

### Annex III

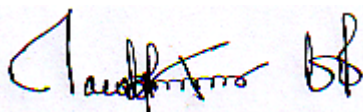
### COMPLETION REPORT

#### 1. Please provide a copy of the grant budgeting expenses (you may attach it to this report)

At the end of the financial report, please add an acquittal declaration signed by an appropriately authorised officer of the funded organisation stating the following:

'I declare that:

- this report is complete and accurate
- the acquittal is a correct record of income and expenditure for this project
- the expenditure detailed in the acquittal has been extracted from the organisation's financial accounting records
- a detailed record of income and expenditure at an individual item level is available
- the funds allocated to this project were used in accordance with the GAL and the Application Form, including any variations to the project formally approved by Stop TB Partnership in writing.'



- Signature:
- Full name of authorised officer: **Jacob Aloysius Kayombo**
- Position in the organisation: Chairperson and Project Coordinator
- Date: 5<sup>th</sup> March 2011

#### 2. Narrative Report

*You may attach up to 5 additional pages for this section.*

##### 2.1 Summary Table

Objective	Activity	Planned Output	Output achieved	Baseline outcome indicator	Outcome achieved so far (if any at this point)
Build and create linkages among community groups to create a democratic forum where the voice and a	Conducting ACSM Skills building training to 240 representatives from the networks of the affected communities based in Dar es Salaam and coast region.	120 patients/networks representative trained and ready to carry out TB/HIV ACSM activities.	2 workshops conducted & 120 patients/networks representative trained and ready to carry out TB/HIV ACSM activities.	1 report on the patients led ACSM activities	120 representatives from CSOs and patients have been empowered, 6 ACSM plans developed & 6 activities being carried out

**Challenge Facility for Civil Society (CFCS)**

**Name of Organization:** Tanzania Public Health Initiative

<p>meaningful participation of civil society, affected communities especially TB patients act as a catalysts in the fight against TB and HIV/AIDS</p>	<p>Organize 2 meetings to 80 representatives from networks of the affected communities to address community needs and set a plan of action on how they can collaborate with National/local TB control programs to contribute on TB control.</p>	<p>2 meetings involving 80 representatives from the networks of the affected communities</p>	<p>A joint message to the NTP that outlines the communities needs as well as things that communities especially TB patients and people living with HIV/AIDS can commit to collaboratively strengthen the TB/HIV programs has been written and will be sent to NTP and partners after World TB day.</p>	<p>A joint letter that outlines the community needs as well as things that CSOs can commit to do to strengthen the TB program developed</p>	<p>A joint letter was finalized by December 2011 and will be submitted to NTLN through district TB program manager during the World TB day of 2011.</p>
	<p>Conducting 2 meetings to representatives from NGOs, CBOs, CSOs, People living with TB and HIV for the purpose of enhancing partnership.</p>	<p>2 meetings bringing together 80 partners around TB and HIV/AIDS conducted</p>	<p>Promoting ongoing discussions about enhancement of network of community based organizations dedicated to lead the fight against TB and HIV/AIDS.</p>	<p>6 reports of activities done by members of the partnership at the grass-root level</p>	<p>Promoting ongoing discussions about enhancement of network of community based organizations dedicated to lead the fight against TB and HIV/AIDS.</p>

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	Carrying out capacity building training on Human rights to 120 TB patients and TB/HIV on the rights and responsibilities based on patient charter	2 capacity building training carried out to 120 TB patients and people living with HIV/AIDS on the rights and responsibilities of patients.	2 capacity building training carried out to 120 TB patients and people living with HIV/AIDS.	Training report	120 TB patients and people living with HIV/AIDS have been empowered on the rights and responsibilities of TB patients.
	Conducting a Final evaluation meeting with stakeholders from Communities.	1 meeting attended by 40 stakeholders from TB/HIV program and community.	1 meeting conducted attended by 40 stakeholders from TB/HIV program and community.	Final report.	The project has been evaluated report written and shared to stakeholder.

**2.2 For you, which are the most important expected and unexpected outcome(s) of the funded grant (different from 2.1)**

*2.2.1 The most important expected outcomes.*

Through activity under CFCS funding, TB knowledge among communities has been increased this is both directly and indirectly:

**Directly:** The knowledge of people who have been attending the training and meetings has been assessed by using evaluation tool and finally documented. Experience gained from pre and post training evaluations showed that, the knowledge of participants before training sessions was low as opposed to higher knowledge after training sessions. This obviously indicates that, training and meetings have been effective in scaling up understanding of TB/HIV.

**Indirectly:** According to reports from community based organizations and patients who have been integrated in training and later volunteered to train members of their organizations and community, there is an increase of awareness about TB in families. Teams of former TB patients who work as home care service providers to TB and HIV/AIDS patients reported to have visited more than 350 families provided them with IEC materials; communicated information about prevention, treatment and management of both TB/HIV.

Build and create linkages among community groups

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### **2.2.1 The most important unexpected outcomes**

Implementation of activities through CFCS has opened the doors for TPHI to advance in advocating for TB program. It has as well opened the doors for TPHI to partner with individual persons and organizations which have interest in fighting against tuberculosis.

### **2.3 Did your project encourage community members to take action to address a health issue? Please explain:**

The project encouraged community members to take action to address health issues by building their capacities to understand various health related issues such as basic TB/HIV science and more importantly ACSM skills to take positive actions that can address such issues.

On the basis of the main objective of the project, linkage among the community members, CSOs and patients has been enhanced. Linkage among community members will result into mutual collaboration; such is anticipated to be a strong tool that can enable community members working in unity to address health issues.

### **3. Some results (you may add more results related to HIV or MDR-TB, as required)**

	<b>Total number of persons:</b>
<b>Approximate number of beneficiaries reached in person:</b>	<b>420</b>
i) ACSM Skills building trainings	120
ii) Meetings to representatives from networks of affected	80
iii) meetings with representatives from NGOs, CBOs, CSOs, People living with TB and HIV	60
iv) capacity building training on Human rights	120
v) Final evaluation meeting	40
<b>Approx. number of beneficiaries reached through other means(ACSM carried out by empowered CSOs):</b>	<b>513</b>
i. Family based social mobilization and communication program.	92
ii. Sensitization of community leaders	30
iii. Behavior change communication program	44
iv. Dialogue with traditional healers	15
v. Community meeting with HI/AIDS &TB/former patients	332
<b>Approx. number of people that received printed information about TB:</b>	<b>670</b>

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**4. Did you find a way to sustain the activities you started with the grant? Please describe it:**

The project has sorely been a skills building opportunity to communities. Capacity building trainings have all been conducted for the purpose of endowing community members with adequate and efficient skills to carry out the same activities when CFCS funding ends.

Our organization has been reaching other funding organizations for the purpose of seeking more funding to enhance the good results gained from CFCS funded project.

On the basis of successes attained from this reported project. TPHI is once again planning to apply to Stop TB partnership (CFCS) in order to scale up partnership among CSOs and communities to respond TB.