# **CELEBRATING CHANGE**

In this exhibition, we celebrate seven extraordinary individuals who represent the force of social change for children and women in Tanzania.

These change makers not only have a vision of what they want to achieve in their communities, but they also make change happen.

Using a combination of knowledge, resources, and determination, they push through until their dream becomes real, and then they push some more.

These inspiring women, men and adolescents and many others like them – work with passion to bridge the gaps between the haves and have-nots

Tanzania has made progress in improving the welfareof its people, but 6.5 million children under the age of 15 continue to live in poverty. Social disparities are large between wealth groups, genders, rural/ urban areas and among regions and districts.

Children are the first to falter when confronted with poverty and inequality. Many are denied the basics



of a decent education, quality health care, good nutrition, clean water and

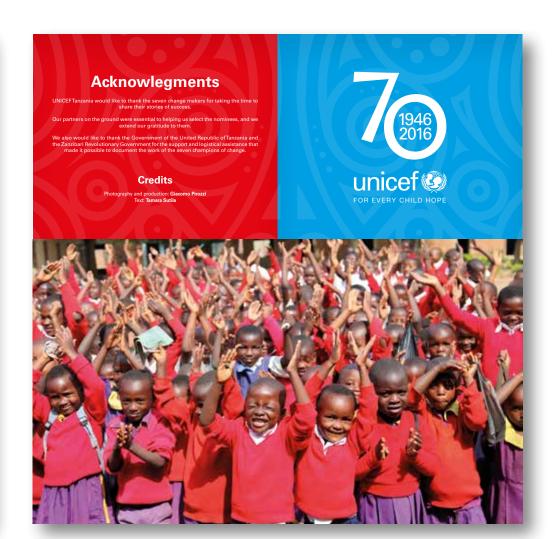
Tackling the vicious cycle of poverty and inequality starts with focusing

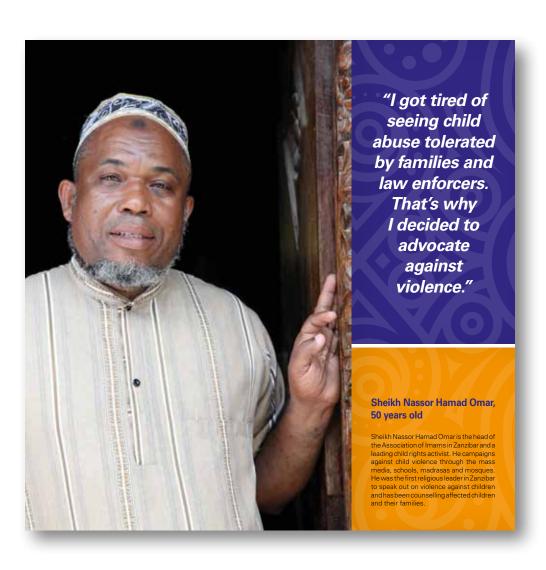
on disadvantaged children and their families. This is where our champions

of change are making their greatest impact - working tirelessly to ignite

sanitation, and safe homes, schools and communities.

hope for even the most vulnerable children.







Tanzanian children who have been punched, whipped or kicked during childhood, including school.



Above: Sheikh Nassor Hamad Omar with his sons Khalid, 4, and Salum, 3.

Centre and below: Sexual violence affects 1 in 3 girls in Tanzania before they reach the age of 18. In these two images, a 16-year-old girl who was gangraped is being seen by a counselor and medical doctor at the one-stop centre for survivors of sexual violence at Tumbi Regional Hospital in Klabia.



Il children have the right to live free from violence and abuse. InTanzania, a large number of children are abused, beaten and exploited on a daily basis. Scaling up a child protection system and changing cultural practices that perpetuate harm against children are key to stopping this tragedy.





53%
Stunted children who live in 10 of Tanzania's 30 regions

(Dodoma, Morogoro, Dar es Salaam, Ruvuma, Mbeya, Tabora, Kigoma, Kagera, Mwanza and Geita)

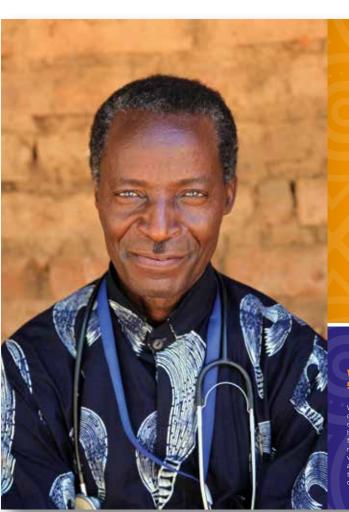


Above: Laitina shows 26-year-old Martha how to prepare a fortified and nutritious porridge for her 11-month-old daughter.

Centre: Martha feeds her daughter porridge made from maize milk, egg yolk and a bit of sugar.

Below: Laitina talks to young mothers and fathers on how to give their families a diverse diet of vegetables, proteins, legumes and fruits.

ore than a third of Tanzanian children under the age of 5 are not growing properly and are too short for their age. However, stunting and other forms of malnutrition can be prevented in the first 1,000 days of life between a woman's pregnancy and the child's second birthday. After that, the damage is largely irreversible.



