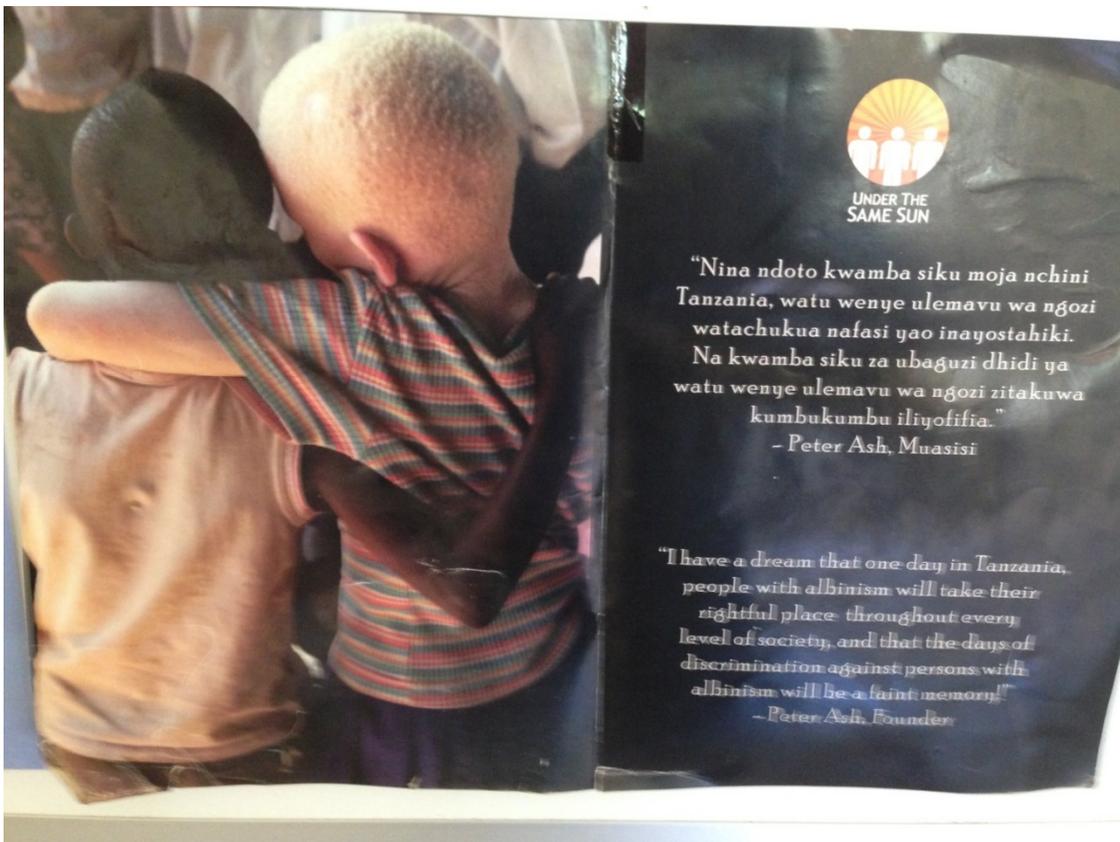




## Bethsaida Health Centre, Musoma, Tanzania

### Annual Report 2016



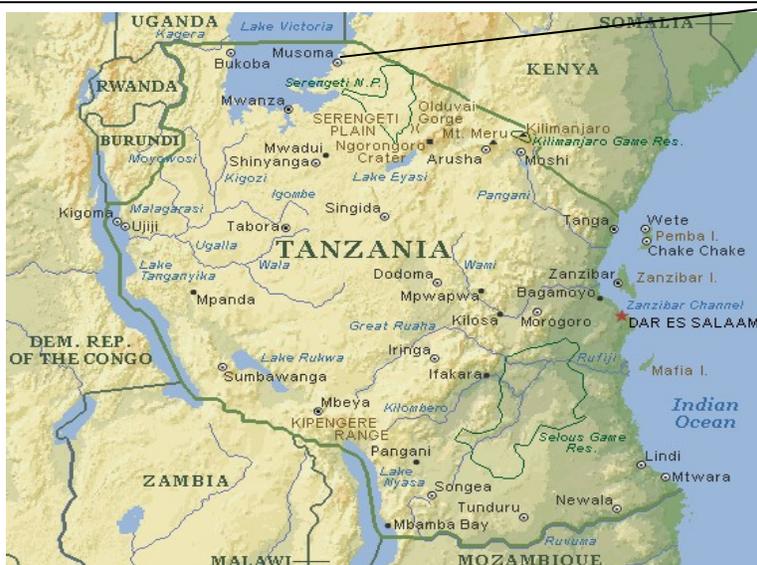
*Written on the poster:*

*"I have a dream that one day in Tanzania people with albinism will take their rightful place throughout every level of society, and that the day of discrimination against persons with albinism will be a faint memory!"*

