SOCIO and ECONOMIC EDUCATION TRANSFORMATION for HEALTH (SEET)

ANNUAL REPORT

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Socio and Economic Education Transformation (SEET) Programs

Annual Report January 2022 – December 2022

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Cover Photo:

Community health coordinator, Counselor and adolescent girls and boys during a two hours Ukombozi training. The training was conducted at Kamanija Education Center in Buguruni Dar es Salaam city, Tanzania.

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Acronyms

AIDS	acquired immunodeficiency syndrome
CHMT	council health management team
HIV	human immunodeficiency virus
ITNs	insecticide-treated nets
MoH	Ministry of Health and Social Welfare
SEET	Socio and Economic Education Transformation for Health
TOTs	trainers-of-trainers
US	united states
WOT	widow, orphan and Teen mothers

Executive Summary

SEET (Socio and Economic Education Transformation for Health) partners with local communities to improve the health, education, and economic sustainability of poor, marginalized, and isolated Tanzanians. SEET's focus is on the Dar es Salaam and Pwani regions, but with the potential of scaling up to regional and national levels. SEET works closely with the Regional Medical Officers and District Medical Officers and its partner communities.

SEET was first created in January 2016 as the action arm of the Interfaith-Government-Community Partnership which began in 2014 in Dar es Salaam. In 2019, SEET, which originally began as Faith in Action, changed its name to SEET to represent its emphasis on health, social supports, and education to transform communities.

SEET's major initiatives are: (1) assisting widows, orphans, and unmarried teens with children to help themselves improve their health, education and establish sustainable incomes; (2) training all residents to address violence against women and children, alcohol and other drugs, and AIDS; (3) improving maternal-child and reproductive health through comprehensive community-based programs that directly address maternal and child deaths and family planning; (4) addressing malaria; and (5) using the SEET partnerships and programs develop family medicine.

During 2022, SEET continued addressing drugs, violence and AIDS through a community mobilization initiative, the Ukombozi (or "Liberation") program. Our trained community volunteers encouraged every community member to participate in the three-hour mobilization discussion concerning drugs, violence an d HIV/AIDS. Those affected by these problems were encouraged and supported to form Emotions Anony mous 12-step self-help groups, in order to heal together. As a result, over 6,000 more people were trained in the Buguruni and Vingunguti wards. This resulted into positive feedback and substantial community-wide increased awareness and involvement in addressing violence, drugs, and AIDS.

SEET also continued activities to improve the health, education and economic status of widows, orphans and young unmarried mothers. During the year, SEET assisted 48 orphans and 33 widows with emergency food, 326 health screened, 52 were given health referrals and over 233 orphans and their care-givers were covered with health insurance through community members or partner organizations. Eighty-eight orphans received school supplies and 18 school fees. Over 60 widows enrolled in saving and credit cooperative society and all of them receiving some sort of business training. The unmarried teen mothers created their own saving circle and received business training.

In 2022, SEET completed a two-year collaboration with Rufiji District CHMT to implement comprehensive malaria reduction activities in three villages in Rufiji District. In this project, we trained nine healthcare

providers in the diagnosis and treatment of malaria as per new released treatment guideline, organized twelve malaria mass screen and test events through which 3129 (1949 female & 1180 male) people were screened. The malaria infection rate notably increased from 23.7% testing positive in December to 33.1% testing positive in the March and May camps. (This was attributed to the 428 (25.9%) new clients at the March and May camps. A total of 547 were treated for malaria. The program also included spraying bio-larvicide in six malaria breeding sites and raising community awareness on importance of sleeping under ITNs daily to over 6000 people.

In 2022, SEET also continued to develop and expand family medicine through its Centre for Family Medi cine Development and Research. The centre is led by Dr. Eric Aghan who also leads the "Family Medicin e Working Group" of universities. Dr Aghan worked closely with the Muhimbili University of Health and Allied Sciences (MUHSAS) senior leadership, international family medicine leaders to plan for the creati on of a family medicine department and residency program at MUHAS and rollout throughout Tanzania. MUHAS is Tanzania's national medical school and first public medical school.

During 2022 SEET completed the evaluation of the clean birth kit project which had been funded with a Laerdal grant. SEET developed a community family planning KAP study. SEET also continued to build partnership with additional organization located in SEET's partner communities.

