USAID Boresha Afya - Southern Zone Newsletter

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Delivering Bold Achievements









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Foreword

Dear Friends of USAID Boresha Afya -Southern Zone

you all got a well-deserved break over the festive season. I also understand that the breaks seem much shorter for healthcare professionals as our calling to serve knows no rest. It is that time again I would like to share with you our latest newsletter.

In what is now our 7th issue, amongst our benefactors! other stories readers will have the opportunity to learn of the newly accredited program supported laboratory in Mtwara, the critical role played by HIV treatment supporters as well as the national and regional commemorations of the 16 Days of Activism against Gender Based Violence. Gender as you might be aware, is one of our key cross cutting Program areas of focus.

Even so, all our Programmatic achievements owe a great deal to our prime partners, the Government through the Ministry of Health Community Development Gender Elderly and Children (MOHCDGEC)

Happy New Year to all! I am optimistic and the Ministry of the President's Office Regional Administration and Local Government (PO-RALG), other partners as well as our dedicated program staff.

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

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

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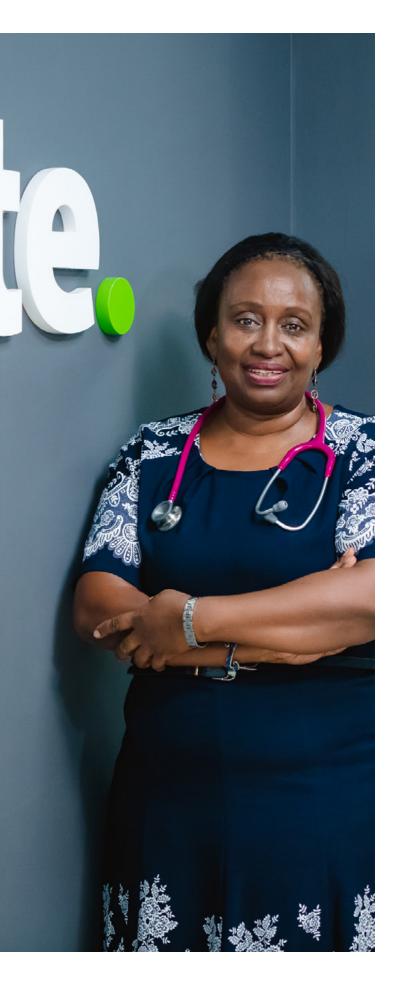




Engender**Health**















Program highlights

Program Supports Government to develop National Client's Service Charter for Health Facilities

The Program handed over 2,000 copies of the National Client's Service Charter for Health Facilities to the Ministry of Health Community Development Gender Elderly and Children (MOHCDGEC) and Ministry of the President's Office Regional Administration and Local Government (PO-RALG) on 17 October 2019. The charters were developed to outline the rights and responsibilities of users of the health facilities, i.e. clients and health care workers. MOHCDGEC and PO-RALG expressed their appreciation to the Program for the technical and

financial support in the development of the National Client Service Charter and requested further assistance in disseminating the charter in health facilities in Program implementing regions. As a result, some 500 copies of the charter were issued to the Program for dissemination in supported care and treatment facilities in Morogoro, Iringa, Lindi, Mtwara, Njombe and Ruvuma. It was agreed that dissemination of the client charter would go through Regional Medical Officers and R/CHMTs. Ø





Haki na wajibu wa Mtoa Huduma Haki za Mtoa Huduma

- 1. Haki ya kuheshimiwa na mteja.
- 2. Haki ya kutekeleza kazi na wajibu wake kitaaluma na kwa weledi bila kuingiliwa na mteja na ndugu wa mteja.
- 3. Kujadiliana na jopo la wataalamu wenzake kitaaluma kuhusu mgonjwa/mteja bila kuingilia au kutoa siri za mteja / mgonjwa.
- . Kufanya utafiti baada ya kupata kibali na kusambaza taarifa za utafiti huo kitaaluma bila kuingilia siri za mgonjwa.

