

# HABARI GANI (“What news” in Swahili)

A Newsletter by Priscilla and Henry Ziegler

*September-November 2018*

Henry has just returned from his third visit to Tanzania this year. Great progress has been made in both the hospital and in community health. We also are strengthening the St. Augustine school with books, food, computers and scholarships for some orphans. We are working with major partners to develop the hospital for poor women and children and use it to expand family medicine in Tanzania. Please help.

A post-Thanksgiving thank you to everyone who has helped the construction of the obstetrical-surgical ward building and the surgery building. **We are operating! Thank you!**

## The Hospital

As long-term readers know, we have been trying to establish a full hospital for the poor in Dar es Salaam since 2009. The focus has always been on women and children. In 2010 Sharon Steele, a hospital planner, came to Tanzania as a volunteer and with William Gallagher, a volunteer architect, did preliminary plans. In 2011, Episcopal United Thank Offering and other individual church grants allowed the building to begin. An existing building that was built by the Anglican Church of Canada was modified to create the women’s obstetrical and surgical ward building. In 2013, the surgical building was completed. Since 2013 until the present, needed modifications to both buildings were made and necessary equipment and supplies obtained thanks to everyone’s donations. This fall we finally had everything ready and received final approval from the Ilala Municipal District Medical Officer and Ministry of Health to operate.

Our first C-section was done November 2<sup>nd</sup> and both mother and baby are fine. (See photo of newborn below and the surgery itself on the following page.) The obstetrician-gynecologist, Dr. Last Mwakasitu, is from the Amana Regional Hospital. He has been seeing our gynecology and high-risk obstetrical cases.





Since we have started operations, Raphael Barua our Health Director has done a brilliant job by recruiting highly regarded academic surgeons to come, see cases, and operate. Dr. Peter Wangwe is the Department Chair of Obstetrics and Gynecology at the National hospital. Dr Maryam Fakh is also from the national hospital and one of the primary obstetrics and gynecology teachers at the national medical school. Dr. Festas Mpojulu is on the Obstetrics and Gynecology faculty at the highly regarded Hubert Kairuki Medical School. We also have Dr. Peter Dattani a pediatric surgeon and senior faculty member from the National Hospital to operate on pediatric patients. He is one of approximately seven pediatric surgeons in all of Tanzania. In addition to his excellent skills, he was the head of the regional hospital in Coast Region and will act as a consultant to our management team.

These are special people and will see both paying patients and the very poor once we can get charity support. Since we are creating a model district hospital to teach family doctors, medical and nursing students who will serve in the health centers and district hospital throughout Tanzania, they need to learn from the very best. The charge for a C-section is \$174, much lower than other private hospitals but still very high for poor people in Tanzania. It is important to note that 12 million of Tanzania's 60 million people earn less than 60 cents a day. **Please donate so we can operate on more poor people.**



Above are Dr. Mtasiwa, the former Tanzanian Chief Medical Officer and Health Tanzania Foundation board member on the left and Dr. Peter Datanni on the right.

### **Family Medicine Training**

As we said in the last newsletter, the Tanzanian government has decided to make family medicine a full medical speciality in Tanzania and the core of its medical manpower development. In August Dr. Mtasiwa and Henry met the leaders of Hubert Kairuki University. If we can build a a women and children’s ward building and an education building, Kairuki will implement one of the first family medicine residency training programs at the Buguruni site. With the shortage of doctors in Tanzania, having a Tanzanian model of family medicine as the core for district hospitals and health centers will improve both the quality of leadership and the care throughout Tanzania. Remember, we have raised over \$150,000 to have a fully equipped and functioning surgical program. We can build two floors of a women and children’s building and a first floor of the education building for \$200,000. This will be enough to begin full hospital services except for x-ray. **Please help us become a full teaching hospital and donate to the women and children’s building and the education building.**

### **Partnership and Fundraising**

Henry and Mr. Mohamed Shariff Manekia, another Health Tanzania Foundation board member, are shown below at a Muslim-American event in Florida. Henry and Shariff went there to strengthen partnerships to help Tanzania and reach out for possible funding.