Introduction

Socio and Economic Education Transformation (SEET) is a Tanzanian non-governmental organization certified as an NGO in the Ministry of Health and Social Welfare.
SEET unites religious and local government leaders to equip, empower, and mobilize community members in self-reliant efforts to realize more equitable health, education, and local development outcomes. SEET focuses on everyone in the entire community, but especially the marginalized. SEET is currently working in the poor urban Buguruni and Vingunguti neighbourhoods of Dar es Salaam and the poor rural villages in the Rufiji District. While programs and partnerships have focused on the Dar es Salaam and Pwani Regions, the emphasize is developing programs and products that are potentially scalable to serve all of Tanzania. The program priorities have been driven by perceived needs as identified with the Tanzanian partners rather than being categorical.
Vision: SEET envisions health, education, and economic self-sustainability for women, youth, and the community at large.
Mission: SEET strives to promote, protect, encourage, empower, educate, and support women, the poor and other marginalized to achieve their life goals.
Goals:
Working as a community-interfaith-government partnership:

1. Identify community members such as widows and orphans, who are in particular need, and help them improve and maintain their health, increase their education, and create sustainable sources of income.

2. Mobilize the communities to address violence, alcohol and other drugs, and AIDS, while helping those already dealing with the problems and decreasing further violence, drug abuse, and AIDS in the community.
3. Decrease malaria through comprehensive community programs.
4. Improve maternal-child and reproductive health through comprehensive community-based programs that directly address maternal and child deaths and family planning.
5. Develop community partnerships and programs to complement and strengthen the development of Family Medicine in Tanzania.
6. Identify and address other community issues that prevent Tanzanian poor and others at risk from improving their health, education, and economic stability.

To achieve these goals, SEET employs an approach of community self-reliance and long-term sustainability. This is achieved through three primary action strategies:

1. Foster collective action among mosques, churches, local government, and other institutions.
2. Educate and mobilize community members.
3. Monitor, evaluate, and Improve.

SEET mobilizes everyone to contribute. International resources complement local person power and money.
In 2022, SEET continued implementing three programs/projects: (1) Violence, Alcohol & Other Drugs, a nd AIDS, (2) Widow, Orphan and Vulnerable Children, and (3) Malaria reduction project. In addition, SE ET continued strengthening its Centre for Family Medicine Development and Research. This 2022 annual report takes a look at what SEET achieved with communities through 12 intense months

Violence, Alcohol and other Drugs, AIDS

SEET address violence, drugs, and AIDS (VDA) through a community mobilization initiative, the Ukombozi (or “Liberation”) program. The goal of the Ukombozi program is to see that Buguruni and Vingunguti are communities without violence, addiction, or AIDS. Since the program began in 2017, SEET developed the Ukombozi manual and curriculum for training all community residents, trained volunteer trainers who facilitates the community three-hour VDA training and identified survivors and addicts. The VDA survivors and addicts were then encouraged and supported to form Emotions Anonymous (EA) 12-step self-help groups in order to heal together. By 2021, over 70,000 community residents were trained to plan together about how to address and prevent violence against women and children, alcohol and other drugs, and AIDS. In addition, 14 EA 12-step self-help groups were formed and supported.

In 2022, SEET continued with encouraging every Buguruni and Vingunguti community members participate in an Ukombozi two hours' mobilization discussion concerning drugs, violence and HIV/AIDS. In addition, we encouraged and supported those affected by these problems to form Emotions Anonymous 12-step self-help groups, in order to heal together.

- 104 ukombozi training sessions conducted at schools, vocational training centers, churches, mosques and community settings.
- Over 6, 000 people trained on ukombozi
- 2 Emotions Anonymous 12-step self-help groups formed

In order to achieve this goal, SEET staff educate and mobilize Trainers-of-Trainers (TOTs) from amongst mosque, church, and community members. These TOT's train volunteers to coordinate the three-hour discussion groups. TOTs also mobilized addicts in the community to form Emotions Anonymous support groups, SEET Staff provides Twelve-Step Trainings, check-in meetings, and additional trainings to support the ongoing groups.

Widows, Orphans, and Teen Mothers (WOT) Program

In 2022, SEET continued to implement the WOT program. The goal of the WOT program is the sustained wellbeing of orphans, widows, and young unmarried mothers in Buguruni and Vingunguti communities. "Sustained" refers to ongoing wellbeing that will continue even if the Program ends. "Wellbeing" entails a holistic view that includes access to health services, lack of HIV stigma, sufficient education, financial self-reliance and stability, and access to basic needed items. In order to contribute to this

- 81 orphans & widows given emergency food
- 326 health screening with 52 referred
- 233 covered with health insurance.
- 88 orphans received school supplies and 18 school fees,
- 2 new widow's self –help group established
- over 60 widows enrolled in self-help groups and received business training

goal, SEET staff educate and mobilize volunteers on resource mobilization; community health issues (HIV/AIDS, preventive screening); identification and assessment of orphans, widows, and single children with children. Staff conducts regular check-in meetings with these volunteers, widows and caregivers to monitor program activities. Staff also advocates on behalf of WOT to mosques, churches, and local governments to support WOT. Lastly, the staff connects caregivers, widows, and young mothers (CWYM) to savings circles and small business training.



