

## FINAL PROJECT NARRATIVE REPORT

You will need to refer to your Project Application Form and the Agreement with WACC. Please answer the questions as fully and concisely as possible to help us learn about your completed project. The report should not exceed 15 pages, excluding appendices. Please return the report with any supporting documents and materials to WACC. We welcome stories about how individuals benefitted from the project, with photos. We also welcome case studies. Please place stories and case studies, if any, in an appendix.

### 1. GENERAL INFORMATION

<b>1.1 Project Title:</b> (as in the Agreement)	<b>Training for the Widows of Pastors wives and denary workers on HIV/AIDS prevention.</b>
<b>1.2 Project Reference Number:</b> (as in the Agreement)	<b>1984</b>
<b>1.3 Full Name of Organisation:</b>	<b>Moravian Church in Tanzania South West Province- Women and Children department</b>
<b>1.4 Country:</b>	<b>Tanzania</b>
<b>1.5 Full Postal Address:</b>	<b>P.O.Box 377, Mbeya- Tanzania</b>
<b>1.6 Physical Address:</b>	<b>Jacaranda – Mbeya City</b>
<b>1.7 Contact Person:</b>	<b>Rev. Agnes Samuel Njeyo</b>
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<b>1.10 E-mail:</b>	<b>agnessnjeyo@yahoo.com</b>
<b>1.11 Website:</b>	<b><a href="http://www.moravian.or.tz">www.moravian .or.tz</a></b>
<b>1.12 Period the project was implemented:</b> (from month/year to month/year)	<b>MAY – AUGUST 2012.</b>

### 2. OUTCOMES AND IMPACT

<b>2.1 What was the project's long-term goal?</b>
<i>To reduce stigma, discrimination against people living with HIV and AIDS and reduce new infection of HIV and AIDS in the province.</i>
<b>2.2 What was the project's immediate purpose and to what extent was it achieved?</b>
<i>The immediate purpose of the project; built capacity to widows, denary workers and pastors' wives on how to communicate properly the messages of HIV and AIDS to infected and affected individuals and households respectively. Since the attendance and participation were so good, and the facilitation was excellent then about 90% of the purpose was achieved. These skills will be transferred to Infected and affected people in the province. They start to be accepted; start to be involved and welcome to all collective social activities such as wedding, funnel, games, and family matters etc.</i>