Mtoa hudum *kuhusu*

malalami 100

itoa huduma kupata muda na kula chaku

Kutoa hugun uadilifu na umakin

a kuzingatia kanuni, maadili,

Kutoa huduma katika ma ngira salama, kwa namna inayomjali na kumheshimu mgonjwa au mteja. Kujenga mahusiano mazuri kwa mteja na kutoa maelezo na ushauri wa kutosha kuhusu afya yake pamoja na mazingira ya hospitali.

Kufanya kazi pamoja kama timu ili kutoa huduma bora. Kumkinga mgonjwa asipate maambukizi mapya anapokuwa Kituo cha Kutolea Huduma za Afya.

Kuhakikisha kanuni na taratibu za Kituo cha Kutolea Huduma za Afya zinazingatiwa.

Kutokuomba wala kushawishi malipo yoyote yasivo halali

MOHCDGEC office, Dodoma – Nyantito Machota, Manager in the Program Results Management Office, hands-over a copy of the National Client's Service Charter to Dr. Eliud Eliakimu, Director of Health Quality Assurance. ©USAID Boresha Afya – Southern Zohe/S. Mhando.















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Commemorations of the 16 Days of Activism against Gender-Based Violence

The 16 Days of Activism Against Gender-Based Violence is an international campaign to challenge violence against women and children. The campaign runs every year from 25 November -International Day for the Elimination of Violence against Women to 10 December - Human Rights Day. The campaign whose theme in 2019 was "Generation Equality: Stands against Rape" provides a platform for joint stakeholders' efforts towards elimination of gender-based violence. The 16 Days of Activism Campaign is a time to galvanize action to end gender-based violence in the country. Gender-Based Violence (GBV) is a human rights violation affecting men, women and children. Around the world, violence against women and girls is most prevalent and is happening within communities, homes and families. Approximately one in three women worldwide has been beaten, coerced into sex, or otherwise abused in her lifetime. Similarly, 1.5 is the increased likelihood that women who experience intimate partner violence will acquire HIV. Moreover, exposure to GBV, particularly intimate partner violence (IPV), is associated with lower Antiretroviral Therapy (ART) use, half the odds of selfreported ART adherence, and significantly worsened viral suppression among women.

National event:

USAID Boresha Afya Southern Zone was part of the national organizing committee and participated at the national launch in Dodoma on 26 November 2019 coordinated by the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) in collaboration with UN Women and WiLDAF. The event was attended by representatives from the government, civil society organizations, development partners, private sectors, UN Agencies and other stakeholders working in the areas of GBV/VAC. The program also participated in an exhibition at Jamhuri Stadium in Dodoma where the Guest of Honor was Hon. Ummy Mwalimu, Minister – MoHCDGEC.



Jamhuri Stadium, Dodoma – Hon. Ummy Mwalimu - Minister of MoHCDGEC gives her remarks during the national launch of 16 Days of Activism against Gender Based Violence. Photo taken on 26 November 2019 ©EngenderHealth/ R. George



Jamhuri Stadium, Dodoma – Youth visit the Program exhibition booth during the national launch of 16 Days of Activism against Gender Based Violence. Photo taken on 26 November 2019 ©EngenderHealth/ R. George



Heritage Cottage Hotel, Songea Municipal, Ruvuma Region – Program staff participate in an outdoor activity during the climax of the commemorations of the 16 Days of Activism against Gender based Violence. Photo taken on 10 December 2019. ©USAID Boresha Afya – Southern Zone/S. Mhando

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Regional events

Mtwara:

Commemoration events were conducted throughout the five (5) district councils of Mtwara region, in forms of community dialogues, school campaigns, testimonies, dramas, and concerts. The campaign involved different GBV stakeholders; police gender desks, paralegal officers, community development officers, social welfare officers and community mentors. The regional climax event was conducted in Nanyumbu District Council on 10 December 2019 where USAID Boresha Afva Southern Zone participated in mobilizing the community for post-GBV clinical care especially to sexual violence victims for prevention and response to HIV infection. Some 3,635 (1,572 male and 2,063 female) people were reached.