*- Peter Ash, Founder of "Under The Same Sun".*

## TANZANIA - MUSOMA

BETHSAIDA



CONTENT	PAGE
1. Introduction	3
2. Mission and Strategy	3
• General goal	
• Motivation and commitment	
3. Services	4
4. Contact	4
5. Bethsaida Organogram	5
6. Bethsaida Organization	6
7. Narrative Report	7
8. Home Care	8
9. Other stories and activities of Bethsaida	15
10. Three new programs in Bethsaida	15
11. Challenges 2016	18
12. Donors 2016	18
13. Special Visitors	19
14. Top-ten diseases	20
15. Population Statistics Mara Region	21
16. Cooperation with other organizations	22

## **1. Introduction**

Bethsaida CHD is a non profit Tanzanian registered organization (incorp. no. 60280) that operates a Health Centre with a Home Care facility. The Health Centre offers both services at the center as well as at patients' homes during visits in accordance with health and social welfare policy and health practitioner's ethical standards.

## **2. Our mission and strategy**

### **General goal:**

We strive to offer services based on the Tanzanian Development Vision – 2025, her present Health Policy (2005) and in line with the Development Millennium Goals for 2015. Bethsaida CHD therefore envisages offering equitable accessible and effective health services to people in our service area with efficiency to improve health and livelihood.

### **Our motivation and commitment:**

Acknowledging our Government resource limitations and realizing the availability of poor, disadvantaged and vulnerable groups among us, we are determined to offer quality health services to all through:

- Public-Private Partnership arrangement with our local Government Authority and collaboration with all other stakeholders.
- Principles of equity where we offer services not only at the center but also through a Community Home care Facility with a target exemption provision to unable to pay clients.
- Comprehensive and integrated approach by coordinating all activities in our strategic plans be it preventive, curative, rehabilitative, educative or health promotion in liaison with other health providers in the region.
- Quality Insurance Strategy where supervision, open performance appraisals and helpful client's suggestions are considered.
- Our Working Philosophy: we cling to practical and efficient working that manifest integrity, innovation, effective use of resources and ethical consideration for holistic development of Mankind.

- Our Services through Home care: following the Tanzanian Ministry of Health and Social Welfare guidelines (2005) and upon arrangement, we can offer Home Care in accordance with the available resources as follows:

Medical- and nursing care, Counseling and Testing, Palliative Care including pain management , Ensuring patients medical adherence, psychological- and social support, nutritional guidance & food support, preventive – and health education, support equipment for disabled patients.

### **3. Services we offer**

#### *Health services at the Centre.*

Medical- and Nursing care, Contraceptive and Cervical Cancer screening, Ultrasounds and ECG's, all laboratory investigations, Counseling & Testing, Palliative Care including Pain Management, Ensuring patients' Medical Adherence, Psychological – and social support, Nutritional Guidance & Food Support, Preventive and Health Education, Support equipment for disabled patients.

#### *Health services at home.*

Bethsaida Health Centre offers in cooperation with Kigera Dispensary Home care to everybody who is not able to come to the Centre. It is all inclusive care meaning there is no differentiation in the type of illness or disability a patient has.