2.3 To what extent were the expected outcomes and outputs achieved?

<p>Expected outcomes and indicators</p> <ol style="list-style-type: none"> <li>1. 80 women to be trained and change their wrong belief on people living with HIV and AIDS.</li> <li>2. Reduced incidence of stigma and discrimination as a result of campaign to be made by 40 widows and 40 denary workers in 180 congregations in the province by using communication strategies to increase the community skills on the harm of stigma and discrimination for people living with HIV/AIDS.</li> <li>3. Radio audience shall be given the first hand information from the HIV/AIDS experts and those living with the disease, and possibly they will change their negative attitude built towards people living with AIDS. Infected and affected people in the province will be accepted and start to be involved and welcome to all collective social activities such as wedding, funeral, games, meals, politics, Sunday services and family matters after getting live communication from experts in the areas of HIV and AIDS.</li> <li>4. Women group especially widows and denary workers are regarded as leaders at their local communities, therefore 80 shall learn on how proper communication skills are needed to deliver different messages of HIV/AIDS and that can help to reduce discrimination, stigma and new infections.</li> </ol>	<p>Achieved outcomes (disaggregated by sex)</p> <ol style="list-style-type: none"> <li>1. 93 Women were trained to change their wrong concepts for people living with HIV/AIDS. E.g HIV can not be transmitted through hugging, eating together with infected one etc</li> <li>2. 93 women leaders implemented communication strategies to increase community knowledge of the harm done by stigma and discrimination against people living with or affected by HIV and AIDS.</li> <li>3. About 70 people were direct connected or lively connected to radio experts and infected people who were telling their stories on how bad words from different communities wanted to kill them at their first days of experiencing HIV/AIDS life. For example some said they were called 'walking dead body, slow puncture, slim, electric shot, etc" but after the receiving explanations from experts they were healed psychologically)</li> </ol> <p>Achieved outputs (disaggregated by sex, if applicable)</p> <ol style="list-style-type: none"> <li>1. 93 women trained on HIV/AIDS communication strategies to affected and infected people.</li> <li>2. Increased awareness to 93 seminar participants on new methods of preventing HIV/AIDS.</li> <li>3. etc. 93 Women were healed their traumatic problems and they were</li> </ol>
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<p>Expected outputs and indicators</p> <p>1. Communications skills strategies will be imparted to 80 women.</p>	<p>ready to help others who are traumatised in the community.</p> <p>4. 93 women share their experiences in different ways of participating and involving themselves in HIV/AIDS prevention, entrepreneurship and trauma healing skills for the betterment of women lives in the community.</p>
<p>2.4 What other observations did you make? Please mention anything that may illustrate the benefits arising from the project.</p>	
<p>i. <i>Many women are not ready to be open to speak out their problems (they remain traumatised for so long)</i></p> <p>ii. <i>Radio communication allows more people to speak openly because they don't see the facilitator, for example a person who is infected because of prostitution could say openly that, I was infected because of lack of money".</i></p> <p>iii. <i>Seminar could stimulate people to be open.</i></p> <p>iv. <i>More women have started their small businesses to combat their poverty as a result of knowledge from the seminars.</i></p>	
<p>2.5 If you observed any unintended positive outcomes arising from the project, please describe.</p>	
<p><i>We did not expect large number of infected people or people living with HIV/AIDS to give their testimonies to others through radio, they could very much encourage radio audiences to change their behaviours and encouraged more people to go for self test.</i></p>	
<p>2.6 If you observed any negative outcomes arising from the project, please describe.</p>	
<p>No negative outcome emanated from this project.</p>	
<p>2.7 Did you observe any long-term impact (positive or negative) in the wider context that might be related to the project interventions?</p>	
<p><i>The big number of church and non church members are expecting to change their behaviour, fight against poverty and sustain their lives through training that are currently being conducted by 93 women who attend the seminars.</i></p>	
<p>2.8 What methods did you use for assessing outcomes and impact?</p>	
<p>i. <i>We used group discussion and plenary presentations. Where every member of the group was given time to speak about their topic.</i></p> <p>ii. <i>Seminar participants were asked to form or tell an event using drama, stories and testimonies.</i></p> <p>iii. <i>Examination methods, seminar participants were given 10 questions, and facilitators marked them. Almost all passed the exams.</i></p>	
<p>2.9 Please describe the actual direct beneficiaries and indicate the number of women and men. Please also mention any indirect beneficiaries.</p>	
<p>a. <i>Direct beneficiaries: 93 seminar participants, 70 radio audiences who called direct (live) to get explanations from experts</i></p> <p>b. <i>Indirect beneficiaries: All radio audiences who were only listening from the programmes, families of seminar participants, and the church at large.</i></p>	
<p>2.10 What is the likelihood that the project outcomes will be sustained over the medium and long term? Please explain.</p>	
<p><i>This is likely to be sustained because the programmed involves the grass root people and the needy, also the church has put in place the strategic plan that will last for 10 years, in that document there are programme of teaching people on HIV and AIDS till</i></p>	

2021.

2.11 What has been the most important change brought about by the project and what is the key evidence for this change?

Increased level of openness on HIV and AIDS issues. The key evidence is seen in the gatherings, Sunday services and anywhere women are meetings they discuss about HIV/AIDS and the awkward names that were formally used to give to infected people has started to disappear.

### 3. ACTIVITIES

3.1 Please provide a summary of the major activities carried out in comparison with those planned. In the case of significant changes, please explain the reasons. If applicable, please report on specific activities for women and men respectively.

Planned activities	Actual activities ( <i>state if they were specifically for women, for men, or for all</i> ):	Explanation of change
1. Preparation of the workshops	1. We prepared the workshops.	1. No change
2. Hire the venue	2. We hired the venue at Moravian Youth Centre Hostel	2. We changed the venue from OTTU to Moravian Hostel, because at OTTU they had other customers.
3. Purchase teaching materials (flip charts, maker pens, photocopy papers etc)	3. Training material were bought as per plan.	3. No change
4. Organize for the facilitators	4. We organised for 7 facilitators depending on the topics presented in the workshop.	4. No change
5. Write letters to widows and denary workers on the seminar	5. 93 letters were written to seminar participants.	5. No change
6. Invite the radio presenters and newspaper reporters	6. Only radio presenters were invited to plan the programme of on air live programmes	
7. Arrange for meals (breakfast, lunch and dinners)	7. Arrangement was made by making an advance cash payment to the hostel management	
8. Arrange for accommodation for seminar participants	8. Accommodation was arranged by paying	

<p>and facilitators</p> <p>9. Preparation of daily evaluation reports</p> <p>10. Organise for the seminar secretariat- Some body with a computer to take minutes</p> <p>11. Refunding of transport fares for seminar participants</p> <p>12. Report Writing</p> <p>13. Report bidding</p> <p>14. Evaluation</p>	<p>advance cash.</p> <p>9. Daily Evaluation report forms were prepared</p> <p>10. Seminar secretariat was formed to take all seminar minutes.</p> <p>11. Payments to those who travelled and attended seminars were refunded their transport costs.</p> <p>12. Both reports (Narrative and financial reports) were prepared.</p> <p>13. The report has not been bound.</p> <p>14. Internal evaluation has been performed.</p>	
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3.2 How did the beneficiaries react to the programme activities?

