



2022 Program Report



A Detailed Analysis of
Maji Safi Group's
Programs in 2022

Rorya District, Mara Region,
Tanzania

Contents

Maji Safi Group Overview	2
Maji Safi Group's 10-Year Impact	5
2022 Overview.....	7
1. Community Health Educator Program	9
2. Learning Tools.....	9
3. WASH in Health Care Facilities	10
4. Information Communication Technology (ICT)	12
5. Outreach	14
6. Female and Male Hygiene Program (Menstrual Hygiene Health Program)	17
7. The Oboke Water Project	19
8. WASH Hubs.....	20
9. Conclusion	21

Maji Safi Group – Overview

Maji Safi Group (MSG), “Clean Water Group” in Swahili, operates in the Mara Region of Tanzania, an area consisting of farmland and villages on the shores of Lake Victoria. In the Mara Region, water is mostly taken directly from unprotected sources that are contaminated with human, animal, and industrial waste. As a result, 99% of all drinking water is contaminated with dangerous levels of pathogens, which leads to high levels of water-related diseases and widespread water-related outbreaks (Perel-Slater, 2011). According to Dr. Chirangi, Chief Medical Officer at the Shirati KMT District Hospital, 50% of illnesses in the Mara Region come from water-related diseases, such as schistosomiasis, cholera, and dysentery. To combat this situation, MSG began as a project under the Shirati KMT District Hospital in May 2012 to implement prevention-focused programs that reduce the occurrence of water-related diseases.

MSG builds and trains teams of local, mostly female, Community Health Educators (CHEs), who lead disease prevention outreach and interventions. MSG was founded with the goal of developing and implementing sustainable and effective programs through participatory methods, relying on our CHEs’ expertise, community recommendations, and needs assessments. Currently, MSG works through four pillars: Menstrual Hygiene Health (MHH), WASH in Health Care Facilities, Information Communication Technology (ICT), and WASH Hubs. Programs for each pillar are carefully designed to reach our objectives, and our interventions touch a wide spectrum of stakeholders, such as parents, teachers, health care providers, government leaders, and youths. Each MSG program was created to reduce the occurrence of preventable diseases that would otherwise continue to paralyze development. MSG does this by empowering women, youths, and vulnerable groups to be change makers of their community’s health. To reach this goal, MSG addresses the root causes of recurring preventable diseases through water, sanitation, and hygiene (WASH) and healthy lifestyle education.

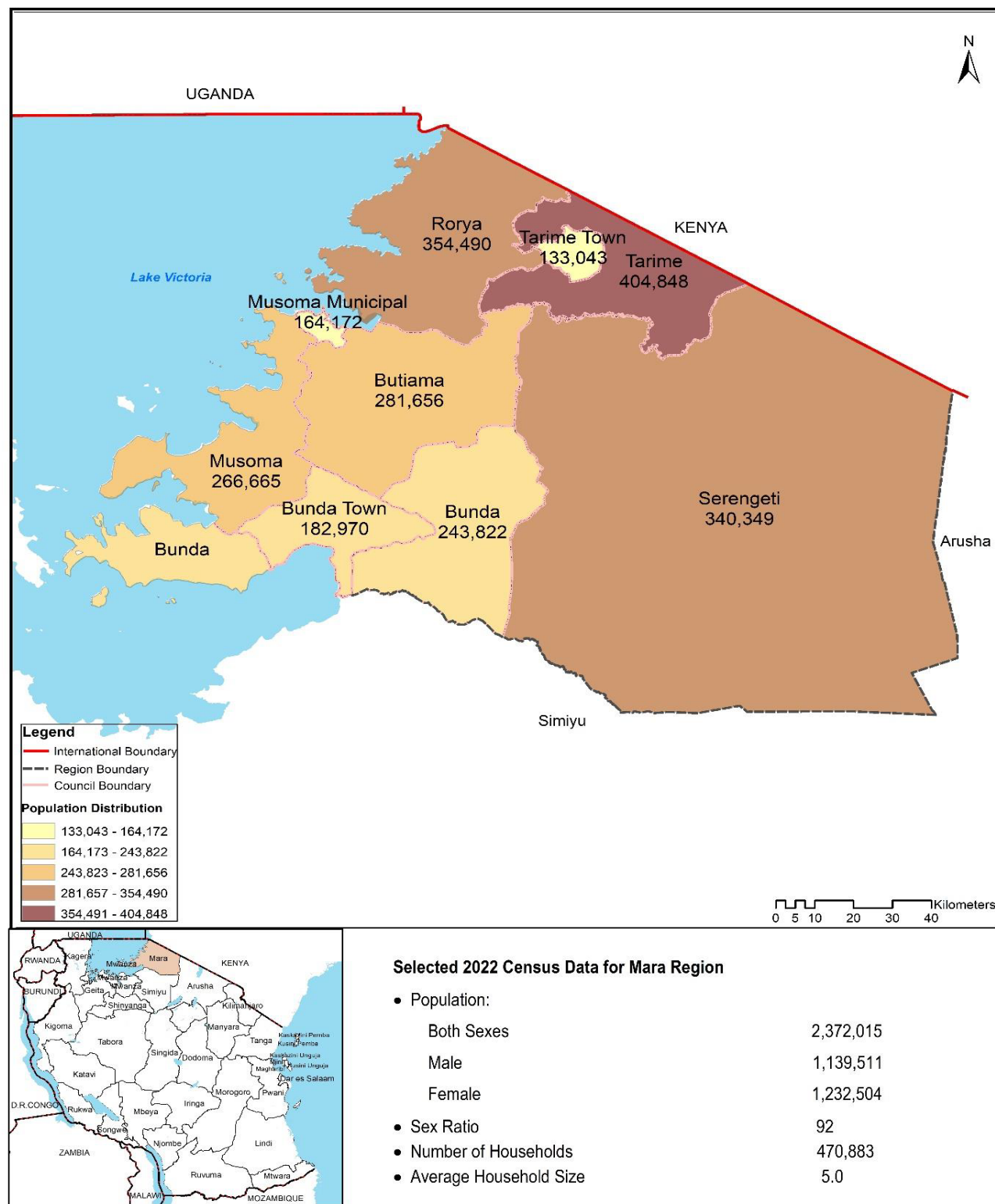
MSG’s organizational approach embodies Confucius’ philosophy: *Tell me, and I will forget. Show me, and I may remember. Involve me, and I will understand.* MSG believes that by engaging communities with fun and interactive lessons on disease prevention, participants will have the knowledge and motivation to improve their water, sanitation, and hygiene (WASH) behaviors. Since the beginning of 2013, Maji Safi Group has taught WASH lessons and the importance of improving personal and community WASH behaviors to populations in the Mara Region, helped local health authorities fight four cholera outbreaks, and supported a district-wide COVID-19 prevention campaign.

