

# USAID Newsletter

## Boresha Afya - Southern Zone

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# Foreword

## Dear Friends of USAID Boresha Afya – Southern Zone

A number of interventions have taken place over the past couple of months as we strive to achieve our Program goals, some of which are documented in yet another USAID Boresha Afya Southern Zone Program newsletter, our fifth issue to date.

The past quarter has kept our staff fully engaged to achieve our goal of improving the health status of all Tanzanians. In so doing, the Program hosted several USAID Tanzania site-monitoring visits in Morogoro, Iringa and Njombe regions. Likewise, the Program received three (3) technical assistance visits from Family Health International (FHI 360) Headquarters in Durham, North Carolina to provide support on HIV Care and Treatment, Integration, Quality Improvement (QI) as well as Tuberculosis Program implementation. Additionally, the Project provided support to USAID Tanzania during the Country Operation Plan (COP 19) preparations. This included a series of partner meetings, data analysis and responding to data calls by PEPFAR Tanzania. Over the past quarter, the Program also embarked on HIV surge activities, an intensive site monitoring support concentrated on selected facilities aimed to demonstrate significant Program achievement to support COP 19 submission as well as improvement on Program performance.

Throughout, our Program has continued to undertake supportive supervisions that are conducted collaboratively with officials from the Ministry of Health Community Development Gender Elderly and Children (MOHCDGEC), Ministry of the President’s Office Regional Administration and Local Government (PO-RALG), Regional and Council Health Management Teams (R/CHMT) and USAID leadership to health facilities to oversee Program implementation in line with the national guidelines. Our technical team on the other hand led the various undertakings including mentorships, trainings, community sensitizations, technical meetings and quality improvement activities. Some of the aforementioned interventions are illustrated in the form of success stories in this newsletter: from Index Testing to Family Planning uptake, from gender economic empowerment to community interventions.

I hope you will enjoy reading through the pages as much as we have cherished every minute in service of our benefactors!

**Dr. Marina Njelekela – Chief of Party, USAID Boresha Afya – Southern Zone Program.**



# Program highlights

## USAID Boresha Afya Program Donates Bicycles to Community Volunteers in Southern Tanzania

The Regional Commissioner of Morogoro, Dr. Stephen Kebwe on 22 February 2019 received 2,160 bicycles worth TZS 493,600,000/- (US \$ 215,076.25) from the the Chargé d’Affaires (CDA) of the Embassy of the United States of America Dr. Inmi K. Patterson in a brief ceremony at the Mji Mkuu Ward Executive Office Grounds, in Morogoro Municipal Council. The bicycles will be

used by community volunteers from 12 Program supported Civil Society Organizations (CSOs) in the regions of Iringa, Njombe, Morogoro, Lindi and Mtwara to reach HIV clients in remote areas, directly improving access to the HIV Care and Treatment program in Southern Tanzania.



Mji Mkuu Ward Executive Office Grounds, Morogoro Municipal Council, Morogoro - Chargé d’Affaires (CDA) of the Embassy of the United States of America Dr. Inmi K. Patterson officially handover a bicycle to a community volunteer. Regional Commissioner of Morogoro, Dr. Stephen Kebwe looks on. ©USAID Boresha Afya – Southern Zone/S. Mhando

Regional Commissioner Kebwe, upon receiving the bicycles on behalf of other Program implementing regions expressed the Government's appreciation for the strong and healthy partnership between the American and Tanzanian people. "The relations of Tanzania and the American people have always been cordial and can be traced back to historical times. This support further strengthens these relations," said Dr. Kebwe. He also used the occasion to commend the good work of the Program and urged community volunteers to maintain the bicycles.

Speaking during the handover ceremony, the Chargé d'Affaires, thanked the Government of Tanzania for its commitment to improve the health status of all Tanzanians. The CDA noted, "Through this donation, the U.S. Government is partnering with the Government of Tanzania to increase access to health services at community level. Community members are well positioned to access those that are hardest to reach and are in most dire need of essential health services. Only those living in these communities experience first-hand the day-to-day challenges of accessing health services in a timely manner."

