTs of the Msalala, Shinyanga DC and Kishapu. This resulted in considerable increase in family planning budget up to 6 folds in the 2020/21 budget allocation compared to the financial year 2019/20.

Three projects - Taka ni Mali and Pro poor sanitation of WASH program (sanitation market) and Global Fund's through income generation activities (IGA) contributed to reaching 9397 beneficiaries with economic entrepreneurship activities mostly women and vulnerable groups including AGYW. With Ustawi Mwanamke project, Amref has contributed to reaching 29,903 households in Misungwi and Itilima districts and increment to reduce maternal death of 5% since the project commenced.



### Research

In 2020, we concentrated on dissemination of our research work at the Tanzania Health Summit where the following five research work were presented.

**1. Towards eradication of Female Genital Mutilation in Tanzania: Role of Community Leadership and Ownership.** This study showed that there is a marked reduction in the FGM practices although community members confirm of sporadic cases done secretly without public celebration as they used in the past. The involvement of community leaders who are also custodian of the culture was mentioned by most of the participants. Educating girls and women was also cited as one of the key factors in fighting FGM while inter-tribal/race marriage with tribes that do not practice FGM was seen as a significant cultural turning point against FGM.



**2. Risk factors for loss to follow-up among HIV-infected adults attending health care facilities in Tanga region, Tanzania.** This study concluded that the pattern of LTFU risk factors indicate that young men are still are predominantly most likely to be LTFU hence having poor adherence to ART leading to poor clinical outcome. There are possibility of other social economic factors/activities e.g., fishery (as seen in Pangani district) that attribute to poor adherence to clinic appointments.



**3. The role of gender power relations on women's health outcomes in Tanzania: Evidence from a maternal health coverage survey in Simiyu, Tanzania.** The study showed that the association between decision-making and other gender domains with women's health outcomes highlight the need for providing more attention to gender dimensions for intervention coverage. Future studies should integrate and/or analyze gender-sensitive questions within all surveys.

**4. HIV/AIDS fast track targets - efforts to address the 90% among men in Tanzania.** This study revealed that male enrolment into HIV care increased by 1.6% per year for the past four years which is twice compared to females.

**5. Effects of eLearning on Knowledge Transfer, Retention, and Quality of Healthcare Provision in Tanzania.** This study showed there was strong consensus among midwives and their supervisors on knowledge transfer, retention and skills and competencies at 70%, 70% and 82% degree of consensus respectively. However, satisfaction on the quality of healthcare provision was rated moderate at 62% degree of consensus.

### On UHC and Financial Protection

We successfully advocated for the training of 570 CHWs on mobilization of Community to enroll in the improved Community Health Fund (ICHF). Each CHW will reach approximately 50 households with each household having a size of 7 to 10 family members.

### On Investment for Health

We succeeded to influence the increase of Family planning budget of Msalala from 12million Tshs (2029/20) to 59million Tshs (2020/21) & Shinyanga DC from 3M (2019/20) to 32M (2020/21) while the 2020/21 financial year is yet to end, to date (quarter 3 of the FY 2020/21) the committed increase has been disbursed by 40%

### On prevention Harmful Traditional Practices

In September 2020, the ARP/WASH project managed to facilitate Local Maasai traditional leaders (laigwanans) from Tanga, Iringa, Morogoro, Pwani Dodoma and Manyara to sign a social pact (a declaration) to end FGM in their communities. Amref believes this social pact which stems from communities themselves coupled with the national anti-FGM strategy which was successfully advocated for its development in 2018, will bring sustained impact. The two bring community structures and the state machinery to the same course.



### On HRH/CHWs

We successfully managed to facilitate for the establishment of CHW-Led advocacy platforms that operate at three levels (village, ward, and district), from October 2020, when the 2021/22 budget preparations began CHMTs invited representatives of these platforms to participate in the budget process and thus offering opportunity for CHWs to continue monitoring and pushing for their agenda especially incentives in the budgeting process.

