

**COMMUNITY CONCERNS OF ORPHANS AND DEVELOPMENT ASSOCIATION
(COCODA)**

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COCODA 2019 ANNUAL REPORT

COMMUNITY CONCERN OF ORPHANS AND DEVELOPMENT ASSOCIATION

REPORTING PERIOD: 1 JANUARY – 31 DECEMBER 2019

Projects Implemented

- SAUTI Project
- USAID KIZAZI KIPYA Project
- USAID Tulonge Afya

Councils

Njombe Region councils:

- Njombe Town Council
- Njombe District Council
- Makambako Town Council
- Makete District Council
- Wanging'ombe District Council
- Ludewa District Council

Prime Recipients

- DELOITTE CONSULTANCY LTD
- JHPIEGO
- PACT TANZANIA
- FHI360

Implementing Partners

- LGAs
- Health facilities

Programme/Project	Budget/Year
• SAUTI	182,970,583
• USAID KIZAZI KIPYA	297,158,227
• USAID TULONGE AFYA	159,376,560
TOTAL:	639,505,370

Programme Duration

5 Years
5 Years
5 Years

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List of Acronyms / Abbreviations

AGYW	Adolescent Girls and Young Women
AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral
CBHS	Home Based HIV Services
CBHSP	Community Based Health Services Providers
CDO	Community Development Offer
CHF	Community Health Fund
COCODA	Community concern of orphans and development association
COME	Community mentors
CTC	Care and Treatment Clinic
DC	District Council
FSW	Female Sex Workers
GBV	Gender Based Violence
GBV	Gender Based Violence
HBHCT	Home Based HIV Counselling and Testing
HIV	Human Immunodeficiency Virus
IGA	Income Generating Activities
KP Prev	Key Population Prevention
LGA	Local Government Authority
MSM	Men Sex with Men
MVC	Most Vulnerable Children
OHSP	Other Hot Spot Population
OVC	Orphans and Vulnerable Children
PFSW	Partner of Female Sex Workers
PLHIV	People Living with Human Immunodeficiency Virus
PLHIV	People living with HIV and AIDS
PMTCT	Prevention of Mother-To-Child Transmission of HIV
PP prev	Priority Population Prevention
PPT	Periodic Preservatives Treatment
SBCC	Social Behavior Change Communication
SILC	Saving and internal Lending Community
SWO	Social Work Officer
TB	Tuberculosis
TC	Town Council
VCT	Voluntary Testing and Counselling
VSLG	Village Saving and Lending Groups

Executive Summary

Community Concern of Orphans and Development Association (COCODA) was formally registered as a non-governmental organization in Tanzania in year 2000 with registration No. 10278 under Ministry of Home Affairs. Later in 2015 it was assigned a new registration number 00NGO/00007795. COCODA was registered to operate anywhere in Tanzania Mainland but currently its activities are mainly located in Njombe region. The establishment of COCODA resulted from intensified concern among community members in Tanzania mainland over the surging number of orphans, mainly as a consequence to increased number of people infected with HIV and dying from AIDS, majority being adults leaving behind young children without parents. It was obvious then that this trend had a direct negative impact on social and community development. Hence, COCODA envisioned offering contributing its efforts towards addressing these challenges through awareness creation activities to local community members on facts about HIV/AIDS in order to cut down new HIV infections and stimulate mobilization for all matters related to HIV/AIDS including care of orphans.

Since its establishment COCODA has recorded scaled achievement as evidenced by substantial numbers of community members reached by various programmatic interventions executed by the organization as well as heightened level of partnership with the government, community based implementing partners and funding partners.

