

## **HABARI GANI** (“What news” in Swahili)

**A Newsletter** by Priscilla and Henry Ziegler

***September - November 2020***

A week ago, we sent out a request for crisis support. The Buguruni Anglican Health Centre (BAHC) has been unable to pay salaries and purchase medications. Three events have come together to create the crisis: (1) Tanzania’s National Health Insurance Fund (NHIF), by far the largest revenue source for the health center, is three to four months behind in payments and only paid one third of its last payment; (2) an HMO, for which BAHC provided substantial patient care, went bankrupt. The HMO has not paid the \$21,000 owed for the care and medicines provided; and (3) in April during the coronavirus pandemic, Tanzania’s president told everyone to stay away from care and take natural herbs. Health visits all over the country are still substantially down because of this and so revenue from patient care is down.



In 2019, BAHC saw 65,200 people, including 11,806 well child and reproductive health visits for child health care, such as immunizations, prenatal care and family planning, and 7,500 AIDS patients. Some medicines and supplies are paid for by the Tanzanian government but there is no payment for the employees needed to supply these services. In 2019, BAHC kept costs down and was able to pay for 95% of the costs of medical care with local revenue. BAHC even paid for some of its charity care for sick patients with no money and the AIDS and reproductive and child health visits. BAHC revenue and expenses and revenue balanced at \$342,000 for the year. Health Tanzania Foundation only provided \$14,000 (4% of the total) in charity support and an additional \$30,000 for building and equipment to continue to strengthen and develop the program as a district teaching hospital.

We are blessed that some of you came up with additional funds to help the health program

through this crisis. November salaries have been paid and some medications have been purchased. Thank you. We still are looking for help for December salaries and the remaining medications.

### **COVID-19 in Tanzania**

With the coronavirus pandemic here, Henry will not be able to go back to Tanzania until at least April. Despite the recent Tanzanian presidential campaign with its large rallies and no masks or distancing, there still appears to be relatively little coronavirus in Tanzania. Many Tanzanians are drinking daily herbs, but it is not clear if this is making a difference as there is virtually no testing occurring. Visits to doctors and hospital are still down throughout the country. Just as in the U.S., non-coronavirus problems are being neglected.

The content of this newsletter is based on information obtained from the team in Tanzania either by email or telephone calls. All the photos were taken by team members and sent to us. We thank Dr. Maxwell, Dr. Chilowaka, Dr. Obondo, Mr. Barua, Ms. Faidha Rashid, and Mr. David Habibu for their help.

### **Local action to address the economic crisis**

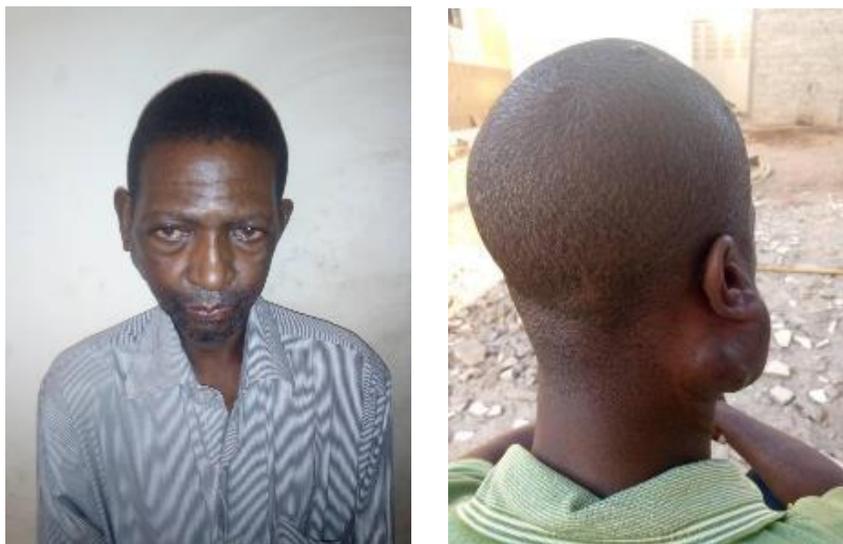
BAHC leadership is working hard to address the decrease in patient volume and revenue. Increased patients will mean more service for the community and more revenue even if patients are poor and cannot pay the full costs. BAHC, in partnership with SEET, is conducting health screenings in the poor neighborhoods around the health center. This identifies health problems and also encourages more of the residents to come for health care. The poor people need to know that BAHC is available to them. In addition, the health team is visiting a different Anglican Church each Sunday to screen and encourage more use of the health center. The government's messages to stay away from health services and be fearful of the virus means that many people do not get care for their non-coronavirus health problems. The last newsletter had pictures of the community screenings.