### On capacity building for advocacy

We successfully managed to influence 14 CSOs in Shinyanga to form an Advocacy coalition. The Coalition for Health Promotion in Shinyanga (CHPS) which has clear Terms of Reference/Memorandum of Understanding on advocacy agenda. The coalition has since advocated for and participated in the development of the *Regional Strategic Plan to end Violence against Women and Children in Shinyanga (2020/21-2024/25)* which was launched by Shinyanga Regional Commissioner in October 2020. The coalition will continue to monitor implementation of this strategy by participating in the budget process to ensure resources promised in the strategy are actually allocated and disbursed in the 2021/22 budget.

### On Public Private Partnerships (PPP)

In 2020 we focused on ensuring that, the commitments that we had secured (2018-2019) from three key private health insurance companies (Britam, Strategies and Resolution) on inclusion of Family planning into their health benefit package are materialized. As a result of this follow-up advocacy, Britam and Strategies insurance made actual inclusion of FP into their benefit package to effect the commitment they had made, in 2018. Amref will continue to follow-up with Resolution insurance to ensure that the pledge they had made actually materialize.

### On Media Advocacy

In 2020 we continued to work with our media advocacy initiative with The African Media on health Accountability (AMNH-Tanzania Chapter). Through this alliance AMNH published more approximately 250 thought-evoking, empowering and solution based stories which have not only led to increased awareness of the publics but also creating useful dialogues for people centered health services and policies such as the Single national health Insurance which is currently proposed under the 2020 draft Health policy.



## VOICES FROM THE COMMUNITY

### “I Don’t Stay and Wait for them, I visit where they are ”

Samson Samwel is a Community Health Worker at Ikunguliu village, Itilima District. He is one of the community health workers that have been trained by Amref Health Africa Tanzania’s Ustawi wa Mwanamke project in the district. His duties are to conduct community sensitization and health awareness campaigns to the community members in Itilima district.

Samson, along with other CHWs, visit households, sensitizes pregnant women to start antenatal care visits and to follow proper nutrition. They also sensitize the community on child clinic attendance for immunization and other important child health observations. Here is what Samwel had to share with us...

“We have seen some changes; for example in the past there was very low attendance of postnatal care service among women, and the level of awareness among people in the district on clinic attendance for children immunization and other health checks was very low. But after our intervention, the situation has improved; we visit them in their homes and encourage them to attend clinics for their children’s health,” explained Mr. Samwel, Community Health Worker from Itilima district.

Samson also has observed an increase in awareness among pregnant women who start ante-natal care visits on time. In the past, pregnant women did not see the importance of attending clinic when pregnancy is below 12 weeks as recommended. However, this has changed as the number of pregnant women attending health facilities for ante-natal care has increased tremendously; they have also observed an increase in the number of men attending clinics

with their wives.

“So for now as we continue creating awareness, we also visit these women at their homes and encourage them to attend clinics. We also encourage women with infants to continue attending clinics until all necessary immunization is completed,” Samwel concluded.

Despite the recorded success of using CHWs to promote ANC and Child immunization visits, this intervention has encountered some major challenges in reaching dispersed communities hence contributing to slow and gradual progress in reaching optimal maternal health outcomes. However, the Ustawi wa Mwanamke project, has facilitated them using bicycles, working gears and motivation to the CHWs that contributed a lot to reach more people in the community. Mr. Samwel urges the government of Tanzania to consider formalizing CHWs cadre into government payrolls. He believes that CHWs play a significant role in preventing a number of communicable diseases and also contribute in reduction of preventable maternal deaths at the community level.

With support from the Ireland Embassy, Tanzania (Irish Aid), Amref Health Africa in collaboration with Benjamin Mkapa Foundation has been implementing the Women and Girls Wellbeing (Ustawi wa Mwanamke) Project in Misungwi and Itilima districts, aiming at reducing maternal mortality through an integrated health and behavioral change approach. The programme is working to strengthen health and social welfare systems to respond to the needs of girls and pregnant women.



## They call me “MAMA CHOO”



Maria Kisiri, 44, is one of the Amref beneficiaries and a dedicated CHWs in Serengeti District. We were able to capture Maria’s story, sharing some of her experience with the FINNISH Mondial project.