*The programme activities were accepted. They skills that were delivered changed and empowered them for future development of personal and institutional achievements.*

3.3. If the project is primarily purchase of equipment, please describe what kind of impact / change the equipment is bringing to the beneficiaries.

*Not applicable to this project.*

3.4. If the project included a workshop, seminar, or consultation, please attach the list of participants, the themes/topics of their speeches/papers, and any statement, declaration, or other material published.

*The seminar topics included the following:*

*i. HIV AND AIDS:*

- *Pre test and post test*
- *Stigmatization*
- *Effective use of ARVs*
- *Home based care*
- *Men circumcisions.*
- *Effective use of condoms*
- *Ways of HIV transmission and how to prevent the transmission*

*ii. Entrepreneurship:*

- *How to raise capital, the process of Village community Bank (VICOBA)*
- *How to keep business information (simple book keeping)*
- *How to start micro businesses to alleviate poverty.*
- *Micro financing of small projects.*

*iii. Trauma healing:*

- *How to help wounded people*
- *Ways that may traumatise people*
- *Language used when speaking with wounded person.*
- *Testimonies that may encourage a wounded person to speak out.*
- *Gender awareness in the community (widows losing their properties)*

#### 4. CHANGES IN THE ORGANISATION

4.1. Please note any important changes or events that took place that directly affected the project. These can relate to management, planning, staffing, or other matters.

We received money on time through our bank account, this facilitated positively the implementation of the programme without delay.

#### 5. CONTEXT

5.1 Please note any important changes in the following contexts since the project began and summarise the implications for the relevance of the project.

<p>Political:</p>	<p><i>Women were encouraged to participate in the process of decision making, especially in the event of giving their views for the current exercise of constitution change of our country. Women have understood that it is their rights to participate in decision making especially if they could put some words or section protecting women against any discrimination in the national constitution.</i></p> <p><i>By using radio communication strategy people could tell plainly that some problems are caused by bad leadership in their villages. For example some explained that most of village executive leaders are men, for that matter they are not willing to protect women once they are stigmatised or discriminated (they are not informed to attend some important seminars in their villages) organised by government and non governmental organisation on HIV/AIDS prevention programmes. After this seminar women have changed their altitudes and now they regard themselves as important attributes to the change and development of their nation, especially using the forum of church women to speak out their problems without any fear.</i></p> <p><i>The implication of the relevance of this project to the community especially using radio communication strategy, more people were able to give their views than expected before.</i></p>
<p>Social:</p>	<p><i>One of the most important changes instigated by these seminars is the ability of the community to break the silence. Within the seminar participants after the seminar presentations and testimonies from the people living with HIV, more people gave their testimonies. Radio programmes brought a big change to the majority of listeners. People could ask some indicative questions such as where can I get tested of my health status? I am healed psychologically condition due to my health status. The community leaders who called directed people not to fear to contact them if they find any medical or government health workers is stigmatising them after testing on HIV/AIDS in their areas. The implication of this project to society was positive. It touches the real need of the community.</i></p>

Natural environment:	<i>The lessons of entrepreneurship brought to the seminar different ways of doing business. How to select sustainable business allowed participants to share their experience on how they consider natural environment to be vital. Those dealing with agriculture, for example, they were some who are cultivating tobacco as their commercial projects, they were heard saying now we are going back to start other business. They complained that tobacco is ruining a lot of trees, and environment is highly polluted with nicotine. They were taught to plant fruits trees such as avocados which could give them more profit than tobacco. Some promised to sell their animals to buy seedlings of avocado. They discussed on the issue of climate change as a result of polluting natural environment.</i>
5.2 To what extent is the project still relevant in the present-day context? Please explain.	