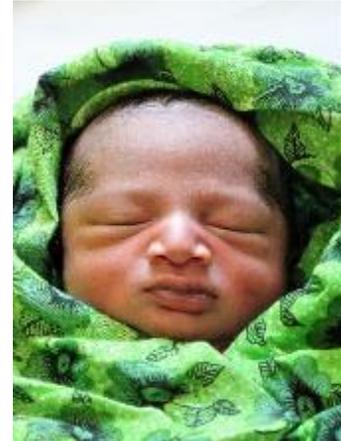
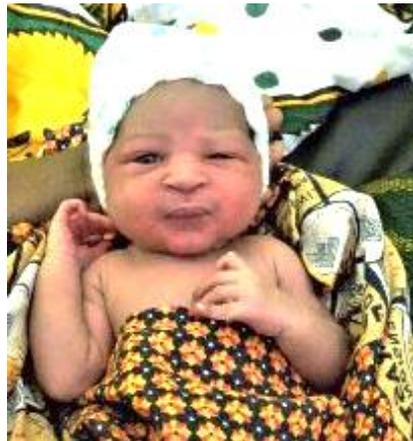


Mr. Manekia, Dr. Mohsin Jaffer and Henry are shown above. Dr. Jaffer is a Kenyan-American family physician and a major humanitarian along with his wife. If he appears to have a halo of light around his head, it is not likely accidental. He and his wife have given much support to charitable causes both in East Africa and here in the U.S. Below are photos of Mr. Manekia with fellow leaders and academics from South Florida.



**Patients at the health centre**

Below are two newborns that the team at Buguruni Anglican Health Centre just delivered. One is wearing one of the newborn hats made by a volunteer in Virginia.



This is Dr. Maxwell and one of our first AIDS patients who is continuing to do well because of our award-winning AIDS program.



These are mothers and children in a well-child clinic. The weighing scale is seen on the right.



Shown above is Hadija who is the patient who came to Buguruni Anglican Health Centre at age 14. She had been playing soccer with her brothers and had a broken upper bone (femur) in her left leg which had become infected and an infection in her right ankle. She had been mismanaged at multiple hospitals. She was an inpatient at the health centre for three months for IV antibiotics before her infection was totally cleared. A bone graft at a partner hospital failed and her left leg was amputated. She generally does well but her appliance needs to be upgraded. She is shown with her younger child who is afraid of Henry and her nephew. All her care was paid for by a generous donor.

### **Charity Program**

Your donations over the years have supported a great deal of charity care. With expensive services such as surgery and dental now available in our program, more charity support is needed, and policies must be carefully created in order to help the neediest with the money available. African Palms and an individual donor have donated \$750 to begin our formal charity program. Thank you both of you.

In addressing this, the program is being very creative. For example, poor widows and orphans qualify for the very lowest annual premiums for National Health Insurance coverage. For \$20 a year an orphan under 16 has all health care costs covered. If a widow joins with 10 others, she will have to pay \$30 for the year which would then cover her C-section if she needs one. In other words, if you donated \$20 to purchase the health insurance for a woman, the hospital would not need any further charity support for a C-section. In our interfaith-government partnership, we are identifying all of the widows and orphans in the area (200,000) around the health centre. The local churches, mosques, and governmental structures are all trying to help and have already paid for some orphans and widows. Together we hope to cover all of them.

Liam Peter is an orphan without a father. We were able to give him the \$20 (50,000 Tshillings) so that his mother could enroll him in the National Health Insurance program and receive all his care at no cost. He was playing and peeled the label from a water bottle and then wrapped it around his head.



**Staff improvement**

Thanks to the excellent leadership of the all Tanzanian staff headed by Mr. Raphael Barua, the developing hospital is a fun place that is constantly improving and shows caring. Through a grant from African Palms, last year the health program became one of the tiny number of hospitals and health centers in Tanzania with a waste recycling program aimed at protecting both patients and staff from infection and playing a part in the greening of the planet by recycling.

Most important is hand washing. In past emails, we have shown the staff all practicing washing their hands at morning rounds. As part of the hand-washing, every staff member is wearing a button (pictured below) that reads: “Ask me about hand washing.”



In the picture above right, Dr. Maxwell (Max) is explaining the game he designed. Each staff member draws several folded papers. The staff member must place each item in the correct box. The boxes



say “very dangerous,” “dangerous,” and “not dangerous.” Above these boxes are three more boxes, one for sharps and other infected material, an IV catheter receptacle, and a receptacle for used medicine ampoules. The staff put each item in the correct container along with much humor. They then went over each item and either agreed with the placement or explained why they didn’t agree. The photo on the right is of a poster located in the laboratory that explains where different waste materials must be placed.

