

Link with UK charity builds local skills

Welcome to CCBRT

CCBRT is the largest indigenous provider of disability and rehabilitative services in Tanzania.

Through its disability hospital, community programmes and outreach schemes in Dar es Salaam and the surrounding regions and via its programme in Kilimanjaro, more than 120,000 people directly benefit from CCBRT's services each year.

Website: www.ccbtr.or.tz

Quarterly Highlights

- Alliance with UK charity formed
- New database launched
- Free HIV/Aids testing kits arrive
- National study on disability and HIV/Aids progresses
- EU awards funding for day care centre
- Legal Aid cases outsourced
- Advocacy efforts stepped up

CCBRT has joined forces with the UK based international disability and development organisation Motivation to make wheelchairs and other mobility devices.

Motivation is generously providing a trainer to the Community Based Rehabilitation programme in Kilimanjaro who will share skills with the team on how to make special wheelchairs and seats for people with disabilities.



A young boy with cerebral palsy is supported in a seat made from local materials.



A child with cerebral palsy using a walking frame and, behind, parallel bars made simply from bamboo.

In Dar es Salaam, a CCBRT occupational therapist and a team of foreign students have been showing parents and caregivers in the communities how to make devices such as standing frames or special seats for people with disabilities (mainly children) from affordable and available materials such as bamboo. The students are carrying out a study on appropriate technology in the community and will come up with a handbook on which materials to use and

how to make affordable mobility and positioning devices.

This quarter we were also joined by two visitors from Madagascar who are looking at setting up a community based physiotherapy and rehabilitation programme there. They came for a week to learn how CCBRT operates and were especially interested in seeing how CCBRT builds local skills in the communities.

Empowering lives was just one discussion subject during a week long training session for international staff from Light for the World. CCBRT hosted the training which also presented a good opportunity for a welcome exchange of ideas. The group visited various project sites and received an overview of disability issues, medical and community based rehabilitation, hospital management, mobile outreach management as well as economic empowerment.

CCBRT doctors help establish fistula society

Two representatives from CCBRT have become founder members of the International Society of Obstetric Fistula Surgeons.

The inaugural annual conference of the Society took place in Addis Ababa, Ethiopia in mid September and Dr Perialis and Dr Robert from CCBRT attended.

The Society aims to ensure a high standard of fistula repair and treatment services in the world, share expertise and combine training efforts as well as undertake research in obstetric fistula. At the conference, a final draft of the Society's constitution was passed and discussions about VVF training look place.

CCBRT is the only regional training centre for fistula. Three trainees (mostly from Tanzania) each year spend a month at CCBRT's disability hospital gaining experience in fistula surgery. They then return to their hospitals and put the experience gained at CCBRT into practice whilst referring complicated cases to CCBRT.

Free HIV/Aids testing kits for CCBRT clients



A voluntary HIV/Aids test takes place.

“People with disabilities are particularly vulnerable to the HIV/Aids infection. So we are focusing our awareness raising and prevention efforts on this susceptible group.”

Erwin Telemans
Chief Executive Officer

CCBRT has started to receive free HIV/Aids testing kits from the government as part of the agreement reached when the home based care aspect of CCBRT's Holistic HIV/Aids Related Programme (no longer in existence) was handed back to the government. The first supply of these kits arrived in August via the Municipal council of Kinondoni (a region of Dar es Salaam) and they will be used mainly for our clients and patients—people with disabilities.

Each morning in the waiting area of the disability hospital, CCBRT holds an awareness

creation session on health issues (such as club foot, eye problems and HIV/Aids). After these sessions, some people, while they wait for their appointments, choose to go for counselling and testing. The kits are also used for hospital patients and by the community rehabilitation workers for clients wanting tests in their own homes.

As part of its assistance to The Tanzania Commission for HIV/AIDS (TACAIDS), CCBRT has jointly developed the terms of reference with TACAIDS and UNAIDS for the production of a major study on HIV/Aids and disability in Tan-

zania. TACAIDS and UNAIDS are in the process of establishing a steering committee for the project. The study, financed by GTZ, will focus on two rural areas and two urban districts and will provide the first picture on HIV/Aids amongst people with disabilities in the country.

The project is also supported by UNICEF and PEPFAR. Following the assessment, a Technical Support Plan, developed by consultants, will be established to make HIV/Aids strategies in Tanzania inclusive for people with disabilities.

Global financial crisis affects funding levels

The global economic slump has led to a drop in funding levels at CCBRT and some cut backs have had to be made. A number of non medical staff from the Dar es Salaam and Kilimanjaro programmes were made redundant, the car park logistics were reorganised and we had to reduce meals for patients from three to two a day.

