

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

**A Newsletter** by Priscilla and Henry Ziegler

*January - March 2022*

We did it! Thank you everyone! We made the match – raising \$25,000, which was then matched by a donor for another \$25,000. Thanks to your support we are able serve thousands of poor, sick, widows, and orphans and set up systems for their health, education, and sustainable incomes.

### **Hospital Development**

Thanks to everyone who generously donated last year, Buguruni Anglican Health Centre (BAHC) continues to serve the poor community in Dar es Salaam and work to expand to a district-level teaching hospital. With your help, in 2022 we can greatly expand the number of the very poor who need help.

In the Ilala District of Dar es Salaam, where the health center is located, 60,000 to 80,000 people of the 420,000 in the partner community earn less than 71 cents/day/family member. This is the Tanzanian poverty standard and makes them eligible for the new Improved Community Health Fund (ICHF) health insurance for the poor. The ICHF health insurance pays for basic health insurance. As we are enrolling patients, they must pay 40,000 Tanzanian shillings (\$18.00) for a family of three or \$6.00 dollars per family member per year to enroll. This is even cheaper than we had understood previously. Unfortunately, most the of the very poor do not have the \$6 per family member to pay for the insurance.



Dr. John Obondo, the medical director at BAHC, and the District ICHF officer

**Please help us pay the annual fees for our widows, orphans, and others most in need so that they can receive a year of health coverage.** To make the health insurance sustainable, our Tanzanian

partners are setting up savings programs in which each poor family can deposit \$0.50 a month for each family member in the widows' saving circles or with SEET. By the end of the year, they will have saved enough funds to pay for their own health insurance for the following year.

Both the district and the Dar es Salaam region have encouraged us to enroll as many of the very poor in ICHF as possible since very few have been enrolled by the government health facilities. The plan is to use the SEET (see below under SEET) connected communities, churches, and mosques to spread the word about the program and help pay for or subsidize the annual insurance fee for at least some of their members. BAHC will hold health screenings to both identify patients needing immediate charity care and encourage the eligible poor to sign up for ICHF. We have already enrolled several thousand ICHF members.

In our previous newsletter, we stated that Action Medeor, a German NGO, was donating a new digital x-ray machine to BAHC as soon as we constructed a building to house it. Blueprints and a location for the x-ray building were reviewed and approved by the government radiation representative to ensure that the building meets government code and is placed in a safe space. (Tanzania calls them the "atomic people.") We have a donor to pay for the building and are buying supplies and beginning to build. This will be a major advance since there is little x-ray availability in Tanzania, especially for the poor.

Health Tanzania was able to sponsor Fidelius Ibinga, a nurse midwife, to go to a six-month training program as a nurse anesthetist. He has recently returned. We now have an all-BAHC team doing C-sections. This has been a dream of Dr. Maxwell for 15 years. BAHC no longer must pay outside doctors and anesthetists for every operation. Thus, C-sections are much now more available and cheaper.



Left to right: Mariam Ramadhan (nurse assistant), Fidelius Ibinga (nurse anesthetist), Dr. Maxwell (surgeon and medical officer), Augustino Chacha (nurse midwife), and Francisco Luambano (surgical assistant)

### **Building Improvements**

The roof and other building repairs are finished, and staff members say they look like brand-new buildings. It is just in time, too, since it is the long rainy season. On the next page are more pictures of workers doing roof and building repairs.



### **Support from India**

Dr. John Obondo, Buguruni Anglican Health Centre's medical director and SEET's board chair, is in India. He will be at the IQRAA International Hospital and Research Centre in Calicut, Kerala State, India for three months. The IQRAA Hospital is a nonprofit hospital and research center initially established to help and fund care for orphans. As part of its mission, it supports African health leaders and programs with training and other resources. Dr. Obondo met an IQRAA representative last year when he was in Tanzania.

The IQRAA Hospital is training Dr. Obondo; and together they are planning ways to help the BAHC program and Family Medicine development in Tanzania. Health Tanzania paid for Dr. Obondo's airfare, visa costs, and a living stipend. All other costs are paid by the IQRAA Hospital. Dr. Obondo is shown below with one of his IQRAA partners and meeting with Executive Director of IQRAA Hospital and Research Centre. Dr. Obondo is IQRAA's first African trainee.



### **Patients at the Health Center**

On the following page are photos of babies delivered at BAHC. The first two were vaginal deliveries and the third was a C-section.



This mother came in at 8 pm in labor, and a nurse-midwife (pictured) delivered the baby at 2 am. He is Augustino Chacha.