**Interfaith Partnership Community**

Faith in Action is the interfaith non-profit partner using volunteer church, mosque, and community organization members to identify and help widows, orphans, and unmarried children with children and receive health care and social support. They also attempt to train everyone to deal with alcohol, drug, violence, and AIDS. Those directly affected are encouraged and trained to start their own Alcoholics Anonymous-like 12 step self-help programs. Faith in Action received a grant for 2018 from the Khaki Foundation. The grant was through the Health Tanzania Foundation who monitored progress and

finances. In October, Mr. Khaki and colleagues came and visited the program. He has approved a second year. If you are interested in the data from the program, read the report attached along with this newsletter. It was prepared by Dr. Cyprian Chillwaka, the community health doctor associated with the health centre and one of the leaders in the Faith in Action program.

### **AIDS Orphan Program**

Abdul (on the left below) is an AIDS orphan who did not attend school until he was 10 years old when we found him. He caught up quickly in school and did so well that he was accepted into the government secondary school which is quite competitive. He is now in year two of secondary school and wants to be an engineer.



On the right is Samira who is another AIDS orphan that the program is helping with her school fees and other needs. She is a very good student and wanted to go to a better school. A sponsor was able to pay the \$130 for this new school but we are looking for funding for next year.



Wastara is another of our AIDS orphan successes. He just finished his second year in university where he is studying to be an engineer. We are looking for the \$650 for the tuition for his last years.

### **St. Augustine's School**

Alice, the wonderful headmistress of the next door St. Augustine's Primary School, is shown on the next page with some of the 54 books that were donated. Henry brought the books and some flash drives for her students who use them in the computer laboratory at the school. The school particularly needs first grade and early reader books for both the preschool and early elementary level students. If your children or grandchildren have outgrown their books, please send them to us so that Henry can take bring them to

Tanzania. The school is an English medium school and there is a great shortage of books in English for the children as they learn to read.



The Holy Cross Episcopal Church in Dunn Loring, Virginia provides funding for 250 of the over 950 students so that they get a midmorning porridge meal. Without this they would not have lunch and often no breakfast.

### Staff Updates



On the left is Felicia Makame, a new member of the community health team working for Faith in Action in the community. She is the daughter of one of our long-term nurses. On the right is Samuel Ayub who is our new administrator/accountant who is assisting Mr. Barua with the business side of the developing hospital.



Our nurse who had a stroke continues to improve and can now walk, although not for any long distance. Her right arm is better but still minimally usable. With no source of income and three children, she continues to need help. She is shown with our driver who went to pick her up in the village. Henry was able to give her some money.



The team is always attempting to hire from within. Neema Tabu Karata is an excellent and reliable nurse assistant who was promoted to cashier for the night shift since there was no night cashier. Collections have increased substantially which will help the health program increase salaries and pay for more charity care. A charitable business is still a business.



Youth near the health centre who wanted a selfie. So Henry obliged and left a copy at the health centre. As usual, Henry gave copies of all his photographs to the subjects of the photos.

### **Need for Volunteers**

Our Tanzanian leaders are talented but there is still a need for an international person to help with the administration and financial management of the health program. This will ensure continued transparency at the health centre and the future hospital. He or she does not need to have significant experience and can be just out of school, retired, or anywhere in between. If you know of anyone who might be interested, please ask him or her to contact Henry at [hdziegler@yahoo.com](mailto:hdziegler@yahoo.com).

### **Donations**

As we announced in previous newsletters, the Health Tanzania Foundation, our non-profit foundation, has tax-free status as a public charity - a 501(c)(3). Please look us up on the web at [www.healthtanzania.org](http://www.healthtanzania.org). In addition to finding out more about our programs, you can now donate through PayPal at the website. Please help. You can designate what the donation is for and this will be honored.

In addition to making Pay Pal donations at our website, you can send donations to Health Tanzania

Foundation, 1300 Crystal Drive, Apt. 605, Arlington, Virginia 22202 (our home address and the address for the foundation). Make any checks out to “Health Tanzania Foundation” and a receipt will be mailed to you. All donations are tax-deductible.

We know that we are always asking for funds, but so little can do so much in Tanzania. Especially with the Tanzanian shilling decreasing in value when compared to the dollar, a little goes a long way. We both continue to pay for our own trips and bring supplies with each trip. Henry brought more medical supplies such as stethoscopes, pulse oxygen readers, and blood pressure machines this trip. They were donated by people at Grace Church in Alexandria, Virginia. We also purchased and brought other supplies.

Please continue to pray for the health programs in Tanzania. Henry will be visiting again in February to bring supplies and to meet with Tanzanian leaders. Anyone is welcome to go with him.

May God Bless All of Us,

Henry and Priscilla



Merry Christmas! The orange blossom tree is called a Christmas Tree in Tanzania.