

THE RAPID FUNDING ENVELOPE FOR HIV/AIDS: TANZANIA



Good for the Body and for the Soul

“Sometimes, when I am walking, I start crying suddenly and I say: ‘my god, what have I done to you?’” A moment of grief washes over Zawadi’s¹ face before she breaks into a smile as she reaches out to greet a friend; happy greetings echo around them. In anticipation of the imminent session, the group looks for paper and pens. It is almost as if Zawadi has not just described the feeling of losing four of her ten children to HIV/AIDS, and of being infected herself.

It is a hot, breezy Saturday in Dar es Salaam, Tanzania, and Zawadi is one of 25 women and four men gathered for an HIV-positive support group meeting. Young and old, from near and far, they gather weekly to share experiences and to learn from the Centre for Counseling, Nutrition and Health Care (COUNSENUTH), a Tanzanian nongovernmental organization (NGO) working since 1999 to improve quality of life for Tanzanians by promoting preventive health, nutrition, and counseling at the community level. Nutrition is important to maintain everyone’s health, but

for people living with AIDS, proper nutrition can help ward off disease and keep their immune system stronger, longer. COUNSENUTH recognizes that nutrition knowledge is often influenced by poverty, by traditional beliefs, and sometimes by false hopes. In collaboration with the National AIDS Control Program, COUNSENUTH has worked to develop a more coordinated response to reach more Tanzanians with one clear message: good nutrition can help you better manage HIV. To effectively do this, however, COUNSENUTH needed resources.

Meanwhile, the environment for AIDS funding in Tanzania was experiencing a brief and fast-moving shift. As large donors came together to allocate millions to fight HIV/AIDS, the Tanzanian Commission for HIV/AIDS (TACAIDS) realized the need for short-term funding to provide 6–12 month grants to Tanzanian NGOs for urgent activities. This mechanism, called the Rapid Funding Envelope for HIV/AIDS, is managed jointly by Management Sciences for Health (through its Management and Leadership Program) and Deloitte & Touche with funding from eight bilateral donors².

COUNSENUTH used the RFE grant to greatly expand its programs. Radio programs reaching millions of Tanzanians throughout the country cover all aspects of HIV and nutrition—combating the misinformation fuelled by many “experts.” As Mary Materu, Executive Director of COUNSENUTH said: “People with HIV think that they need expensive foods and that local foods are not good. They associate local food with being poor so we promote these and show people (living with HIV/AIDS) how to value local food and improve the quality of what they cook.” Printing and distributing 20,000 Swahili nutrition booklets



Counsenuth staff member Belinda uses the RFE-sponsored booklets to educate the HIV-positive support group on proper nutrition.

¹ Names have been changed to protect the privacy of individuals.

² Canadian International Development Agency, Embassy of Finland, Irish Aid, Royal Danish Embassy, Royal Netherlands Embassy, Royal Norwegian Embassy, Swiss Agency for Development and Co-operation, USAID

targeting people living with AIDS, as well as health providers and NGOs, provide valuable information not only on basic nutrition and infant feeding, but also answers to the most commonly asked questions about HIV and nutrition. As part of the RFE-funded project, COUNSENUTH partnered with Sokoine University, a well-known Tanzanian nutrition research institution, to develop the three nutrition booklets, and a training manual serving as the country's main reference for nutrition and HIV in capacitating counselors, health workers and home based care supporters. Each of these unique and mutually supportive products—from radio programs and information/education/communication (IEC) materials to a uniform training manual—has filled a critical gap in nutrition education.

Among those benefiting are Tanzanians infected or affected by HIV, like the support group members gathered this Saturday. There is 60-year-old Lea, taking care of her infected grandson—who is visibly ill and infected himself—because both of his parents died of AIDS; 38-year old Sophia whose husband is not infected but who still helps care for her when she is ill; 60-year-old Djuma, whose wife died of AIDS and who is afraid to tell his children; and finally 14-year-old Bandali, who is both HIV-positive and orphaned—now both child and adult, sitting with the support group before getting up to go and play with the children who have accompanied their care takers. Despite their difficult circumstances, they have come to learn from COUNSENUTH staff Belinda and Tizie. Today the topic of focus is eating out: from funerals and ceremonies to cafeterias to hospital canteens. Belinda and Tizie talk for about an hour, using the booklets to illustrate their point. They describe how to check the temperature of foods to ensure it is cooked, they advise not to eat salads and to avoid raw vegetables: “These can cause diarrhea or upset your stomach.” They also share information about what fruit to buy at street vendors, recognizing that most of their clients are poor. As they recommend which fruits have high nutrient values and are most affordable, they remind them about using germination to improve digestion and absorption, as well as the importance of steaming vegetables to preserve nutrients. The support group jots this point down, interrupting frequently to ask questions. “What if I have oral thrush? Is it true that I should not



Nutrition education is important for maintaining everyone's health.

PROJECT OUTCOMES

- ▶ Reached thousands of Tanzanians with nutrition education via radio and print materials, contributing to better management of HIV/AIDS
- ▶ Demonstrated positive influence of good nutrition with proper health
- ▶ Trained NGOs, counselors and health workers to address neglected topic
- ▶ Built financial management capacity of small NGO and increased its visibility to outside donors

eat sugar?” An example of many conditions common in AIDS patients; the counselors quickly answer: “yes, decrease your sugar intake. Sugar feeds the fungus.”

The session emphasizes the importance of nutrition education to cope with HIV/AIDS and demonstrates the members' improved knowledge: “good nutrition doesn't cost much, most foods are locally available . . . I am sure good nutrition has improved my immune system.” HIV counselors also express improved understanding, “(clients) were asking me about nutrition but to answer was very difficult because we did not understand how to give this information. Now we give all clients nutritional information and now, they feel better.”

The group reinforces this sentiment. Sophia says: “I've learned a lot, (good nutrition) has given me more energy. Because I have these booklets, I know that fruits and vegetables are better for me than starch.” Djuma echoes this sentiment, “I have seen that (proper) nutrition has helped me more than medicine . . . I am still poor but I can modify my diet to ensure proper nutrition. When I get money I know what is better for me . . . vegetables, beans, papaya, oranges.” Most importantly, the nutrition information is helping people living with AIDS to cope. Zawadi looks around her and offers her thoughts: “My advice to others: try to learn healthy eating habits, avoid alcohol and fatty foods...when you are living with HIV you should be very careful in both health and nutrition.” She pauses a moment: “I hope (as a result) I will live longer. I tell my family to be careful . . . let me be a lesson.”

For more information about Management Sciences for Health, please visit: www.msh.org

Story and photos by Carmen Urdaneta