Nanyumbu District Council, Mtwara - Guest of Honor, Baraka Mlahagwa (Mangaka Division Officer) greets USAID Boresha Afya Southern Zone Program staff ©USAID Boresha Afya – Southern Zone

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Lindi:

In Lindi region, the commemorations started on 25 November 2019 with different activities in Lindi Municipal, Ruangwa District and Nachingwea District Councils. Key messages were provided on gender-based violence against women and children (VAW/VAC) as well as addressing social cultural gender norms that contribute to sexual violence incidences. Social welfare officers, police gender desks, legal aid, health providers and community mentors facilitated school dialogues. A total of five secondary schools and three higher learning institutions were reached during the commemorations in the region. Overall, some 2,142 (1,014 males and 1,128 females) people were reached.

Morogoro:

Numerous events were conducted in Morogoro region from 25 November to 10 December 2019 in collaboration between R/CHMT, Paralegal Morogoro Services, civil society organizations, police gender desk, social welfare officers, community mentors and health care workers. The activities took place in Morogoro Municipal, Morogoro District Council and Mvomero District Council. The campaign included football matches between 'bajaji' and 'boda boda' drivers, awareness raising on community radios and television, school dialogues and community sensitization. Key messages were delivered to women and children on human rights, GBV/VAC, HIV, police gender desk services, post-GBV clinical care and awareness on harmful gender norms that lead to GBV/VAC. Overall, some 3,614 (1,696 male and 1,918) people were reached.

Iringa:

The 16 days of activism campaign in Iringa commenced on 25 November 2019 at Samora Avenue. The event was graced by the Regional Police Commander and attended by 1,177 people. Campaigns were held within the community, schools as well as radio and television stations. The police gender desks, legal aid, social welfare officers, community mentors and leaders conducted a specific dialogue session for women and girls. This dialogue aimed at empowering them with information on gender norms, linkage and refferal to post-GBV clinical care. As part of the commemorations, Program staff in Iringa also conducted awareness campaigns on gender, family planning, and GBV/VAC at Mwembetogwa grounds on World AIDS Day during which 1,386 (692 males and 694 female) people were reached.

Njombe:

Program staff in Njombe commemorated the 16 Days Campaign on 27 November 2019 through a symposium evaluating GBV interventions within the region. The Regional Administrative Secretary chaired the meeting which was attended by all key government stakeholders. The critical GBV/VAC and HIV situation in the region prompted the meeting. It was noted that GBV is a main driver for HIV transmissions and other sexual reproductive health consequences. GBV was cited as a significant barrier to women's use of health services such as HIV testing and counselling (HTC) services, family planning services and prevention of mother to child transmission of HIV (PMTCT) services. Participants were in agreement that addressing GBV issues would tackle HIV prevention, maternal health, family planning and PMTCT issues concurrently. As such, the government, civil society organizations and development partners in addressing barriers of VAW and VAC, developed a joint action plan.









Ruvuma:

A solidarity event for key and vulnerable populations (KVP) was conducted on 30th November 2019 with the agenda focused on strengthening GBV case linkage among KVPs, whereby 50 (KVPs), vulnerable adolescent girls and young women (VAGYW) and female sex workers (FSW) were mobilized through peer educators in collaboration with KVP gate keepers. These persons shared their testimonies and facilitated public dialogue to stimulate a discussion on the effects of GBV and stigma among the AGYW, sexual minorities and general populations. Social welfare, police gender desk officers, health care workers, district medical officer and other invited guests gave insights after listening to the challenges that were shared by the KVPs during the dialogue session.