*Mji Mkuu Ward Executive Office Grounds, Morogoro Municipal Council, Morogoro - Chargé d'Affaires (CDA) of the Embassy of the United States of America Dr. Inmi K. Patterson (centre) signs visitor's book. To her left is the Regional Commissioner of Morogoro, Dr. Stephen Kebwe. To her right is the Chief of Party of USAID Boresha Afya – Southern Zone, Dr. Marina Njelekela. ©USAID Boresha Afya – Southern Zone/S. Mhando*



*Mji Mkuu Ward Executive Office Grounds, Morogoro Municipal Council, Morogoro – A cross section displaying some of the handed-over bicycles ©USAID Boresha Afya – Southern Zone/S. Mhando*

# International Women's Day: Changing Mindsets Towards Gender Equality

The global commemorations of International Women's Day take place on 8 March annually through engaging activities related to gender and women's empowerment. The day celebrates the social, economic, cultural and political achievements of women; it also marks a call to action for accelerating gender parity. The ambitious Sustainable Development Goals (SDGs) to realize a Planet 50-50 by 2030 requires new, mind changing approaches that could remove structural barriers and ensure that no woman or girl is left behind. As such, the global theme for the year 2019 was 'Think equal, build smart, innovate for change.' In Tanzania, the adopted theme was 'Badili Fikra Usawa wa Kijinsia/ Changing Mindsets Towards Gender Equality.'

USAID Boresha Afya – Southern Zone commemorated the day with a range of activities in close collaboration with the Ministry of Health, Community Development, Gender, Elderly and Children

(MOHCDGEC), R/CHMTs and other stakeholders including CSOs, financial institutions, VETA, Police Gender Desks, students and women groups. Some of these included community health fairs, reflections on accomplishments to date and dialogue sessions geared to build greater momentum towards gender equality. Similarly, stakeholders marched and carried themed messages on combating gender-based violence and highlighting the contribution of women to socio-economic development. Overall, some 9,016 people (6,364 female and 2,652 male) were reached across five Program implementing regions.

For the Program, gender is a cross cutting theme and Program staff continue to promote gender equality to ensure there are equal opportunities in accessing social and health services in order to enable women and girls to fully participate in social economic activities at household and community level.



Jamhuri Stadium, Morogoro Municipal, Morogoro Region – Women and men in a peaceful demonstration during the climax ceremony of the commemoration of International Women's Day. ©USAID Boresha Afya – Southern Zone/E. Erasto



Teachers' College Grounds, Mtwara Municipal Council, Mtwara – Students from Mtwara Girls Secondary School who visited the Program exhibition booth pose for a group photograph during commemorations of International Women's Day. ©USAID Boresha Afya – Southern Zone/Aikade Nkini.



Jamhuri Stadium, Morogoro Municipal, Morogoro Region – CSO coordinator from HACOCA elaborates Program activities and distributes different IEC materials to a man who participated during the climax ceremony of the commemorations of International Women's Day. ©USAID Boresha Afya – Southern Zone/E. Erasto



USAID Boresha Afya Southern Zone Program Office, Lindi Municipal, Lindi – Program staff hold themed messages to commemorate International Women's Day. ©USAID Boresha Afya – Southern Zone/S. Rwebangira

# USAID Mission Director visits Lindi's Program-supported Town Health Centre

Mission Director Andy Karas of the United States Agency for International Development (USAID) in Tanzania met with regional government authorities and conducted a familiarization visit to Town Health Centre in Lindi on 24 April 2019, accompanied by other key personnel from USAID.

Upon arriving at the facility, he received a brief overview of the facility, integrated services offered, clients served and support received from the US Government. He thereafter had the opportunity to get a first-hand look at key service delivery points such as the Care and Treatment Clinic (CTC), Outpatient Department (OPD),

Maternity Ward, Reproductive and Child Health (RCH) wing. The Mission Director also received a brief explanation on the use of an electronic information system better known as 'GoTHOMIS' supported by Public Sector Systems Strengthening (PS3), a USAID funded project.

Throughout his visit, Mr. Karas mingled with service providers and beneficiaries present, acknowledging their diligence and courage to serve their communities.



