Dear HABARI readers,

This current issue of our HABARI newsletter draws together the works undertaken by the Amref Health Africa Tanzania team through various projects implemented across the regions in Tanzania. With a vision of creating lasting health change in Africa we have documented success stories, testimonials, media highlights and many more for you to catch up with what is going on with Amref Health Africa’s health intervention in Tanzania.

It is with great pleasure that I take this opportunity to welcome you to read the stories; from our programs that are categorized under four major programmatic areas, that include (i) Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH), (ii) Water, Sanitation and Hygiene (WASH), (iii) Capacity building and (iv) Disease Control and Prevention (DCP) Programmes.

We kindly appreciate the endless support that we are receiving from the Government of Tanzania, donors, partners, stakeholders and the community at large. It is also worth noting that as we continue to grow our strategic partnerships, we are also fostering partnership with the corporate sector for creating lasting health change.

I wish you happy reading, and rest assured that we value your feedback highly; through which we are all very privileged to learn from.

From the Director’s Desk

Dr. Florence Temu
Country Director

Success Stories

Micronutrient Powder Saved My Child’s Life: Samwel Mashaka’s Story

Samwel Mashaka (35), is a resident of Mwanza, a single parent and father of Simon Samwel. His wife left him some months ago due to their difficult economic situation coupled with the passing of Simon Samwel’s twin brother. Ever since, Samwel Mashaka has been taking care of his child including his health. As a caring father, he brought his child to Makongoro Health Centre and the child was diagnosed with moderate acute malnutrition. The child weighed 7.1kg at the age of one year, his mid upper arm circumference was 12.1cm, a typical sign of moderate acute malnutrition. The child was experiencing delays in some important milestones of healthy growth like standing up without support or making any movement at the age of one year.

At the clinic, Samwel Mashaka was counselled on Infant and Young Child Nutrition and accordingly was instructed to start using Micronutrient Powder for his child. He regularly observed and followed the instructions and made sure that he mixed the MNPs in his child’s food every day. He had to bring the child to the health facility every week for his weekly mandatory monitoring.

After two (2) months, the child weighed a remarkable 9.7kgs and his mid upper arm circumference had increased to 14.2 cm. These were good signs proving that his condition had improved.

MNP worked very well for Simon Samwel and has proved to be one of the best interventions in addressing his malnutrition problem.

This was made possible through Amref Health Africa’s Infant and Young Child Nutrition Project which seeks to improve the nutrition status of infant and young children in Mwanza and Simiyu. The project is supported by Nutrition International. Up to now 36,697 children in Mwanza and Simiyu have been provided with micronutrient powder.
I was the last to acknowledge Anti-FGM interventions in Inchugu Clanship

Sungura John Mturi (84), born in Mbalibali Village, Serengeti District is the chairperson of Inchugu Council of traditional leaders.

“I automatically became a traditional leader as I was raised in a family that moulded and respected traditional and cultural beliefs. I was powerful in the supernatural ghost world. This is something we inherited from our ancestors. We stood and preserved them for a number of years. It has been our heritage, and it differentiates our tribe “kurya” from other tribes. The declaration by the government that genital mutilation should be abolished, is a challenge to our traditions and cultural beliefs. We need time to slowly shun these beliefs that we have adopted for a long time. What is needed is time and mass education to our people.”

This was the first message given by Mr Sungura John Mturi, immediately after being consulted by the Tokomeza Ukeketaji Project on how to eliminate female genital mutilation in Serengeti. After several project interventions including numerous trainings and dialogue forums on the health effect of female genital mutilation, Mr Sungura was converted and became one of the project Anti-FGM champions. This was as a result of his efficiency and ability to advocate and sensitize the communities in the project area and beyond. He was later appointed to attend the International Dialogue on FGM, Child Marriage and Teenage Pregnancy organized by UN Women and held in Nairobi.

Again, while responding to the question as to whether female genital mutilation is a business oriented practice, he quickly replied:

“(That is) not true at all. Our tradition does not associate with money. The money paid by girls is only as a thanksgiving token to cutters therefore this should not be interpreted as a money oriented cultural and traditional practice.”

Mr Sungura Mturi agreed to support the project on the fight against female genital mutilation. He was quoted as saying: “I was among the last of the traditional leaders in the district to understand the health effects of FGM and join the anti-FGM movement as an elder champion. I understand, agree and recognize the laws and policies of our government requiring us to eliminate FGM. I used to oppose the anti-FGM movements of previous projects, but with anti-FGM awareness programs and forums, I am now firmly stand with the Amref Tokomeza project and the Government to oppose FGM as one among many other forms of inhuman practices in the Serengeti District.”