Table 1: Maji Safi Group Facts

Maji Safi Group Facts	
Country	Tanzania
Region	Mara
Population of Mara Region by 2022:	2,372,015 total population 1,139,511 males 1,232,504 females

Districts MSG works in and their populations	Bunda District = 243,822 residents
	Butiama District = 281,656 residents
	Musoma Rural = 266,665 residents
	Rorya District = 354,490 residents
Year Established	2012

Map 1: Population Distribution by Sex, Sex Ratio, Number of Households and Average Household Size by Council, Mara Region; 2022 PHC.



(Source: The 2022 Population and Housing Census: Administrative Units Population Distribution Report; Tanzania, December 2022.P.188).

Maji Safi Group's 10-Year Impact

Cumulative Impact

Over the 10 years Maji Safi Group has now been in operation, we have learned so much and reached millions with our lifesaving WASH education. Each year, we learn from the previous year and adjust programs, measurements, and curriculum to make an even more positive impact on the communities we teach. Overall, including our social media and radio program, we have cumulatively reached 4,829,192 residents and have directly taught 381,040 people WASH lessons (Table 2 and Table 3).

Table 2: MSG's 10-Year Impact (Cumulative numbers from 2018-2022)

Program/ Activity	Number Reached January 2018 – December 2018	Number Reached January 2019 – December 2019	Number Reached January 2020 – December 2020	Number Reached January 2021 – December 2021	Number Reached January 2021 – December 2022	All-time Total Number Reached Per Program (January 2013 – December 2022)
Home Visit	1,323 Family Members	885 Family Members	-	-	-	11,358 Family Members
After School	405 Students	262 Students	-	-	-	10,812 Students
Disease Prevention Center (DPC)	1,193 Visitors to DPCs	645 Visitors to DPCs	347 Visitors to DPCs	1,915 Visitors to DPCs	1,745 Visitors to DPCs	11,125 Visitors to DPCs
Singing and Dance Group (including performances)	4,015 Community Members	4,221 Community Members	-	-	-	22,894 Community Members
Maji Safi Cup	3,822 Participants	-	-	-	-	26,711 Participants
Outreach (events, market visits, stores, salons, and restaurants)	13,022 Community Members	24,540 Community Members	6,986 Community Members	7,780 Community Members	4,881 Community Members	89,441 Community Members
Female Hygiene	4,876 Participants	7,558 Participants	1,916 Participants	-	-	28,366 Participants
Hotline*	1,513 Participants	1,305 Participants	686 Participants	2,010 Participants	3,746 Participants	18,486 Participants
Radio Show Listeners	185,200 Listeners	371,200 Listeners	508,800 Listeners	372,400 Listeners	360,000 Listeners	2,057,100 Listeners

Radio Show Callers	144 Direct Callers	158 Direct Callers	109 Direct Callers	92 Direct Callers	116 Direct Callers	1,079 Direct Callers
Radio Show SMS Messages	372 SMS Messages	753 SMS Messages	562 SMS Messages	586 SMS Messages	186 SMS Messages	2,459 SMS Messages
Social media	-	-	-	-	2,239,927 People	2,239,927 People
Health Screenings	6,911 Screened	8,299 Screened	1,200 Screened	-	-	27,701 Screened
Cholera Outreach	-	-	-	-	-	94,830 Participants
Male Hygiene	2,485 Participants	1,048 Participants	1,573 Participants	-	-	6,226 Participants
Menstrual Hygiene Health (Female and Male Hygiene)	-	-	-	3,161 Participants	6,568 Participants	9,729 Participants
Toilet Project	3,223 Users	4,740 Users	-	-	-	8,138 Users
Water Project	-	5,600 Users	7,210 Users	-	-	12,810 Users
Total reached each year (excluding radio show, but including callers)	42,932 Community Members	59,261 Community Members	20,589 Community Members	15,544 Community Members	21,405 Community Members	381,040 Community Members
Total reached each year (including radio shows)	228,504 Community Members	431,214 Community Members	529,339 Community Members	387,944 Community Members	2,621,332 Community Members	4,829,192 Community Members

Notes:

*Hotline numbers indicate number of SMS messages sent/received and number of incoming and outgoing calls made.

**Radio Show is estimated to reach approximately 6,400 listeners per show at Sachita FM and 15,000 listeners at Bunda FM. These numbers may include repeat listeners.

*** Social media include Facebook and Instagram.

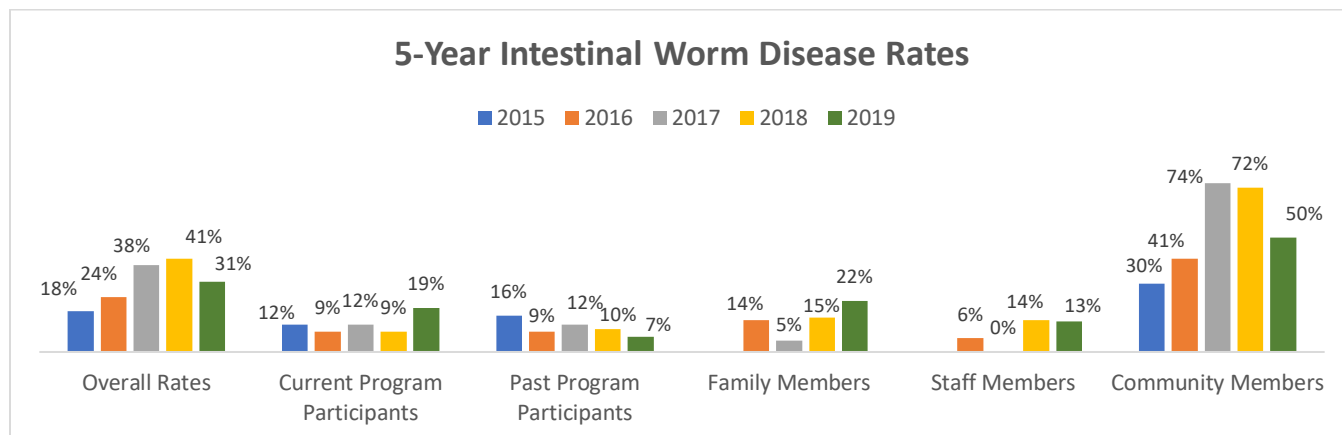
Table 3: Cumulative Number of Total Number of Program Participants Reached