Town Health Centre, Lindi Municipal, Lindi Region – USAID Mission Director, Andy Karas is briefed by Medical Officer In Charge, Dr. Zulfa Msami at the facility's Outpatient Department. ©USAID Boresha Afya – Southern Zone/S. Mhando





Town Health Centre, Lindi Municipal, Lindi Region – Jovial expert client Zafarani Mohamed (L) and mother champion, Imani Ligau (R) flank USAID Mission Director Andy Karas during his visit to the facility. ©USAID Boresha Afya – Southern Zone/S. Mhando

## More about Town Health Centre

Town Health Centre was officially opened in 1963 as a clinic prior to its upgrade to a health centre in 2002. It is the only health centre in Lindi Municipal Council out of 21 health facilities. The facility is located in a congested area of Lindi Municipal Council and due to its limited space, does not have an in-patient department (IPD). However, with Sokoine Regional Referral Hospital nearby, the facility is able to refer complicated cases. According to the 2012 census, Town Health Centre has a target population of 10,361 and a service population of 22,460. Some 42 employees presently staff the facility, which provides various health services to the community.

A number of partners including USAID Boresha Afya – Southern Zone, GIZ, NHIF, PS3, Marie Stopes and PSI, support service delivery at the facility. USAID through the Program supports the facility in HIV, Tuberculosis, Family Planning, Malaria and cross cutting areas such as nutrition, community, gender and youth services.



Town Health Centre, Lindi Municipal, Lindi Region – Sister Neema Kambona, RCH in Charge responds to a question posed by USAID Mission Director Andy Karas during his visit to the facility. ©USAID Boresha Afya – Southern Zone/S. Mhando



Town Health Centre, Lindi Municipal, Lindi Region – Dr. Mariam Chitanda OPD In charge briefs USAID Mission Director Andy Karas during his visit to the facility. ©USAID Boresha Afya – Southern Zone/S. Mhando

# Success stories

## Index Sexual Partner Testing Yield, a Function of Fidelity of Implementation

### Does Index Testing Work?

Reaching the global goal of HIV epidemic control requires early identification of HIV infected persons and optimal antiretroviral therapy to get them to be virally undetectable and untransmittable. Owing to this, targeted testing is important to avoid wastage of resources and time associated with low yield testing. Index sexual partner testing is renowned globally as a high yield testing approach, which gives positivity

yield far above that of the general population. Ikweha ward's Ugenza Dispensary in Iringa's Mufindi district has made remarkable progress in this regard. The stand-alone health facility, which provides Prevention of Mother-To-Child Transmission of HIV services (PMTCT), had never reported index cases since the Program commenced in October 2016. However, due to Program interventions, a turnaround is evident.



*Ugenza Dispensary, Ikweha Ward, Mufindi District Council, Iringa – Medical Attendant, Federika Mkandawile (51) sorts patient files at Ugenza Dispensary. ©USAID Boresha Afya – Southern Zone/S. Mhando*



Ugenza Dispensary, Ikweha Ward, Mufindi District Council, Iringa – USAID Boresha Afya Southern Zone HIV Advisor in Iringa, Dr. Kakwaya Jumanne (L) mentors Medical Attendant (M) and Facility In Charge (R) on proper documentation of patient records at Ugenza Dispensary. ©USAID Boresha Afya – Southern Zone/S. Mhando

USAID Boresha Afya – Southern Zone Program conducted a root-cause analysis for suboptimal index sexual partner testing which revealed that sexual partner elicitation was the key challenge. In response, Health Care Workers (HCWs), Community Health Workers (CHWs) and Community Volunteers (CVs) were trained and mentored on sexual partner elicitation and proper documentation. They were mentored to elicit sexual partners of index patients beyond primary partnerships (spouse) as well as to prioritize sexual partner testing for all newly diagnosed index clients and how to identify and test sexual partners of index clients with high viral load.

At Ugenza Dispensary, two facility staff, i.e. Facility In Charge – Juma Sadiki Mnyese (25) and Medical Attendant – Federika Mkandawile (51) were amongst those mentored. They were urged to closely follow up and hold further consultations with clients in order to reach more contacts.

### How did they get index clients to confide?

Federika declares that it is a combination of informing patients of the dangers of continued sexual relations with infected partners as well as her relationship with clients. “My community trusts me as I was born and raised here and as such I am close to our clients. I know most of them. These are my neighbours. They feel confident to disclose their status. I guess it’s also because of my age,” she shrugs.