After completion of the training facilitated by Amref Tanzania in 2018, she has been working at the Central Stand ward in Serengeti District, where she joined other CHWs for house-to-house awareness on sanitation and hygiene. The sensitization made on the effects of contagious diseases resulted from poor access to improved sanitation and hand washing practices. In addition to awareness raising, CHWs have also been given hands-on skills on how to build toilets using local materials. This is what she had to share with us;

“The knowledge gained has not only enhanced my confidence in educating people about hygiene, but also has equipped me with hands-on skills on how to construct toilets using locally available materials,” Maria says with confidence.

“I have also been taken to another training at Busia district in Kenya where I learned how to successfully construct toilets using local materials. Amref Health Africa has provided us with the ability to advise the society and the community has positively acknowledge it to be very potential given the rural economical situation,” she explained.

Maria’s efforts have started bearing fruits. Within two years, she has managed to mobilize her community to build toilets using available resources. “some people constructed improved latrines and now, we

have many toilets in around the districts. our district demonstrate a good success as there are many households with new toilets than the rest. We continue to provide community awareness, training and knowledge sharing with the community...Wealso esure they get all instructions on how to construct such modern toilets,” she happily explained.

Like any other start, it was not easy to convince people to shift from the old practices and open defecation in particular, according to Maria, to some areas open defecation was taken as a cultural issue this myth was the main obstacles towards encouraging people to shift their mindset

“In the beginning the community had negative beliefs. For instance, the Kurya tribe believed that men should not share toilet with their daughter in laws, ...This situation made men to stop building toilets, instead family members preferred to defecate in the nearby bushes...”

However, courtesy of the Amref’s FINNISH project has gradually changed peoples mindset over the past two years. Awareness and education by CHWs has been the key driving force for behavioral change.

Since the project started, Maria has helped people to build more than 496 toilets, where only 17 were built by the project’s technicians, and thereafter community members initiated the new construction by themselves.

In order to make the project more attractive to those who did not have resources, a micro-credit component was introduced in the project where some members were financially enabled by the banks. For instance, 24 people have since received loans from Equity bank. “I’m really grateful to Amref for this project... The FINISH Project has reminded us that a toilet is essential in a house and we ask that they should continue providing us with the training and knowledge so that every house builds a toilet...” says Maria.

Through this project and the role played by Maria, the community has totally forgotten her real name and opted to nickname her “Mama Choo- The woman who cares a lot about toilet” in reference to her endless efforts ensuring every home has an improved toilet. “I have accepted this nickname...and they normally call me when they have completed first part of digging the hole for the toilets so that I can support with quality check. This project has been very crucial to the whole community” she concluded.

Financial Inclusion Improves Sanitation and Health for Tanzania (FINISH MONDIAL) is a public private partnership (PPP) project funded by the Dutch Government and being implemented in Serengeti district by Amref Health Africa in Tanzania. Its goal is to increase access to sustainable sanitation in the rural financially excluded communities through micro-credit initiatives. The partnership is composed of six local and international partners namely: the Government of Tanzania/Serengeti district Council, Amref Health Africa in Tanzania & Netherlands, Equity bank, WASTE and Aqua for All.





Makena Mwikabe looking at his new toilet, he started building it after the CHWs house-to-house awareness campaign on sanitation and hygiene in Serengeti District.



## “Knowledge is Key; Now owning my business” Tatu Juma

Tatu Juma (20years ) dropped out of school at her early age, She could not complete her Form Four secondary education due to economic hardship. “I used to stay with my grandmother who didn’t have much to support my education progression. I therefore had to stop studying and went to work as a housemaid, She explained.

Apart from all the situation, I was glad to not entertain the failure attitude. I actively engage myself in various income generating activities and finally benefited through Timiza Malengo project implemented by TAYOA. With the fund support from the Global Fund where Amref is the prime recipient. Apart from health education received through Timiza Malengo project, I also got an opportunity for entrepreneurship training which has immensely strengthen my skills she explained

Since I joined the Timiza Malengo project in 2018 my life has changed, completely, I have received parenting training at Singida region. The training under TAYOA through Amref has provided me with parenting knowledge, about STDS and how to stay safe from HIV/AIDS. The entrepreneurship skills received is so helpful as it enables me to smoothly run my business (selling sun flower oil), she added.

I acknowledge the support of Tshs 240,000 seed capital provided by Amref in partnership with TASAF, this capital injected to the business I am owning today which is cooking oil business and the progress is very promising. For the first time I made a profit of 36,000tzs, she declared.

