



T-MARC TANZANIA

Tanzania Marketing and Communications

Serving Communities, Improving Lives

ANNUAL REPORT 2014

About T-MARC Tanzania

T-MARC Tanzania is an independent, Tanzanian, not for profit, non-governmental organization (NGO) working in Tanzania, for the benefit of Tanzanians. T-MARC employs a dynamic approach, bringing together public and private stakeholders to develop and expand consumer markets for a broad range of social products. T-MARC also promotes behaviour change through evidence-based practices that contribute to a positive health and social impact within the development field. These practices, products and strategies are in the areas of infectious diseases like HIV/AIDS and malaria, reproductive health, water & sanitation and nutrition. The interventions are specifically targeted at vulnerable, at risk and low income audiences.

Mission

T-MARC Tanzania's mission is to successfully contribute to the well-being of all Tanzanians by developing effective and diverse partnerships between multiple players in the commercial, NGO, governmental and public sectors to implement social marketing and communications solutions that address key health, social and economic challenges. T-MARC facilitates the growth of the "full market" for an extensive range of social products and services; and works to increase the practice of healthy behaviours.

Vision

T-MARC Tanzania is committed to becoming a leader in creating sustainable solutions by utilizing the Organisation's "Four Ps" Approach:

1. **People:** Reaching all Tanzanians with special focus on the under-served and most in need, while promoting continued growth in staff expertise.
2. **Partnerships:** Promoting new collaborations with partners from the public, private and non-profit sector, working with a diverse group of donors, and collaborating with local government agencies, NGOs, CBOs, commercial entities and others throughout Tanzania.
3. **Portfolio:** Serving the needs of Tanzanians through a variety of health, social and economic activities focused on social marketing, communications and partnerships.
4. **Place:** Facilitating reach throughout Tanzania with extensive knowledge of the country and areas where the most at risk groups reside; using innovative technologies to produce research data linked to region and location to improve policy practices and results.

Values

T-MARC Tanzania holds itself to the highest levels of integrity and has a strong commitment to the following values:

1. **Leadership** – T-MARC Tanzania strives for top results in the initiatives it undertakes; stepping forward with innovative ideas, bringing together new partners and staying on the cutting edge of innovations in social marketing.
2. **Partnership** – T-MARC Tanzania is part of a larger team; working with stakeholders,

government donors, collaborating agencies and others to combine resources, strengths and skills to achieve success.

3. **Accountability** – T-MARC Tanzania is committed to achieving the highest level of transparency and ethics in all financial, management and partnership activities undertaken – holding itself responsible to donors, partners and beneficiaries of its programs.

4. **Respect** – T-MARC Tanzania puts respect for the people of Tanzania first - revering diversity, valuing strengths and skills and working collaboratively with the beneficiaries of its programs and products.

5. **Passion** – Staff at T-MARC Tanzania maintain personal and professional enthusiasm for their work and are driven by a sense of purpose and a desire to do all that they can to help improve the social conditions of Tanzanian families.

Objectives

The primary objectives of T-MARC Tanzania are to:

1. Develop and manage a cost-effective marketing, sales, and distribution networks that will improve access by key populations to branded products and services addressing health, social and economic challenges.
2. Develop and manage broad-based social marketing and behaviour change communication initiatives that enhance accurate knowledge of Tanzanians about core issues related to branded social products, health and economic issues, including persuasive information to encourage and sustain healthy behaviours.
3. Establish and maintain practical partnerships with international agencies and local organizations from Tanzania's commercial, non-governmental and/or faith-based sectors for key roles in planned and ongoing programs.

Business Philosophy

T-MARC's business philosophy is to find cost-effective sustainable solutions which best address the needs of the Tanzanian communities it serves, by fostering effective, strategic, public-private partnerships.

History and Ownership

T-MARC Tanzania was founded and registered as the T-MARC Company on 1 April, 2007. The Organisation arose in 2004 from the Tanzania Social Marketing And Communication (T-MARC) Project that was managed by the Academy for Educational Development (AED) with funding support from the United States Agency for International Development (USAID). T-MARC was Tanzania's first independent, locally run social marketing organisation. The T-MARC Company was later re-registered as a not-for-profit non-government organisation on 13 May, 2011, changing its name to T-MARC Tanzania.

This report summarizes the activities and achievements made by T-MARC in its different programs for the period October 2013 – September 2014. The specific project reports contained within are;

- Tanzania Social Marketing Project (TSMP)
- Husika Project

Governance:**Board of Directors**

The main responsibilities of the Board of Directors as outlined in Articles 19 – 24 of the T-MARC Constitution are directing and controlling the organisation with oversight in Management, Financial, Legal matters and Policies.

T-MARCs Board of Directors comprises

Mr Charles Singili
(Board Chairperson)
Managing Director,
Azania Bank Ltd



Dr. Benett Fimbo
(Board Member)
Program Advisor,
National AIDS Control
Program MoHSW



Ms. Joyce Mhavile
(Board Member)
Managing Director,
ITV Radio One



Mr. Alex Mgongolwa
(Board Member)
Managing Director,
Adili Associates



Awaichi Mawalla
Marketing Director
Tanzania Cigarette
Company Limited



Mr Heri Bomani
(Board Member)
Managing Director,
Pangani Advisory



Aida Nanguma Kiangi
(Board Member)
Wind Development
Manager (East Africa),
Wind Lad Systems



**Dr Mohammed Ally
Mohammed,**
Board Member (Director
of Health and Quality
Assurance MoHSW)



Ms Diana Kisaka
(Board Member)
Managing Director,
T-MARC Tanzania

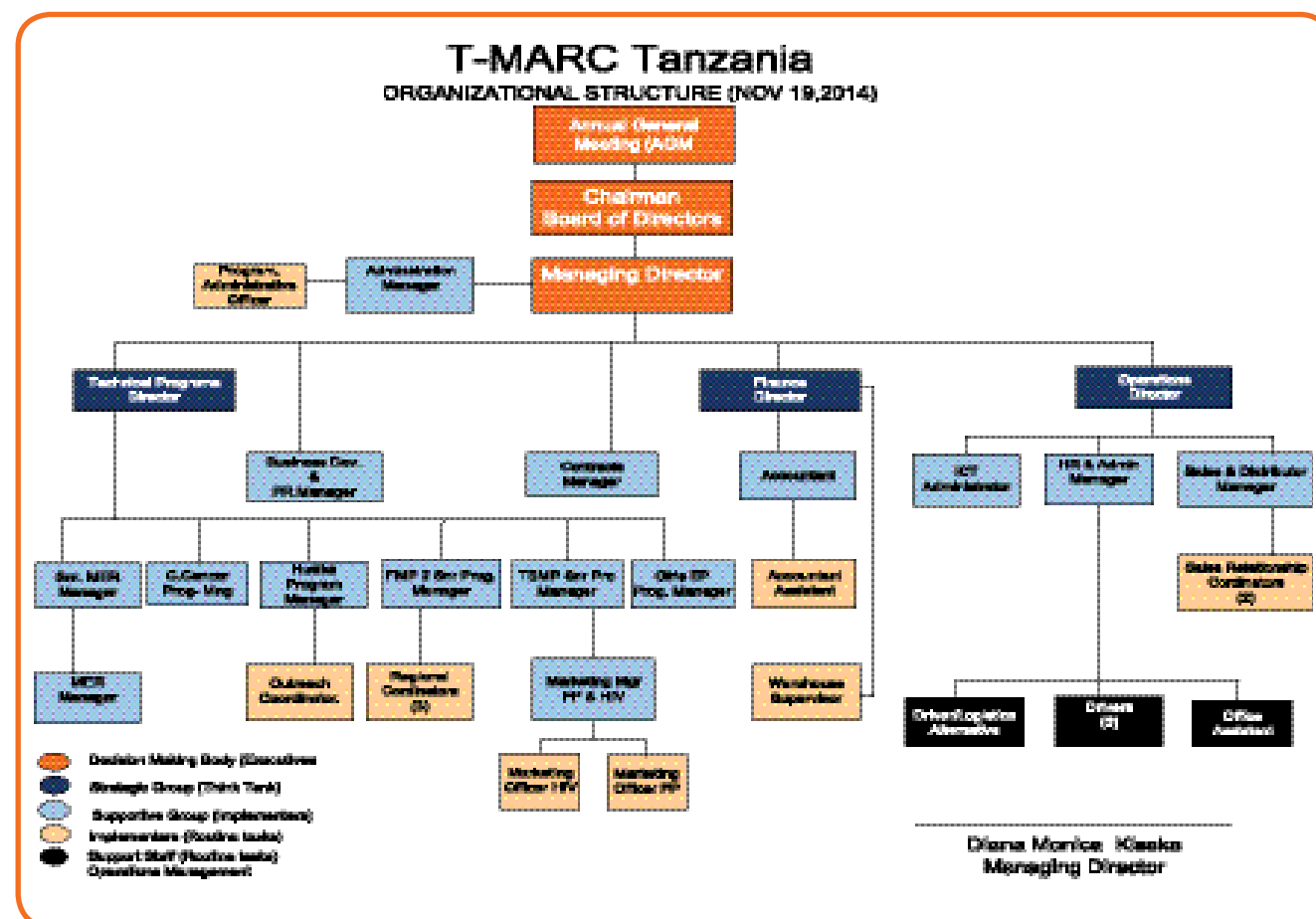


Athanasia Aloyce Soka
(Board Member)
Coordinator
Civil Justice System ,
Law Reform
Commission of Tanzania



Mr Tumaini Kimasa
(Board Member)
Operations Director,
T-MARC Tanzania

Message From the Board Chairperson



Welcome to our T-MARC Annual Report and Financial Statements - 2014 which highlights the successes registered in achieving T-MARC Tanzania's goal of having a positive impact on the health and lives of Tanzanians.

T-MARC has a wealth of experience in implementing behavior change interventions targeting key populations (high risk groups) and the general population. Our core strength lies in evidence based programming in behaviour change communications, health product development, health promotion, social marketing, research, monitoring and evaluation.