Program Staff Participate in National and International Conferences

USAID Boresha Afya – Southern Zone participated in the Stakeholders Dissemination Conference on HIV and AIDS in Tanzania from 10-12 September 2019. During this conference which was held at the Arusha International Conference Centre, the Program presented two abstracts on index testing (i.e. experiences from Morogoro and Lindi), expertly delivered by Dr. Allan Sayi (Lindi) and Dr. Amos Scott (Morogoro). Similarly, on the sidelines of the conference the Program also participated in an exhibition, which

was visited by the Guest of Honour, Dr. Faustine Ndugulile, the Deputy Minister of Health, Community Development, Gender, Elderly and Children (MOHCDGEC). Amongst key recommendations emanating from the conference was a call by the Deputy Minister for Health, Community Development, Gender Elderly and Children for NIMR in collaboration with TACAIDS, National AIDS Control Program (NACP) and other stakeholders to ensure that HIV platforms such as this one are organized atleast bi-annually. These ought to bring

together the HIV/AIDS implementers, clinicians, stakeholders and the scientific community to share their experiences, best practices and challenges on HIV control. Likewise, there was also a call for NIMR to organise researchers and HIV implementers to prepare policy briefs and research summaries from their scientific works in lay terms and share with politicians and other key policy makers who in turn may influence policy changes and hence guarantee good general practice.



Arusha International Conference Centre, Arusha – Presenters engaged in a panel discussion on the theme 'Achieving and Sustaining HIV Control in Tanzania.' ©NIMR

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Program exhibition booth. ©USAID Boresha Afya – Southern Zone/S. Mhando



Arusha International Conference Centre, Arusha – From Left to Right, Stephen Mhando (Communications Manager), Dr. Allan Sayi (PMTCT Advisor in Lindi), Amos Kabuhaya (Driver) and Dr. Amos Scott (Regional Program Manager in Morogoro) stationed at the Program exhibition booth. ©NIMR



Arusha International Conference Centre, Arusha - Deputy Minister of Health, Community Development, Gender, Elderly and Children, Dr. Faustine Ndugulile is briefed by Dr. Amos Scott, Regional Program Manager for Morogoro as he visited the





ICASA 2019

On 2-7th December 2019, the Program participated in the International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA). Held in Rwanda at the Kigali Convention Centre, ICASA provided a great opportunity to highlight the diverse nature of the African region's HIV epidemic and the unique response to it. The conference also provided a platform to share successes and challenges at various levels; from global to local. Various stakeholders working in HIV including NGOs, UN Agencies, leaders, researchers, people living with HIV and others committed to ending the epidemic participated bringing together 8,522 delegates from 152 countries.

Overall, the Program presented four scientific papers on contribution of mobile health in reshaping HIV/AIDS services, community – facility services collaboration, approaches to reaching men with HIV services and psychosocial pairing in viremia clinics for improving

viral load suppression among pediatrics and adolescents. The aforementioned abstracts which drew case studies from Program implementing regions in Southern Tanzania were presented by Ferdinand Nachenga (M&E officer), Helena Haule (M&E manager), Simon Mbele (Gender and Youth Advisor) and James Benjamin (Pediatric Advisor). The Program was also represented by Dr. Marina Nielekela (Chief of Party and Elizabeth Ngoye (Head of M&E at EngenderHealth).

During the conference, Program staff were privileged to have a brief discussion with the Deputy Minister for Health, Community Development, Gender, Elderly and Children (MoHCDEC), Hon. Dr. Faustine Ndugulile. Commenting on the poster presentation on "Approaches to Reaching Men with HIV Services" by Simon Mbele, the Deputy

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Minister commended the Program innovations in addressing the difficulties in reaching men with HIV services. Hon. Ndugulile commended the initiatives on the Male Friendly Health Services specifically the establishment of male corners for multi disease service package (diabetes testing, sexual and reproductive health, HIV testing and counselling, TB screening and BMI) in efforts to respond to men's unmet needs. He used the occasion to call upon the National AIDS Control Program (NACP) to consult with USAID Boresha Afya Southern Zone and assess the potential for scaling up the approach beyond the Program's implementing regions. He also requested such initiatives to be shared with MOHCDGEC to inform tailor made health programming.