The woman below came in with her two-month-old baby and older child to thank Mr. Barua, the health director, for the good care she and the baby received during her C-section two months before.



The five-year-old shown below with Dr. Obondo and her parents was born with a closed anus. She survived only because she developed a rectal-vaginal fistula that passed both stool and urine out of her vagina. When Dr. Obondo examined her, he immediately referred her to a specialist at Muhimbili, the national hospital. The specialist suggested that she be enrolled in the National Health Insurance. This is not the basic one into which we are trying to enroll the very poor. This one will cover a much wider array of services. Tanzania government insurance costs the same, even with preexisting conditions. Health Tanzania paid the \$30 for her insurance that will cover most of her expenses, likely well over \$1,000. We will be asking for your donations to cover whatever they do not cover.



### **Family Medicine**

As we stated in the fall newsletter, Tanzania currently has only two physicians per 100,000 Tanzanians. At the district and subdistrict level there is a major need for doctors who can give a high level of care and supervise lesser trained doctors and nurses. Aga Khan University has the only Family Medicine training program in the country.

HTF, SEET, and BAHC are part of a “Family Medicine working group” of major universities that

are working with the government to develop and expand Family Medicine for Tanzania. As described in the previous newsletter, Dr. Eric Aghan, a senior Family Medicine academic, now heads the “Family Medicine Development and Research Centre” as a division of SEET and leads the Family Medicine effort. Dr. Aghan and a team member just met with the Tanzanian minister of health. BAHC and SEET have been identified as sites for community-oriented family medicine teaching. BAHC is being developed as a community-based teaching hospital for this effort.

### **SEET**

Health Tanzania helped establish SEET (Socioeconomic Education Transformation for Health) as a Tanzanian nonprofit in 2016. SEET is a multifaith and local community partnership that is now working with the estimated 420,000 poor people in the Buguruni and Vingunguti neighborhoods and additional people in the rural villages in the isolated rural Rufiji District. SEET partners with churches, mosques, and community leaders to address critical issues. It mobilizes everyone to contribute; and international resources complement local person power and money.

Currently, SEET is identifying all widows, orphans, and unmarried teen mothers in the designated communities and helping them improve and maintain their health, increase their education, and create sustainable sources of income. As described in the last newsletter, 154 volunteers in the two communities have been trained.

With volunteers, SEET mobilizes the communities to address alcohol and other drugs, violence, and AIDS (Ukombozi program). They help those already dealing with the problems and prevent further drug abuse, violence, and AIDS in the community. By the end of 2021, 61,241 adults and youth had taken the three-hour course and discussed what they could and would do for themselves, their families, and the community. Six Emotions Anonymous self-help groups were established with recovering addicts and survivors of violence, drugs, and HIV/AIDS.

Other SEET initiatives are the following: (1) improving maternal and reproductive health through comprehensive community-based programs that directly address maternal and child deaths and family planning; (2) addressing malaria; and (3) using the partnerships and programs to train Family Medicine residents as part of the development of Family Medicine in Tanzania.



SEET continues to identify and help over 1,200 widows and orphans with emergency food, health care, and developing saving circles and sustainable incomes. These are widows from one of the saving circles.

## Malaria Grant

With a grant to the Health Tanzania Foundation from the Kyeema Foundation in Australia, SEET is doing a “proof of concept study” on a comprehensive approach to malaria eradication in isolated Rufiji villages that have year-round malaria. The program consists of community mobilization, testing everyone, treating those who are positive, and using treated mosquito nets and larvicides to kill the mosquitos. Because of the isolation, such a campaign should be able to largely eliminate malaria in a village, if there is good follow-up.

Initial assessments and interviews done in October identified that the three remote villages had 16,393 people. In the two months before October, 613 people tested positive for malaria, but this was not the heavy malaria season when numbers would be higher. If you expand the number to a year, the program could largely eliminate 3,600 malaria cases a year and the related suffering and deaths. Health education about malaria, testing of everyone, treating cases, and larvicide spraying of mosquito breeding sites occurred in December, and monthly larvicide spraying has begun. Shown below are pictures of some of the testing and treatment in Kipugira, Mbwara, and Nambunju.



One of the workers applying larvicide.

Below are the Rufiji District Council chairperson (left) and the District malaria coordinator (right) getting screened for malaria.