T-MARC continues to work closely with donor organizations and other contractors to focus on social marketing and behaviour change aiming at improving the quality of Tanzanian's lives. To this end, T-MARC has this year alone partnered with a wide range of public and private sector partners including the Ministry of Health and Social Welfare, the United States Agency for International Development (USAID), the Centre for Disease Control and Prevention (CDC), the Pink Ribbon Red Ribbon Initiative (PRRR), The Bristol Myers-Squibb Foundation (BMSF) and the Vodacom Foundation.

T-MARC would like to express gratitude for the financial, logistical and technical support received from the Government of Tanzania and the donor community. Your invaluable contributions have been a key factor in actualising our program plans for this year.

T-MARC has also implemented programs in collaboration with a number of local and international non-governmental organisations of varying size, scope and experience. A number of vendors and suppliers of various equipment and services to T-MARC, financial institutions and individuals have also played various roles in making this year a success for T-MARC.

As we present the Annual Report 2014, we also take this moment to thank all our other partners who in one way or another contributed to the achievements highlighted herein. We value your partnership and invite you to join hands with us in the journey ahead.

Mr.

**Charles Singili,
Board Chairperson.**

Foreword by the Managing Director

Welcome to this issue of the T-MARC Tanzania Annual Report for 2014.

We remain thankful to the Almighty God who has enabled us to successfully complete most of the objectives that were set for this financial year. This year has seen a number of significant changes within the Organisation, key amongst these being the implementation of changes in T-MARC's operations and structure to ensure organisational sustainability. These changes are in line with the recommendations contained in an evaluation of the Organisation's operations that was carried out by a consultant.

Another significant change has been the closure of some of the programs that came to the end of their natural program cycle. T-MARC is happy that these programs achieved the goals for which they were conceived and implemented.

A number of changes have also been noted within the overall operating environment including shifts in donor priorities and program goals which have led to changes in how T-MARC also designs and implements its programs. T-MARC has successfully taken these changes in stride with the growing nature of our operations and the steadfast commitment to serve the needs of communities in Tanzania, even as we strive to attain Organisational sustainability.

As such, T-MARC remains well placed to deliver on our core mission of forging diverse partnerships to implement social marketing and behaviour change communication solutions that address key health, social and economic challenges in Tanzania.

This Annual Report for 2014 highlights milestones achieved by the programs implemented by T-MARC in the past year.

We take this opportunity to thank our partners for the continued support received in serving the communities we are committed to.



Diana Monica Kisaka
Managing Director

Achievements for Year 2014

TANZANIA SOCIAL MARKETING PROGRAM (TSMP)

Improving the Health Status of Tanzanians Through Measurable Behaviour Change Communication and Social Marketing

T-MARC works in collaboration with PSI Tanzania to support the goals and objectives of this five-year program funded by the United States Agency for International Development (USAID).

The overall goal of this Tanzania Social Marketing Program (TSMP) cooperative agreement, is to improve the health status of Tanzanian families, with the objective of ensuring measurable behaviour change (including use of effective health products) among project target groups. To support this goal and project objective, the TSMP works to ensure achievement of the following intermediate results (IRs):

IR 1 Aggressively expanded impact of targeted social marketing initiatives that are aligned to measurable behavioural outcomes in HIV/AIDS, FP/RH, child survival, and malaria.

IR 2 Local capacity (civil, public, and private) to sustain social marketing activities in Tanzania strengthened to achieve public health outcomes.

The TSMP team achieves these results by leveraging the "Total Market Approach" (TMA)—supported by social marketing—to correct market inequalities and develop more sustainable solutions to health problems by providing customers with wider and more effective choices. The goal of the TMA is to achieve a marketplace where all segments of society are reached with high quality products and services according to their ability to pay. In a balanced TMA, the poorest access products and services through free distribution, those who are somewhat better off through subsidized products, and those with greater ability to pay through commercially-distributed products. Social marketing organisations are essential to growing the overall market volume by attracting new user groups into the market and opening up new markets, particularly in rural areas through community-based distribution.

Under the leadership of Population Services International (PSI), the TSMP facilitates the TMA by providing direct technical support to two Tanzanian organisations, T-MARC Tanzania and PSI/Tanzania, as well as engaging key stakeholders from the public, non-profit and private sectors to improve market segmentation, subsidy strategies and distribution systems.

HIV/AIDS Prevention

Dume Male Condoms

Dume's marketing activities focussed on sales and distribution to bridge gaps in coverage and penetration especially in high HIV prevalence areas.

The 'Mwanaume wa Kweli/real man' campaign that was developed to launch the Dume brand into the mid-tier condom market continued to run this year, with shorter versions

of the radio and TV commercials developed to enhance media placement costs during the FIFA World Cup season.



There is potential for further cost recovery on the product. Willingness-to-pay studies indicate most Dume consumers are willing to pay a higher price than is currently being charged. As a result T-MARC and PSI have considered price increases and discussed the timing of these increases across the whole portfolio of socially marketed products. Currently at the retail, Salama and Dume are sold at same price points at TZS 500 per packet as they are perceived to be similar in quality and appeal. The current recommended retail price for Dume Condom is TZS 400 for a pack of 3 condoms.

In addition to increasing prices and volumes, through the new PSI/T-MARC consignment agreement signed towards the end of FY 2014, T-MARC has now contracted all of TSMP's sales and distribution activities to PSI. As such PSI will now implement and manage TSMP trade marketing activities that were previously implemented by T-MARC's Zonal Coordinators which includes trade point of sale (POS) placement & product merchandising activities, order generation, stock replenishment linkages and trade blitz campaign at the wholesaler and retailer level. These activities will leverage PSI's well established national sales and distribution network, coordinating and grouping PSI and TSMP social marketing trade activities to bring about significant savings in TSMP's sales and distribution costs.



Through a marketing blitz campaign, a total of 10,207 outlets were reached, 8,388 branded with Dume point of sale advertising material and 5,826 penetrated with Dume products in Iringa, Mbeya, Njombe and Dar es Salaam. 3,054 were recruited as new Dume handling outlets in Dar es Salaam (Ilala, Temeke and Kinondoni Districts), Mbeya (Mbeya, Mbozi, Kyela and Rungwe districts), Iringa (Kilolo, Iringa, Mafinga and Mufindi districts), and Njombe region (Njombe and Makambako districts). A wholesalers' data base of 330 wholesalers was established and these were linked to the RDs to improve sales in the two zones.

Dume Challenge Season II (DCSII):

Following a highly successful first season of the Dume Challenge TV contest, T-MARC developed, produced, promoted and aired the Dume Challenge Season II (DCSII) television contest.

Throughout the production and post-production phases of DCSII, T-MARC involved the Ministry of Health and Social Welfare (MoHSW) through the Tanzania Commission for HIV and AIDS (TACAIDS), the National AIDS Control Program (NACP) and the Health Promotion and Education Section, as well as USAID for buy-in and approval.



Contestants were selected through zonal auditions conducted in five mainland regions of Dar es Salaam, Mbeya, Mwanza, Dodoma and Arusha (representing Eastern, Southern, Lake, Central and Northern zones respectively). The gathering of Dume's target audience during the DCSII zonal auditions were leveraged to conduct Jali Maisha (value life) sessions - an interpersonal communication intervention that provides knowledge on HIV/AIDS prevention, encouraging responsible sexuality, proper male/female condom use as well promoting HIV counselling and testing services. A total of 1,656 men were reached through Jali Maisha sessions conducted during the zonal auditions.



12 contestants drawn from the five zones made it to the final of the DCSII



Ten episodes of the Dume Challenge Season II were aired on ITV's Sunday night primetime slot from April 5th to June 7th, 2014; with re-runs on Tuesday afternoon.

According to an Omnibus survey conducted by the media research firm IPSOS, approximately 1.7 million men age 15-49 reported watching at least one episode of DCSII. 52% of those exposed to DCSII reported watching the program once to twice per week, and 100% of those reported to have watched DCSII could recall at least one of the eight Dume core values of authenticity, courage, adaptability, intelligence, teamwork, leadership, respect and responsibility. These were the brand values/personalities used to select the winner of Dume Challenge Season II contest.



The winner of Dume Challenge Season II was Emmanuel Mandigo, a resident of Mikocheni in Dar es Salaam who took home the coveted title of Mwanaume wa Kweli wa Dume (Dume's True Man) and a cash prize of TZS 20million.



1st Runner up of the Dume Challenge Season II was Josephat Mmassy (center) from Dar es Salaam who was selected as a Brand Ambassador for Dume condom and took home a cash prize of TZS 2.5million and a home entertainment unit. Mmmasy is seen here receiving his prize from TSMP's Chief of Party (COP), Alysha Beyer (left) and T-MARC's Managing Director Ms Diana Kisaka (right).

The second runner up in the Dume Challenge Season II was Victor Shula, a resident of Dodoma region who was selected as a Brand Ambassador for Dume condom and took home a brand new motorcycle.



Dume multimedia campaign

A new approach of positioning brand Dume based of target audience's 'need state' aims to differentiate brand Dume more prominently from other condom brands in the market, thus facilitating the development of the total market for condoms in Tanzania. This will also reinforce Dume's mid-tier positioning and introduce two Dume line extensions i.e. Dume Desire (scented and coloured condoms) and Dume extreme (scented and textured condoms). T-MARC's ability to revise marketing decisions in light of new evidence demonstrates the Organisation's social marketing capacity and sophistication. The refined campaign will appeal to the 'assertive need state', which is one of six need states in the emotive need state framework. The assertive need state represents the largest segment of men in Tanzania.

An IPSOS Omnibus survey of 2013/2014 on Dume Brand exposure and recall indicates that an estimated 81% of men aged 15 -49 i.e. approximately 8.1 million men out of a

possible 10,074,778 men aged 15-49 in Tanzania reported that they have heard a Dume condom advert in the past 12 months on any of channels that Dume was advertised on in FY13/14. Of these 8.1 million men who reported hearing a Dume advert in the last 12 months, 43% could complete the Dume slogan “Mwanaume wa Kweli hutumia Dume (A True /Real man uses Dume)”. This recall rate increases to 55% in urban areas where Dume is focused.