In the financial year of 2019, COCODA continued implementing three awarded project in all councils of Njombe Region. The three projects include; SAUTI project under JHPIEGO being implemented in all six councils of Njombe Region, USAID Kizazi Kipya project funded by USAID under PACT Tanzania implemented in Njombe District council, Njombe Town council and Makambako Town council and USAID Tulonge Afya funded by USAID under FHI360 being implemented in Njombe Town Council and Njombe District Council. On one hand, COCODA through the three projects, has managed to implement demand creation interventions for HIV, STIs, FP and GBV screening services reaching 8636 KVPs in all six councils of Njombe region. On the other hand, the organization identified 13222 OVCs in Njombe DC, Njombe TC and Makambako TC and reached them with nutrition, health, psychological support, education, food and household economic strengthening services through PEPFAR OVCs program. Furthermore, COCODA managed to conduct Interpersonal Communication interventions for HIV test and treat services, FP and ANC services in Njombe Town council reaching 32185 beneficiaries (11659 males and 20526 females) including men and women at risk of HIV, pregnant women and their partners as well as unmarried female and male youth (aged 15 -24).

PROJECT IMPLEMENTATION

In supporting GOT human development initiatives, COCODA has implemented its activities in collaboration with other stakeholders. Majority of projects that have been implemented by COCODA have had their main percentage of work requiring management of field work activities at community level. At each one given time COCODA has been implementing multiple projects in multiple community areas. The following is the description of projects implementation for the period of financial year 2019 in Njombe region basing on projects;

I. SAUTI PROJECT

Sauti project is a five year comprehensive HIV prevention project targeting Key Vulnerable Population (KVP's). The project is funded by USAID through PEPFAR fund and it is managed by JHPIEGO in partnership with Pact Tanzania, Engender Health and NIMR Mwanza. Sauti project seeks to contribute to the improved health status of all Tanzanians through a sustained reduction of new HIV infections in support of the United Republic of Tanzania's (URT) commitment to HIV prevention. The project is implemented through three key interventions that are biomedical intervention, Social Behavior Change Communication intervention and structural intervention including research conducted across all other interventions.

COCODA in FY 19 in partnership with JHPIEGO regional Sauti team implemented Sauti project activities in six councils of Njombe region. These councils are Wanging'ombe DC, Makambako TC, Njombe DC, Njombe TC, Makete DC and Ludewa DC. The interventions being implemented include Social Behavior Change Communication education to FSW and AGYW as well as demand creation in different hotspots to the KVP's not reached with SBCC education classes to access biomedical services offered by Sauti regional team. These biomedical services included HIV testing and counseling on sexual transmitted infection, Family planning and GBV Screening.

SBCC Intervention

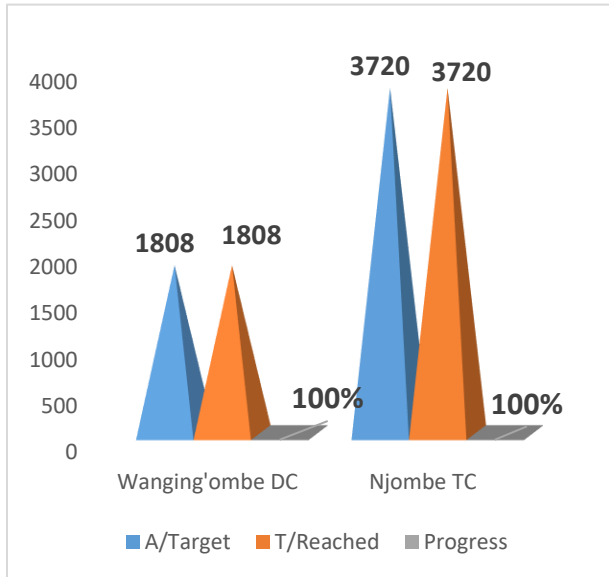
During this reporting time, COCODA SBCC team managed to conduct SBCC education to 9174 beneficiaries among them 6210 (5528 AGYW and 682 FSW) who were reached through group education while 2964 (234 MSM and 2730 FSW) were reached on individual education. 3167 beneficiaries accessed different biomedical services offered by Sauti project through CBHTC+ teams before changing of testing modality into index testing and 5564 were given referral to nearby health facilities. Thus 151 clients identified HIV+ in which 142 positives clients were successful enrolled to CTC.

Family planning methods also were offered to the beneficiaries whereby total of 3063 Methods were given of which 2271 offered to AGYW and 792 to FSW's. Similarly Gender Based Violence screenings were offered to SBCC participants through which 475 clients were GBV survivor.