"When we were studying, we were constantly told about Tanzania's high maternal and neonatal mortality.
When I got here, I saw it with my own eyes."

# Wilson Chota Mganga, 55 years old

Wilson is the clinical officer and the head of the Uturo health dispensary in Mbeya district. Passionate about the welfare of his community, he mobilised women to form mothers groups in 1998. The groups make sure that every pregnancy in the village is registered and that mothers attend ante- and post-natal care. Since then, there has not been a single stillbirth or maternal death in the village.



The poorest women in Tanzania who deliver their babies in a health facility

Above: Veronica Kirosa, 26, has just given birth to her fifth child, a

Centre: Clinical officer, Wilson, and Elizabeth Mwalima, a midwife do a check up of a pregnant woman from the village.

Below: A member of the mothers group takes notes in the community register while talking to a pregnant woman in her home.



very day, around 20 Tanzanian women die during pregnancy and childbirth. Many babies don't survive either. Around 40 per cent of deaths of children under the age of 5 happen in the first month of life. These tragic deaths can be avoided by identifying women at the start of their pregnancies and making sure that they and their newborns have access to quality health care.











Above: Members of the Tuseme club at Mishewe Primary School in Mbeya Rural district school perform a motivational song.

Centre: Miriam, 12, a vocal member of the Tuseme club, performs a skit about a girl whose parents don't support her education.

Below: Two club members lead the drum beat to a Tuseme song.

wo million Tanzanian children aged 7–13 are out of school. Only 60 per cent of children who complete their primary education go to secondary school. Fewer girls finish secondary school than boys. However, an educated population is vital to Tanzania's aspiration of becoming a middle-income country. Educating girls and boys breaks the cycle of poverty and creates a ripple effect of opportunity that influences generations to come.



"Cleanliness is health. Children and adults need to practice hygienic habits of the body and of the environment. Water and toilets are very important for this."

### Rahma Ramadhan Juma, 56 years old

Rahma is the driven deputy head teacher of Nyerere Nursery and Primary School in Unguja Zanzibar. Since joining the school four years ago, she has raised funds and overseen the building of school latrines for boys, girls and children with disabilities, a water tank, borehole and water taps. The school has won several awards for cleanliness, tixwell-maintained water, sanitation and hygiene (WASH) infrastructure, and its motivated teachers and school WASH clubs.



# 1:168 /1:161

The pupillatrine ratio for boys and for girls in Zanzibar. The government standard is 1 latrine for every 50 school children.



Above: Students at Nyerere Nursery and Primary School in Zanzibar wash their hands at the school's water taps. Liquid soap is available at all times.

Centre: School boys line up to use the school's pristine latrines.

Below: Mural on a classroom wall reminding punils to wash their hands



early half (48 per cent) of all schools in Tanzania don't have water and the vast majority (98 per cent) have no disability-friendly toilets. The national WASH-in-School programme in Tanzania needs to reach all schools to protect children's health and ensure that girls and children with disabilities are able to complete their education.



"I may be HIV-positive, but I have everything else. So why shouldn't I be able to fulfil my dreams?"

## Witness Nakanje, 19 years old

Witness was born with HIV and lost her mother to AIDS when she was 11. When she moved in with her father after her mother's death, her stepmother treated her badly and gossiped about Witness's status to friends and neighbours, adding to the stigma and discrimination that Witness faced. However, since being trained as a HIV peer educator by Pasada, a faith-based NGO, Witness has transformed into a strong and confident young woman. She is also doing her diploma in accounting at the prestigious Institute of Finance Management in Dar es Salaam.

8%

**Adolescents** living with **HIV** globally who reside in Tanzania



Above: Standing in front of a colourful mural at the Pasada HIV clinic in Dar es Salaam, Witness explains how to disclose one's HIV status to friends and family.

Centre: ARVs are a lifelong commitment and Witness also helps other children and adolescent stick to their treatment regime

Below: A young man waits at the Pasada HIV clinic to see the doctor.



PASADA SERVICES

VOLUNTARY COUNCELING
AND TESTING
SUPPOSTIVE COUNSELING
MEDICAL ASSISTANCE
- ANTE ETIRO-VIRAL THERAPY
- ARTY
- PREVENTION OF MOTHER TO
CHAL TRANSMISSION/PRICTITB DIAMONS & TREATMENT
DEPMARK SUPPOST

- 18 DIAMPOSS S. I REALMON ORPHANS SUPPORT - COMMUNITY EDUCATION - MAINTEN HEETING FOR PLUMA - COMUNITY BASED LOAN SCHEP FOR PLUMAA - HOME-BASED CARE AND FALLIATIVE CARE SERVICES



IV prevalence among 15–19-year-old teenagers in Tanzania has not increased since 2008 but it has not decreased either. Adolescents continue to be vulnerable to HIV but can play a key role in positive social change. When equipped with knowledge and skills, adolescents help combat the stigma and discrimination of people living with HIV and AIDS, support their peers to lead safe and healthy lives, and demand better HIV services.