Dume Condom Website



Dume website (www.dume.co.tz) was transformed into a responsive version that enables easier access and navigation through mobile phone handsets and PCs. This improves the reach of the Dume website among its target audience who often use their phone handsets to navigate the web. T-MARC's program team was also trained to maintain Dume's website and social media sites, enabling in-house management of Dume's digital activities.

Dume Condom on Facebook



Dume's Facebook page (www.Facebook.com/DumeCondoms) recorded a fan base of 49,799 individuals, representing an increase of 39% in Dume's fan base from FY13. Approximately 85% of these are men aged 18-65. Younger men aged 18-34 account for 71% of all Dume Facebook fans.

The Facebook page also received 52,840 unique visits in FY14 and recorded an increase in active interaction (a two way dialogue) with 4,000 people within its fan base, an increase of 47% from 2013.

On Twitter (<https://twitter.com/DUMECondoms>) Dume's current following is at 356, representing an increase of 28% compared to this time last year.

YouTube viewers have increased by 47% to 47,188 views thanks to new content made possible by DCSII. Additionally, Dume's YouTube subscribers increased by 70%. Dume brand promotions at sports events



Dume brand promotions at sports events

Dume sponsored two sports events; the Dume Cup football competition featuring 24 teams and the live screening of FIFA World Cup 2014 matches. Small group HIV prevention and brand promotion 'Jali Maisha' sessions were conducted, including informal brand detailing sessions in taxi ranks, truck stops and barber shops which cumulatively reached 4,771 men.

Dume brand promotions at public events

Dume was promoted during World AIDS Day (WAD), the 38th Dar es Salaam International Trade Fair (DITF or Saba Saba), White Ribbon Day and World Women's Day. Through these events that took place in Dar es Salaam and Rukwa, 1,578 men were reached through Jali Maisha sessions.



DCSI & DCSII contestants were a big attraction in mobilizing and selecting men fitting Dume's target audience profile to attend Dume's Jali Maisha sessions. Here some finalists of Dume Challenge Season II, Mandigo (far right who won the contest), Moses (centre) and Mmasi (centre) referee an edutainment activity for clients who visited T-MARCs pavilion at SabaSaba.



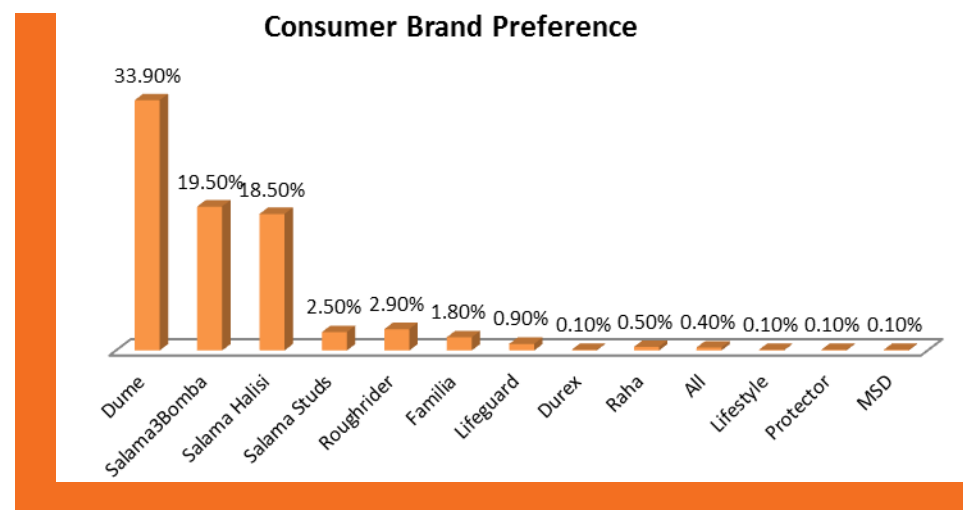
Partnership

FEMINA Hip's program TV host, 'Bwana Ushauri' participates in activities at the T-MARC pavilion during the World AIDS Day celebration 2014 held in Njombe region.

T-MARC also leveraged events organized by partner organizations. Collaborative activities included the Universal HIV/AIDS Intervention for Counselling and Testing (UHA-CT) couples' HIV counselling and testing outreach campaign implemented by Jhipiego in Mtwara, Ruvuma and Njombe; TCCP's Tulizana campaign (a partner reduction/faithfulness campaign for HIV prevention) with students of higher learning institutions implemented by John Hopkins University (JHU) in Iringa and Dodoma; Launch of Sugar Radio Program that aims to engage and create dialogue on HIV among young people, implemented by TACAIDS and UNICEF in Iringa and TACAIDS employee family day implemented in Dar es Salaam. Jali Maisha sessions implemented during these events reached 4,186 men with HIV prevention messages, condom use demonstration and Dume brand messages.

Dume Brand Preference

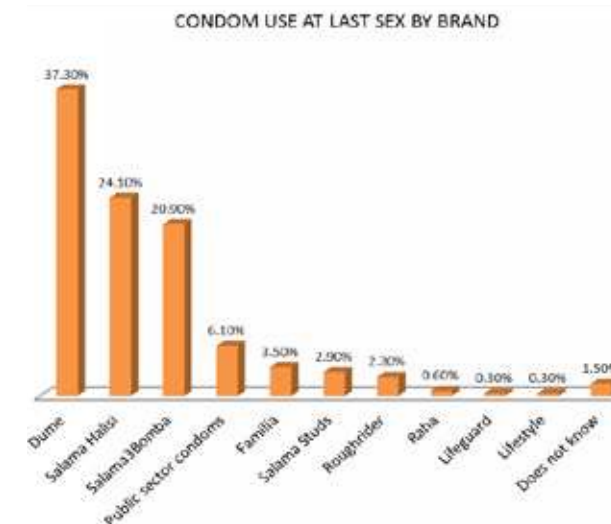
According to the Omnibus 2014, 34% of condom users aged 15-49 reported preference of Dume to any other condom brand in the market. This figure indicates that Dume is the single most preferred condom brand in the market, followed by Salama3Bomba and Salama Halisi at 20% and 19% respectively.



Additionally, the survey indicates a positive correlation between exposure to DCSII and brand preference for Dume i.e. there was a higher rate of reported brand preference among men who were exposed to DCSII compared to those who had not been exposed.

Specifically, 48% of those exposed to DCSII prefer brand Dume to any other condom brand in the market, whilst among those who were not exposed, only 33% prefer Dume.

Dume is reported to be the most used brand among men age 20-35 with 37% of users claiming to have used the brand at last sex, followed by Salama Halisi and Salama3bomba with 24% and 21% of users respectively as illustrated in the graph below:



In FY 2014 a total of 8,602,416 pieces of Dume male condoms were sold versus the fiscal year's target of 19,000,000 pieces, representing 45% of the annual target. Dume's sales has been very erratic this year and also behind FY13's achievements due to changes in sales policy and a price increase of Dume condom that negatively affected sales.

T-MARC continued with the C-vendor program through 85 condom vending machines maintained across 69 bars and guest houses in high risk areas of Kinondoni district in Dar es Salaam region. A total of 10,564 pcs of Dume condoms were sold through this initiative in FY 2014.

The Telesales Call Centre initiatives to verify the outlet data submitted by Zonal Coordinators from their regular sales and marketing activities conducted 3,334 telephone interviews. The call centre referred 1,903 outlet owners that were unaware of the stocking points to the proper stocking points (RDs). Apart from being a monitoring tool, the call centre activities were also conducted to get market feedback on product availability and to generate sales.

Lady Pepeta Female Condom



This year, the brand's mid-media activities focussed on its niche target audience of sex workers (SW) and women engaging in transactional sex (WETS) including barmaids, food vendors/mama nitilie, students in higher learning institutions and small business traders/wachuuzi

Small group face to face sessions equipped the target audience with HIV and STI prevention knowledge, condom negotiation skills and correct and consistent use of male and female condoms. Together with Lady Pepeta brand detailing and distribution of free samples for trials, these activities reached 3,646 SW and WETS.



Lady Pepeta also leveraged Husika project's program's WETS and SW peer educator activities to promote the brand and issue free samples for trials in the Husika implementing regions of Dar es Salaam, Mwanza, Geita, Shinyanga, Tabora, Mara, Mbeya, Iringa and Njombe.

Vendors of traditional brews check out free samples of Lady Pepeta female condoms in Njombe region.



Lady Pepeta was co-promoted with Dume and Flexi P during Saba Saba, World AIDS Day (WAD), White Ribbon Day and the World Women's Day. T-MARC through Lady Pepeta targeted barmaids, waitresses and mama lishe that work in these temporary catering outlets in and around the events. This year 558 women were reached through public events in Dar es Salaam and Rukwa regions.



Lady Pepeta detailing across Pharma outlets

To improve product access, T-MARC conducted female condom detailing, Lady Pepeta product sales and merchandising activities across pharmacies, accredited drug dispensing outlets (ADDs) and drug stores (duka la dawa baridi - DLDBs) in all 11 of Lady Pepeta's priority regions. The Pharma outlets were targeted due to their receptiveness to stocking female condom products. Outlets were offered product through direct sales and required to order repeat purchases via telesales. Through this activity, a total of 1,131 outlet attendants across 1,131 outlets were reached with brand detailing activities and 146 cartons of Lady Pepeta condoms were also sold.

Jipende! Resource Centers for Women's Health

T-MARC implemented refresher trainings with 182 attendants (out of a possible 206) from the 94 salons (out of a possible 103). The training included a new health area of urinary tract infection (UTI), in addition to refresher knowledge on current health areas i.e. HIV, Family Planning (FP), cervical and breast cancer. HIV 'health days' were also implemented in select Jipende! saloons that attracted more than just salon clients but a larger surrounding community. The health days are led by health specialists are a form of on job training and support for the salon attendants and aim to enhance credibility of attendants and the salons as health information centres. In this way 4,560 people (3,676 women and 884 men) were reached with HIV prevention and brand messages

Partnerships



Lady Pepeta was promoted during UHAI-CT's couples' HIV counselling and testing outreach campaign in Mtwara, Ruvuma and Njombe; TCCP's Tulizana campaign with students of higher learning institutions in Iringa and Dodoma; the launch of Sugar Radio program in Iringa and TACAID's family day in Dar es Salaam. Through the above activities, Lady Pepeta reached 4,198 women with HIV prevention messages and brand promotional activities.