Despite the agreement reached by the traditional leaders and the district officials, the signed agreement not to practice FGM was not well implemented. The project anticipates to see more traditional leaders changing and becoming ambassadors for the elimination of female genital mutilation.

Testimonies

“The DREAMS Project has empowered us and strengthened the bond between teachers and students,” Ikamaja Elias

Ikamaja Mazigwa Elias (36), a resident of Segese and a Deputy Headmistress at Mwalimu Nyerere Secondary School in Msalala District, Shinyanga Region explains her lessons learnt from Determined, Resilient, Empowered, AIDS free, Mentored, and Safe women (DREAMS) IC project implemented in their school. “The project has brought tremendous changes in the school. In 2016, the school had about six dropout cases as a result of early pregnancies, while in 2017, the number reduced to two and in 2018, there are no reported pregnancy cases. The relationship between students and teachers was non-existent in the past as there was no bond between teachers and students. This has now improved significantly after training by Amref through the DREAMS Project. We have now changed our judgmental attitudes towards students and created a good relationship that has made them feel free and open with us on sharing and discussing various issues that they face. This has also led to improvement of performance where our school has been among the top three secondary schools in the region and, more impressively, girls have led the pack.

Apart from this, through the training we got, we were able to convince our headmaster to allocate a small budget for purchasing sanitary pads and painkillers for students for use during their menstrual days if needed. This has also led to a reduction in the number of days girls snuck out due to menstrual pain or lack of sanitary pads, and has enabled them to attend all required classroom sessions and topics.” Determined, Resilient, Empowered, AIDS free, Mentored, and Safe women (DREAMS) is a project funded by PEPFAR seeking to reduce HIV risk among adolescent girls by addressing both the causes and consequences of early pregnancy and keep girls longer in schools.
“I am imparting the knowledge I have acquired through the Uzazi Uzima project to benefit girls in my area,” Faustine Bahini

Faustine Bahini (45), a health worker at Nyaumata Dispensary in Bariadi District in Simiyu Region of Tanzania explains, “After being trained by the Uzazi Uzima Project on Youth Friendly Services in August 2018, I decided to use the knowledge I had acquired to reach out to adolescent girls at my church. I formed a group of six girls to create awareness on various issues among them menstruation, teenage pregnancies, and many others that they face.

Apart from this, the girls also get the opportunity to ask and seek clarification on different sexual and reproductive health questions which they face in their day-to-day lives. We are happy to provide them with answers.”

The Uzazi Uzima (Kiswahili for ‘Safe Deliveries’) project is a partnership among Amref Health Africa and Marie Stopes, with Deloitte as a service partner, which is focused on reducing maternal mortality and morbidity rates in Tanzania. With support of $10.2 million from the Government of Canada through Global Affairs Canada (93% of the total project budget), this four-year project aims to directly reach 348,567 women and adolescent girls and 334,515 men and adolescent boys in six district councils in the region of Simiyu.

“The mVacciNation project has improved data quality,” Saimon Misuzi

Saimon Misuzi (40), a District Immunization and Vaccination Officer (DIVO) at Bukombe District in Geita Region explains “Prior to the mVacciNation Project interventions, data quality on vaccines for children under five years was not satisfactory. However, after the introduction of the project, health care workers from seven health centres were trained on data quality. We noticed that data quality improved from 79% to 93% as a result of the e-job trainings and the mobile technology that was used to remind mothers of dates when vaccines and outreach services were provided.” Mr Misuzi added that one of the major contributing factors towards this change is the fact that CHWs have played a great role in creating awareness to households on vaccination. Since they have proved to be very effective, I would kindly request that the project coordinators think of providing bicycles to them as part of essential working tools to enable them reach out to more communities.

Amref Health Africa has been implementing a two-year pilot project funded by Human Development Innovation Fund (HDIF) and GlaxoSmithKline (GSK) in Shinyanga and Geita regions. The project focuses on reducing morbidity and mortality caused by vaccine preventable diseases in children under the age of five years by reducing immunization regimen dropout rates through real-time tracking using the mVacciNation platform and with its eventual integration to the government system (VIMS) and roll out in Geita and Shinyanga.

“During our practical session at the CEmONC training, we provided delivery services to seven mothers within an interval of one hour,” Dr Mfaume Salum

Dr Mfaume Salum, 36, is a resident of Shinyanga Region in Tanzania and a National Facilitator of the Comprehensive Emergency Obstetric and Newborn Care (CEmONC) training that was conducted in Geita district through the Canada-Africa Initiative to Address Maternal, Newborn and Child Mortality (CAIA-MNCM).