### **4. Contact**

#### ***Bethsaida Health Centre:***

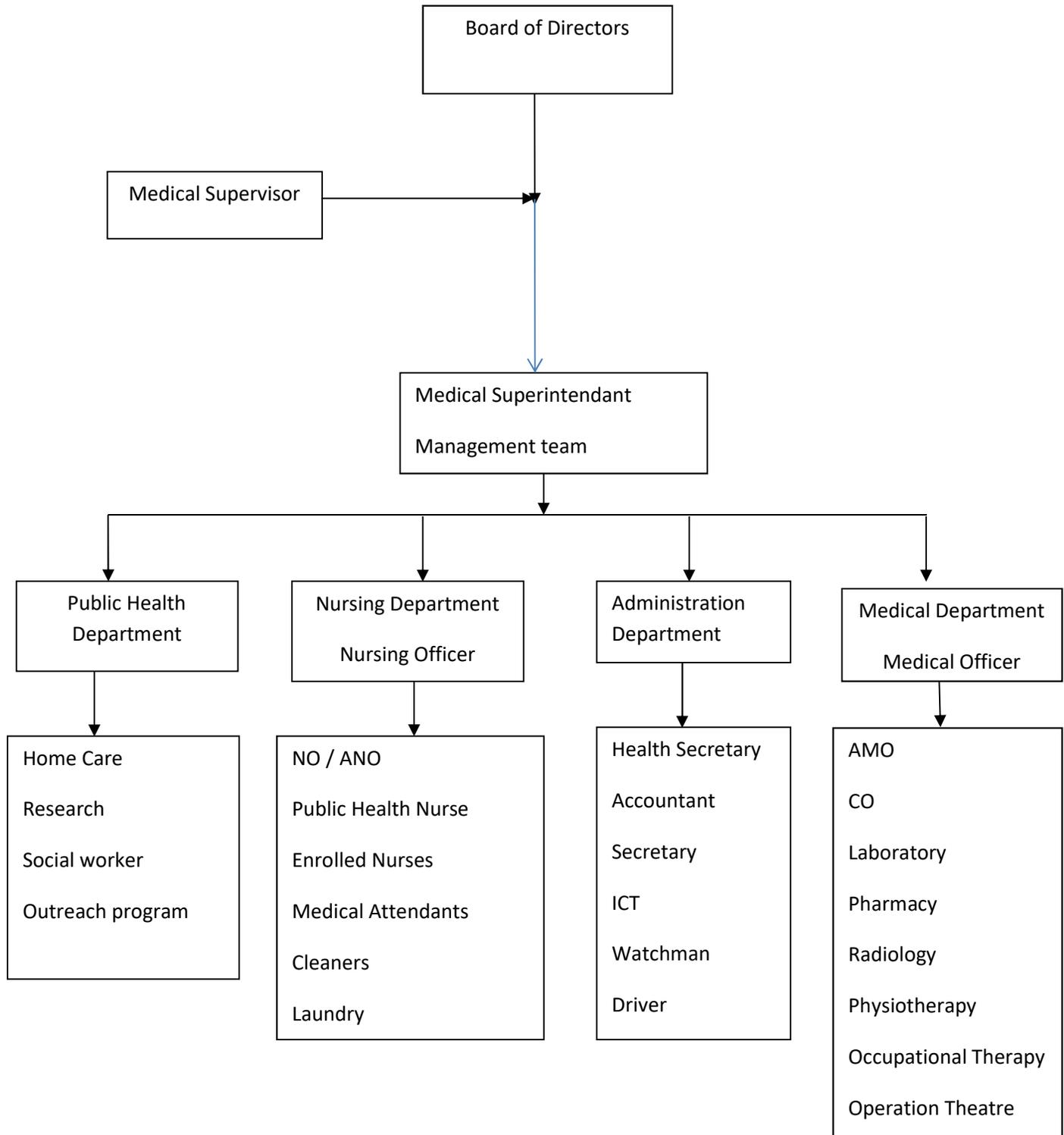
**Office number: Tel. +255 786 235 626**

**In Charge: Mrs. Millicent Rabach**

**Adress: Chirangi Street, Kwangwa Area**

**P.O.Box 666, Musoma, Tanzania.**

**5. ORGANOGRAM BETHSAIDA CENTRE FOR HEALTH AND DEVELOPMENT**



## 6. BETHSAIDA CENTRE FOR HEALTH AND DEVELOPMENT, THE ORGANIZATION

### CO-DIRECTORS

1. Mrs. Elisabeth de Quant, BHA
2. Mr. Dr. Musuto Chirangi, Phd
3. Mr. Jumanne Magiri, MPH

### MEDICAL SUPERVISOR

Dr. B.M. Chirangi MSc, MPH

### MANAGEMENT TEAM

- |                          |                           |
|--------------------------|---------------------------|
| 1. Dr.Bituro             | : Senior Clinical Officer |
| 2. Mrs. Millicent Rabach | : Matron                  |
| 3. Mr.Robert Mochomba    | : Accountant              |
| 4. Mr. James             | : Lab assistant           |



Every Monday and Friday Bethsaida gives Health Education on different topics to our clients and those who are there being our patients (page 15).

## 7. Narrative Report about 2016



In our waiting hall: an educational poster about prevention and awareness of Malaria.

Because of the untruth Tax Claim and the still not realized PPP, Bethsaida, paying the TRA claim, came into financial problems and was not able to fulfill its duties for staff and was also not able to have enough drugs in the pharmacy. The patients became less and so the income.

This made reorganization unavoidable. In the beginning of 2017, after discussions with Tughe, the branch organization for workers in Health Care, we came to the conclusion, to pay all the workers up to March and ask them to apply to their own jobs again which everybody did. Per April first we started with few workers. We need a new AMO and a new lab technician to be able to get our patients back.