On the other hand, Juma attributes this to the use of different platforms for outreach of index message. “We’ve had the opportunity to join our ward councillor in community meetings across several wards to inform citizens of the importance of testing,” says Juma.



Ugenza Dispensary, Ikweha Ward, Mufindi District Council, Iringa – Ugenza Dispensary Facility In Charge, Juma Sadiki Mnyese (25) attributes the success of index partner testing at the facility on outreach services and a good relations and attitude towards clients. ©USAID Boresha Afya – Southern Zone/S. Mhando

### Results

In unison, Federika and Juma seem to agree that amongst important factors in obtaining a large number of HIV positive clients through index testing is through closeness with clients and outreach. As a result, over the Jan-March 2019 quarter, Ugenza Dispensary managed to enrol 24 clients to care through Index testing. Amongst these clients, the largest chain comprised of 11 sexual partners emanating from one HIV positive client. All these clients are linked to the Care and Treatment Clinic at nearby Saadani Health Centre.

### Food for thought

According to Federika, women have been at the forefront of getting their sexual partners tested, out of sheer concern for their health and due to the education they receive at the facility. On the other hand, self-stigma seems rampant amongst men. Most are shy to go to facilities for HIV care and treatment,” Juma shares his personal observations. They have confided to him that they are not comfortable having to stand in queues at Care and Treatment Centres, most of which are isolated from the main facility. However, this does not take away the remarkable progress at Ugenza Dispensary.

# Outreach Services Lead To Increase in Family Planning Uptake in Iringa

According to the United Nations Population Fund (2018), Family Planning (FP) is the information, means and methods that allow individuals to decide if and when to have children. This includes a wide range of contraceptives including pills, implants, intrauterine devices, surgical procedures that limit fertility, and barrier methods such as condoms as well as non-invasive methods such as the calendar method and abstinence. FP also includes information about how to become pregnant when it is desirable, as well as treatment of infertility.

The Tanzania Demographic and Health Survey (2015/2016) cites that the average number of children of women of reproductive age (aged 15-49) on the Tanzania Mainland, known as the total fertility rate (TFR), is high at 5.2 whereas in Zanzibar the TFR is 5.1. Many women have more children than they want because of limited access to their preferred method of contraception, resulting in unintended pregnancies. In fact, there are 89

million unintended pregnancies in developing countries each year. As with most developing countries, the contraceptive prevalence rate (CPR), modern methods is low in Tanzania. Amongst married women aged 15-49 the CPR stands at 32%. In Iringa region, to the southern highlands of Tanzania, the same is true. Low uptake of FP services is detrimental in many ways. It increases pregnancy related health risks amongst women, increases infant mortality, quickens population growth directly affecting the economy, environment, national and regional development efforts.

USAID Boresha Afya – Southern Zone has undertaken efforts to increase FP uptake in Iringa region by training service providers on quality integrated FP service provision. Likewise, mentorship, regular supportive supervision has been conducted and demand created through community sensitization as well as the orientation of community leaders collaborating with USAID Tulonga Afya. These interventions have proved to be functional and beneficial. Of recent for

instance, outreach services conducted through community health workers (CHWs) in Kilolo DC in Iringa, reached 1,539 clients. As a result, during the last quarter (Jan – March 2019), 40% of clients who received FP services in Kilolo DC were referrals from CHWs. This progress has seen an increase in FP uptake in Kilolo DC as well as Iringa region as a whole.

Sikujua Gabriel Luvanda (39) of Muwimbi village in Kilolo DC (Iringa) is one of the region’s beneficiaries. Her choice about how many children to have has a direct impact on fertility levels. This matters because it reflects the extent to which she and her husband have the power and means to make a choice about the number, timing and spacing of pregnancies. This can impede or accelerate their progress towards prosperity, equitable and sustainable development and well-being.