“During the practical session of the CEmONC training we visited Katoro Health Centre, a health facility that receives around 600-700 deliveries per month and has few staff to provide the service. During our visit, we found one nurse who had over 30 cases to deliver. We managed to assist seven mothers to deliver within an interval of one hour. One of the cases we managed was a caesarean where we had found a pregnant woman in the labour ward with a pelvic disorder. After assessing her condition, we decided to go for emergency caesarean section. Five health care workers who attended the CEmONC training were involved in preparing the patient and three were involved in the surgery (2 clinicians and one nurse who had previous training on anaesthesia). After applying what was taught during the training, the procedure was successful and she delivered a healthy baby boy.”

18 health care workers from Nyang’hwale and Geita districts were trained on CEmONC through the Canada-Africa Initiative to Address Maternal, Newborn and Child Mortality, 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 (SickKids) and WaterAid Canada – with $24.9 million in support from the Government of Canada over four years.
The DREAMS project hands over 2,300 packs of re-useable sanitary pads to students at Mwalimu Nyerere Secondary School at Msalala District, Shinyanga Region.

Determined, Resilient, Empowered, AIDS free, Mentored, and Safe women (DREAMS) is a project funded by PEPFAR seeking to reduce HIV risk among adolescent girls by addressing both the causes and consequences of early pregnancy and keep girls longer in schools.

Health Care Workers from Nyang‘wale and Geita districts during CEMoNC training through the CAIA-MNCM project, a partnership between four Canadian organisations – @Amref, @SickKids and @WaterAidUK.

Erasto Kilongo, a resident of Bariadi District in Tanzania was a coach in a football league sponsored by the Uzazi Uzima project. The Uzazi Uzima (Kiswahili for Safe Deliveries) project is a partnership between Amref Health Africa and Marie Stopes, with Deloitte as a service partner, focused on reducing maternal mortality and morbidity rates in Tanzania. With support of $10.2 million from the Government of Canada through Global Affairs Canada (93% of the total project budget), this four-year project aims to directly reach 348,567 women and adolescent girls and 334,515 men and adolescent boys in six district councils in the region of Simiyu.

A total of 200 mosquito nets donated to Meatu District hospital by the Good Gift-UK through Amref Health Africa’s Afya Kwa Vijana Project.

In the picture is the Project Manager handing over the nets to the DMO of Meatu.
New app raises immunisation in Lake Victoria zone

By Guardian Reporter

UNICEF five children in Shinyanga and Geita regions have benefited from a handy smartphone app—Vaccination implemented by Amref Health Africa, while raising the immunisation level from 95 per cent to 98 per cent in the past two years.

The app allows healthcare workers to not only capture individual records for each child they vaccinate, but also record vaccine temperatures and stock levels. This data synchronizes with the cloud in real time and sends alerts messages to parents or caregivers to remind them about the next vaccination visit, and to district immunisation officers in case a technician is needed for cold chain maintenance or vaccine stock-outs.

Funded by Human Development Innovation Fund (HDF) and GlaxoSmithKline (GSK), the project has raised immunisation level in the two lake regions.

Project manager Nyere Mwera said that the programme has been implemented in Bukombe and Mboonde in Geita Region, Msalala and Kamaa villages in Shinyanga Region.

The programme, according to Mwera is aimed at overcoming barriers to immunisation in the country that might otherwise be out-of-reach or have a weak health system, thereby reducing the number of child deaths.

Project Manager Mwera said that the programme has raised the immunisation level, the programme has also witnessed the drop of vaccines challenges in health centres from 78 per cent to 28 per cent...healthcare workers were also trained on how to use the technology,” he said.

Amref, he hopes to roll out the Vaccination in more health facilities and is exploring integration with Vaccine Information Management System (VIMS), the national-level online system which captures stock and coverage data from the district to the national level, and other technology platforms to create a single, multi-sided, multi-purpose platform in Tanzania. Through the Vaccine Information Management System, Amref hopes to play its part in promoting the right to health for every mother and their children in a cost-effective and innovative manner.

For his part, HDF Deputy head Joseph Marieczka said through use of a Smartphone technology, children lives were saved.

An immunisation officer from the ministry of health Bonaventura Nestor called on district authorities to ensure that they make well use of the system by protecting it and making it sustainable.

Geita regional medical officer, Dr. Jude Maro said Amref’s project has helped to uncover number of challenges which were thwarting efforts to fight the underlying deaths.

“The system has started to spread in other district and health facilities, it has significantly impacted the speed and flow of communication regarding the availability and viability of vaccine stocks in health centres,” he added.