## 6. YOUR ORGANISATION'S LEADERSHIP ROLE AND NETWORKING WITH OTHERS

6.1 Has the project and the support from WACC helped your organisation be in a better position to provide leadership for further initiatives of your own or of others? If so, please explain.
<i>Yes, this support has helped very much to provide leadership needs to most of women. Since the establishment of this province and since the break out of HIV and AIDS widows of pastors wives have never called for seminars of this kind. The main reason was lack of money. Therefore, bringing them together it helps to network women from various parts of the province. It has lifted the credibility of the department of women and children that it cares for all women in the Church.</i>
6.2 In what ways has your organisation articulated and shared good practices, lessons learned, and/or resource materials with other organisations working on similar or related concerns? If you have not done so, do you plan to do so? How can WACC assist?
<i>The Moravian in Tanzania South west province through the department of women and children shared this good practice with the Anglican Church of Tanzania and Evangelical Lutheran Church of Tanzania where sister Rachel Ndelwa and Alice Mtui were invited to represent their churches respectively.</i>

## 7. CONCLUSIONS

7.1 What lessons and good practices have emerged from this project?
<i>Lesson learnt: It was learnt that widows of pastors are mostly ignored in the community and they need to be empowered in various fields to enable them cope with new life after their beloved husbands' deaths.</i>
<i>Good practice: Participatory approach using more pictures and few writings are the effective ways of delivering messages to different age groups.</i>
7.2 What challenges and difficulties were encountered, and how did you address them?

**Challenges:**

Time to answer all questions using radio was not enough to accommodate all questions asked by radio audiences. However, we provided five minutes for each caller.

People are not open to discuss things related to HIV and AIDS due to cultural problems. In Mbeya sexual issues are not allowed to be discussed in the public, especially to adults such as mothers and grand mothers. It is regarded as misbehaving if one can mention any reproductive part of the human body in front of people. To solve this challenge, the facilitator started by asking every participant to mention the reproductive organs of human body in their vernacular or their mother language, in first place it was difficult for them to mention BUT due to expertise of the facilitator every body mentioned those parts. Then the exercise continued easily for the rest of the topic of HIV and AIDS. Through that way they made every participant to share their experience on how they fight against HIV and AIDS in their communities.

Traumatized people were also not ready to share their wounds. This makes difficult to help them. For example a raped woman is not able to speak out her problem openly as this could mean shame to society. Eventually this contributes to the HIV and AIDS transmission. Widows who have lost their properties are traumatized such that when they are displaced of their homes they get confused in new homes, and this leads to alcoholism, drug abuse, prostitution and eventually contracting HIV/AIDS. This challenge was solved by giving skills of counselling on traumatized people. When they go back to their respective homes they could help others to change their status.

**7.3 Did the project have any impact on gender equality issues?**

*Yes, the project had some impacts on gender equality. The number of people who were giving testimonies comprised both men and women especially on HIV and AIDS. Furthermore, facilitation of the seminars involved both men and women, participants could learn that men and women are equally affected by the pandemic. The radio communication witnessed calls from all genders. Moreover, because the church serves both men and women, seminar participants after going back to their respective congregations, they shared reports with all church members regardless of their gender.*

**7.4 What further work needs to be carried out or follow up steps taken, if any?**

*Further sensitization programmes to widows should continue to be carried out, also the follow up on the formation of microcredit services known as VICOBA is vital. Furthermore, the close follow up to see the long term goal of reduced stigma and discrimination for people living with HIV/AIDS is achieved in Tanzania. The church should play a great role to achieve such goal. This project covers almost 200 congregations, those with widows were well represented but congregation without widows were not represented, for that matter those congregations need to be reached by the group of (Training of Trainees) ToTs.*

**7.5 Other comments, if any.**

*There is a big need of establishing a mobile clinic in the province where people can test their HIV and AIDS status without travelling much. This happened after the training people were ready to test their status, but since the exercise was not anticipated*



*counsellors and HIV technicians to take blood specimens were not ready prepared to be at site for testing people. It is more difficult for people living in remote rural areas where the testing services are not available.*

*Another important instrument needed in the process of fighting against poverty is CD4 count machine. People living with HIV/AIDS from remote areas may be helped to check their development of their health after taking ARVs.*

*Radio communication strategy is identified as the best way of sending messages to community and this should be continued in future.*

7.6 We would like to receive digital copies of materials produced such as manuals, training materials, and other products to share them with others. We would also appreciate digital copies or internet links to photos, video or audio recordings produced by or about the project. Please indicate below what you are sending us.



Widows at Baraka Radio



Group picture of denary workers with church leadership.



Mrs Salome Magwaza presenting HIV/AIDS topics



Widows in group discussions



Seminar participants sending their problems to the cross  
All problems are burnt as a sign of forgiving and healing.

CD for the whole workshop  
Time table  
Notes.

Name and position of person submitting the report.

***Rev. Agnes Samuel Njeyo***

**Signature:**

**Date: 22<sup>nd</sup> October, 2012.**

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