Pictures below show some of the church screening events. The ambulance is used both for the screenings and to advertise the kinds of services available.

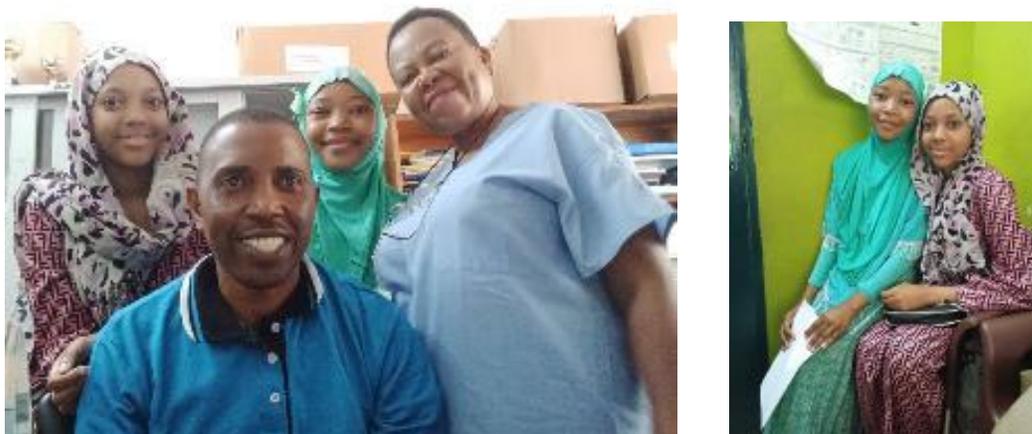


The BAHC board and leadership are reviewing expenses and looking for ways to cut expenses and generate more revenue. They are looking at ways that they can provide more services that will generate further revenue and identify possible donors in Tanzania. Also, they are trying to speed up payments from NHIF and decrease the huge payment deductions. A suit is pending to try and get at least some of the \$21,000 owed by the bankrupt HMO.

### **Patients at the health center**



Since he had no money, the patient on the left was seen as a charity patient for a swelling in his salivary gland. He was given antibiotics and tested for HIV, malaria, and TB. Blood tests were normal. He was then seen at the local hospital for a biopsy which showed cancer of the tongue. To try and raise money to pay for a NHIF card that would allow him to get a CT scan and chemotherapy, he is going to the mosques and churches for help. The patient on the right has a neck abscess which was treated.



Above are two sisters being treated for AIDS (with Dr. Max). Due to poor attendance and no care, they have a high viral load. There has been a decrease in the number of visits for all our AIDS patients.



On the left is a new diabetic patient with foot gangrene. On the right are Mokiwa Orphanage boys acting tough after being circumcised. Remember that circumcisions decrease the transmission of the AIDS virus.



This is a newly diagnosed diabetic who developed a cough with sputum. Because of the diabetes the symptoms were not typical; but after evaluation and tests, he was diagnosed as having tuberculosis. Taking both diabetic and tuberculosis medications, he is doing well.