She further explained that Most of my fellows are less informed about these disease I have spotted a great change in my village especially with decrease of hear/say about cases of early pregnancies within community members our usual observation the number of street children seems to significantly drop” she concluded.

Tatu has managed to reach over 50 youth in her village, inform & educating them on STDs, early pregnancies, family planning, and HIV/AIDS.

With support from The Global Fund for AIDS, Tuberculosis and Malaria (GFATM), Amref Health Africa Tanzania is implementing a three years Global Fund HIV/TB project (2018-2020). The program contributes to National TB/HIV goals through combination prevention strategies to meet the target of achieving 90% 90% 90% strategy and decrease TB in the community for 15% and related death for 50% by 2020. The Grant is entitled “Increase Coverage of HIV and AIDS Services.”



Reproductive health before and after pregnancy is a proven low-cost, best buy intervention that saves lives and highly contributes to economic development and social transformation of a country. In view of this, Amref through the Health System Advocacy project has been working with multiple stakeholders at both national, regional and district levels to advocate for improved reproductive health services by focusing on

## Strengthening Health System through Advocacy

health financing, health governance, health commodities and human resource for health (HRH).

Through these set of interventions a number of achievements have been recorded as expounded by the Kishapu District Medical Officer (DMO).

“We really appreciate the collaboration that we have had with Amref since the inception of the HSA project in 2017. Through reproductive health budget analysis and subsequent advocacy that Amref/HSA has been doing each financial year there has been a notable increase in the budget; more notably we have been able to allocate funds from our own district sources such as NHIF, CHF

TIKA. Based on this, the budget has increased from TShs 4.8 million in FY 2015/16 to Tshs 26.7 Million in FY 2019/20. While the 2015/16 budget was solely from basket funding and other partner contributions, 52% of the 2019/20 budget comes from district own resources. While the project is ending in October 2020, we believe this strong foundation that we have built will be sustainable,” said **Dr Shani Josephat Kishapu District Medical Officer (DMO)**.

Health System Advocacy Partnership is a project funded by the government of Netherlands. HSA Partners are working with civil society organizations in Kenya, Uganda, Zambia, Tanzania and Malawi in advocating for strengthened health systems that enable people to realize their right to the highest attainable sexual and reproductive health.

## 2020 MAJOR EVENTS

### Amref Support for Infection Prevention and Control to reduce COVID-19 risks at facilities in Dar es Salaam, Tanga, Zanzibar & Simiyu

Knowing the basic needs in the efforts to curb the COVID-19 pandemic, Amref Health Africa in Tanzania embraces her stronger partnership with the Government and other development partners in infection prevention and possible transmission of the virus. These efforts are aimed at minimizing the impact of COVID-19 to our communities.

Since the outbreak of COVID-19 pandemic, for the period of over five months, Amref Health Africa Tanzania has successfully partnered with & mobilized an assorted list of essential materials aimed at strengthening Infection Prevention and Control at a number of health facilities. These supports were provided to Tanga Region and



Government of Canada in partnership with Deloitte and Marie Stopes. In Dar es Salaam the health department of the police force was provided with COVID-19 PPE through Amref & NOKIA partnership in the fight against the outbreak of the COVID-19 pandemic.

Being part of the support to the Government of the United Republic of Tanzania, Amref Tanzania handed over items including portable and large sanitizers, plastic buckets with taps, large size buckets, gloves, white disposable medical coats, liquid hand washing soap,



antiseptics, linen saver under pads and COVID-19 awareness materials (posters and fliers) to Simiyu, Tanga, Dar Es Salaam and Zanzibar to ensure that all people and communities remain safe and healthy during that period.



Zanzibar through Amref's Afya Kamilifu Project which is implemented by Amref Health Africa Tanzania in partnership with University of Maryland Baltimore and Tanzania Communications Development Centre funded by PEPFAR through CDC Tanzania.

In Simiyu Region, the COVID-19 PPE support was provided through Uzazi Uzima (Kiswahili for "Safe Deliveries") project with financial support from

## Women & Youth; Enterprising Through Solid Waste Management

Amref's Pro Poor project hands over four tricycles (Bajaj) for Solid Waste Management, to two district authorities; Nyamagana and Ilemela district of Mwanza, Tanzania.