T-MARC integrated the Mango System as a pilot in collecting outlet data through the use of smart phones. The Mango system was set to update and maintain the Dume's outlet data base. The system was introduced to improve accuracy of data collected and reduce paper works for Zonal Coordinators and hence increase productivity and efficiency in this area. A total of 3,954 new outlets were captured by T-MARC Zonal Coordinators from April to July 2014.



In FY 2014, a total of 987,840 pcs of Lady Pepeta female condom products were sold and distributed representing an increase of 5% over FY 2013 volumes and an achievement of 99% of the annual sales target. In FY14 institutional sales contributed to 31% of Lady Pepeta annual sales performance.

Family Planning Flexi P Oral contraceptive pills

Key strategic priorities for Flexi P oral contraceptive pills in FY14 were:

- Improve the quality of Flexi P's marketing interventions by refining training tools and conducting refresher training with implementing teams
- Improve sales team's skills on Flexi P detailing to enable them to better support the brand in the trade
- Implement targeted demand creation activities for Flexi P by prioritizing trials to non-users
- Improve Flexi P's performance in sales, coverage, penetration and visibility

Highlights of activities implemented on each strategic priority include;

Improve the quality of Flexi P's marketing interventions by refining training tools and conducting refresher training with implementing teams

T-MARC refined the family planning training manual and developed visual aids to enhance the quality of Flexi P small group sessions. Using the refined training manual, T-MARC conducted refresher training for the family planning implementing teams through the Ministry of Health and Social Welfare's (MoHSW) National Family Planning Trainer, Mr. Maurice Hiza. The five day intensive training was conducted to capacitate the team to implement FY14 Flexi P sponsored family planning IPC sessions. 24 T-MARC family planning staff and contracted outreach teams attended the training.

Furthermore T-MARC revisited and revised its implementation approach for small group sessions to enhance focus on the oral contraceptive (OC) method category. It was noted that the approach of supporting the entire family planning method mix did not allow enough time to focus on OCs which is the most effective way of supporting Flexi P brand, given restrictions in directly promoting the brand (as it is scheduled as a prescription medicine). Going forward, Flexi P small group sessions will focus on OC knowledge, addressing side effects concerns and other related barriers to OC use. Flexi P brand messages and promotion of male and female condoms as dual methods of protection will also be given a priority during the sessions. A smaller amount time will be allocated for overview of family planning in general and available modern family planning methods (MFPM) in Tanzania.

Improve sales team's skills on Flexi P detailing to enable them to better support the brand in the trade

To enhance support toward the Flexi P brand in the market, refresher training on Flexi P MFPM and Flexi P brand detailing was conducted with T-MARC's sales team including Zonal Sales and Marketing Coordinators, Sales and Distribution Manager and the Operations Director.

Implement targeted demand creation activities for Flexi P by prioritizing trials to non-users

Flexi P Mass media program and print media sponsorships: T-MARC began preparations to pilot the strategic use of mass media to promote Flexi P. Specifically, T-MARC will leverage radio and TV talk show programs to discuss family planning with emphasis on addressing oral contraceptive barriers as part of the talk show content. Due to Government restrictions on promoting ethical products, Flexi P's exposure during the sponsored programs will be limited to brand mentions of 'This program is brought to you



by Flexi P' and a product logo placement in the case of TV programs. We believe that this level of exposure will suffice to raise brand name awareness and interest from the target audience.

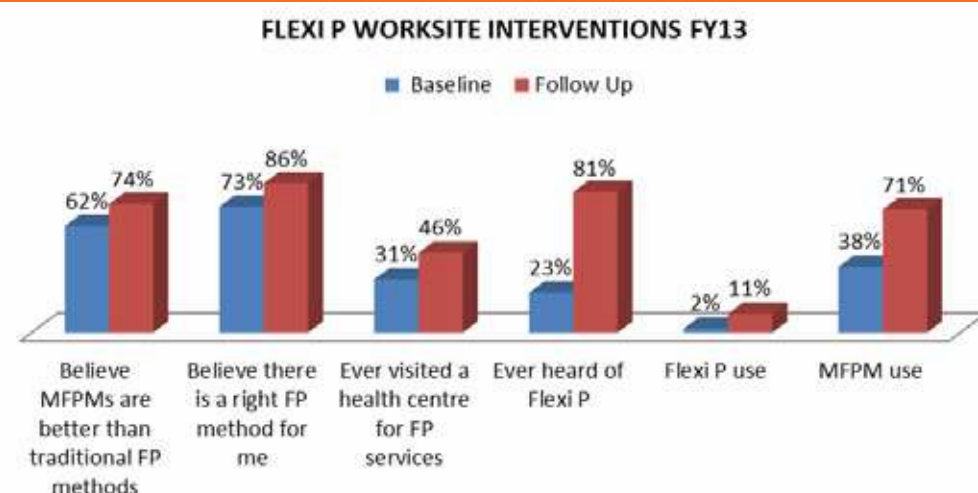
T-MARC contracted a television talk show program 'Wanawake Live' and a radio talk show program 'Radio One Doctor' on program sponsorship basis. The above radio and TV programs will host a series of family planning talk shows that will be delivered by an experienced family planning specialist. T-MARC is in the process of securing the specialist through the MoHSW. The rollout of this campaign will take place in quarter one of FY15.

Mid- Media Activities

Flexi P Sponsored community group meetings: This year, T-MARC worked closely with the MoHSW and other development partners to prepare for the Green Star community re-launch activities in the lake zone. The Green Star campaign aims to reinvigorate and reposition family planning at the national, regional, district and community level. T-MARC's contribution to the re-launch campaign in the Lake Zone was the implementation of family planning education during Flexi P sponsored community group meetings.

During a month-long period of the Green Star re-launch activities in the Lake Zone, T-MARC implemented family planning sessions with community group members in Mwanza, Geita, Mara, Shinyanga and Simiyu. T-MARC also implemented these interventions to support Flexi P outside the Green Star re-launch regions in Dar es Salaam. Collectively across the six regions, T-MARC reached 77 community groups and 2,385 group members (1,935 women and 450 men) with family planning education and counseling.

Flexi P Sponsored Family Planning session across Worksites: T-MARC recorded positive trends (revealed through pre and post- test) in knowledge, attitude and behaviour as result of last year's worksite interventions as illustrated on the chart below



Given the above successes, T-MARC continued to implement these interventions in FY14. Through 117 organisations and higher learning institutions, T-MARC reached 7,807 individuals (4,373 female and 3,434 males) with family planning education across 11 mainland regions of Dar es Salaam, Lindi, Mbeya, Iringa, Dodoma, Morogoro, Arusha, Mtwara, Tanga, Pwani and Kilimanjaro.

Brand promotion during the public events: T-MARC continued to leverage large gatherings during public events to promote family planning and Flexi P. This year Flexi P was promoted during the National Family Planning Conference, International Midwives Day, International Women's Day, White Ribbon Day, World AIDS Day (WAD) and Saba saba – Dar es Salaam International Trade Fair.

As with all family planning mid-media activities, Flexi P sponsored family planning sessions were implemented during the above events reaching 1,654 people (1,351 women and 303 men) in Dar and Rukwa.



T-MARC's Flexi P's Oral contraceptive mid-media activities were also used to promote Dume and Lady Pepeta brands as dual methods of protection for HIV and pregnancy. Collectively through the interventions, 1,446 women and 776 men were reached with dual methods of protection messages. Activities included worksite interventions in Dar, Mtwara,

T-MARC's Flexi P's Oral contraceptive mid-media activities were also used to promote Dume and Lady Pepeta brands as dual methods of protection for HIV and pregnancy. Collectively through the interventions, 1,446 women and 776 men were reached with dual methods of protection messages. Activities included worksite interventions in Dar, Mtwara, Lindi, Mbeya, Iringa, Morogoro, Dodoma, Kilimanjaro, Arusha, Tanga and Pwani alongside community group interventions in Dar, Mwanza, Geita, Shinyanga, Simiyu and Mara.

Leveraging Jipende! Resource centers to promote Flexi P:

T-MARC continued to support Flexi P through the Jipende! program activities as follows:

- Refresher training on family planning with 186 salon attendants across 103 salons
- Routine Jipende salon educators' health talk sessions with salon clients on family planning education and Flexi P brand promotion
- Family planning health days implemented in select Jipende! salons with sufficient space to host these activities that attract more than just salon clients but a larger surrounding community.

These Jipende! family planning activities reached 2,840 people (2,337 women and 503 men) with family planning education and Flexi P brand promotion across all nine Jipende! implementing regions of Dar, Mbeya, Iringa, Njombe, Mwanza, Geita, Shinyanga, Tabora and Mara.

Improve Flexi P's performance in sales, coverage, penetration and visibility

Medical detailing across ADDO, Pharmacy Type 1 and health facilities: This year Flexi P medical detailing campaign was implemented across all 25 Tanzanian mainland regions. The campaign reached 3,767 Accredited Drug Dispensing Outlets (ADDOs), pharmacies and private health facilities and 3,814 outlet attendants/ service providers with Flexi P detailing messages including information on Flexi P's price changes and an up-to-date list of restocking points in each area. All 3,767 outlets were branded with Flexi P point

Sales and Distribution



Flexi P sales were 1,808,064 cycles. This is 90% of the annual target. The brand controlled 56% of the market. The Regional Distributor price was increased from TZS 15,400 per carton of 8 dispensers to TZS 17,000 per carton of 4 dispensers representing 120% increase. The retail price was increased from TZS 150 to TZS 300 per cycle.

of sale (POS) material and attendants given an OC eligibility checklist to be used before dispensing OCs.