For the PPP we asked, on recommendation of a Minister, the interference of the District Commissioner of both Musoma town and urban.

For the TRA claim we went again to the TRA Regional Manager with the letter we wrote to the Minister of Finance. At the end of this discussion he said that this could have been miscommunication. We made several appointments about written documents which he is willing to forward them to the TRA Commissioner in Dar es Salaam who has the authority to take the claim from the table.

## 8. Home care

From September 2016 up to January 2017 the Dutch occupational therapist Lidwien Weitenberg worked in Bethsaida Home Care and helped many patients. Also from the budget from Running for Walking, she helped Bethsaida to go with 4 children to see the orthopedic surgeon in Shirati Hospital. Three out of four children were operated and back on their feet again. One was not possible to operate due to significant contractions.

Here follows the report of Lidwien.

### FINISHED PATIENTS

#### **Albinas Josef (stroke)**

Kiara, near Kwesis Machine

Home visits between September and December 2016.

Main problems: weakness of the right arm, not able to write, weakness of the right leg.

Treatment: exercises for hand function, exercises for writing, exercises for muscle strength arm and leg

Result: able to write and walking longer distances. Still trembling of the right hand.

Treatment finished, no follow up necessary

#### **Shitoe Mashouti (paralyzed legs, no diagnosis)**

Home visits between September and November 2016.

Main problem: not able to walk after giving birth to daughter 2 years ago

Exercises for strengthening the leg and core muscles. After a few weeks 2 crutches given.

In November able to walk with one crutch for longer distances. Walked without crutches around the house.

In November left for Dar es Salaam, unknown when she will return.

Crutches returned to Bethsaida (she had not taken them to Dar, according to her mother she no longer needed them.)

No follow up necessary



#### **Rose Saimon (72 years, stroke)**

*Near Nyamatara Mosque, tel number 0688662699*

Stroke in april 2016.

Home visits between September 2016 and January 2017.

Main problem paralysis of the left arm and leg. Walks with stick.

Treatment: exercises for mobility left arm (passive movement only), night splint given for left arm to prevent contractures.

Result: less pain in the left arm.

No follow up necessary. Night splint is borrowed from Bethsaida HC, and should be returned when no longer necessary.

**Andrew Leo (65 years, stroke)**

Shabani street house no 7, Tel number: 0759317165

(brother of doctor Bituro (Bethsaida HC))

Had a stroke, with problems on the right side of the body.

Is known with polio as a child. Used already braces for both legs and crutches. He uses a tricycle for mobility over long distances.

Exercises given to strengthen the right side of the body, advice about standing and walking (with crutches).

Money given to repair the tricycle (new tires and some welding)

Braces of both legs are old and should be replaced.

No follow up necessary.

**FOLLOW UP PATIENTS**

**SEEN BY LIDWIEN (OCCUPATIONAL THERAPIST) SEPTEMBER 2016– JANUARY 2017.**



**Emmanuel Mitwa (6 years, paralyzed legs birth defect)**  
*Kijera opposite the school; tel number: 0783814250*  
*(mother)*

Home visits started September 2016.

Main problem is contractures of both knees. Exercises where of no use, surgery was not an option (according to the orthopedic surgeon visiting Shirati nov 2016).

Handbike given for mobility, needs to practice with it.

Follow up: yearly visits to see if the handbike is still in use and suitable.

Handbike will be owned by Bethsaida, family needs to pay for small repairs/maintenance themselves.

**Elias Hospita (9 years, dropped head syndrome of unknown origin)**

*Near gesti lodge*

Home visits started in September 2016

Main problem: bended neck, see picture

Able to stretch neck active, when asked. Can keep his head up for several minutes. Can turn his head to left and right when it is up.

Exercises and collar given to train the muscles of the neck.

X-ray of the neck made 2015, no diagnosis could be given from that.

Follow up: Regular visits to encourage Elias to keep his head up during activities (school, play, meals)

If possible, more medical examination to find a diagnosis (muscle weakness caused by underlying neurological or neuromuscular disease?). Exercises and collar do not improve gesture, but questionable how much Elias is doing the exercises and wearing the collar.

Will get a plastic collar made in Lake Victory Disability Centre.





**Betty Maikel (3 years, CP)**

Mtakuja, tel number 0788386111

Home visits started in October 2016

Main problem: no good chair/possibility to sit

Betty is very spastic in both the legs and arms. She does not talk, but reacts on her name, sounds and movement.

She cannot stand, don't use here arms to grasp things.

Sitting difficult due to spasm of the legs. Problem holding balance while sitting. Head balance is fine.

Wheelchair will be adapted by Lake Victoria Disability Centre.