This was part of support from Amref's pro poor project; The tricycles (Bajaj's) will be used to collect waste across the two districts and transport the wastes to the waste disposal centers, where they are recycled into various products which women and youth are selling to earn a living.



Amref Health Africa in Tanzania officially launched its new project named Continued Essential Services Project (CES) in Mainland and Zanzibar. The project aims to increase the capacity of health facilities to continue to provide essential health services during the pandemic in 17 regions of Tanzania Mainland and Zanzibar. The project focuses on increasing the capacity of 8,960 (800 in Zanzibar) medical and non-medical workers in 297 (33 in Zanzibar) health facilities to implement pandemic infection prevention and control procedures according to WHO standards.

Continued Essential Services Project is a one year funded project by UNICEF and implemented by Amref Health Africa in close collaboration and with the guidance from the Tanzania Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC), Zanzibar Ministry of health and President's Office, Regional Authorities and Local Government (PO-RALG)



Pro Poor project is funded by Madrid City Hall, Spain. The project targets women and youth in low-income areas by enabling them to access income-generating and economic development opportunities by doing entrepreneurship through producing alternative products from solid and sewage wastes.



Municipal City Director of Ilemela District John Wanga (left) receiving two Bajajis from Amref's Pro Poor project. These were handed over by WASH program manager Eng James Mturi during a short ceremony held at the Ilemela District Council office in Mwanza.



## Amref's supports the renovations of a temporary methadone clinic in Tanga Region

Amref Health Africa Tanzania through its Afya Kamilifu project supported renovation of a temporary methadone clinic at Bombo Tanga Regional Hospital in Tanga region. The clinic is meant to provide comprehensive care, prevention, and treatment to key and vulnerable populations (KVP), in order to end the AIDS Epidemic by 2030 in Tanga. This temporary methadone clinic will provide Comprehensive Prevention, care and Treatment to treat heroin addiction.

The clinic was launched during the commemoration of the World Drug Week, whereby various stakeholders participated.

With support from PEPFAR through CDC in Tanzania, Amref Health Africa is implementing Afya Kamilifu project in Tanga and Zanzibar, in partnership with University of Maryland Baltimore and Tanzania Communications Centre. The project aims to contribute to Tanzania efforts in attaining the 95-95-95 fast track target by 2020 and eliminate HIV/AIDS by 2030, through implementation of comprehensive HIV prevention, care and treatment services supported by continuous quality improvement, monitoring and evaluation, and laboratory services strengthening.



Hon. Ummu Mwalimu (C) Minister for Health mark the launch of the temporary Methadone clinic at Bombo Hospital Tanga along with Dr Florence Temu (R) Country Director for Amref Tanzania, Hon. Martine Shigella RC in Tanga (Second L), and Drug Control and Enforcement Authority Commission General, James Wilbert Kaji (Second R)

## Amref Tanzania at the Health Care Symposium

Amref Health Africa participated in Tanzania Health Summit that took place between, 25th–26th November 2020, in Dodoma. Amref's participation was done through various sessions including oral presentations, posters and exhibition presented by Amref Tanzanian Program team. The presentations included an abstract from **"The Role of Gender Power Relations on Women's Health Outcomes in Tanzania: Evidence from a Maternal Health Coverage Survey in Simiyu, Tanzania.** Another one was also a topic on **"Risk Factors for Loss to Follow-Up Among HIV-Infected Adults Attending Health Care Facilities in Tanga Region, Tanzania, Middle Income Economy in Health Sector"**. The exhibition also included a paper titled, **"Towards Eradication of Female Genital Mutilation in Tanzania: The Role of Community Leadership and Ownership", "Middle Income Economy in Health Sector"**. The summit discussed other wide-range health issues under the theme, 'Transforming the Success of Middle- Income Economy to a Healthier Nation'.