Kigali Convention Centre, Kigali, Rwanda – USAID Boresha Afya – Southern Zone Chief of Party, Dr. Marina Njelekela shares a light moment with Hon. Dr. Faustine Ndugulile, Deputy Minister (MoHCDEC) on the sidelines of the International Conference on AIDS and Sexually Transmitted Infections in Africa (ICASA). ©EngenderHealth/E. Ngoye.



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Success stories

How the Factors Hindering Timely Reporting were Addressed in Mtwara

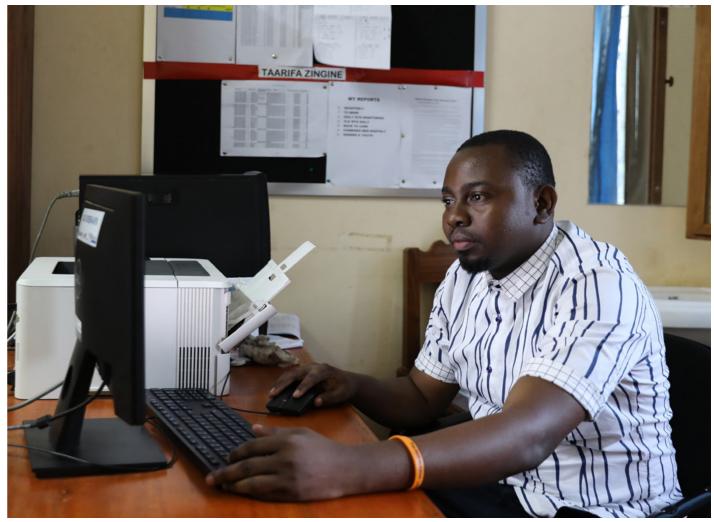
Delays in submission of guality guarterly facility based HIV care and treatment reports as per the National AIDS Control Program (NACP) deadline requirements had been one of the challenges in some of the 'paper-using' facilities in Mtwara. In October 2016, when USAID Boresha Afya -Southern Zone commenced its operations in Mtwara region, one amongst the areas of focus from a monitoring and evaluation (M&E) perspective, was to improve quality of data and early submission of reports into national and implementing partners' data systems.

In December 2016, the region only had 45 electronic sites out of 105 facilities supported by the Program. Throughout the 45 facilities, only 25 computers were in use. This was one of the challenges hindering early submission of data into national systems.

To counter this, the Program held data review meetings, supportive supervision and mentorship visits to facilities jointly with Regional and Council Health Management Teams (R/CHMTs). The intention was to build the capacity of facility staff (Health Care Workers and Data Clerks) on the use of data for decision making thus

improving early submission of reports from facility to CHMT level and from CHMT to the DHIS2 system. Therefore, by June 2017, the Program had purchased and distributed 63 desktop computers to 59 supported facilities.

As recommended by NACP, data clerks were recruited in 25 facilities with more than 100 clients. The Program also trained 46 data clerks on the Patient Monitoring System. Gradual improvements have been noted. By July 2019, an additional 60 facilities had been upgraded from using paper-based systems to electronic making a total of 105 facilities reporting electronically.



Ligula Regional Referral Hospital, Mtwara Mikindani Municipal Council, Mtwara – Hussein Kipingu, Data Clerk at Ligula Regional Referral Hospital is proud of the Program training that has enabled him to do 'more than just data entry.' Photo taken in September 2019. ©USAID Boresha Afya – Southern Zone/S. Mhando

Dr. Ladislaus Makarious, Regional AIDS Control Coordinator has seen this progress first-hand. "Initially data quality was poor and impacted early submission of data. Today, there is a huge difference. Improved oversight and good collaboration with USAID Boresha Afya has seen us meet our deadlines," he expounds.

> Mikindani Health Centre, Mtwara Mikindani Municipal Council, Mtwara -Dr. Makarious cites good collaboration between the Program and Government as a reason for the great reporting performance of Mtwara. Photo taken in September 2019. ©USAID Boresha Afya - Southern Zone/S. Mhando

















"It helps that the health care workers have taken ownership. Leadership is equally important and Dr. Sylvia Mamkwe (Mtwara RMO) has shown great leadership," states Ms. Janet Bushiri, the Program M&E Team Lead for Mtwara. "Manual data collection is laborious," chips in Dr. Makarius.