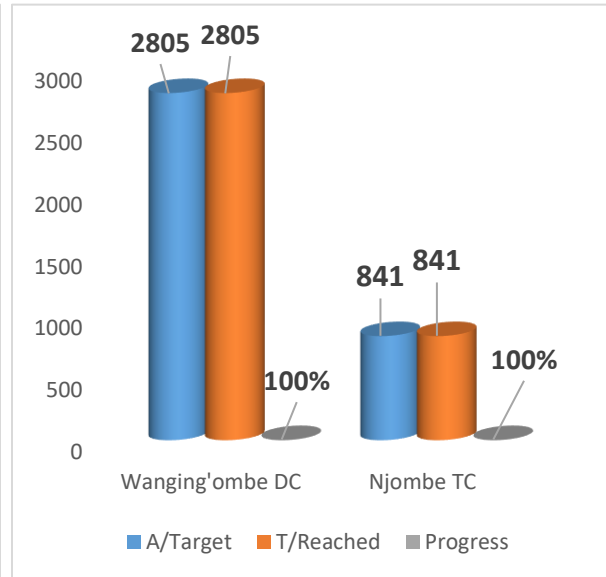


Photo: Igwachanya (left) after their sessions on 24 July 2019 and (right) AGYW SBCC Session at IGOMINYI on 15/07/2019 they were visited by Capacity building officer (Mwamini).

COUNCIL	REACHED WITH SBCC	PP PREV	KP PREV FSW		K P P R E V M S M	HT C	H T C +	YI EL D %	ENROLLED TO CTC	FP		GBV SC RE EN IN G	GBV SURV IVOR	GBV SURVI VOR REF
			IE	G E						AG YW	FS W			
Wanging'ombe DC	4613	1808	2244	561	NA	1730	80	5%	75	1142	729	3453	410	290
Njombe TC	4561	3720	486	121	234	1437	71	5%	67	1129	63	2803	372	185



Graph1: PP Prev in two districts



Graph2; KP Prev in two districts

Demand Creation Activities

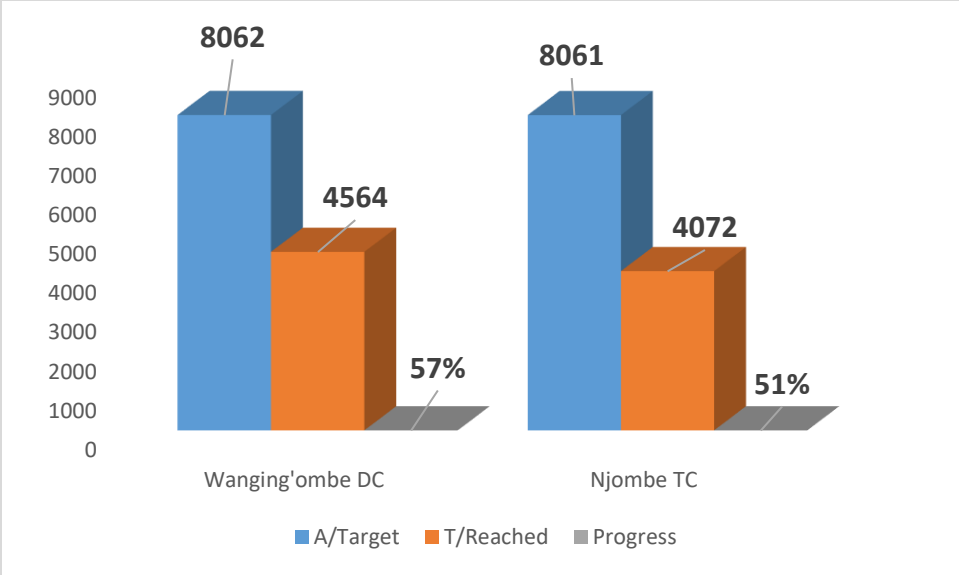
COCODA CBHS providers continued to mobilize KVPs in different hot spots in wards reached by Sauti CBHTC+ team and successful achieved to created demand for biomedical services to 8636 KVP's among them 2025 were AGYW, 2951 FSW, 71 MSM, 54 pediatric and others 3535 i.e. PFSW and PWHR. A total of 603 positive cases were identified however only 538 positive cases were successful referred for enrollment to CTC.

