Dear HABARI readers,

I take this opportunity to introduce to you our first quarter newsletter for Jan-March, 2018. The newsletter carries various success stories, testimonials from projects’ beneficiaries, media highlights and photo gallery from different Amref’s projects, implemented under RMNCAH, WASH, Diseases Control Programme and Capacity Building Portfolios.

All these documented efforts would not have been achieved without the continual support that we are receiving from our distinguished partners including the Government of Tanzania, donors, our stakeholders and the community at large.

We highly value your feedback; hence we will be quite privileged to learn from you but also receive your comments on various articles which we promise to consider in the upcoming quarterly newsletters.

I wish you all a happy reading.

Female Genital Mutilation Crackdown in Serengeti District Council

Amref’s Anti-FGM project in Serengeti in collaboration with its partner Legal Human Right Centre (LHRC), District Council and other stakeholders is ensuring that the law against FGM is strongly enforced in Serengeti district to protect thousands of girls from the CUT. This has resulted to discouraging parents in the area including those living in the neighbour villages of Kenya that are bordering Tanzania from sending their girls for FGM practices.

The FGM practice carried in Serengeti, is basically known as clitoridectomy, this type consists of partial or total removal of the clitoris and/or its prepuce. It is normally done at the dawn/early in the morning before the sun rise in traditionally blessed bush known as a Kibagha. After the project learned about all these, we made some efforts to ensure all the key influential persons including the elders understood the effect of the FGM and joined Amref’s team for awareness creation to their fellow community members.

Apart from that, the law enforcement bodies including the police force, have been conducting different awareness sessions and patrols around the villages, which were linked with road shows on human rights topics, with the emphasis on anti-FGM campaign. Serengeti District Commissioner Nurdin Babu said “despite the hidden mission of few parents, the repeated police force warnings and patrol managed to halt the FGM practices, as we speak, traditional leaders, parents and circumcisers who violated the law are now charged and have their ...

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FGM Crackdow...

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...proceedings underway at the district court; this year
there was no rowdy youth mobs wielding traditional
weapons like it was in the previous years”. In Serengeti
District, enforcement of the law is strong and therefore
some girls are crossing the border to avoid prosecution”,
says the District Commissioner.
Unlike the previous years, the statistics of FGM/C in
Serengeti district have drastically dropped, as per project
level assessment in 2016; a total of 5621 girls aged 4-7
were registered to be cut, out of which 2313(41.1%)
are reported to be cut in the whole district. The cutting
sessions were conducted per clan. As Serengeti district
is traditionally divided into 5 different main clans, the
cuts are spread as follows: Inchugu (56%); Inchage (12.6);
Warenchoka (12.4%); Ngoreme (6.3%) and Tatoga (22.3%).
Despite that, mostly were conducted in the neighboring
district (Tarime) or else in their households at midnight,
762(13.5%) of girls are reported to openly denounce the
practices against their parents and relatives’ willingness.

The efforts of the traditional leaders, police
force, religious leaders and the district council
has dramatically reduced the number of girls
who were to be cut in 2016 by 84%, as in the
preceeding season (2014), a total of 14,122
girls were cut as per locally aggregated data
from the traditional leader’s register. Even,
the number of the girls registered in 2016 had
dropped by 60% as it is only 5621 (39.8%) who
were registered in 2016. Remarkably, during
the 2016 female cutting year, at least 10 anti-
FGM cases were filed at District Resident
Court and 4 suspects have been sentenced
by the court to imprisonment for the term of
five to ten years in jail. Such imprisonment
term was accompanied with penalties of 2 to 5
million Tanzania shillings.

In Serengeti, traditionally the FGM practice is regarded to be
part of the rite of passage to womanhood among the kuryan
communities, as extensively described in different articles.
Over, the past one year of Amref’s Tokomeza Ukeketaji
project, which is funded by UN Women through the UN
Trust Fund, has brought significant changes through its
campaign of anti-FGM in the district. The testimonies and
the statistics collected by the project justify that the physical
cutting is increasingly reduced as part of the traditional
ritual.

Usafi kwaAfya Project has Equipped us with Hands on Knowledge and Skills to
instantly Resolve Some of the Water Challenges in our Community.

Christina Joseph (43) and Marwa Mgosi (36), are some of the local artisans residents of Kibeyo-Mugumu, who have
been trained on repair, operation and maintenance of boreholes, solar pump and plumbing systems by Amref Health
Africa Project known as Usafi kwaAfya which is implemented in two wards of Kisangura and Sedecco through the
support of Junta de Castilla y Leon. The project contribute to improved health and poverty reduction among the
communities of Serengeti district through improved water, sanitation and hygiene practices by 2018.

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Usafi kwaAfya Project has Equipped

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Ms. Christina says the training has equipped her with knowledge and skills on how to conserve the environment so that it does not create an adverse impact on the water sources and how to repair the damaged water pipes.

“I am thankful to Amref Health Africa for the training they have given us, and I am committed to collaborate well with my community through awareness creation on how best they can conserve water sources so that at the end it benefits them and their future generation.

I would like to ask Amref to continue disseminating this knowledge in other areas of my community and to construct more boreholes to the areas that are highly affected and shortage of water sources” Ms Christina concluded.