Rehabilitation program to start using hands and stimulating further development in sitting, crawling and manipulating with the hands

Follow up: frequent visits to help the parents stimulate Betty in her development, using her hands and communication.

**Jackson Mashauri (4 years, CP?)**

Near Nyamatara mosque, tel number 0656715187

Home visits started in October 2016

Main problem: no head balance, not able to sit or use his hands

Rehabilitation program to stimulate head balance, sitting and use of hands. Family needs a lot of encouragement to involve Jackson in daily live.

Adapted chair given, so Jackson can sit with his family and will be stimulated more.

Neck collar made.

Follow up visits necessary to encourage development of Jackson. Main subjects to start with are the head balance, the use of hands and communication.

**Tabu Tamisi (9 years, unknown)**

Near Nyatare Mosque, tel number: 0687667774 or 0768753339

Unknown diagnosis

Problems: stretching the right knee, not able to walk not able to sit (due to twisted pelvis?)

Treatment: crutches to support walking, contracture prevention exercises of the knee and hips

More examination of the hip is necessary (X-ray?)

NB sitting during school hours a problem?

Crutches are made for her, but she moved back to the village. Crutches left with the neighbours, and contact will be made by telephone to make sure she gets them.

**Emmanuel Paulo (6 years, unknown)**

Tel nr 0767933647

Unknown diagnosis, not able to bent the left elbow (active and passive), little active movement in the right elbow. No supination in the wrist on both sides. Weak grip (in palmair flexion).

Very small arms.

Main problems: eating, dressing himself. Next year in school problems with writing

Treatment: adjustment of spoon and other tools to make activities of daily live easier. Strengthen the movements he has in shoulder and arm.

Solutions that will help are: extending the handle, making the handle thicker, bending tools

X-ray should be taken from the elbows.

**Israel Daudi (4 years, unknown)**

*Sonbe, tel number*

Difficult delivery after 7 months, with finally a cesarean. During the section the physician sliced the back of the head of the baby. Big scar is still visible on the head.

Not able to walk, can stand with little support. Development of the arms/hands seems normal

Known with TB

Very small for his age.

Further examination: development other skills, development mentally

Stimulate walking (with support) in playful manner.

**Elias John (4 years, unknown, probably polio)**

Stays sometimes near Sinza Bar, lives in rural Musoma, tel number 0688838510

Very floppy child.

Problems with controlling the movements of both arms. Is able to overstretch al his joints in his arm.

Feels very thin/boney when picking him up under his shoulders. Big risk for subluxation of the shoulder by pulling him up by his arm.

Not able to walk, can sit in upright position, enough balance of the head and body. Not using his hand as he should.

Further medical examination is advisable and a discussion with the parents how to help him.

Contracture prevention of the knees and ankles.

**Rachel Marini (15 years, spina Bifida)**

Kwanga, tel number 0755884316

Paralyzed from the legs and problems with bowel control due to Spina bifida.

Problems with urine incontinence makes that Rachel is not going to school.

Treatment:

Provide her with a wheelchair, so she can move herself around.

## Surgery patients



### **Lydia James (12 years, dislocated knee left)**

Tel nr: 0756870996

Surgery in Shirati on 17-10-2016

6 weeks plaster

Watch out for: abduction of the foot, leg length difference

Treatment: regular visits to stimulate to learn the new walking pattern.

Stimulate to use the crutches until enough power in the knee muscles to carry her weight.

Walking without crutches since January 2017. Leg length difference seems to reduce/ disappear.

Walking possibilities are improved by the surgery, but cosmetically the leg still has a big lump around the knee and is very bended.



### **Dobia Daudi (3 years, bended legs left and right)**

Tel number: 0764731575

Surgery in Shirati on 17-10-2016

6 weeks plaster

Very scared to start moving after plaster removal

Treatment: learn to walk again, gain more confidence in own possibilities

Turns left feet extreme inwards when walking. Difficult to correct. Still afraid to move freely.

Advise to wear shoes, and wear them mirrored (left shoe on right foot and vv)



### **Makami Elis (2 years, bended leg left)**

Tel number: 0684559910

Surgery in Shirati on 17-10-2016

6 weeks plaster

Treatment : Learning normal walking pattern.

Watch out for overstretching knee left.

NB other leg looks more bended now => also surgery?

January 2017 walks and plays freely. Some overstretching of the knee.

Parents are happy with the result.

**Baraka Lameck, 11 years**  
Sonbe, tel number 0799863969

**Clubfeet**

Disussed with dr Bwirre Chirangi of Shirati hospital. Needs complex surgery, probably multiple surgeries. Not possible in Shirati, needs to go to ???



