





Working Together to Build Healthy Communities and End Poverty

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A FOCUS ON PARTNERSHIP

Tanzania was home to IMA World Health's first field project and continues to be a country of priority and innovation for IMA. When our first-ever field office opened in 1997, IMA led a team of partners in targeting the neglected tropical disease (NTD) onchocerciasis. Today, IMA's presence reflects an expanding, comprehensive approach to public health with deep-rooted partnerships that have addressed wide-ranging challenges such as HIV prevention, testing and treatment; NTD control and management; childhood cancer; maternal and child health; childhood stunting; cervical cancer and more.

A new focus on nutrition programming aims to make a brighter future by reducing stunting among children under age 5. IMA works closely with the Tanzania Ministry of Health and a network of partners to determine the best, most costeffective solutions to reach as many children and families as possible. IMA also continues its 20-year effort to control and eliminate NTDs, now on a much larger scale. In addition to mass drug administration (MDA), IMA's NTD work addresses morbidity management and social stigma, so that Tanzania's most vulnerable can achieve our vision of health, healing and well-being for all.

OUR PROJECTS ASTUTE DFID | 2015-2020

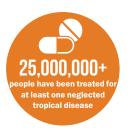
Through a five-year contract from the Department for International Development, IMA World Health leads the Addressing Stunting in Tanzania Early, or ASTUTE, program. In support of Tanzania's commitment to the Scaling Up Nutrition (SUN) movement, IMA builds the capacity of local government authorities across sectors to address the myriad causes of child stunting among Tanzanian children under 5 years old and contribute to the evidence base for what works best and most cost-efficiently in the local context. ASTUTE is implemented among a collective population of 10 million people and more than 750,000 stunted children in five regions of the Lake Zone: Kagera, Kigoma, Mwanza, Geita and Shinyanga.

ASTUTE builds the capacity of 50 local civil society organization partners; has trained nearly 7,800 district health workers and non-health sector service providers; and has reached three million mothers, caregivers and decision-makers with improved child feeding information. Our consortium includes the Partnership for Nutrition in Tanzania, Cornell University's Division of Nutritional Sciences and Development Media International. DFID gave the program an A+ review rating for its third year.

ACT TO END NTDS | EAST

USAID | 2018-2023 IMA is a partner on the global USAID

project, led by RTI International. As the follow-on to ENVISION, Act | East works with country governments to eliminate and mitigate five major NTDs: lymphatic

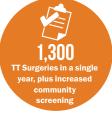


filariasis (LF), onchocerciasis, trachoma, schistosomiasis and soil-transmitted helminths. IMA continues to lead the project in Tanzania, where we work with the government's Neglected Tropical Disease Control Program (TZNTDCP) to achieve its goals regarding the mitigation and elimination of these five NTDs. Activities include continuing to provide full geographic coverage for mass drug administration (MDA); training community volunteers to provide treatment; and working with the TZNTDCP to leverage schools and communities as NTD control platforms. In Tanzania, in addition to the activities that Act | East has absorbed from ENVISION, the program will emphasize health system strengthening and gender components.

Through ENVISION, as of October 2018, Tanzania was able to stop MDA for LF in 96 of the 120 endemic districts, which amounts to 21.4 million people – 69 percent of those living in endemic areas – who are no longer at risk for LF. Additionally, as of June 2018, Tanzania was able stop trachoma MDA in 59 of 71 endemic districts, which means 14.8 million people – 86 percent of those who were living in endemic areas – are no longer at risk for trachoma.

DFID SAFE NEGLECTED TROPICAL DISEASE PROJECT 2015-2020

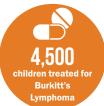
IMA is the lead implementing partner in the Mtwara region of Tanzania on the SAFE project, which is led by Sightsavers International. The project follows the World Health Organization-endorsed SAFE strategy – Surgery, Antibiotics, Facial



Cleanliness and Environmental Improvements — to address the potentially blinding effects of severe or repeated trachoma infection. IMA addresses the backlog of trachoma trichiasis cases, in which eyelashes have turned inward and scrape the surface of the eye. In such cases, surgery is required to relieve pain and prevent blindness. IMA builds district surgical team capacity, facilitates case finding and treatment, and organizes surgical camps in six districts of Mtwara region, reaching more than 7,600 patients with sight-saving surgery to date.

CHILDHOOD CANCER CARE AND TREATMENT 2001-Present

With funding from foundations, Week of Compassion, American Baptist Churches and private donors, IMA has worked since 2001 to fight the highly aggressive but treatable childhood cancer Burkitt's



Lymphoma (BL) through training health workers in diagnosis and case management as well as providing essential chemotherapy drugs, facilitating treatment for more than 4,500 children. In 2009, IMA facilitated the development of the country's first cancer guidelines and in 2011 received national accreditation with the Ministry of Health for its fiveday Laboratory Technician Burkitt's Lymphoma Diagnostic Training. In 2018, IMA partnered with Tumaini La Maisha/ Their Lives Matter to expand services for all children being treated for cancer at Muhimbili National Hospital. These include provision of medicines and supplies, nutrition supplementation, skills training for parents and caregivers, capacity building of the referral network and more.

CERVICAL CANCER PREVENTION AND CONTROL

2011-Present

Cervical cancer is the leading cause of cancer death among women in Tanzania, despite being easy to detect and treat.

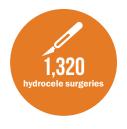


With funding from the U.S. Centers for Disease Control and Prevention, foundations, Week of Compassion, American Baptist Churches and private donors, IMA has worked to stop the growing burden of cervical cancer in Tanzania since 2011 through screening and treatment for those diagnosed early. IMA support has enabled nearly 24,000 women to be screened using the visual inspection with acetic acid (VIA) approach in some of the most at-risk areas of the country. IMA uses a "single visit approach" that integrates cervical cancer and breast cancer screenings with existing HIV and AIDS testing and treatment programs. In this way, women can receive testing for all three diseases in a single visit and initiate treatment right away. IMA currently partners with Shirati KMT Hospital in the Mara region to provide essential supplies and conduct outreach, screening, cryotherapy treatment and referrals for advanced cases.

LYMPHATIC FILARIASIS (LF) MORBIDITY MANAGEMENT PROJECT

IZUMI Foundation and Presbyterian Church (USA | 2013-2016

IMA helped to mitigate the devastating impact of LF through health care worker surgical training and direct surgery for patients suffering from fluid-filled hydroceles. More than 1,300 people received life-changing surgeries, freeing them from daily pain and disability and



improving their self-esteem from addressing what is often seen as a shameful condition.



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Khadija Selemani weaves a mat at her home in Mkundi, Tanzania. The 75-year old woman's right leg is affected by lymphatic filariasis or elephantiasis, a mosquito-borne tropical disease.

All photos by Paul Jeffrey/IMA World Health