Above are photos of program staff and widows during regular check-in meetings

In 2022, five orphans were awarded with scholarships to enable them complete their education through college, funded by "Help Aid Africa" through the Health Tanzania Foundation. The scholarship covered their tuition fees, school supplies, transport fare, stipend and accommodation. All of the orphans are very thankful for the scholarships and that their focus is now doing well in their study. It could have been very difficult for them to continue with school without this support. Below are the five scholarship awardees.





Samira Karim Hamida Hashim Salehe Ally Editha Thobias Feisal Shaaban

Reducing Malaria in Rufiji District, Tanzania

In 2022, SEET continued with implementation of the project to reduce malaria in the rural Rufiji District, Tanzania. This malaria project was funded by Kyeema Foundation of Australia through Health Tanzania Foundation. The project implementation started in September 2021 with the vision of eradicating malaria in three villages (Kipugira, Mbwara & Nambunju) of Rufiji district. The Project has three main goals which are:

1. Largely eliminate malaria in the populations of the three initial isolated villages in the Rufiji District;
2. Demonstrate the effectiveness of the "island model" of Malaria eradication; and
3. Create a template for malaria eradication in other hotspots in Tanzania and potentially around the world.

To achieve the goals, SEET implemented the following interventions:

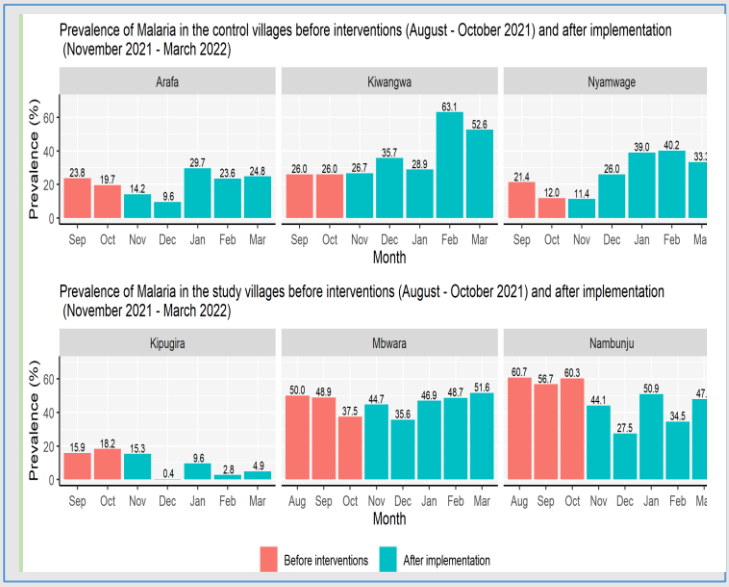
1. Conducted community mobilization followed by mass all-community testing, with rapid tests, and treatment with combination therapy such as Coartem;
2. Followed-up of non-tested family members and neighbors of those identified as having malaria and of portions of the community where malaria was found to be most prevalent;
3. Ensured full use of ITNs;
4. Used larvicides throughout the target areas;
5. After three months, repeated mass all-community testing to further decrease malaria and identify areas for further aggressive testing and treatment;
6. Evaluated and improved facility-based malaria services to complement the project and form a basis for ongoing malaria suppression; and
7. Evaluated supply chain to identify and address gaps and ensure ongoing larvicides, rapid tests, Coartem, and ITNs as part of ongoing malaria suppression.

The primary hypothesis of this malaria project was that these comprehensive interventions will reduce the prevalence of malaria in the study villages compared to their baseline.

In 2022, we implemented remaining project activities including conducting the final project evaluation and reporting. In collaboration with Rufiji CHMT, we built capacity of clinicians from both project intervention villages (Kipigira, Mbwara & Nambunju) and the control villages (Nyamwage, Kiwanga and Faraja) through direct and in-job training.
We also raised community awareness on the importance of early malaria diagnosis and treatment, conducted malaria mass screen and treat events with follow ups to households found with malaria during events. In addition, SEET sprayed bio-larvicide in mosquito breeding sites

- 3129 (1949 female & 1180 male) screened for malaria
- 547 (17.5%) people diagnosed with and treated for malaria
- 9 clinicians oriented on malaria laboratory test, treatment, data documentation and reporting as per guideline
- 11 malaria breeding sites sprayed with bio- larvicide
- over 6,000 people reached with malaria related messages

During the same reporting year, we conducted the final evaluation of this malaria project. The evaluation was conducted by Dr. Irene Ketewe of the SEET FMDRC and Dr. Henry Ziegler, the president of the Health Tanzanian Foundation.