## SEET

SEET, the multifaith-local community partnership, is working with the 230,000 poor people in the Buguruni and Vingunguti neighborhoods and some of the rural villages in the isolated rural Rufuji District. SEET partners with churches, mosques and community leaders to address critical issues. Community volunteers train those in greater need, such as widows and orphans, and help them improve their health, education, and economic sustainability. They are working with the community to address alcohol, other drugs, violence, and AIDS.

The pictures below show the SEET team with partners in rural Rufiji district villages where they are conducting a Laerdal Foundation study to document the decreased maternal and newborn death associated with the clean disposable birth packs and community education and mobilization. The disposable clean birth kits were developed by team members who are now with SEET and HTF. The team is bringing materials to the three study villages and educating the pregnant women. Surprisingly, the clean birth packs were not found available in the villages even though the government can supply them. The blue bags contain the donated birth kits and were given to the pregnant women.



The SEET team addressing the communities in the villages are seen below.





From the right, members of the SEET team are Gao John Gao, SEET administrator, Asteria Massawe, a nursing leader from the Regional Medical Office, Faidha Rashid, SEET community coordinator, and two members of the Rufiji District Health team.

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

Since education is a critical part of health, donations to the Health Tanzania Foundation help support six needy orphans and other children at St. Augustine's English Medium Primary School with its 1,000 students. Seen below is Alice with the six orphans - she is the head of the school and does a great job.



As we said in the past newsletter, many of the families of the children at the school are poor. After paying for the schooling that they highly value, the parents do not have money to pay for the hot lunch provided at the school. Thirty dollars will feed a child for a year with a nutritious mid-morning meal. The parishioners at Holy Cross Episcopal Church in Dunn Loring, Virginia pay for 250 children of the 1,000 to receive a midmorning meal.



In 2016, a Holy Cross team helped install and paid for a playground set, a requirement for preschool. When the children first saw the play area, they were afraid because they had never seen playground equipment before. As you can see, it is very well used now. St Augustine needs to update the equipment and also expand the school to be able to teach more children. When we started partnering in 2005, they had 600 students and they are now at 1,000 and need to grow much more to meet the community need.





### Staff

Faidha Rashid is SEET's and the Buguruni Anglican Health Centre's community coordinator. In each newsletter, you see her working in many places. In addition to her SEET work, she heads the AIDS orphan program and the home-based care program of BAHC. Despite only having nursing assistant training, Faidha is one of the most effective and strongest of our Tanzanian partners. Her caring, organizational skills, and untiring hard work are amazing.

In our last newsletter, we discussed the death of Faidha Rashid's husband and her need for housing. As her husband recently died, she now must take care of her five children while continuing to lead our community efforts. Thanks to initial donations, she has begun to build a house, as can be seen below. She needs another \$2,000 to finish the house. Please help if you can.



Readers may remember that BAHC was one of only six hospitals or health centers to receive a pilot waste management recycling system. With the assistance of African Palms who paid for housing the equipment, BAHC runs a comprehensive waste management and recycling system

of infectious and non-infectious waste. The buckets seen below contain the different types of waste that are collected and burned or recycled.



Below is the most recent waste management in-service with the staff at BAHC.



### **Need for Volunteers**

We are constantly looking for volunteers both short and long term to help in the U.S. and in Tanzania. There is always a role. If you or someone you know may be interested, have them call, text, or email Henry to talk about possibilities at [hdziegler@yahoo.com](mailto:hdziegler@yahoo.com) or 703-887-1574.

### **Donations**

As we announced in previous newsletters, the Health Tanzania Foundation, our non-profit foundation, has a 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. You can designate what the donation is for and this will be honored. We are also on Amazon Smile which means that 0.5% of any purchase will go to

Health Tanzania. Just register on Amazon Smile and designate that the money earned is given to our non-profit.

In addition to making Pay Pal donations at our web site, 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.

Please continue to pray for the health programs in Tanzania.

May God Bless All of Us,

Henry and Priscilla

Everyone loves a baby elephant!  
(from our visit to Mikumi game park early in our time in Tanzania)