Year	Total cumulative number reached after each year (excluding radio)	Total cumulative number reached after each year (including radio)
2013	10,993	10,933
2014	25,937	57,437
2015	114,075	194,575
2016	186,903	365,403
2017	225,472	634,972
2018	268,404	863,476
2019	323,442	1,290,467
2020	344,091	1,819,916
2021	359,635	2,207,860
2022	381,040	4,829,192

Measuring Our Impact – Health Screening Campaigns

Between 2015 and 2019, MSG conducted annual health screenings and found a consistent pattern: People who have been exposed to MSG’s WASH education are healthier than those who have not received such education, and when MSG is running programs in a community, overall public health improves. During the five years of MSG’s Health Screening Program, we tested 26,650 participants and provided free treatment as needed! Data showed that our disease prevention education is protecting MSG program participants from contracting preventable WASH-related diseases that would otherwise continue to negatively impact their lives and impede development.

Figure 1: 5-Year Intestinal Worm Disease Rates



*Note: Family members and staff members were not tested in 2015. (Community Members = non-program participants).

2022 Overview

When including social media, radio show listeners, event spectators, and public announcement listeners, Maji Safi Group reached 2,621,332 people in 2022. When only looking at the lessons taught directly (in-person), our CHEs reached 21,405 Mara Region community members with lifesaving WASH education in 2022.

MSG continued to maintain organizational partnerships during 2022 despite the pandemic. Our major partners included regional and local government institutions (Rorya District Council, Butiama District Council), the Shirati KMT District Hospital, Tanzania Water and Sanitation Network (TAWASANET), the Tanzanian Menstrual Health and Hygiene Coalition, Street Business School (SBS), Center for Affordable Water and Sanitation Technology, Mighty Ally Institute, Washington University in St. Louis, LUSH Charity Pot, Friends of Tanzania, Posner Center for International Development, UNICEF, National Institute of Medical Research, Africa School Assistance Program (ASAP), ReliefPads, Anuflo Industries, Salama Pads, and SAALT Cups.

MSG maintained its programs and focused on creating sustainable change among program participants. Our participatory model continued to gain acceptance in the community, and our monitoring and evaluation results indicated that Rorya District community members are changing their WASH behaviors and becoming healthier. This is especially noticeable with MSG program participants and participants' families who have worked with MSG over the years. The rest of this report gives a detailed analysis of each program explaining the program's reach, successes, and opportunities for improvement.



MSG's team during the celebration of our 10th anniversary in October 2022.

1. Community Health Educator Program

MSG's goal is to deliver factually correct, consistent, and continued WASH education and services to the Mara Region communities. To reach that goal, we use a Community Health Educator (CHE) model, also known as *Mabalozi wa Maji* in Swahili. MSG provides full-time, quality employment with social security and health insurance benefits for our Community Health Educators and staff. Through holistic community initiatives, they target individuals, households, and institutions, such as schools and health care facilities. MSG has used this model since 2012. It has proven to be highly efficient, effective, and sustainable in promoting water, sanitation, and hygiene (WASH) best practices in the Mara Region.

Our CHEs' knowledge of their culture and communities is coupled with training lessons and seminars to build staff capacity. In 2022, CHEs were trained on schistosomiasis, internal worms, menstrual hygiene health, the use of Microsoft Excel, WASH in health care facilities (WASH FIT 2.0), and planning and budgeting for programs. In addition, our management team received staff development training from CAWST, Mighty Ally Institute, and the Street Business School. Our CHEs and management staff were also trained on driving motorcycles to facilitate reaching areas inaccessible by car due to poor road infrastructure and to reduce the cost of operations by decreasing the use of our program car in proximity areas. Delivery of quality WASH education is paramount to MSG's success and always measured. Hence, our CHEs were evaluated twice in 2022 (every six months) to ensure quality of education and services to the communities where we work.

2. Learning Tools

MSG spreads WASH and disease prevention awareness through various mediums. Wall murals, painted by local artists, provide a constant reminder of WASH best practices. These paintings visually demonstrate disease prevention techniques, such as washing your hands properly, brushing your teeth, and using the toilet, as well as growth and body changes, gender balance, and menstrual management products. In conjunction with other MSG outreach programs, these murals are easily accessible and long-lasting learning tools for entire communities. When MSG builds WASH infrastructure in public and private institutions, such as schools and health care facilities, wall murals are also used to illustrate and promote proper WASH infrastructure and practices, thus serving as learning centers for other institutions and households to encourage replicating the technologies.

In 2022, we painted four murals in the Butiama District: Two murals at the Kukirango Secondary School and two at the Kigori Primary School. They illustrated growth and body changes for girls and boys, gender balance, and Menstrual Hygiene Management (MHM) products.

MSG also continued using 15 learning tools, newly redesigned based off our CHEs' feedback on various WASH-related diseases and practices. In 2022, we distributed 7,383 copies of these tools to community members, averaging 615.2 per month. The tools help program participants fill gaps in health knowledge and can be used for personal referencing purposes and for teaching other community members.

In line with our innovative approach, we continued to use several educational and entertaining games, as well as live performances of dialogues, dramas, songs, and dances, to teach our WASH lessons and attract a wide range of community members to our program activities. Our CHEs created and recorded three WASH-lesson songs that are used to educate the community during events and through our radio shows.