The above price increase was based on the willingness to buy research and the prevailing actual market price, which confirmed that OC prices could be adjusted upwards as consumer were paying an average of TZS 500 per cycle.

Monitoring, Evaluation and Research

Monitoring, Evaluation and Research activities conducted this year included

- Review of the TSMP monitoring and evaluation plan including training of the M&E department on PEER Methodology to equip the T-MARC MER team with skills in 'Participatory Ethnographic and Evaluation Research' (PEER) skills to roll out this approach in evaluation across multiple program components. In FY 2014 various studies and assessments were carried out by the MER unit to inform key FY2014 work plans
- **MAP studies** including Measuring Access, Availability and Performance of Social Marketing Products (MAP-Hotzone and MAP-Fast Moving Consumer Goods (FMCG)), Pharma Census and Needscope survey. These studies guided and informed balance of FY14 marketing, sales and distribution strategies plus budget allocations. The reports were also used to develop a comprehensive situational analysis presentation for the FY14/14 Dume and Lady Pepeta Delta Marketing Planning workshop.
- **2013 MAP Hotzone Survey** measuring coverage, quality of coverage, numeric distribution and adherence to the recommended price of male and female condoms in high risk areas for HIV infection across 7 regions of Tanzania i.e. Dar es Salaam, Mbeya, Iringa, Mwanza, Shinyanga, Tabora and Mara - 264 hot spots across these regions were surveyed. The study confirmed good male condom coverage performance across the hot spots surveyed, with at least 98% of the areas surveyed having at least one outlet with male condoms available. This was substantially lower for female condoms at only 37%, highlighting the need for increased and targeted Lady Pepeta female condom products across these priority areas. Dume was available across 22% of the outlets visited and of these outlets only 2% had female condom available at the time of the visit.
- **MAP FMCG** - a nation-wide survey aiming to measure condom coverage, quality of coverage, and numeric distribution trends for Salama Halisi, Salama Studs, Salama 3Bomba, Dume, Lady Pepeta and Care female condoms, among other socially marketed health products. It was conducted among 20,306 outlets, across 25 mainland regions. Random sample of 19 EAs (Villages in Rural areas and Streets in Urban areas) in all regions was used. The study confirmed that there are high male condom coverage trends at the retail level and this is currently at 90% in urban areas and 86% in rural areas. Dume's coverage gains in urban areas at 63% vs. 42% in rural areas, in line with the brand's mid-tier position strategy.
- **Pharma Census** - This was a study conducted in all mainland regions as census of all Part 1 Pharmacies except for Dar es Salaam where census of Part 1 Pharmacies was a random sample of 50% of wards. Total sample size was 524 pharmacies. The Pharma census confirmed that Dume was well represented across the Pharmacy channel, as the product was available in 69% of the pharmacies at the time of visit. On the part of Flexi P the product's was also well represented as 82% of the pharmacy type I outlets had the product available at the time of the visit.



- **Needscope Study** - Aimed to characterize behaviours of male condom users. It was conducted in February 2014 among men aged 18-40 years and by TNS. The study confirmed that condom use rates at last sex with any partner was 48% among male condom users; and there are notable regional variations. For example condom use rates were at 73% and 18% in Kilimanjaro and Tanga region respectively. It was also interesting to note that there were no statistical significant differences in the social economic status indicators among Dume and Salama users, suggesting that the segmentation strategy implemented under TSMP had not yet been able to significantly differentiate Dume and Salama condom brand users. Omnibus surveys - Three rounds of Omnibus studies were administered by the T-MARC MER department to inform key FY2014 work plan pricing strategies and demand creation interventions.
- **Q 1 Omnibus survey** captured Dume male condom willingness to pay trends, Dume condom user trends and modern family planning awareness, perception, attitude and use trends. The study found that the current compliance levels of Dume's recommended retail selling price is relatively good and there is some room to increase Dume's retail selling price from TZS 400 to TZS 500 - 600 for a pack of 3 pieces. However the increase should be done cautiously, as two thirds of Dume's target audience confirmed that they will trade off for a substitute brand if Dume's retail price increases beyond TZS 600. The reported mean price was TZS 431/- (range 100 to 2500) per pack of condom vs the current recommended retail price point of TZS 400. More than 88% of the Dume condom users were willing to pay more than the recommended price. Oral Contraceptive pill use over time has also gained momentum amongst TSMP's target audience (women between 25-24) which was at 11.2% versus 4% in the 2010 DHS, an indication that TSMP's family planning interventions are making a tangible contribution to OC pills prevalence rates.
- **Q2 Omnibus survey** conducted in April 2014 captured condom use at last sex at 25%, condom use among men aged 20-35% was 34%, 29% of condom users reported using Dume condom at last sex and Dume mass media reach was 63%, while recall was 40%.
- **Q4 Omnibus survey** that was primarily aimed at evaluating Dume Challenge Season II. Viewership of the DCSII program was 17% (estimated to be 1.7 million men of reproductive age throughout Tanzania) of which all could recall at least one core value of brand Dume. Condom use at last sex increased from 29% in 2013 to 37% of which 37% of them used Dume condom (an increase from 29% in 2013). Dume condom brand usage was significantly associated with DCSII exposure. Those who were exposed to DCSII were significantly more likely to use Dume condom compared to those who were not exposed (49% vs 33%, $p=0.024$). Similarly exposure was generally associated with increased condom use. A significantly higher proportion of those who used condom the last time they had sex, were likely to have been exposed to DCS II compare to those who used other brands (57% vs 37%, $p=0.001$). Exposure to DCSII was also significantly associated with brand preference (48% vs 32%, $p=0.02$). Among those

who watched DCS II; 80% said their friends would use Dume condom, 85% said that they learnt about how to use condoms and 71% said that the Challenge made them want to use Dume condoms the next time they have sex.

Other studies that were administered in FY 13 include

- **Regional Distributor Assessment** – this outlet audit report tracked Dume, Flexi P and Lady Pepeta product coverage and availability trends at the RD level. There was a significant improvement in different service provisions pre and post indicators such as visibility of Flexi P logo (45 - 85%) and promotional materials (2762%), availability of Flexi P (56 - 80%), counselling by ADDO (49 - 66%). An indication of the campaign's positive impact behind the Flexi P's performance gains across ADDOS.
- **ADDO mystery client survey** conducted to assess the impact of Flexi P's 2013 ADDO medical detailing campaign on Flexi P's visibility, availability and administering trends across the channel. Awareness about Flexi P increased from 23 to 81% , reported visits to health facilities increased seeking for modern Family Planning MFP services increased from 31 to 46%, use of MFPM increased from 38% to 71% post intervention out of which Flexi P increased from 2 to 11% and there was significant changes on positive attitude and belief on MFPM before and after the interventions.
- **PEER Study on Jipende Saloons** - Participatory Ethnographic Evaluation Research (PEER) was also conducted among Jipende salon attendants and clients to evaluate learning, achievements and locate gaps in the program. The results showed that Jipende Program was well accepted and valued by the clients and attendants and has led to significant changes in behaviour. Some recommendations were to expand the program to areas with high need of the intervention.
- **OC and other MFPM Assessment** - aimed at identifying barriers and drivers of OC and other modern family planning methods. Women's willingness to pay level were measured whereby most said they were willing to pay above TZS 500/-.
- **Management of Information System via MANGO system** smart phones were purchased for data collection for the MANGO system, to ensure the system is fully implemented before the end of Quarter 2. Training on MANGO data collection system was provided to all Zonal Coordinators and trial data collection and feedback on improving the system was received and incorporated.
- Research findings from six studies initiated at the end of FY13 to measure brand performance and to inform marketing strategies and spend in FY14 and beyond indicated a significant opportunity to grow the total market for condoms in Tanzania, especially in areas with high HIV incidence.
- Monitoring and evaluation field visits



Empowering Young Girls In and Out of School in Mtwara Region (Hakuna Wasichoweza) Project



The overall goal of the Hakuna Wasichoweza Girls' Empowerment Project is to improve the education standard of young girls by increasing their school attendance rates through two program objectives:

- i. Sustainably provide low cost sanitary pads to about 10,000 young girls in and out of school in Mtwara region of Tanzania to help them manage menstruation and improve their school attendance and performance.
- ii. Enhance the HIV prevention knowledge levels of adolescent girls to encourage them to delay the onset of sexual debut and to reduce high risk sexual behaviors as a means to reduce schoolgirl pregnancies, school dropouts and sexually transmitted diseases including HIV.

The first phase of the program which was jointly supported by the United States Agency for International Development (USAID) and the Vodacom Foundation came to a close in August of 2014.

The primary target audiences of this project are young girls between the ages of 9 – 15 years, in regions of the country where school dropouts and truancy rates are disproportionately above the national average, such as in Mtwara. The secondary target audience is the key influencers of the primary target audience on sexual reproductive health issues, these being the parents and/or caretakers, teachers and peers.



The overarching strategies of the Girls' Empowerment Project are to:

- *Utilize existing systems to reach girls with necessary skills and confidence to manage menstruation and receive pertinent youth sexual and reproductive health education.*
- *Build successful partnerships with key stakeholders in order to raise the public profile and awareness of issues surrounding menstruation, resulting in attention being paid to menstrual management at all levels.*
- *Provide coaching to women and girls on how to make, and care for re-usable pads to ensure the program's sustainability.*
- *Sustainably scale up this intervention to the national level across all regions of Tanzania.*

T-MARC engaged focal persons from the Ministry of Health and Social Welfare and the Ministry of Education and Vocational Training in a series of meetings aimed at creating awareness and understanding for the program and its goals, nurturing project ownership, receiving technical feedback on proposed strategies and work plan activities and finding areas of common interest where the program could leverage existing resources and / or activities within the ministries. Following this meeting, T-MARC moved on to introduce the project to key stakeholders at the national level through a series of stakeholders meetings, followed by the launch of the Girls empowerment Project in Mtwara. During the project launch activities, T-MARC ensured that all the relevant stakeholders for girls' initiatives in Mtwara had a common understanding of the projects goals, objectives and activities, including securing their technical inputs, guidance and support.