As highlighted in last quarter's newsletter, the legal aid programme fell victim to depleting

funds and legal aid is now being outsourced to a local NGO called LASEHA which will take over all current cases and new referrals.

The long term sustainability of CCBRT was high on the agenda at a meeting of the General Assembly on 30th of August. Joint fund raising efforts with some of CCBRT's traditional partners were discussed. Another option to address long term funding needs for CCBRT was the potential establishment of an

International Foundation, and this was discussed at length during the meeting.

On the subject of sustainability, it is hoped that payment contributions from the clinic could rise following a recent study. During the assessment, many self funded patients said they would be prepared to pay more towards their medical care at CCBRT with the extra money paying for operations for the very poorest people in the country. More on this later in the year.

Advocacy efforts expanded

Following a visit from Suzan Boon of the Programme Development Unit, the CBR programme in Kilimanjaro is to step up its advocacy efforts. A number of sessions on disability with stakeholders and local government in the area revealed a certain lack of knowledge about disability issues and

MKUKUTA (the government's five year poverty reduction plan). The team is to arrange some regular meetings with local partners and other organisations to raise awareness about disability issues.

During Suzan's visit, ways of better utilising the well

equipped rehabilitation centre there were also discussed. The centre currently hosts intensive training weeks for parents (mainly mothers) and caregivers where they learn how to improve the abilities of their children and share experiences with others.



Mothers and caregivers attending a training session run by CBR Kilimanjaro.



A community worker visiting a cataract client. The new database will improve client follow ups.



A post surgery rest for an eye patient watched over by one of hundreds of toys kindly donated by a Belgian NGO.



Tom Bourez, Director of Community Programmes at CCBRT

New database to deliver efficiencies

After months of planning, preparation and trials, CCBRT's new database is up and running. The database contains a comprehensive log, accessible by both the hospital and community programme team, of all relevant information pertaining to CCBRT clients. For instance, each time a client receives a home visit or attends a support unit the information will be recorded. It is the first time that the data has been centrally computerised in this way and it will en-

able even greater co-operation between the hospital and community programmes. As well as improving client follow ups, the database will allow CCBRT to organise its services in a more efficient way and ensure a quality service is provided by allowing us to focus on the clients most in need. The database will also facilitate a much improved reporting line and provide greater financial transparency. Information inputted into the database can also be

disaggregated by various means such as gender, impairments and locations. This will allow us to recognise where particular patterns or trends may be emerging.

In due course, all patients discharged by the hospital will automatically be logged onto the database where community programmes will follow up each case to make sure that appointments are kept and home visits are provided where necessary.

Renovations and restorations commence

Quotes for construction and building work for a proposed new day care centre in a ward of Dar es Salaam are being collated. The joint CEFA/CCBRT proposal for the establishment of a day care centre got the green light in this quarter after the EU approved funding for the project. The centre will empower hundreds of people each year.

Restoration work commenced at Tanga Bombo hospital's eye unit in Au-

gust. The renovations should enable a better level of service. In addition, the eye clinic at Bububu Military hospital on Zanzibar is in the process of being upgraded. A memorandum of understanding between CCBRT, the Ministry of Defence and the German Armed Forces Technical Advisory Group (GAFTAG) for the renovations was signed in early August.

Meanwhile, on the eye and orthopaedic wards of the

disability hospital, children were delighted when they were presented with toys and clothes. A 40 foot container containing clothes, toys and other equipment arrived at the disability hospital in August courtesy of Magabu - a Belgian NGO. Also included were wheelchairs, standing frames, crutches and medical equipment such as operating theatre gowns. We are extremely grateful to Magabu for the contributions.

Meet the team : Tom Bourez

Tom Bourez joined CCBRT as Director of Community Programmes in September 2007 after volunteering in Kenya for Voluntary Services Overseas. Before that, an engineer by training, Tom created and designed medical and industrial products but a change of scene and new challenges beckoned. Thanks to cbm, Tom came to CCBRT and under his guidance, the community programmes have been restructured and refocused. In a re-

cent development, Tom also takes on responsibility for the Kilimanjaro Community Based Rehabilitation Programme which has two new managers recruited internally. He explains, "Bringing all the community programmes under one umbrella should allow for a more efficient allocation of resources and greater financial accountability. The Kilimanjaro team will work in parallel with us and receive a greater level of assistance from us."

Tom maintains that the most rewarding aspect of his job is: "The diversity of the role and the opportunity to build up a modern community based rehabilitation programme together with a motivated team." However, the global economic slowdown has already had an effect on CCBRT finances and he explains that the most challenging aspect of his role is trying to balance programme activities with falling funding levels.