In 2022, we allocated resources to digitalizing all our learning tools to make them shareable online through our website and social media platforms. Hence, our lifesaving education, our work focus, and our methodologies of delivering WASH education are now available to the communities where we work and beyond.



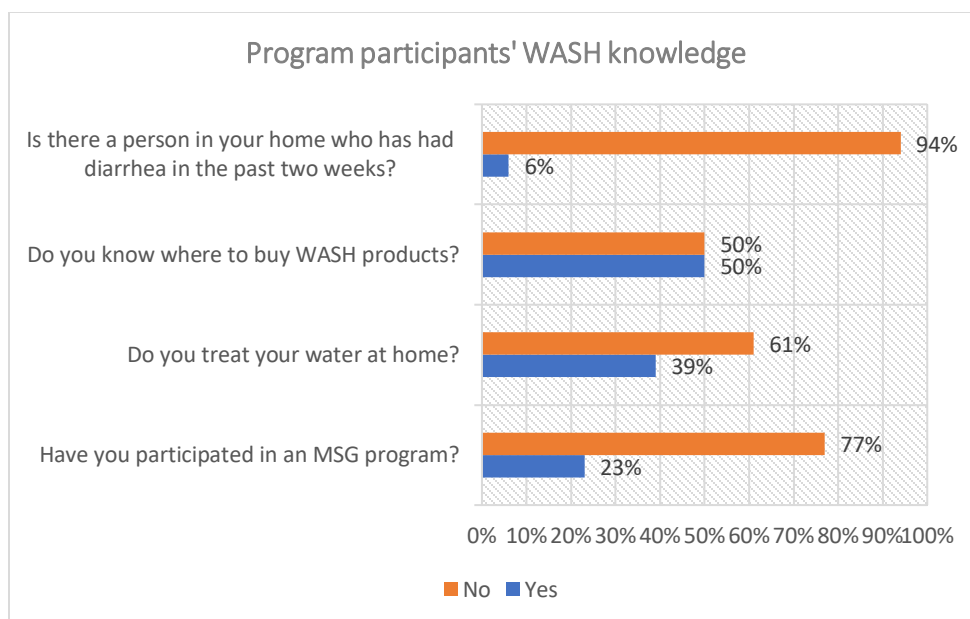
3. WASH in Health Care Facilities

Disease Prevention Centers (DPCs)

In 2022, our Disease Prevention Center Program continued at five locations: The Shirati KMT District Hospital, the Masonga Health Center, the Sokolaboro Dispensary, the Nyambori Dispensary, and the Raranya Dispensary. We also started new DPCs at the Nyamagaro and Nyamtinga dispensaries. The program objective is to provide WASH-related disease prevention education to HCF visitors, patients, and staff. In 2022, the program was implemented for 104 days and reached 1,745 people, averaging 16.7 people per day. We hosted nine demonstrations at the DPCs: seven on Menstrual Hygiene Health (MHH) and two on water, sanitation, and hygiene (WASH). On average, 2.3 demonstrations were conducted per quarter. Also, to increase the number of people we educate about WASH, we extended our education from focusing on visitors to including MHH lessons and teaching clients at the Reproductive and Child Clinics. With the same intention, the program was also conducted in the areas where we run other types of outreach initiatives. Handouts with WASH lessons were given to the Kibuyi and Nyanchabakenye HCFs for them to distribute to the community members.

Figure 2 presents the 2022 Program Assessment of WASH behavior after lessons at DPCs. Of the surveyed program participants, 77% (n=1080) reported that they had never participated in an MSG program before. After having gained this new WASH knowledge, 39% of the participants were treating their water in their homes, 50% knew where to buy WASH products, and 94% reported having experienced no diarrhea cases in their homes within the past two weeks. The numbers indicate that MSG's efforts to reach many community members in the Rorya District and draw them into our programs are effective as the lessons provide substantial WASH knowledge and encourage behavioral change.

Figure 2: 2022 DPC Program participants' knowledge of MSG's programs and WASH-related issues.



WASH in Health Care Facilities

It has always been MSG's dream to help create healthier Tanzanian communities with minimum rates of WASH-related diseases and Healthcare Acquired Infections (HAIs). In 2021, we started a new program: WASH in Health Care Facilities. It aims to improve the quality of care at HCFs by investing in WASH infrastructure, managing infectious waste, and teaching hygiene and environmental cleaning. In 2022, MSG continued the program by supporting HCFs identified in the initial assessment in 2021 as lacking basic WASH facilities. The program aims to ultimately improve quality of care in all health care facilities in the Rorya District, not solely the facilities MSG works with through the Disease Prevention Centers (DPCs). MSG's work in HCFs is intended to model proper WASH infrastructure, waste management, hygiene, and environmental cleaning to be replicated by other HCFs. As MSG is a small, donor-funded INGO, it is unlikely that we alone will be able to fill the gap in WASH facilities on a districtwide scale. Hopefully, government support and other funding will increase as the need is huge everywhere.

In 2022, we supported WASH facility improvements at the Nyambori Dispensary by building an incinerator for waste management, and at the Panyakoo and Bugirei dispensaries by constructing new latrines for patients and improving staff latrines. The constructed latrines have one room for females, one for males, and one for people with reduced mobility. We also helped establish water supply into all rooms and to hand-washing stations. At the Changuge Health Center, we drilled a borehole to create a reliable water supply. The previous water source, rainwater harvesting, is too seasonal and reduces access to quality care during dry season, leading to an increase in WASH-related diseases, including Healthcare Acquired Infections (HAIs).

In 2022, we also created a WASH Facilities Improvement Team (FIT) that includes the District Council Health Management Team (CHMT), health care facility staff, and MSG staff for routinely monitoring and tracking the quality of care and the

sustainability and condition of the constructed WASH infrastructure at the facilities through a monitoring tool known as “Circuit Riders”.



Latrine at the Panyakoo Dispensary supported by the Denver Southeast Rotary Club through our WASH in HCFs program.