Major activities and accomplishments of the program include;

Needs Assessment Exercise - T-MARC undertook a comprehensive needs assessment study to define the existing needs for the Empower project interventions i.e. provision of low cost sanitary towels and WASH activities around the identified schools. This exercise was conducted in order to guide the implementation of this project and provide input for



fundraising initiatives in support of the project. The exercise also provided the strategic approaches that T-MARC can pursue in addressing the issue of low cost sanitary pads, project planned activities and existing WASH and other partnership opportunities.

Securing the buy in and support of key stakeholders and implementing partners

- At least 15 meetings with various stakeholders were conducted in order to secure their buy in for the project, encourage project ownership and explore potential areas of partnership in support of the program activities. Among the stakeholders met were Ministry of Health and Social Welfare, Tanzania Institute of Education, Kays Hygiene Ltd, Tanzania Women Lawyers Association (TAWLA), Wanawake na Maendeleo (WAMA) Tanzania 21st Century (TZ – 21), District Officials Mtwara, Vodacom Foundation, Ministry of Education and Vocational training (MoEVT) and The Germany International Cooperation (GIZ).

Roll out of the project through sensitization meetings at Regional, District and Community levels in Mtwara region

- A team consisting of 6 government officials from Mtwara municipal and rural district offices and 1 representative from an NGO was formed to support T-MARC technically in the project implementation. Project introduction at community level with various groups such as teachers, traditional nurses, and influential older female members of the community, ward education officers, ward education officers and community leaders reached 274 participants (176 females and 98 males).

Selection of schools, teachers and traditional nurses (Nyakanga) - The head of education department provided T-MARC with the names of 24 selected schools for the intervention based on the selection criteria developed during sensitization meetings. Thereafter, project introduction sessions were conducted with community leaders and head teachers. The selection of two (2) teachers per school and two (2) traditional nurses (Nyakanga) per ward across 17 wards who directly work in the project's implementation was then conducted. These selected teachers and traditional nurses were then trained on MHM issues and became good educators and mentors in their respective schools and communities.



Collection and compilation of data for girls who are in and out of schools – This captured the baseline data indicators for the project's impact evaluation study and enabled tracking of the success of the project and measuring notable changes in girls' school attendance. 5,291 in-school girls and 607 out of school girls were selected. This list was updated on regular basis to support the smooth distribution of pads exercise to reach the intended beneficiaries.

Securing partnership with Vodacom Foundation on co-funding basis – Following a series of meetings with various private sector organizations, the Vodacom Foundation expressed interest to support the Hakuna Wasichoweza project and provided T-MARC with TZS 160,000,000 (Tanzania shillings one hundred and sixty million) over a period of one year (2013/2014) in support of various project activities including SMS campaign, scaling up and sustainability of the project, as well as logistical support for awareness-raising activities.



Securing Project Ambassadors (Champions), Project Launch Event and preparations towards SMS Campaign Launch

- T-MARC secured 3 brand ambassadors / champions Including Honorable Mama Tunu Pinda (the Prime Minister's wife), Beatrice Makani (popularly known as Mama Ushauri who has been involved in many health related projects in the country) and Salum Njwete (popularly known as Samjet – the Winner of Dume Challenge 2012) as brand champions. They among other things, participated in major events for the Girls' Empowerment Project and created awareness about the Girls' Empowerment Project in different forums and amongst their peers and social networks. They were also engaged in the media in order to raise the profile of the project and to enhance the call to action for target audience to participate in the SMS campaign. The ambassadors also occasionally visited the project implementation areas and act as role models for the school girls benefitting from the project.

Development of training materials & development of Kiswahili Project Name and Logo:

Working with the Tanzania Institute of Education (TIE), T-MARC developed the Menstrual Hygiene Management Training Manual with 8 key topics for use by the project. Given literacy limitations among most traditional nurses and nyakanga, a simpler

manual for use by traditional nurses was also developed. These manuals were used in capacity building trainings to the outreach educators and mentors who then cascaded the trainings to targeted girls. In order to increase visibility of the project, T-MARC also developed a Swahili project name Hakuna Wasichoweza which denotes that nothing is impossible for girls; they can overcome the challenges they face, and can achieve their dreams and do well in their lives as long as they are empowered. A project logo was also developed.

Development and Approval of two batches of 226 SMS messages and information and preparations for SMS Campaign: T-MARC and Vodacom developed an SMS awareness campaign aimed at raising public awareness on the issue of menses and the challenges women face during this period, and providing information on MHM issues. Through the awareness component to be conducted via an SMS promotion with support from Vodacom (through the Vodacom Foundation), the project hopes to collect some data on the scope of the problem, create awareness on the problems faced by girls and women during menses and provide correct information on the issue of menstrual management.

Identification, selection and engagement of Master Trainers and facilitators: 12 facilitators were recruited of which 8 were core facilitators of the training sessions and 4 were kept on a reserve list and were engaged on a need basis. This team of TOTs supported T-MARC to deliver the training sessions for the program's proposed outreach educators, amongst 48 teachers and 34 traditional nurses and thereafter conducted supervisory visits during the delivery of training sessions to the targeted project beneficiaries.



Capacity building trainings to teachers and traditional nurses: This involved the training to 48 teachers from the 24 selected schools and 34 traditional nurses from 17 wards of intervention. The training objective was to increase understanding on the Hakuna Wasichoweza project and equip them with knowledge on the concept of Menstrual Hygiene Management and its impact on girls lives in order for them to introduce package of MHM as extra curriculum activity to in and out of school girls.



Training sessions to in and out of school girls - 5,784 girls were reached during the of pilot phase period, through a total of 252 sessions for out of school girls and 559 sessions for in school girls were conducted.

Each eligible girl also received two packs (each pack containing ten units) of disposable sanitary pads on monthly basis over a period of five consecutive month starting June to November, 2014.

This distribution exercise has enabled the girls to benefit of this valuable product and it is expected that the school attendance of girls will improve going forward.

T-MARC has secured additional funding support from the Vodacom Foundation to support the roll out of the program to an additional 4,200 girls across Mtwara region.

Actions plans on the roll out of training sessions to girls were developed as a result of these trainings. The training workshops enabled the roll out and introduction of MHM education as an extra-curriculum activity to in school girls in 24 schools. The trained teachers and traditional nurses then worked as outreach educators in delivering the training sessions to the girls.

Cervical Cancer Awareness, Screening and Treatment Project

T-MARC Tanzania with support from the Bristol Myers -Squibb Foundation through the Pink Ribbon, Red Ribbon Alliance is implementing a program to foster awareness and encourage screening and treatment of cervical cancer in Iringa region, of Tanzania.

This year, T-MARC focused on strengthening the cervical cancer working relationship with its implementing partners and other relevant stakeholders at the national, regional and district level to ensure that planned project activities were conducted on time and in compliance with the required standards. In doing so, the involvement of key stakeholders particularly the respective regional and district Medical Offices (RMO) during the implementation of the project was maintained throughout the reporting period. This active stakeholder involvement and support enabled the project to achieve high participation numbers amongst the targeted communities in the project's cervical cancer mobilization and sensitization activities.

Achievements

The project's community sensitization and mobilization activities achieved significant coverage this reporting period.



Cumulatively, through the two Iringa based implementing partners (TARWOC & KKJ) pool of trained community volunteers, a total of 23,969 women and 13,104 men of reproductive age, were reached with Cervical Cancer health talk sessions across three out of the four districts targeted by the project. Amongst those reached, 12,937 women who met the eligibility criteria were successfully referred and linked to cervical cancer screening and treatment services.

A total of 1,529 women were screened through routine services at the health facilities providing cervical cancer screening and treatment services. In addition to this as T-MARC continued to conduct mass screening campaigns in collaboration with the government and other implementing partners another 4,035 women were also screened via the cervical cancer mass screening campaigns in Iringa Municipal, Iringa District Council and Mufindi Districts.

The above service uptake trends demonstrate a significant increase in cervical cancer awareness and knowledge levels in the communities that have been reached and

supported. Furthermore, the service uptake trends of those referred also reveal that beliefs, attitudes and perceptions pertaining to cervical cancer screening and treatment services appear to have been positively reinforced.

While the demand creation momentum generated for cervical cancer services was relatively high this reporting period, of those referred only 43% were screened, leading to a 56% achievement of the project's target. Visits to the facilities, highlighted that the major factor contributing to this behind target achievement was the out of stock incidents of various cervical cancer screening services consumable supplies. T-MARC is working with partners to address this shortcoming.

Kikosi Kazi Jamii (KKJ) was engaged as an implementing partner on a sub-agreement contract. Through this engagement, T-MARC trained and leveraged the support of 20 KKJ community volunteers to implement cervical cancer community mobilization and sensitization activities across 20 wards in Mufindi district. Community mobilization and sensitization activities by KKJ reached 14,251 individuals aged 20 years and above with cervical cancer health talk sessions during small group discussion sessions or village meetings across Mufindi district. Of these 7,531 were women and 6,720 men. Of the women reached 5,976 eligible women were referred for cervical cancer screening and treatment services using the Cervical Cancer Community Referral Cards that were developed and provided to the volunteers.

This reporting period, T-MARC also trained and oriented 49 Village Health Workers (VHW) from Iringa Municipal, Rural and Kilolo district councils on cervical cancer general knowledge. With this capacity in place the project is now able to reach and sensitize more women to go for cervical cancer screening services during their respective village health meetings and house visits. Referrals to cervical cancer screening and treatments can also be made by the VHW using the IEC materials and community referral cards were also issued to them.

Through 40 trained and equipped community volunteers. A total of 22,822 individuals aged 20 years and above were reached with cervical cancer health talk sessions during small group discussion sessions or village meetings across Iringa Rural and Iringa Municipal districts. Of these 16,438 were women and 6,384 men. Of the women reached 6,961 eligible women were referred for cervical cancer screening and treatment services using the Cervical Cancer Community Referral Cards that were developed and provided to the volunteers.