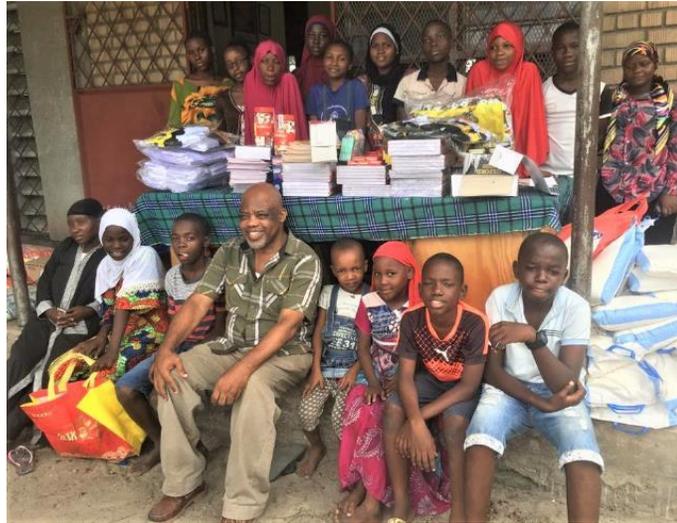


This is part of the road to the villages of Mbwara and Nambunju. Getting to these isolated villages can be difficult!

### **AIDS Orphans Receiving School Supplies**

SEET has continued a program for AIDS orphans that was begun in 2006 to help them with food, health care, and education. This program has continued and complements the SEET orphan program. Shown below are the children receiving bags of rice and school supplies from Faidha Rashid who is the SEET community coordinator and Mr. Gao who is the SEET administrator.





One of the widows whom Health Tanzania has been able to help is Faidha Rashid, the SEET community coordinator. Faidha is one of our most productive and caring leaders. She lost her husband two years ago and has five children. In Tanzania when a man dies, his house and land revert to the parent's family rather than to the wife. Rooms for six people are very expensive to rent. Faidha does not earn much, since despite her leadership position she only has six months of training as a nursing assistant. Fortunately, Faidha had some land in her name. A generous Health Tanzania board member and his family have donated the money and led the effort to build her a nice house. Below are Faidha with her youngest child and a picture of the house.



### **Home-based Care**

The home-based care program has been ongoing since 2008 and serves 25 to 30 patients. Patients are generally very sick and often lack social supports. For some it becomes a form of hospice. The program provides food, medicine, and checkups. Many of the home-based care patients have high blood pressure or have had a stroke. Blood pressure monitoring is an important part of the program.

Some of the patients are post stroke, have AIDS, or have dementia. As with the AIDS orphan program, numbers are limited due to the lack of enough money. Faidha is the coordinator of the program and visits the patients in their homes.



Faidha is shown taking one of the home-based care patients to the HIV/AIDS Care and Treatment Clinic at BAHC.

### **Helping Where We Can**

The SEET team heard of a rural village in the Dar es Salaam region that was very poor and had no health facility or pharmacy. Since it is in the Chalinze area where Pearson Nhayo focuses much of his work, he volunteered to investigate. Fr. Pearson Nhayo, an Anglican priest who trained at Virginia Seminary, is one of SEET's team and is the priest for churches in the Chalinze area. On a Saturday, he went by motorcycle (or "piki piki") to the isolated village because it was difficult to reach by car. He identified that the village was indeed very poor and scattered. However, there was now a very small pharmacy and a government health dispensary. Our team is linking to see how we can help. Pearson is show below with his wife and with the motorcycle and driver.



Lack of water, especially safe and sanitary water, is a major problem in much of Tanzania. Below is a man getting water from a small stream for drinking and cooking. Pictured also is Pearson drinking this water.



Pearson also took photos of some of the houses in the village.



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

Since education is a critical part of health, Health Tanzania helps support the education of needy children. One of the ways it does this is through a partnership with the St. Augustine's English Medium Primary School. Located next to BAHC, the school has 1,000 students. Below is the morning meeting of the entire school. This occurs every day.



Over the years, Health Tanzania has helped build needed toilets and playground equipment for the school. Below is the playground equipment built by U.S. volunteers from Holy Cross Episcopal Church in Dunn Loring, Virginia.



In addition, Holy Cross members have been paying for 250 children of the 1,000 children to receive a midmorning meal. Many of the families are very poor and their children are only getting one meal a day as their families strain to pay school fees. Families with sufficient money pay for the midmorning snack. Below are students at the school.



In last year's newsletter we identified several orphans who need support to attend school and, in some cases, to eat. Thanks to donor support all of them have been helped. Below are some of their pictures and thank-you notes from the older children.