4. Information Communication Technology (ICT)

Hotline Program

In 2022, we continued our Hotline Program for educating people in hard-to-reach areas and offering an effective and easy way to reach people, especially men, who are often engaged in the workplace when MSG brings WASH lessons to their areas. They can call MSG for the lessons at their convenience. The hotline is also used to clarify information and answer WASH-related questions.

In 2022, we had 1,228 contact phone calls. Participants in several areas received WASH education 1-2 times. Most participants called from nearby wards or wards that our Outreach Program had previously visited. WASH-related SMS messages were sent 2,518 times. In total, MSG taught 3,746 WASH-related lessons through phone calls or text messages, an increase of 1,736 phone calls and text messages combined from 2021.

We also promoted our hotline numbers through our social media channels and radio broadcasts to increase the number of callers seeking WASH education and technological advice from our Community Health Educators (CHEs).

Calls



1,228

Messages



2,518

Radio Program

In 2022, we continued broadcasting health information through radio shows. We stopped working with Sachita FM due to unreliable service. Instead, we focused on working with Bunda FM whose community program includes MSG's health education and reaches 15,000 listeners per show. We conducted seven Female Hygiene lesson and five WASH lessons, reaching approximately 360,000 listeners across the Lake Zone and the central regions of Tanzania. Each show was recorded and subsequently repeated later during the week. The programs were participatory in nature allowing listeners to make comments and request clarification through calls and messages.

To increase coverage, MSG also approached and started working with Radio Free Africa (RFA) and broadcast two introductory programs. Radio Free Africa is based in Mwanza and covers all mainland regions in Tanzania as well as several neighboring countries, such as Burundi, Rwanda, Uganda, and Kenya. RFA has an approximate reach of 8–11 million people.



360,000

People reached

Social Media

In 2022, MSG continued using the social media company *BB Creative* to manage our social media pages and website. On a daily basis, the company posted content related to MSG's WASH lessons and the celebration of national and international events, such as International Women's Day, Water Week, International Workers' Day, Menstrual Hygiene Day, Global Handwashing Day, World Toilet Day, World Aids Day, etc. In total, we posted more than 250 times on our social media channels, reaching 2,239,927 people: 1,702,894 people on Facebook, 537,033 people on Instagram. The audience consisted of 68.1% men and 31.9% women between 25 -34 of age.

In the future, MSG plans to increase social media reach in the Mwanza area by engaging public and private institutions such as health care facilities, hotels, schools, etc.



5. Outreach

Since 2012, MSG has used our Outreach Program to target markets, village centers, restaurants, stores, salons, community groups, and community events to help prevent WASH-related diseases and promote health education in the Mara Region. In 2022, we reached 4,881 community members through our Outreach Program in the Rorya District.

Market and Village Center Days

In 2022, our CHEs spent 66 days teaching WASH lessons at 29 markets and village centers in the Rorya District. Market/Center days are either half or full days of work, depending on the size of the market/location. Topics include water treatment (e.g., boiling water, using chlorine tablets, etc.), the fecal-oral route, and preventing WASH-related diseases, such as cholera. The CHEs also use this time to sell chlorine tablets, various feminine hygiene products, and soap to help increase the availability of WASH products in the communities. In 2022, we reached 1,263 people with WASH education through community groups and meetings and 3,108 people on market/center days, averaging 55 people per day.

Shops, Restaurants and Salons

In 2022, MSG visited and taught WASH lessons at 16 salons, 29 shops, and 25 restaurants for two days each. The purpose of teaching restaurants, shops, and salons is to ensure compliance with WASH best practices to protect the health of staff and customers. WASH lessons include hand washing, water filtering, treatment and storage, food preparation, and toilet facilities. On the first day, the owners and staff were tested on their WASH knowledge before lessons, and on the second day on their WASH knowledge after lessons. Participants who scored 65%-100% correctly on their final evaluations were awarded certificates to recognize their WASH knowledge and their role as WASH ambassadors in their communities. The average score was 65%, the highest score was 100%, and 70 establishments received certificates.

Restaurant Assessment Highlights:

As described above, restaurants are taught twice by our Community Health Educators and assessed on the shift in WASH knowledge and behavior between having received no lessons versus two days of lessons within a quarter. The 2022 results show that there was a 20% difference in filtering drinking water between pre-lesson (80%) and after the second lesson (100%). The restaurants that did not filter their water before the first lesson (20%) had already corrected their behavior by the start of the second lesson (*Figure 3*). Water treatment methods prior to the first lesson varied: 28% of the restaurants did not treat their water, 32% boiled it, and 20% used WaterGuard. After the second lesson, the percentage of restaurants that did not treat their water was 4% (down from 28%), the percentage of restaurants boiling their water was 40% (up from 32%), and the percentage of restaurants using WaterGuard was 40% (up from 20%) (*Figure 4*).

Figure 3: Filtering Drinking Water

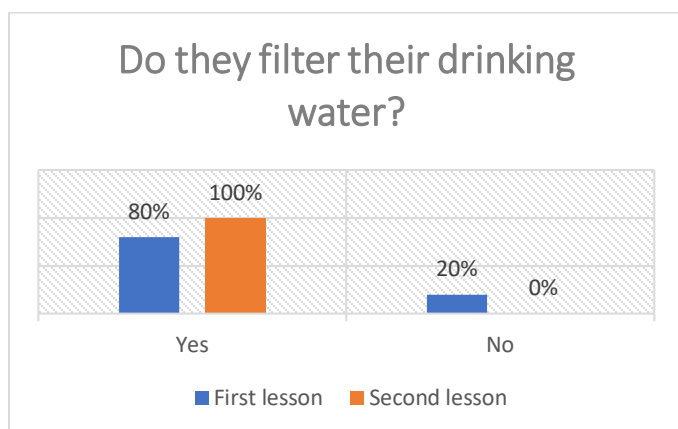
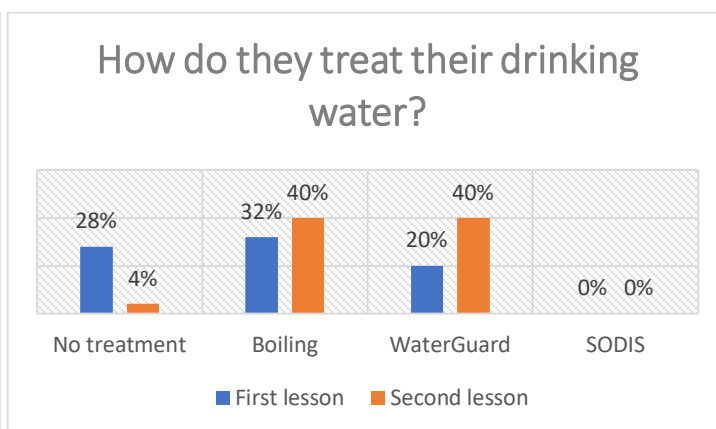