## RECOGNITION FROM THE PRIME MINISTER: WORLD AIDS DAY, 2020



*Amref Tanzania Country Director, Dr Florence Temu (L), briefing the Prime Minister of the United Republic of Tanzania, Hon. Kassim Majaliwa, who visited Amref's booth during the peak of the World AIDS Day, 2020 in Kilimanjaro.*

Amref Health Africa was privileged to participate in the World AIDS Day events in Mwanza, Simiyu, Tanga, Zanzibar, and Kilimanjaro regions, where the national level commemoration were conducted from 24th Nov. to 1st Dec 2020. Amref's participation included exhibition of its HIV/ TB works with Afya Kamilifu and Global Fund Projects.

During the climax of World AIDS Day in Kilimanjaro Region, the Guest of Honor was the Prime Minister of the United Republic of Tanzania, Hon. Kassim Majaliwa, who visited Amref's booth. Dr. Florence Temu, the Amref Tanzania country Director gave an highlights of Amref's activities with focus on the area of HIV/AIDS program.

In his remarks, the Prime Minister applaud what Amref is doing in collaboration with with the Government and other stakeholders and assured them of continued Government's support in the fight to combat HIV/AIDS in Tanzania.



## Amref & UNICEF Tanzania Donates ICT Equipments



*Amref Tanzania representative and officials from the Ministry of Health during the handover event at the Ministry of Health Office in Zanzibar.*

In response to disease outbreaks, Amref Health Africa Tanzania with financial support from UNICEF through a Continued Essential Health Care Services project, handed over telecommunications equipment to the Ministry of Health, Community Development, Gender, Elderly and Children and the Department of Health from the Office of the President Regional Administration, Local Government (OR-PMO-RALG) in Dodoma and Zanzibar. This initiative aimed at supporting the Government of Tanzania's efforts in strengthening the health sector.

Speaking at the handover ceremony held in Dodoma and Zanzibar, Amref Health Africa Tanzania's representative Annagrace Katembo explained how these equipments will benefit the Ministry of Health and PORALG to reach more health care workers using virtual platforms. Apart from the equipment, they will also benefit with training and technical support to ensure the essential health services continue to be provided even during an expected outbreaks.

The devices included laptops, projectors and wireless Internet routers for both Zanzibar and mainland.



*Dr. Serafina Mkuwa (left) handing over computer and other equipment to the former Chief Medical Officer (CMO) Prof. Abel Makubi, (now the Permanent Secretary Ministry of Health). Right is the Deputy Secretary General Office of the President Regional Administration and Regional Government (PMO-RALG) Dr. Dorothy Gwajima, (who has since been appointed the Minister of Health).*

*The handover took place in Dodoma on 27st Nov, 2020.*



# Senior Leadership Team

Senior Leadership Team (SLT) is the highest management body at country level responsible for strategic and operational decisions. Senior Leadership is responsible for the day-to-day management of the organization ensuring enabling working environment for staff and partners to achieve the desirable organizational results.

Chaired by a Country Director (CD), it consists of twelve members.

Senior leader's responsibilities include overall conduct of their area of expertise and related operational matters; take lead of organization business plan as well as allocation of resources, determination and implementation of strategies and policies, direction setting and ensuring timely reporting and provision of information to the Board and engagement of key stakeholders including financiers and partners. Senior Leadership Team is also responsible for effective oversight, implementation and audit of environmental, social and related procedures.



*Dr. Florence Temu*  
Country Director



*Dr. Aisa Muya*  
Head of Programs



*Ms. Asha Kisesa*  
Finance Manager



*Mr. Gaspar Jonah*  
Human Resources Manager



*Mr. Mtengela Hanga*  
Senior Procurement Manager



*Ms. Elimnatha Paschal*  
Comm. & Fundraising Manager



*Dr. Serafina Mkuwa*  
RMNCAH Manager



*Dr. Frida Ngalesoni*  
Monitoring, Evaluation  
& Research Manager



*Ms. Stella Gabriel*  
Administration Manager



*Dr. Edwin Kilimba*  
Afya Kamififu Project Director



*Dr. Amas Nyirenda*  
Disease Control  
Program Manager



*Dr. Godson Maro*  
Chief of Party  
USAID Afya Shirikishi



## Board of Directors

The Board of Directors comprises of nine (9) members from a range of disciplines and professions.

All Board members are independent and sit in the board at their own right. The Country Director, is an ex-official, serves as Board secretariat (non-voting) to the Board of Directors meetings.