**Mwajita, 6 years**

Contractures of the fingers. Right hand dig 4 and 5, left hand dig 5. Unknown cause, since birth developed. NB nerve damage?

Did a stretching program with finger splints, but no progress.

**Mkami Elis**

Tel number: 0684559910

Had surgery of bended leg left, but after surgery the right leg also seems quite bended. Discus with orthopedic surgeon if surgery on this leg is indicated.



**Samuel Kiraka Shabani , 1 year (08-01-1916)**

Kigera, tel number: 0684030607

Clubfoot right side

Plaster program not useful (discussed with orthopedic technician LVDC)

Needs X-ray and then further discussion is needed. Probably he will need surgery on his foot.





Home Care visit with the Mennonite group from The Netherlands.



The girl with the bowed legs was operated. On the right side: Millicent Rabach.

## 9. Other stories and activities of Bethsaida

Millicent met an albino girl in Nyankange, 18 years old. Her parents are black. Millicent found her with a septic wound. This came out being skin cancer. The wound was very big on her head. So we consulted the Albino Peace Makers to support her with treatment at Ocean Road Hospital in Dar es salaam. This is a cancer Hospital. Until now she is there for palliative care.

There was a women attended in Bethsaida. Millicent did do a servical cancer screening after talking with her and founding her complains suspicious for cervical cancer. After Millicents investigations it came out her having this. She was referred to Bugando Medical Centre for further management.

Millicent went out for outreach at Nyamatari area to look for new patients and to advertise that we do Cervical Cancer Sreening and Treatment and to advertise Bethsaida. She was accommodated by the Kamnyonge Church and she performed 96 procedures. These services were given for free but the advertisement for Bethsaida was good. At that following week the attendance to Bethsaida was very high.

Every Monday and Friday Bethsaida gives health education on different topics to our clients and those who are there being our patients. Topics such as malaria, methods of family planning, waterborne diseases, hygiene, cervical cancer, albinism awareness, schistosomiasis, maternal care and preparation before birth giving. All of this is announced to the wall.

## 10. Three new programs in Bethsaida

In Bethsaida there are implemented three new programs:

1.  
KMCT (Kenia, 3 persons,) for UBT training, Uterine Baloon Tamponade, treatment of postpartum bleedings.
2.  
Peacemakers for Albinism for health education about Albinism to spread this knowledge in the area. Bethsaida treats them because of this knowledge in case they need medical treatment.
3.  
Government program for teenagers.



### Albino Peace Maker Team

This albino girl has black parents who are looking for medical treatment for her because she already developed skin cancer. At this moment Bethsaida has more albino children; they are going to normal schools. The Albino Peace Maker team is supporting these children.



Youth Friendly Services.

This is a new program introduced and paid by the government. This service is given to teenagers who cannot fully express themselves, in order to create awareness. They should get to know that their presence is acknowledged in the community and at large. This program wants them to feel themselves important for the community in order to express themselves with all their problems and needs.

Bethsaida is waiting for the RMO and RNO to open this service. These teenagers will come from secondary schools.



Bethsaida Health Centre with at the other side the new signboard with the introduction of the new program for teenagers.

## 11: Challenges 2017

- Open a CTC Department. This is for Counseling and Testing persons who might be HIF infected. If we have room, this service will be established by the government.
- Dentist, this will come after the new rooms are finished. By that time there will be room inside of the main building.
- Cardio-echo-machine. For the use of the Cardio-echo machine and the ECG machine we will ask Mr. Rabach, retired biomedical engineer from Bugando Medical Centre, to come and do a training on the job in Bethsaida.
- TRA incorporate tax. This concerns the untruth claim from the TRA of Tsh. 22,000,000/= . We are still working to get that claim from the table. This claim comes from confusions in our Audit Reports. Mainly about the terminology and the way of presenting our figures. But also there are mistakes in these reports.
- Bethsaida being a Foundation with new Memorandum of Articles as a Health Centre only. This will be ready soon. The reason behind this is that Bethsaida was established as a non-profit company without shares, which brings a lot of confusions.

## 12. Donors in 2016

Our donors in 2016 were:

Dutch Women Mission Organization, The Netherlands

Mennonite Foundation for Health Care, The Netherlands

Mennonite Congregation of Ouddorp, The Netherlands

Gifts from individual persons in The Netherlands

Mare Fund, The Netherlands

Mennonite Church The Hague, The Netherlands

Mennonite Worldwork, organization for solidarity and peace, The Netherlands

Protestant Churches of Rijswijk and Maastricht donated a substantial amount for new buildings.

Roman Catholic Foundation The, Netherlands

We thank God and everybody who is willing to support Bethsaida.