Figure 4: Drinking Water Treatment Method



The assessment results for handwashing also indicated a high level of adherence to WASH best practices among restaurant owners and their employees. After the second lesson, 84% of restaurants treated their water for handwashing compared to 64% before the first lesson. In using soap when washing hands, there was a small drop from 100% before the first lesson to 96% after the second lesson (*Figure 5*).

Our CHEs assessed food hygiene and other hygienic issues in the restaurants. The results showed a high level of food hygiene practice: 100% covered their food both before and after receiving lessons; after the second lesson, 96% used utensils when serving food (up from 84%); after lessons, 60% covered their hair while serving food (up from 40%); and only 4% of the restaurants had many flies before and after receiving lessons (*Figure 6*).

Figure 5: Hand Hygiene

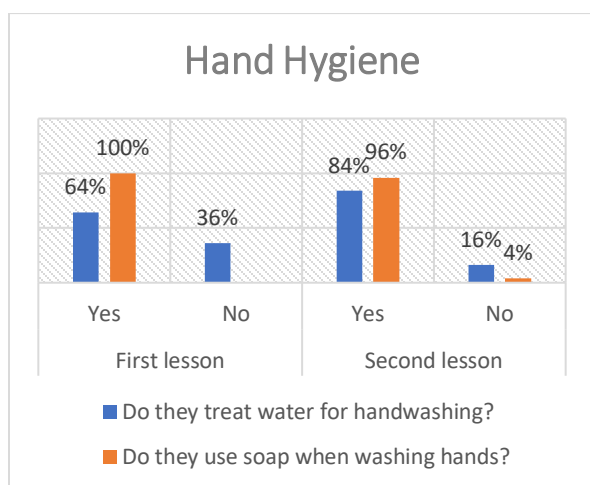
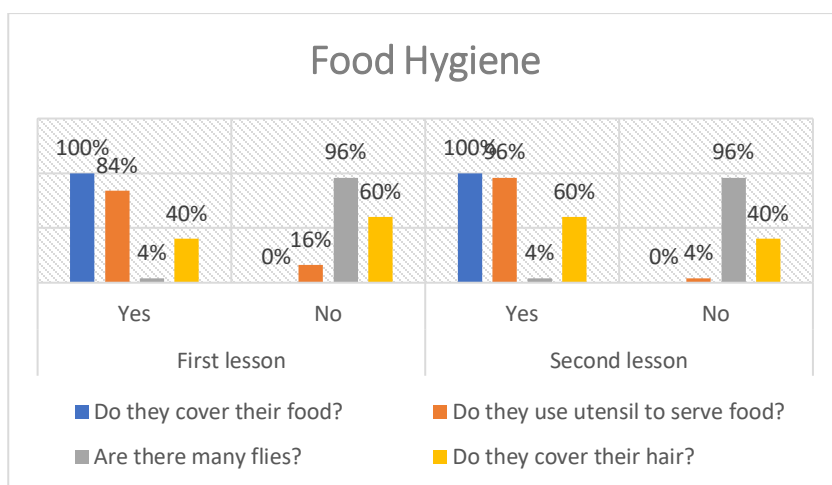


Figure 6: Food Hygiene



Both lessons included proper dish management. The results indicated that 96% of the restaurants washed their dishes with soap before lessons and 92% after the second lesson. Before lessons, 12% of the restaurants used treated water to wash their dishes. After the second lesson, 24% used treated water to wash their dishes (*Figure 7*).

The assessment also considered sanitation and waste management as key components in WASH best practices. The results indicate that 76% of the restaurants had toilets before lessons with an increase to 80% after the second lesson. Before

lessons, only 20% of the restaurants had areas for wastewater management. This percentage did not change from receiving lessons (*Figure 8*).

Figure 7: Dishwashing Practices

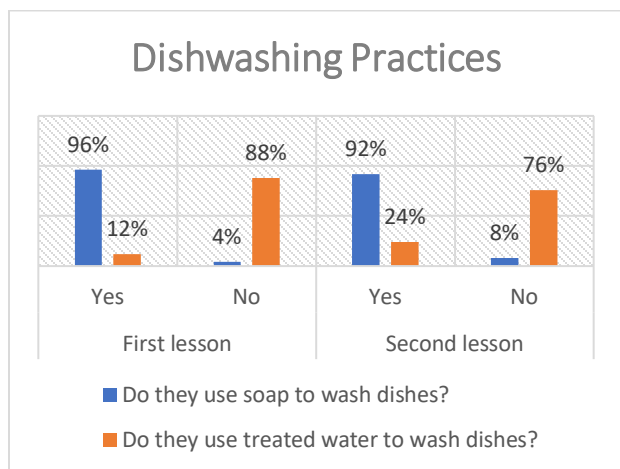
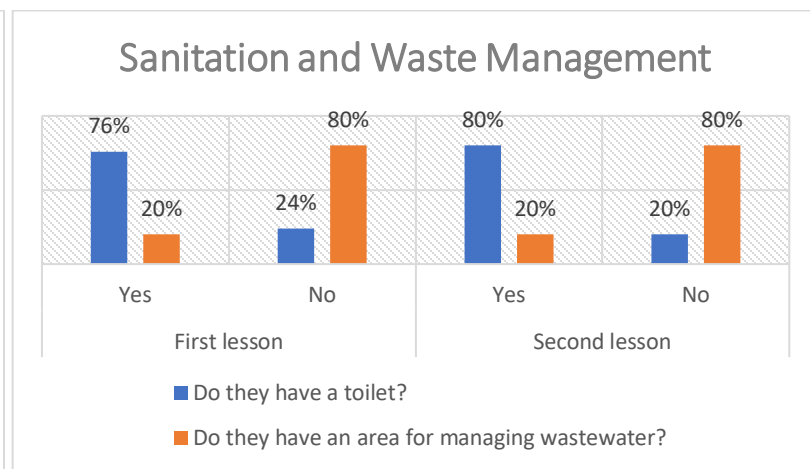