*Uhambingeto Ward, Muwimbi Village, Kilolo District Council, Iringa – Sikuju Gabriel Luvanda (39) contends it was the efforts of Program supported Community Health Workers (CHWs) that finally convinced her to use Family Planning services. ©USAID Boresha Afya – Southern Zone/S. Mhando*

Sikujua, a mother of six children shyly admits her scepticism towards FP initially. “I thought these health care workers were devious. I believed the myths; that our stomachs would swell, that we would have frequent periods, that FP would bring Cancer,” she recounts. However, after the birth of her sixth child and efforts of the CHWs at Uhambingeto Ward, Sikujua agreed to visit the Outreach event with her husband where she chose to

use a contraceptive “stick” as a FP method. “Today I am happy and have less worries. To be honest, children are a blessing but I got to a point I was tired of constantly carrying a child on my back. It was bad for my back,” she chuckles. Sikujua, a maize farmer, can now focus on raising her children and growing her small business she started through joining a SILC group supported by USAID Boresha Afya – Southern Zone.

# How SILC Groups Have Economically Empowered Women in Iringa – Case Study of Sayuni

In Tanzania, women and girls remain among the most marginalized people. The existing gender gaps have direct implications on low women social and economic status, low decision-making powers for women and youth as well as limited accessibility and utilization of existing health services. To address these challenges caused by a multiple of factors including a deep-rooted patriarchal system in some communities, the Government and Development Partners continue to develop an enabling environment through law and policy reforms; and designing national programs that are responsive to the needs in Tanzania.

At Program level, there have been efforts towards addressing existing harmful gender norms, which cause disparity amongst women and men. This is done through community interventions where Community Mentors (COMEs) conduct gender focused discussions using different gender approaches such as Men as Partners (MAP), Couple Connect and Social Analysis and Action (SAA) to capacitate individuals and community members to participate in reflecting on and challenging these norms.

Enabling gender equality and empowering women are critical to advancing progress and growth in Tanzania. Through Savings & Internal Lending Community (SILC) model, USAID Boresha Afya– Southern Zone Program has seen a number of women in Iringa escape the clutches of poverty and assume control of their lives. Zamda Saidi Ngonyani (32) is a thriving SILC group member. She has been a member of Sayuni SILC group since inception. The members comprised of 45 people, i.e. 35 women and 10 men. Each member contributes TZ Shillings 15,000/- per week and can borrow up to TZ Shillings 800,000/- over a three month period, an amount which accumulates a 10% interest rate. For Zamda, this is substantial. The mother of two, over the years, through her SILC group has achieved tremendous success. “Honestly, I am thrilled at my achievements. I didn’t have the opportunity to go beyond grade 7 in my education. But look, I recently connected electricity to the house,” she points to a light bulb in her living room. “Through Sayuni, my husband and I have built this house and we are able to pay bills,” she adds. Zamda’s two children are in school, grade seven and grade one respectively.

Their education is of great importance to her. She wants them to go further. Zamda is also a sharp businessperson. Apart from selling charcoal and firewood, she also has a motorcycle pickup that helps to carry heavy loads in her community for a fee. For Zamda, Sayuni SILC group has seen her transform her life.

Wema George Ndegela (32) is another SILC group beneficiary. She also belongs to Sayuni. When she separated from her husband in 2012, with no means to take care of her two-year old daughter at the time, she tried her hand at housekeeping. This helped her for some time but did not grant her economic independence. This changed when she joined Sayuni SILC group. “The group gave me a personal challenge to attempt business ventures through affordable loans. Initially I was reluctant to start my charcoal and pastry business. Fear of failure I guess,” Wema shrugs. Today, from the aforementioned businesses, Wema is a proud owner of a new house.



*Ilula Itunda, Kilolo District Council, Iringa – Zamda Said Ngonyani attributes her successes to the Sayuni SILC group she belongs to. ©USAID Boresha Afya – Southern Zone/S. Mhando*



Ilula Itunda, Kilolo District Council, Iringa – Zamda Said Ngonyani has recently connected electricity to her new house. ©USAID Boresha Afya – Southern Zone/S. Mhando



Ilula Itunda, Kilolo District Council, Iringa – Wema George Ndegela (32) a SILC group beneficiary operates a pastry business outside the premises of her old house. ©USAID Boresha Afya – Southern Zone/S. Mhando



Ilula Itunda, Kilolo District Council, Iringa – Wema George Ndegela's old house. ©USAID Boresha Afya – Southern Zone/S. Mhando



Ilula Itunda, Kilolo District Council, Iringa – Wema George Ndegela's newly completed house. ©USAID Boresha Afya – Southern Zone/S. Mhando

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