### 13: Special visitors

1. MCC Tanzania visited us 1 time for a friendly visit, discussions and introduction of the new country coordinator. Also for their project about albino's.
2. Public Service International (PSI) Mara: they came 4 times for supportive supervision about Cervical Cancer screening and Contraceptive procedures.
3. NSSF: 3x for discussions about payments.
4. Salama pharmacy visited Bethsaida for discussions for procurement of drugs and advertisement of their products
5. Philips pharmacy visited Bethsaida for discussions for procurement of drugs and advertisement of their products
6. Haron & Company, for Audit reports 2013 and 2014.
7. Government Dar es Salaam: for data collection
8. NHIF Mara: they came 2 times.
9. RHMC (Regional Health Management team – RNO Mara): 1x for supervision: for quality improvement and baseline assessment and for areas where we were told to improve
10. Jipiego: 2 x for quality improvement and plan of action; they work with Nursing Departments; they do trainings on the job also.
11. Musoma Municipal Trade Officer: dealing with matters of procurement.
12. Manager of Health and Social Work from Dar es Salaam 2x for rapid assessment; the mark was average because of the amount of technical staff.
13. Aids Relief: 2 x for assessment about having a CTC; they brought HIV test kits for free.
14. Fire and Rescue Force: for supervision of our fire extinguishers they proposed that we should add two more;
15. APHTA: they invited us about keeping good records. Also they organized a discussions about PPP agreements, mainly about RCH Departments in health Institutions.
16. Jolande Amorison and Leo Bakker Mennonites from Aalsmeer, The Netherlands, for a friendly visit to learn more about Bethsaida.
17. A group of 9 Mennonites from The Netherlands for a visit to learn more about Bethsaida and its homecare.
18. Peacemakers for Albinism for health education about Albinism to spread this knowledge in the area. Bethsaida treats them because of this knowledge in case they need medical treatment.
19. KMCT (Kenia, 3 persons,) for UBT training, Uterine Balloon Tamponade, treatment of postpartum bleedings.
20. Lidwien Weitenberg. She worked as an occupational therapist for 5 months in Bethsaida Home care. Later on her mother and brother also visited Bethsaida.



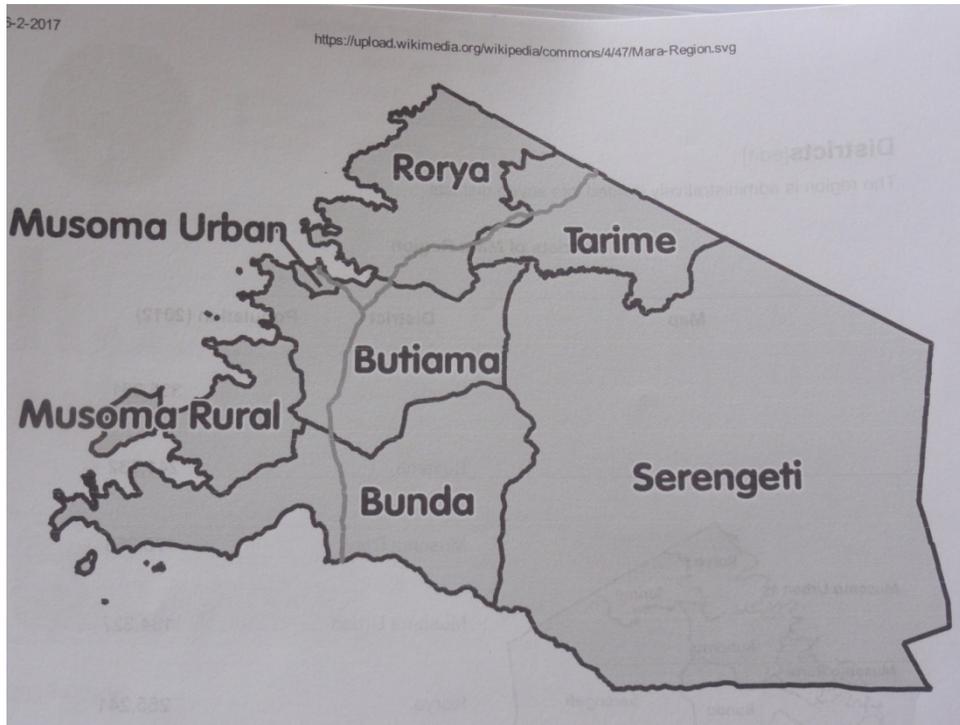
#### 14: Top ten of common diseases

1. Malaria
2. Urine Tract Infection
3. Diarrhea
4. Schistomiasis
5. Intestinal worms
6. Ameba dissentary
7. Anemia
8. Clinical Aids
9. Pneumonia
10. Pelvic Inflammatory Disease