"The electronic system limits errors and captures comprehensive data. We were operating at 80-90% capacity but now we are at 100%," he adds.

Remarkably, over the past year Mtwara region has managed to record a 100% DHIS2 reporting rate for 215 HIV facilities

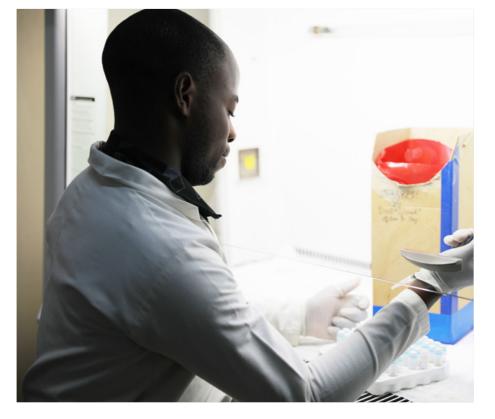
in the region, making it rank among the top five regions in the country. This is largely a result of the excellent relations the Program enjoys with the R/CHMT. Harmonized data collection, review, compilation and entry into DHIS2 as well as capacity building have characterized these relations.

Incredibly Re-Defined Quality at Ligula Laboratory

Quality medical laboratory diagnosis is something every patient visiting a hospital would expect. As far as laboratory medicine is concerned, guality results means obtaining the right test results, at the right time, on the right specimen, from the right patient, with result interpretation based on correct reference data and at the right price. Furthermore, the results should be consistent and reproducible from anywhere in the world. Ligula Regional Referral Hospital Laboratory (LRRHL) has been thriving to provide quality diagnostic services in Southern Tanzania. This involves employing a Quality Management System and applying for International Accreditation, which is offered to laboratories complying with the set International Organization for Standardization (ISO) standards.

Until 2016, LRRH has been participating in a star rating system (Stepwise Laboratory Management Improvement Towards Accreditation – SLMTA) which is endorsed by the World Health Organization. The highest rating ever achieved by LRRHL was three (3) out of five (5). A laboratory that achieves five (5) stars is endorsed for international accreditation assessment. Currently, there is only one laboratory in Southern Tanzania accredited for implementing the set ISO requirements for quality and competence for medical laboratories (ISO 15189).

USAID Boresha Afya Southern Zone in collaboration with the Government (MOHCDGEC) and other stakeholders such as EQUIP Health and Clinical and Laboratory Standards Institute (CLSI) realized the importance of capacitating LRRHL to seek for accreditation particularly



Ligula Regional Referral Hospital, Mtwara Mikindandi Municipal Council, Mtwara - Lab Scientist preparing samples for HIV viral load testing. Photo taken in September 2019. ©USAID Boresha Afya – Southern Zone/S. Mhando

for its renowned departments of HIV Viral Load Testing, HIV Early Infant Diagnosis and HIV Antibody Testing. The laboratory was capacitated with trainings (national and international), human resource, purchase of equipment and furniture and deployment of mentors for onsite support.

After operating for more than two years, the laboratory was assessed in August 2019 by the Kenyan Accreditation Service (KENAS). The team of assessors were impressed with performance of LRRHL and recommended them for a full accreditation of the three departments after addressing a few gaps that had been noted. At present, the LRRHL is fully accredited. This accreditation maps the laboratory globally, brings in research collaboration opportunities and creates consultancy opportunities for staff to support other upcoming laboratories. As the saying goes, "Not all heroes wear capes, some wear lab coats", this is vivid with LRRHL

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An Exemplary Treatment Supporter: The Story of 'Mzee' Hamisi



Temeke Ward, Masasi TC, Mtwara Region – Hamisi Salum (64), a cashew nut farmer and retired driver derives joy from his treatment supporter role. ©USAID Boresha Afya - Southern Zone/S. Mhando.