A Cervical Cancer general knowledge orientation training was also conducted with 15 community volunteers from a Kilolo district CBO – Iringa Mercy Organization. Given the organization's proven footprints coupled by their community sensitization experience, T-MARC intends to leverage the organization's network of community volunteers to scale up cervical cancer mobilization and sensitization activities in Kilolo district, which has been lacking to date.

Moreover, 50 community leaders at the ward level (Ward Executive Officers - WEO) were also engaged through a cervical cancer sensitization and project update meetings to harness their credibility and support to secure better participation numbers amongst the communities targeted during the project's mobilization, sensitization and awareness activities.



With prior permission from the respective district medical offices, a total of 45 cervical cancer service providers supported the three mass screening campaigns that were implemented in Iringa Municipal, Iringa district council and Mufindi district in this reporting period. The support availed through the availed service providers included site preparedness, client registrations, the provision of cervical cancer screening VIA services, as well as cryotherapy and LEEP treatment as required.

Supportive supervision was also conducted during the mass screening campaign to ascertain the adherence of quality standards during the provision of cervical cancer screening and treatment services. This was conducted with the support of the Medical Officers and Reproductive and Child Health Coordinators from the respective regional and medical offices that were in attendance.

Mass screening campaigns were promoted by radio announcements aired on two popular local radio stations in Iringa; Ebony FM and Country FM, as well as via a mobile PA (Public Address) system. The project also used existing platforms and resources to promote the mass screening campaigns in their respective areas. The project successfully screened 4,035 women for cervical cancer out of which 90 were found to be VIA positive (58 treated with cryotherapy and 32 treated with LEEP) and 9 were found with suspect cancer and were referred for further management at tertiary hospital level. The breakdown of the mass screening campaigns that were implemented per district is provided below:



A five-day cervical cancer mass screening event in Iringa Municipality across three sites (Ipogolo Health Centre, Frelimo Hospital and Ngome Health Center successfully screened 1,573 women for cervical cancer out of which 47 were found to be VIA positive (24 treated with cryotherapy and 23 treated with LEEP) and there were 2 were suspected to have cervical cancer.

- A six-day cervical cancer mass screening event in Iringa District Council across four sites i.e. 3 days per site (Kiponzero Health Centre, Ifunda dispensary, Idodi Health Center and Kimande Health Center) successfully screened 1,489 women for cervical cancer out of which **28 were found to be VIA positive (21 treated with cryotherapy and 7 treated with LEEP) and 3 clients were suspected with Cancer.**
- A four-day cervical cancer mass screening event in Mufindi District Council across two (Usokami Health Centre and Mafinga District Hospital) successfully screened 973 women for cervical cancer out of which **15**

were found to be VIA positive (13 treated with cryotherapy and 2 treated with LEEP) and 4 clients were suspected to have cervical cancer.

- HIV counselling and testing was also being offered during the mass screening campaign. Of the 2,926 women who tested for HIV and received their results, a total of 681 women tested positive. As these women were linked and referred to HIV care and treatment services the project has therefore also contributed to the prolonged healthy life years of these individuals.
- There was a significant increase in clients as a result of mass screening events at different sites. Most of the clients screened were in the age groups 30-39yrs (between 30%- 40%) and 40-49yrs (between 20%-30%) and overall VIA rates ranged from 2 - 5%. Most of the VIA+ were in the age group 30-39 years and HIV+ clients comprised most of the clients who were also VIA positive (about 5%) compared to HIV negative clients (about 2%).

With support from the Iringa Referral Hospital Cervical Cancer National Trainer, 34 identified and selected village health workers were oriented and trained by T-MARC on cervical cancer general knowledge. After the training, the VHW's have been working closely with TARWOC community volunteers to support planned cervical cancer referral and linkage activities at the community level in their respective areas.

By continuing to implement the project's activities through existing structures such as local CBOs, community volunteers, village health workers, regional and district service providers, regional cervical cancer master trainers, ward executive officers and key Ministry of Health representatives from the respective regional and district medical offices; cervical cancer community mobilization, sensitization, screening and treatment services are now being streamlined, integrated and strengthened as routine services in Iringa. Furthermore, the much required capacity to sustain cervical cancer efforts in Iringa is being developed and strengthened through the active engagement and involvement of the respective communities and stakeholders during the implementation of the project activities.





The challenge that remains is for the Government to provide the much required budget prioritization, ownership and accountability for cervical cancer screening and treatment services, particularly consumable supplies in line with the unmet demand. T-MARC will share the project's accomplishments, challenges and lesson learnt during an end of project dissemination meeting with national, regional and district stakeholders to support cervical cancer advocacy efforts.

FAMILIES MATTER PROJECT (FMP 1)



END OF PROJECT REPORT

Introduction

T-MARC Tanzania implemented the Families Matter! Project with funding from the Presidents Emergency Plan For AIDS Relief (PEPFAR) through the Centres for Disease Control and Prevention (CDC)Tanzania from 2008 - 2014.

According to the Tanzania Demographic Health Survey (TDHS) 11% percent of young women and 10% of young men aged 15-24 in Tanzania report that they had sex before they were 15 years old (the same levels as in the 2003-04 THIS). Over half of women and 43 percent of men aged 18-24 reported having sex before reaching age 18 years. Rural women are more likely than urban women to have had sex by age 15 (12% versus 8%, respectively). For men, these figures are 11% and 7%, respectively. Women and men in Mainland Tanzania are much more likely than those in Zanzibar to have had sex by age 15 years.

The HIV Prevalence rates from the Tanzania HIV Indicator Survey (THIS, 2003-2004), indicated a prevalence rate of 10.9% in Dar es Salaam, Mtwara 7.4% and 6.8% in Ruvuma. The national prevalence rate was 5.7%. The THIS 2003-2004 also reported a close association between level of education and HIV knowledge.

CDC Tanzania recognized that at the time, there was no particular HIV intervention in the country targeting parents and guardians of young children. Moreover, the youth in the southern regions of Tanzania were particularly vulnerable to pre-teen pregnancies, HIV and STI infection. Henceforth, impressed by the evidence based intervention created by CDC Atlanta and adapted in Kenya, CDC Tanzania introduced the Families Matter! Project in Tanzania.

The Government of Tanzania has highlighted youth HIV prevention as a top strategic priority, as reflected in the last National Multi-Sectoral Framework on HIV/AIDS 2008-2012.

¹THMIS 2007-2008 p.95 pdf

²THIS 2003-2004 p.76 pdf



CDC Tanzania has been at the forefront in the fight against HIV. In 2008, CDC in collaboration with the Tanzania Institute for Education (TIE), piloted an in-school (primary school) intervention on Life Planning Skills (LPS) in several regions including Dar es Salaam, Mtwara and Ruvuma. CDC Tanzania recognized that the in-school intervention targeting children would by itself not suffice, and searched for a community-based intervention that would complement LPS.

The Families Matter! Program (FMP) is an adaptation of the Parents Matter! Program (PMP) developed in the United States by the Centers for Disease Control and Prevention (CDC) in the 1980s and early 1990s. Data at the time showed that pre-adolescents were at risk of HIV infection particularly among Afro-American, and Latino/Hispanic communities. Four main factors were identified as contributing towards the HIV risk within the family context. These were;

- Parents lacked information and awareness of youth sexual behaviors
- Parents lacked awareness about their important and unique role as sex educators
- Parents did not have the information and opportunities to build positive parenting skills
- Parents did not have the information and opportunities to build skills and confidence necessary to communicate with youth about sexual issues

PMP was therefore designed to address these issues and improve parenting and the parent-child communication patterns with the aim at reducing HIV infection rates in the communities mentioned above. An evaluation of PMP showed that the program was effective. In 2001, a needs assessment conducted by the Kenya Medical Research Institute (KEMRI) in Nyanza Province showed that poor parent-child communication contributed to HIV infection. PMP was then adapted and renamed FMP. An outcome evaluation of FMP in Kenya yielded positive results making it a viable intervention targeting parents and guardians of pre-adolescents and contributing towards the reduction of HIV incidence rates amongst the youth.

T-MARC Tanzania received the award to implement FMP for a period of five (5) years on September 1, 2008.

³ FMP Implementer's Manual, 2010 p.17

⁴ H. Vandenhoude, K. Miller, J. Ochura, et al. Evaluation of a U.S. Evidence- Based Intervention in rural Western Kenya: From Parents Matter! To Families Matter!

About the Families Matter Program



Families Matter! Project (FMP) is an evidence based HIV/AIDS prevention initiative designed to promote positive parenting practices and effective parent-child communication about sexuality and sexual risk reduction for parents, guardians and caregivers of 9-12 year children. The aim is to reduce HIV incidence rates amongst the youth by targeting parents as vehicles of change.

The Families Matter! Project aims to bring a difference in Youth HIV/AIDS prevention efforts by targeting parents of pre-adolescents, equipping them with the necessary skills and knowledge about sexuality and sexual risk behaviours, encouraging abstinence and enhancing the delayed onset of sexual debut.



The intervention curriculum has three main objectives including:

- i) Raising parents' awareness about the sexual risks adolescents face today.
- ii) Encouraging positive parenting practices that increase the likelihood that children will not engage in risky sexual behaviors:
 - Parental monitoring (knowing where one's child is, who they are with, and when they will be home)
 - Positive reinforcement (use of praise and rewards to reinforce good behavior)
 - Relationship building (improving the parent-child relationship).
- iii) Improving parents' knowledge, comfort, skills and confidence to effectively communicate with their children about sexuality and sexual risk reduction (parental responsiveness).



The ultimate goal of the FMP in Tanzania is to reduce sexual risk behaviors among adolescents—including delaying the onset of sexual debut; by giving parents the knowledge, skills, comfort and confidence to discuss sexuality issues with their children. It is designed to give parents of children aged 9-12 years relevant information about ways that they can reduce their children's risk of becoming infected with HIV and other sexually transmitted infections, or falling pregnant.