Figure 8: Sanitation and Waste Management



Salon and Store Assessment Highlights

Like restaurants, salons and stores are taught twice by CHEs and assessed on WASH knowledge before lessons and after the second lesson. The 2022 results showed encouraging results from the lessons. Availability of handwashing stations increased from 29% before the first lesson to 62% after the second lesson. The use of soap for handwashing increased from 67% before the first lesson to 84% after the second lesson assessment (*Figure 9*).

The results also indicated improvement on sanitation. The percentage of salons/stores having access to toilets increased from 80% before the first lesson to 87% after the second lesson. In addition, the percentage of salons/stores using their own toilets increased from 27% before the first lesson to 31% after the second lesson (*Figure 10*).

Figure 9: Salons/Stores Hand Hygiene

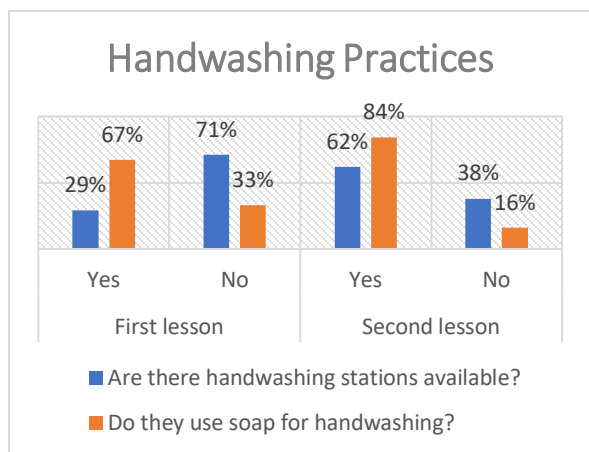
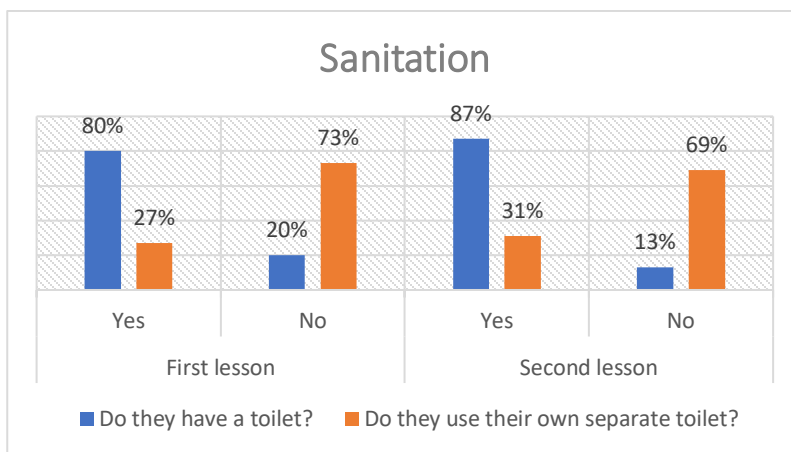


Figure 10: Salons/Stores Sanitation



Other Outreach events

MSG also organized and participated in the following outreach events:

- Conducted six village meetings in the Ochuna, Mori, Kyamwame, Komuge, Kisumwa, and Ruhu villages, reaching 930 community members – 495 males and 435 females.
- Taught two Beach Management Units (BMUs) – one in Kyawigoro in the Baraki Ward and one in Busanga in the Nyamtinga Ward, reaching 96 BMU members.
- Organized a World Water Day celebration event at the Mkengwa Beach, reaching 510 community members – 297 males and 213 females.
- Taught six groups with signed agreements in proficiency in WASH behaviors in the Kisumwa, Kyang'ombe, Rabour, Kyamwame, and Chereche wards, reaching 237 community members.

6. Female and Male Hygiene Program (Menstrual Hygiene Health Program)

Maji Safi Group designed its Female Hygiene Program in November 2013 to promote a safe environment where girls and young women, ages 11-18, can learn about Menstrual Hygiene Health (MHH). The overall objective of this program is to reduce school absences/dropouts related to menstruation by educating girls and young women about MHH, providing them with sanitary materials, supporting them in their studies, and empowering them to become leaders and community change makers. MSG has continued partnerships with manufacturers and suppliers of sanitary materials, like Afripads, HQ, Anuflo, Always, Softcare, Reliefpads, and Saalt cups, to ensure availability of and access to a variety of sanitary materials based on preference. The first MSG Female Hygiene lessons were created through a participatory process based on Marni Sommer's *Grow and Know* curriculum, which was developed specifically for teaching Menstrual Hygiene Management in Tanzania. Since then, MSG has continued to use and improve Sommer's *Grow and Know* curriculum for this program.

In 2017, MSG started a Male Hygiene Program after our CHEs and community stakeholders voiced a strong interest in having an equivalent program for boys and young men in schools and communities. This program provides boys and young men with education about male and female anatomy, puberty, changes in their bodies, personal hygiene, respect for women, and the importance of breaking the silence around menstruation. By involving both genders in the conversation, Male Hygiene Program participants are now becoming more aware and knowledgeable about menstrual hygiene management and female and male hygiene issues. As the young boys become men, they can be supportive of female peers and family members.

Throughout 2022, the Female and Male Hygiene Program (MHH) operated in both the Rorya District and Butiama District. In Rorya, it continued to operate in eight schools (Kinyenche, Ngasaro, Sarungi, Nyamtinga, Bukama secondary schools and Bubombi, Omoche, and Bwiri primary schools), and we added three new schools (Adam Malima and Shirati Sota secondary schools and Ryagati primary school). Lessons were also taught at MSG's office most Saturday afternoons. We reached 5,247 students (2,718 girls and 2,529 boys) through program activities, such as School Health Clubs for program participants and school meetings for non-program participants, and 897 community members through events and special

activities, such as teaching women's groups, Dining for Female and Male Hygiene events, Decent Girl/Boy contests, and celebrating Menstrual Hygiene Day.