"For better or for worse," stated Hamisi Salum Nachipyangu (64), a cashew nut farmer. This was his response to a healthcare worker when probed what he would do should he find out his wife is HIV positive. That was almost 10 years ago at Mkomaindo Hospital in Masasi. He remains the embodiment of those words even after all these years. The decision to take his wife Sajina Nassoro (53) to the hospital was prompted by frequent health scares at the time. "I felt it was important we learned of our HIV status so we went to get tested," Hamisi discloses. Since her diagnosis in 2009, she has lived a healthy life with his unwavering support.

Stigma remains common amongst persons living with HIV. Being gossiped, verbally insulted, exclusion from social, family as well as religious activities are some of the leading forms of stigmatization. Thankfully, Sajina has Hamisi to shelter her from this.

"When I learned of my status, I was numb for a moment. I was shattered. I needed Hamisi and he stood beside me." Sajina divulges.

Hamisi's role as treatment supporter is a result of the health education provided at the Care and Treatment Centre (CTC) at Mkomaindo Hospital. USAID Boresha Afya - Southern Zone has trained healthcare workers on different topics for HIV clients and their supporters. Some of these include how HIV is transmitted, treatment, disease progression and prevention; disclosure and identifying treatment supporters; importance of appointments, dates and time, planning transport; importance of adherence, how to remind, plan, what to do when traveling, sick, etc. This information is disseminated to clients on clinic days at the CTC.



For Hamisi, being a treatment supporter comes naturally. "As a husband it's my duty to take care of my wife. It's not a burden. It is something I enjoy doing," he shares. It is evident he enjoys this. When his wife travels, he picks her medication. Sajina travels frequently in her advocacy work for the Furaha Yangu national campaign to test and treat all PLHIV. In this group she does drama recitals and traditional dances. Hamisi is grateful for the services provided to PLHIV and their families at Mkomaindo CTC. During health education sessions, he learned of Family Planning services such as the use of condoms. Prior to this, he was unaware that he could still have sexual relations with his wife. He now receives condoms every time he visits the hospital. Similarly, he checks his HIV status every three months. Results to date show he continues to be HIV negative. It makes him happy to know his status. Hamisi is happier taking care of Sajna, his true calling.









A pictorial journey of the last quarter



Office of the Regional Medical Officer, Songea Municipal, Ruvuma Region – Regional Medical Officer in Ruvuma, Dr. Jairy Khanga receives a copy of the National Client's Service Charter from Dr. Marina Njelekela, Chief of Party (USAID Boresha Afya - Southern Zone Program). ©USAID Boresha Afya – Southern Zone/S. Mhando



EngenderHealth Country Office, Dar es Salaam – EngenderHealth Tanzania Country Representative, Prudence Masako hands-over Toyota Land-cruiser Hardtop keys to Dr. Mussa Ndile, Director of the Results Management Office at USAID Boresha Afya – Southern Zone Program. The vehicle will support Program operations in Southern Tanzania. ©USAID Boresha Afya – Southern Zone/S. Mhando.

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Deloitte Tanzania Country Office, Dar es Salaam – From left to right, Prudence Masako, EngenderHealth Tanzania Country Representative, Dr. Marina Njelekela, Chief of Party (USAID Boresha Afya – Southern Zone Program), Traci Baird, EngenderHealth President and CEO and Mkami Mahemba, Director of Finance and Grants (USAID Boresha Afya – Southern Zone Program). This was on the occasion of the EngenderHealth President's visit to Deloitte Consulting Limited during which they discussed strengthening the existing partnership and potential future collaboration in areas of reproductive health, gender, youth and social inclusion. ©EngenderHealth/R. George



Heritage Cottage Hotel, Songea Municipal, Ruvuma Region – Simon Mbele, Program Gender and Youth Advisor conducts a gender session for staff during the climax of the commemorations of the 16 Days of Activism against Gender based Violence. Photo taken on 10 December 2019. ©USAID Boresha Afya - Southern Zone/S. Mhando













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