*Dr. Erick Van Praag*  
Chair, Board of Directors



*Dr. Grace Magembe*  
Member, Board of Directors



*Dr. Elihuruma Melkizedec Nangawe*  
Member, Board of Directors



*Mr. Gerase Kamugisha*  
Members, Board of Directors



*Ms. Joyce Mhaviile*  
Members, Board of Directors



*Mr. Francis Majige Nantai*  
Member, Board of Directors



*Hon. Frank Mwalongo*  
Members, Board of Directors



*Ms. Jacqueline Woiso*  
Members, Board of Directors



*Prof. Sia Msuya*  
Members, Board of Directors





## WE APPRECIATE

Amref Tanzania embarked on a number of efforts to continue achieving its programme growth. In 2020, Amref Tanzania successfully secured new grants from various sources.



USAID – TB and FP integrated Community solutions program by Local organization – network (LON) - USAID Afya Shirikishi



Amref Tanzania has been nominated as 2nd Principal recipient under The Global Fund grant to take up the role of sub granting other CSOs in addressing HIV, TB, Malaria and RSSH interventions in Tanzania Mainland for the period -2021-2023- The GLOBAL FUND



Unicef awarded Amref Tanzania a new grant for a project, namely “Continued Provision of Essential Health Care Services to the Most Vulnerable in The Context Of COVID-19 Pandemic in Tanzania”- Unicef –Tanzania



Another successful grant is for “Reducing FGM/C among girls and young women through integrated SRHR and WASH at schools in Handeni District:- funded by BMZ, Germany.



CDC- funded project, Afya Kamilifu has been expanded to include additional region, i.e. Simiyu Region, that is additional to the Tanga and Zanzibar. This expansion comes in with additional funding and staffing size, hence the growth to the country programme.



Amref Tanzania has been granted an extension for Ustawi wa Mwanamke Project with the focus to address women and girls health and COVID-19 case management & response support - funded by Irish Aid.



A new working relationship was gained with NOKIA Foundation in support of COVID 19 response in Tanzania- NOKIA Foundation.



Another successful grant was on STOP-FGM –Elimisha III project -Funded by Sternstunden.



Unicef awarded Amref Tanzania with a new WASH project in Mbeya- UNICEF –Tanzania.



Hygiene and behavior Change Coalition- Funded by Unilever/DFID.



CDC – Tanzania Global Health Security Partner Engagement: Advancing Efforts and strategies to protect and improve Public Health





## DONOR ACKNOWLEDGMENT

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- Acacia Mining Tanzania
- Allen & Overy.
- Azania Bank LTD.
- Big Lottery Fund.
- BMZ, Germany.
- Car Truck Tanzania.
- Center for Disease Control and Prevention (CDC).
- Danish International Development Agency (DANIDA).
- Dalberg Tanzania.
- Dutch Foreign Ministry, Dutch Postcode Lottery.
- GlaxoSmithKline (GSK).
- Global Affairs Canada (GAC).
- Human Development Innovation Fund (HDIF).
- International Development Agency (Ministry of Foreign Affairs- Spain).
- Irish Aid.
- Junta Castillo De Leon.
- Madrid Regional Government-Spain.
- Ministry of Foreign Affairs of the Netherlands.
- Multichoice Tanzania.
- NOKIA.
- Nutrition International (NI).
- Sternstunden.
- Swedish International Development Agency (SIDA).
- The Coca-Cola Africa Foundation.
- The Global Fund to Fight AIDS, Tuberculosis and Malaria.
- The President's Emergency Plan For AIDS Relief (PEPFAR).
- The United States Agency for International Development (USAID).
- UN Women (UN Trust Fund To End Violence Against Women).
- Unilever.
- United Nations International Children's Emergency Fund (UNICEF).





WE ARE

## TRULY AFRICAN

CONNECTED in the spirit of Ubuntu  
COMMITTED to lasting health change since 1957



## DEEPLY ROOTED

in communities, and KNOW how  
African healthcare works, embracing  
INNOVATION and tradition



PART OF A

## GLOBAL TEAM

joining FORCES and IDEAS to make  
a HEALTHY Africa a reality



EVERY DAY

## WE PARTNER

with communities in Africa.  
Their health is our happiness

WE ARE



Since 1957





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