Overall, the evaluation findings indicate that the project made significant achievements with regards to the primary hypothesis. There was an overall decrease in prevalence of malaria in study villages as compared to control villages.

Throughout the project we monitored prevalence of malaria cases at both the health facilities providing services in the three study villages and the three control villages for comparison. Considering the fact that screen and treat camps were held during and after rainy seasons, an increase in prevalence was anticipated which was observed in the control villages. However, the study villages showed a downward trend. Overall, the project has demonstrated the effectiveness of the Zanzibar island model in reducing and preventing malaria. Scale up of the documented best practices is therefore of critical important.

Below are malaria reduction activity's photos

Reducing Maternal and Newborn Deaths in Rufiji District, Tanzania

In 2021, SEET was awarded a grant from the Laerdal Foundation in Norway to perform a proof of concept study of the clean birth packs that SEET partners had developed. These packs with misoprostol address maternal and newborn infection along with maternal postpartum bleeding which are among the

most common causes of maternal and newborn deaths. The grant compared community mobilization and the birth pack to the birth packs by themselves. Despite Covid related delays, the study was completed. In 2022, SEET conducted the final evaluation of the grant. The evaluation was done in partnership with Claire Rater, an MPH student from the University of Washington in US. The data is being analysed and a final report will be issued in 2023.

Respondants in Birthpack evaluation

Centre for Family Medicine Development and Research

SEET has been part of family medicine development in Tanzania since its establishment in 2016 and a member of the Family Medicine Working Group. The Family Medicine Working Group consists of: Aga Khan University, MUHAS, Kairuki University, SEET, Buguruni Anglican Health Centre, and Health Tanzania Foundation. SEET has functioned as the community arm of the community-oriented primary care family medicine model being developed.

In 2021, SEET created a division, the Family Medicine Development and Research Centre, to serve as a focal point for family medicine development and research and act as a research and teaching arm of SEET. Dr Eric Aghan, a family medicine academic and previous head of postgraduate studies at Aga Khan University became the head of the centre. Dr Aghan also is the head of the Family Medicine Working, and led Aga Khan's recent Family Medicine development, linking the family medicine development efforts together.

In 2022, the family medicine centre was involved in the evaluation of the comprehensive malaria initiative and submitted multiple grant applications aimed at funding further development and evaluation of the SEET widows and orphans program and the Ukombozi violence – substance abuse – AIDS program.

Also in 2022, Dr Aghan met with senior MUHAS leaders and together they held multiple planning sessions with national and international family medicine leaders, as they developed the family medicine department and residency at MUHAS.

Dr Aghan, MUHAS assistant, Prof. Enica Richard-MUHAS Dean, Dean Richard's assistant, Prof. Donatus Mtasingwa-Family Medicine Chair-Toronto University (right-left).

Other achievements

1) SEET identified and established partnership with a new orphanage, Upendo, located in the Mivinjeni neighborhood, Buguruni Ward. The center has 40 (20 female & 20 male) orphans and vulnerable children. As a way forward, we have agreed to work together to improve health and wellbeing of the orphans and vulnerable children in Buguruni area

Above is Agnes Mhada (SEET counsellor) with orphans at upendo orphanage

2. Community family planning is an important part of improving and maintaining a community's health. Consequently, working with Erin Ingle, another MPH student from the University of Washington, a knowledge attitude and practice survey was developed. It is being submitted to the Aga Khan institutional review board and will be implemented when approved.

Challenges encountered and Solutions

	Challenge	**Proposed solution**
1	The two hours planned for ukombozi training was not enough to cover VDA at an event	One or two subjects among the three were discussed in an event
2	No violence EA 12 step self-help groups were made as no survivor and or perpetrator disclosed	Continued encouraging disclosure during ukombozi trainings and raising awareness on importance of the EA 12 step
3	Lack of working tools for orphans graduating from vocational trainings	Linked some of them to other NGOs that provide related tools
4	With an increase in cost of living, majority of the patients cared at home had food shortage	SEET provided emergency food to some of the patients.
5	Fewer members of the established widows self-help groups have received entrepreneurship training	More members be trained in year 2023
6	Increased number of orphans requesting for scholarship	Search and apply for related donation and grants