Mr. Marwa Mgosi also had this to say, “After the training we got the opportunity to visit one of the boreholes at Kibeyo Centre at a place famously known as ‘Kwa Mama Bhokhe’, we found that, water valves were blocked with sand and other particles which led to water leakage hence water comes out with a very low pressure. We therefore used the knowledge acquired to fix the problem and the issue was well resolved. We were very happy to apply what we had learnt from the training.”

Testimonials

“I am now more involved on my family health” James Kulwa

James KulwaMalecha (28) and his son Samwel James Kulwa (3) are community members from Nyugwa ward, Nyagh’wale district. “I have decided to take my son to a health care facility to seek for health services because my wife is pregnant and not strong enough to do a lot.

Previously, I was not very responsible and fully involved in my wife’s and children’s health, I left my wife to do all the works. Recently through community mobilization and household health education provided by community health care workers on male involvement on sexual and reproductive health, I now understand how important it is especially following up and be a responsible father on my family health”.

A total of 282 CHWs from Nyangh’wale and Geita districts were trained through the Canada-Africa Initiative to Address Maternal, Newborn and Child Mortality project( CAIA-MNCM), a partnership among four Canadian organizations Amref Health Africa, Christian Children’s Fund of Canada, Centre for Global Child Health at The Hospital for Sick Children (Sick Kids) and WaterAid Canada with $24.9 million in support from the Government of Canada over four years.
"I previously had a very basic understanding of Advocacy but the Spitfire advocacy training has been an eye opener for me as it has showed me clearly how to set goals and objectives for an advocacy agenda, determining target audience, and most importantly drafting key messages that can influence decision by touching both the head and the heart of decision makers. Therefore since my work involves meeting with decision and policy makers especially during Comprehensive Council Health Plans (CCHP), all I can tell you is, the knowledge I have gained from this training is more than relevant to my work” Richard Jinasa. Project Manager –RMNCAH-Good Neighbors-Shinyanga.

This training was made possible through the generous support of the government of Netherlands through Amref’s Health System Advocacy Project that seeks to improve sexual and reproductive health in the country through advocacy by focusing on the four WHO building blocks namely; Human Resource for Health, Sexual and Reproductive Health Commodities, Health Financing and Governance.

With the knowledge acquired, I will encourage Pregnant Mothers to Give Birth at Hospitals

“Being a Health worker at SimiyuRegional Hospital I will use the acquired knowledge to emphasize mothers during their antenatal visits to give birth at hospitals, Reports in Simiyuindicate that the number of antenatal visits is high and the number of women giving birth at hospitals is low”, Grace Mwandu (31) (on the right).

The training was conducted by Uzazi Uzima, a four year project that is funded by Global Affairs Canada (GAC) and is implemented in partnership with Amref Health Africa Canada, Amref Health Africa Tanzania, Deloitte and Marie Stopes in six councils of Simiyu region to reduce maternal mortality and morbidity ratio.
Each year, Amref health Africa-Tanzania conducts its annual review meeting to evaluate progress, achievement, best practices and also for experience sharing, to set new targets and planning for smooth implementation. On 26th -28th February, 2018 Amref Tanzania conducted its 2017 ARM at Bagamoyo Oceanic Bay resort hotel that was attended by all project implementers who got an opportunity to share, learn and discuss various health interventions.

Mwanzugi’s primary school peer educator telling her fellow pupils the benefit of Weekly Iron and Folic Acid Supplementation (WIFAS). Through Amref’s Right start Project, a project supported by Nutrition International through Global Affairs Canada. Adolescent girls (aged 10-19 years) in and out of school in Meatu district are given Weekly Iron and Folic Acid Supplementation (WIFAS).

CAIA-MNCM project is putting in place systems to increase the quality of data collected and assist staff from all levels of the health system to use and analyze data. Grace Mabenga, Enrolled Nurse from Kakora Dispensary (Nyangwale DC) is receiving mentoring and coaching on data management to improve the quality of the data collected at the facility.
A useful question box designed by Ntobo primary school teachers’ in Meatu through Amref’s Uzazi Uzima project to promote learning and encourage pupils to ask sexual and reproductive health questions and get the answers. Uzazi Uzima is a four year project that is funded by Global Affairs Canada (GAC) and is implemented in partnership with Amref Health Africa Canada, Amref Health Africa Tanzania Deloitte and Marie Stopes in six councils of Simiyu region.

Amref Health Africa Tanzania through its ARP/WASH Project in Kilindi funded by Amref Netherlands conducted an Alternative Rites Passages (ARP) Ceremony in February 2018. Hundreds of Maasai people in Kilindi attended the event while Cutters publicly denounced not to continue with the FGM practices and chose to be ambassadors to others and all were awarded certificates by the Deputy Minister for Health, Dr. Faustine Ndugulile.

From left MR Phelician Mkola- Town council immunization and vaccination officer Kahama TC, Miss Sundi Mpandachalo Nurse from Mwime and Amref project officer during supportive supervision visit. The visit was conducted through a UK’s Department for International Aid (DFID) project known as mVaccination-BoreshaChanjo. It was found that mVaccination mobile application innovation allows nurses administering vaccinations at clinics to capture individual records for each child, as well as the overall stock levels of a particular vaccine, in a smartphone application.