FMP is delivered to groups of 12-18 parents by two facilitators (one male, one female) through a series of five consecutive weekly sessions and a booster session offered six months after the completion of the five-week intervention. Each session lasts 2.5 - 3 hours and builds upon the foundation laid in the previous session. The 9-12 year-old children attend the fifth session along with their participating parent. By the end of the program, parents should feel more competent and comfortable in addressing sex issues with their children. The booster session offered six months after parents complete the five-session program helps reinforce lessons learnt and provides a forum for discussing challenges that they have faced in putting their new skills into effect.

Project Achievements

T-MARC successfully adapted the Families Matter! Project to the Tanzanian context by conducting a Needs Assessment/Formative Assessment, successfully translating and producing the FMP training manual, training 25 certified FMP facilitators and successfully conducting FMP pilots in two target regions.



T-MARC has reached 16,424 parents/guardians of 9-12 year old children who completed all 5 FMP sessions (inclusive of 964 participants who completed the outcome evaluation wave) in both Mtwara and Ruvuma Regions. In Mtwara, geographical coverage included Mtwara Municipality and Mtwara Rural District, while in Songea geographical coverage was Songea Municipality.

Some notable achievements include;

- T-MARC implemented 18 training waves in two target regions covering a total of 29 wards (16 wards in Mtwara and 13 wards in Ruvuma). These reached 16,424 parents/guardians of 9-12 year old children completing all 5 FMP sessions (inclusive of the outcome evaluation wave of 964 participants) in both regions.



Directly 16,424 children aged 9-12 years were also reached through session 5. It is assumed that the project also indirectly reached another 16,000 children as parents are assumed to have more than one child in the family. An estimated 10,000 community members were also reached through community mobilization activities since 2010.

- Reached more than 2,300 community leaders through information workshops
- Established linkages with 29 Ward Executive Officers to coordinate effective recruitment of parents and guardians.
- Established 29 Community Advisory Groups (CAGs) as a mechanism for community feedback on the project implementation. Each CAG comprising not less than 10 people elected by their communities.
- Successfully recruited 4 sub grantees to assist in project implementation.
- Coordinated with the US mission in Tanzania to ensure that the US Ambassador met parents who completed FMP session in Mtwara during his visit to the area
- Mapped all intervention sites on Global Information System (GIS)
- Successfully conducted the Violence Against Children (VAC) pilot study
- Successfully completed baseline and intervention components for the outcome evaluation study.

T-MARC has secured additional funding from CDC to implement the scale of the FMP in six regions of Tanzania, beginning with Dar es Salaam and Shinyanga. Scale up of FMP into new regions with an additional 6th session on VAC is envisaged through establishment of a cadre of local Master Trainers. Formal linkages with HIV Testing and Counselling (HTC), Prevention of Mother to Child Transmission (PMTCT), Voluntary Medical Male Circumcision (VMMC), and condom uptake are to be established to assist FMP participants access such services.



Management and Administration

The purpose of Management Support is to provide all the necessary support functions for the implementation of Program activities guided by the Organization's financial, operations, procurement and human resources policies, procedures and processes approved by the Board of Directors.

During this year T-MARC engaged INNOVEX Development Consultant Ltd for a cost and revenue review analysis and subsequent forecast with the aim of determining the sustainability of the T-MARC in undertaking its operations. Four categories of costs were identified from a comprehensive review of the last three years financial statements. INNOVEX's analysis of the T-MARC cost revealed that the levels of all costs were within the sustainable thresholds except for the staff cost that was found to be very high. It is against this background and as a continuation of the Management efforts to manage costs, effectiveness and efficiencies that the current staffing structure (organogram), work organization and work processes has been reviewed. This staff rationalization exercise has given Management an opportunity to review work processes within the existing jobs, and to see the interrelatedness between jobs, in order to maximize value addition for each role and function.

T-MARC's HR Manual was revised in March 2014 to incorporate all the new policies that were approved and endorsed by the Board earlier this year. T-MARC's staff were engaged on the changes and provided with a copy of the new HR manual. T-MARC continues to review and where required updates its HR policies to ensure that these respond and comply with all new labour by laws in the country.

Capacity building support continued. A number of scheduled trainings with both local and international travels have been attended in this financial year.

Production and delivery of monthly financial reports and invoices to clients and donors was done on time, including the generation of quarterly project accrual reports, Board reports and narrative reports. The Finance department also tracks commitments for all projects and follows up to ensure that T-MARC has enough cash for its operations.

T-MARC has also instituted Sales policy to ensure sales are invoiced properly and sales proceeds deposited in CRDB bank account. PSI is invoiced monthly for sales of each month and payments are received into T-MARC sales bank account.

T-MARC year 2013 audit was completed at end of March 2014 as per statutory requirements; and approved by the board on 14th June, 2014. The final report has been shared to donors and stakeholders.

INDEPENDENT AUDITORS' REPORT TO THE BOARD OF T-MARC TANZANIA

An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant estimates made by management, as well as evaluating the overall financial statement presentation and disclosures.

We believe that the audit evidence that we have obtained is sufficient and appropriate to provide a reasonable basis for our opinion on the financial statements.

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of T-MARC Tanzania as at December 31, 2014, and its financial performance and its cash flows for the year then ended in accordance with International Financial Reporting Standards and Tanzania Financial Reporting Standards.

Report on other regulatory requirements

In our opinion, proper accounting records have been kept by the T-MARC Tanzania and the financial statements referred to in the preceding paragraph are in agreement with the accounting records and have generally complied with the requirements of Non-Governmental Organizations Act of 2002 (revised 2005).

INNOVEX Auditors
Certified Public Accountants
Dar es Salaam
Christopher Mageka CPA – PP




Date 2/09/2015

T-MARC TANZANIA FINANCIAL STATEMENTS						
STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 31 DECEMBER 2014						
	Notes	2014 PROJECTS & GRANTS TZS	2014 T-MARC TANZANIA TZS	2014 TOTAL TZS	2013 PROJECTS & GRANTS TZS	2013 T-MARC TANZANIA TZS
REVENUE						
Projects sales	4	-	736,210,900	736,210,900	-	764,884,272
Cost of projects sales	5	-	2,123,663,704	2,123,663,704	-	2,453,645,256
Loss on sales		-	(1,387,452,804)	(1,387,452,804)	-	(1,888,880,984)
Grants	6	6,837,552,024	-	6,837,552,024	6,886,330,828	6,886,330,959
Donor extension grant		-	575,836,800	575,836,800	-	-
Capital donation amortization		-	35,978,446	35,978,446	-	27,187,844
Inventory grant amortization		-	2,123,663,704	2,123,663,704	-	2,453,645,256
Other income	7	-	219,468,135	219,468,135	-	124,347,851
Total revenue		6,837,552,024	1,567,484,281	8,405,036,305	6,886,330,828	7,812,530,726
EXPENSES						
Staff Cost	8	(1,570,334,329)	-	(1,570,334,329)	(1,413,171,673)	(1,413,171,673)
Staff fringe benefit	9	(732,973,778)	-	(732,973,778)	(756,618,081)	(757,258,141)
Consultants	10	(32,544,242)	(969,900)	(33,514,202)	(77,737,595)	(2,456,300)
Travel and transportation	11	(96,206,500)	-	(96,206,500)	(430,126,822)	(438,880,422)
Supplies and equipment	12	(104,814,610)	(1,295,788)	(106,110,398)	(166,703,184)	(168,718,184)
Other direct costs	13	(506,859,638)	(1,198,180)	(508,057,818)	(631,875,372)	(636,778,926)
Program activities	14	(3,187,131,464)	-	(3,187,131,464)	(3,063,888,880)	(3,059,666,680)
Total project expenses		(6,230,864,561)	(3,463,898)	(6,234,328,459)	(6,546,150,403)	(6,583,020,820)
Interest earned/other income		-	(46,274,917)	(46,274,917)	-	(9,152,173)
Projects sales expenses		-	(736,210,900)	(736,210,900)	-	(764,884,272)
Depreciation		-	(35,978,447)	(35,978,447)	-	(27,187,843)
Total expenses		(6,230,864,561)	(821,928,162)	(7,052,792,723)	(6,546,150,403)	(7,364,033,908)
Surplus		606,687,463	745,556,119	1,352,243,582	339,180,425	448,496,818

The notes on pages 23 to 42 form an integral part of these financial statements. The financial statements on pages 18 to 22 were approved for issue by the T-MARC Tanzania on 23rd August 2015 and signed on its behalf by

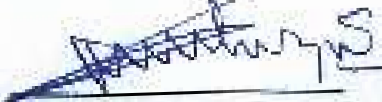
T-MARC TANZANIA FINANCIAL STATEMENTS

STATEMENT OF FINANCIAL POSITION AS AT 31 DECEMBER 2014

	Notes	2014 TZS	2013 TZS
ASSETS			
Non-current assets			
Property and equipment	15	68,143,323	104,121,770
Current assets			
Trade and other receivables	16	160,854,098	267,165,768
Placement in Bank M	17	2,011,115,069	261,115,069
Cash and cash equivalents	18	1,763,476,080	2,069,617,285
Inventory	19	2,844,550,358	873,850,582
TOTAL ASSETS		6,848,138,928	4,375,870,474
ACCUMULATED FUNDS AND LIABILITIES			
Retained earnings		1,667,523,534	836,681,865
Skills Development Funds		335,611,444	253,866,042
Total accumulated funds		2,003,134,978	1,092,547,727
Non-current liabilities			
Deferred capital grants	20	68,143,323	104,121,770
Current liabilities			
Payables and accruals	21	107,603,591	577,846,237
Deferred revenue grants	22	-	109,446,496
Deferred inventory grants	23	2,268,713,557	873,850,582
Amount due to projects	24	2,400,543,479	1,618,057,662
TOTAL ACCUMULATED FUNDS AND LIABILITIES		6,848,138,928	4,375,870,474

The notes on pages 23 to 42 form an integral part of these financial statements. The financial statements on pages 18 to 22 were approved for issue by the T-MARC Tanzania on 23rd August 2015 and signed on its behalf by:


Charles Singili
BOARD CHAIRMAN


Alex Mgongolwa
DIRECTOR

Report of the independent auditors is on pages 16 to 17.