My name is Akram Abilahi I am ten years old. I am in St. Augustines Primary School in class 3. I have no parents, I stay with relatives who can not afford pay school fees. I thank you for paying my school fees and uniforms. I will read hard in class.  
Thank you



My name is HUSSEN ABASI I am 9 years old. I am in St. Augustines Primary School in class 3. I have no parents, I stay with relatives who can not afford pay my school fees. I thank you for paying my school fees and uniforms. I will read hard in class.  
Thank you.



My name is mariam mustafa lam in grade  
3 Hmi year 2022. I am an Orphan, Ilest my  
mother and father I dont no If I can Continue school  
With lchool. Thank you Lo much Jar Paying my fees  
for this year.  
God Blen you

More of the other sponsored orphans are seen below. In the picture on the right are four children, with the older siblings surrounding the younger siblings. Their letters are below.

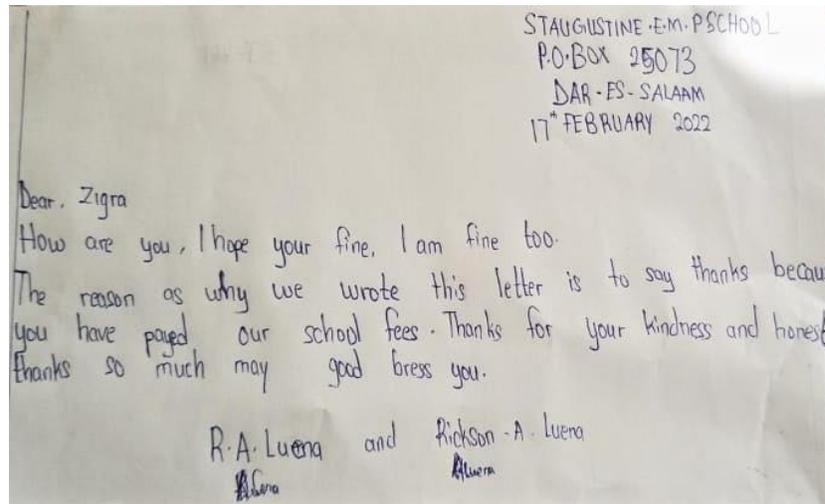


ST. AUGUSTINE'S SCHOOL,  
P.O. Box 25073,  
S-L-P - Dares- salaam.  
17<sup>th</sup> February 2022

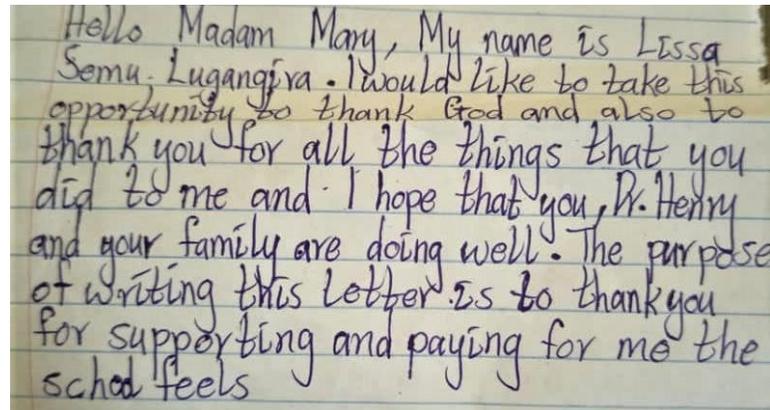
DEAR, Zigra.  
I hope your fine. I am fine too

The reason to write this letter is, we thank  
you for paying us school fees. We thank you  
for your kindness, your honest, may god bless  
you.

As your children,  
Jackline Anania / Joan Anania.  
J.A. Dama



Lisa (below) and her sister Loveness are two of the children who were getting no food except their morning meal and almost nothing on weekends.



### A Visit from Indonesia

Visitors from Indonesia visited TAVICO, the Tanzanian nonprofit that is partnering with SEET in helping the neediest people in the community. The pictures show them visiting our health program.



### Trips to Tanzania

Because of the coronavirus pandemic in Tanzania, none of the Health Tanzania Foundation team went to Tanzania the past two years. Henry plans to go in July. 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, Mr. David Habibu, and Rev. Pearson Nhayo for their help.

### 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 have announced in previous newsletters, the Health Tanzania Foundation, our nonprofit foundation, has a tax-free status as a public charity, i.e., a 501(c)(3). Please look us up at [www.healthtanzania.org](http://www.healthtanzania.org). In addition to finding out more about our programs, you can 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 nonprofit.

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. With the Tanzanian shilling continuing to decrease in value against 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