MSG renovated three former classrooms into Menstrual Hygiene Health (MHH) Labs at Tai, Katuru, and Sarungi secondary schools to create safe spaces in school settings where students can receive guidance as well as learn about and discuss puberty and menstruation freely. These spaces also serve as changing rooms for girls during menstruation. Increased use of MHH Labs in school settings will lead to increased menstrual hygiene management facilities, increased confidence in girls, reduced school absenteeism, and a boost to breaking the silence around menstruation in schools and communities.

In the Butiama District, the MHH Program operated in six schools: Butiama, Kiabakari, Kukirango, and Kyanyari secondary schools and Kigori and Makore primary schools. We reached 403 students through program activities, such as School Health Clubs for program participants and school meetings for non-program participants, and 21 community members through reflection meetings.

Through the program, we were able to provide scholastic materials as incentives for students to continue their participation in the MSG School Health Clubs. We also provided reusable sanitary pads for female participants to help them manage their menses.

[Events/Specific Activities 2022](#)

897 People Reached

- Conducted one inter-school competition at the Bwiri Primary School between Bwiri and Bumbombi primary students, reaching 71 MSG School Health Club members (26 boys and 45 girls) and nine community members (6 males and 3 females).
- Conducted one Decent Girl/Boy event in the Rorya District at the Masonga Health Center, reaching 39 program participants (16 girls and 23 boys) and 253 community members (63 males, 88 females, 42 boys, and 60 girls).
- Conducted two days of MHH training for schoolteachers and education officers from the district and ward level in Shirati, reaching 42 participants (25 males and 17 females). The training aimed at building teacher capacity for teaching in and supervising School Health Clubs as well as ensuring sustainability.
- Conducted a refresher course in the Rorya District, reaching teachers from 16 schools as well as education officers from seven wards.
- Conducted one MHH Program reflection meeting in the Butiama District with schoolteachers and MSG School Health Club representatives. In the latter category, 21 participated (15 girls and 6 boys).
- Engaged four women's/girls' groups from religious institutions: Ngasaro - Compassion Tanzania, Kabwana SDA Church, and Sidika SDA Church, reaching 79 participants (24 girls, 32 boys, 20 females and 3 males).
- Sent two MSG representatives to participate in the national MHH event held in the Kigoma Region to celebrate Menstrual Hygiene Day on May 28, 2022.

- Conducted an event at the Shirati Sota Primary School to celebrate Menstrual Hygiene Day on May 28, reaching 379 community members. Fifty were MSG program participants (20 boys and 30 girls), and 329 were non-program participants (166 males and 163 females).
- Conducted a regional meeting involving a regional team: one organization implementing MHH programming in the Bunda District and the School WASH coordinators from the Rorya and Butiama Districts. Nine participants attended the meeting – five regional, two district, and two representatives from Project Zawadi.
- Conducted one reflection meeting about our MHH Program for schoolteachers in the Butiama District. Twenty-one MSG School Health Club representatives participated in this meeting (15 girls and 6 boys).



In 2022, we piloted MHH Labs in three secondary schools: Sarungi, Katuru and Tai.

7. The Oboke Water Project

Through 2022, our borehole in Oboke has produced 11,581,000 liters of clean water – 2,075,000 liters were sold, and 9,506,000 liters were provided free of charge to community members in Nyamagongo, Oboke and Kabwana. In addition, five households are connected to the water system for private use. The water system operates six days a week and has collected over \$1,900 since 2019. The Oboke water system serves as a backup-water supply option to the community when the government system fails to provide water.

8. WASH Hubs

In 2021, MSG introduced a new innovative concept known as a ‘WASH Hub’ – a one-stop resource center for rural communities with many essential services under one roof. Services include, but are not limited to:

- Water – providing clean water for drinking and domestic use.
- Agriculture – providing new agricultural technologies, inputs (seeds and fertilizers), and result-based financing to increase yields and income.
- Sanitation – offering toilet options and financial support opportunities for building one (or two).
- Hygiene – using our Community Health Educators’ 10 years of experience in teaching WASH information to educate WASH Hub visitors and the surrounding communities about healthy habits, disease prevention, and MHH.

A WASH Hub stands in contrast to many traditional and well-intentioned charity efforts that hand out money and give advice. MSG owns the land for the first WASH Hub in the Rorya District, and we started the initial phase of constructing this first community agriculture and disease prevention center in 2022: borehole, laundry block, and office building. The WASH Hub started operations during the first quarter of 2023.

We believe that the best way to alleviate poverty is by providing people with technology, education, access to finance, and good WASH infrastructure and knowledge, so they can generate income to improve personal and public health. We believe WASH Hubs will serve this objective by facilitating more prosperous and healthier communities. Once set up and operating, a WASH Hub has the potential to be a market-driven model that can fund itself. In addition to covering their own expenses, WASH Hubs will provide both our vendors and clients with new income-generating activities, such as produce from using irrigated agriculture, selling WASH products, and selling agriculture inputs and tools.



The Nkoma Ward Councilor at the opening of MSG’s first WASH Hub.



Nkoma villagers using our laundry block at the MSG WASH Hub.

9. Conclusion

MSG is grateful to our supporters, including donors, partners, and the Mara Region community. Your support gives us a precious and constant incentive to work. Despite challenges, such as COVID-19, you have always been there to support and encourage us to provide Tanzanian communities with the WASH knowledge and improved health care facilities needed to relieve the economic burden they otherwise experience from water-related diseases.

In 2022, your generous support enabled us to bounce back from the negative effects of COVID-19 and impact 21,405 community members directly and 2,621,332 community members indirectly. Using our Community Health Educator model, our team aims to impact even more community members with lifesaving education in 2023 through innovative co-creation, collaboration, and partnerships with stakeholders and government in promoting WASH knowledge and access to decent WASH facilities in Tanzania.