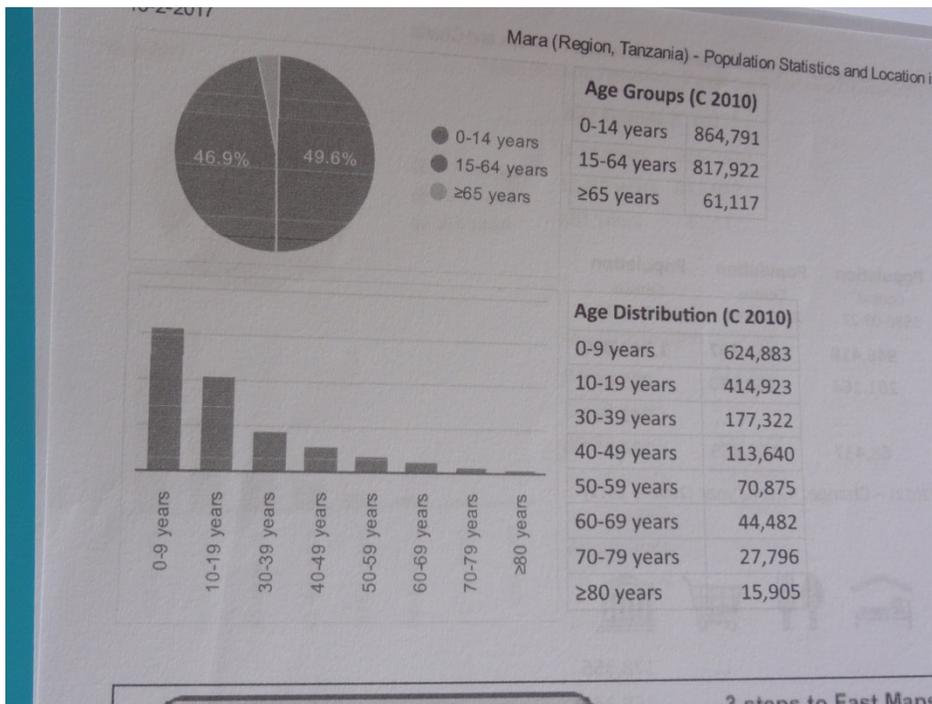


Besides laboratory reagent and other utensils, IV fluid, medical and nursing articles, it is very necessary to have always good and enough medication in stock for our pharmacy.

## 15. Population Statistics Mara Region from the Census of 2010



MARA Region



Age Groups (2010):

0-14 jaar: 864.791

15-64 jaar: 817.922

65 jaar en ouder: 61.117

## 16: Cooperation with other organizations

- International Mennonite Organization (IMO, Europe): direct support, adoption program.
- MennonitischesHilfswerk (MH, Germany): payment of the research for Home Care.
- Doopsgezind WereldWerk (dgWW, The Netherlands): general support.
- Mennonite Central Committee (MCC, The United States / Canada): in different ways.
- Municipality of Musoma: paying the Reproductive Child health Care Department, provision of supportive supervision and baseline assessment.
- Tanesco: through a tender for medical care for their workers.
- Public Service International (PSI): for Family Planning and seminars for workers. Through this organization Millicent Rabach, the Matron of Bethsaida was trained for giving services as Long Acting Reversible Contraception (LARC) and Cervical Cancer Screening.
- APHTA: Association for Private Health Sector in Tanzania: representing the Private Health Care sector towards the government for matters as the PPP. Furthermore they help with medical materials, they organize relevant seminars. From APHTA I learned that in the whole MARA region of which Musoma is the \capital, there is no Private Health \institution like Bethsaida which has a Public Private Partnership signed with the local Musoma Government. APHTA organized many meetings with this local government and their members but up to today There was no concrete result.
- KMT: the General Secretary is one of our co-Directors. They help us sometimes with transport, with advises and more general issues.
- NHIF: this is the National Health Insurance Fund. We have a contract with them. 45% of all our patients are under NHIF.
- NBC Bank: we discuss with them to get the opportunity for workers to get a loan.
- Anglican Church. They work on Home Care for HIV/Aids patients and when necessary they always bring their patients to Bethsaida.
- Musoma Referral Hospital, in all kind of ways.
- RMO, Dr. Jackson, Regional Medical Officer (Mara).
- DNO, Mrs Nurath Hassan, District Nursing Officer (Musoma).
- RNO, Regional Nursing Officer (Mara).
- Lake Victoria Disability Centre, Musoma