Also in this FY 19 in collaboration with SAUTI regional team, COCODA conducted ART Outreach services to the groups that formed in the community. This services started on June to September 2019, 6 CTC facilities at Wanging'ombe DC and 6 mother CTC in Njombe TC were selected. Total of 974 beneficiaries were reached through ART outreach services. Also by using 40 trained Expert Clients we provided PSG meetings to these beneficiaries from June to August.



ART group refill at Wikichi Ramadhani ward Njombe TC on 13/08/2019 listening to ART clinician for Sauti and government providers.

COUNCIL	REACH ED	FSW	AGY W	MS M	PFS W	PWH R	PE D	HTC +	LINKE D
Wanging'ombe DC	4564	1681	791	0	710	1335	47	358	289
	HTC+	102	29	0	42	131	7		
Njombe TC	4072	1275	1230	71	701	783	15	292	249
	HTC+	103	63	2	59	62	3		



Annual demand creation graph of two sub nation units.

Pre Exposure Prophylaxis Services (PrEP)

In January 2019 we had total of 74 PrEP beneficiaries from Njombe DC (26 beneficiaries at Kidegembye ward, 28 beneficiaries at Mtwango ward and 20 beneficiaries at Lupembe ward), In February we had 66 PrEP beneficiaries from Njombe DC (23 beneficiaries at Kidegembye ward, 27 beneficiaries at Mtwango ward and 16 beneficiaries at Lupembe ward. In March 2019 we had of 65 PrEP beneficiaries from Njombe DC (21 beneficiaries at Kidegembye ward, 25 beneficiaries at Mtwango ward and 19 beneficiaries at Lupembe ward) where they continued sharing their experience on using PreP service.

II. USAID KIZAZI KIPYA PROJECT

PACT Tanzania has sub-granted COCODAO to implement USAID KIZAZI KIPYA Project activities in Njombe town, Njombe District councils, and two project wards in Makambako Town Council. The two project wards in Makambako TC are included by target and budget in Njombe district council. Interventions implemented through this project include; provision of services to beneficiaries (OVC) at households and community levels in collaboration with LGA, Lively-hood volunteers and community case workers (CCW). To realize its intended objectives USAID Kizazi Kipya project has built on results areas which deliver services to its beneficiaries such services including Health, Education and vocation training, Shelter support, Psychological support , Nutrition and food security and Households economic strengthening.

Results areas that USAID Kizazi Kipya operated are;

- Result 1: Parents and caregivers have the financial resources to meet the needs of vulnerable children and adolescents.
- Result 2: Parents and caregivers have the skills to meet the needs of HIV infected and vulnerable children and adolescents.
- Result 3: High-quality services are available to HIV infected and vulnerable children and adolescents.

Project Geographical Coverage summary

USAID Kizazi Kipya project Geographical Coverage summary

District	Total number of wards in the Districts	Number of wards covered	% of wards covered	Number of villages covered
Njombe DC	12	12	100	45
Njombe TC	13	13	100	44
Makambako TC	12	2	16	9
Total	37	27	84	98

USAID Kizazi Kipya’s operation involves a number of stakeholders including

1. Orphans and Vulnerable Children (OVC);

These are children, who are HIV infected or affected,

2. Most Vulnerable Children (MVC);

Children under the age of 18 years characterized by severe deprivation as to endanger their health, wellbeing, and long-term development, also these are primary stakeholders.

3. Caregivers;

These are the guardians, who have the greatest responsibility for the daily care and rearing of children,

4. Adolescent;

An individual between ages 10–19 years.

5. Community Case Workers (CCWs);

Government community-based cadre who receive the 5-day National Integrated Case Management Training and who are expected to provide case management services to OVC/MVC households.

USAID Kizazi Kipya Project under COCODA implemented into three councils which are Njombe Town Council, Njombe District and Makambako Town Council.

Under USAID Kizazi Kipya project there are four major Interventions/indicators that are used to measure the project progress and services that are delivered to beneficiaries (OVC and Caregivers). USAID Kizazi Kipya has four major indicators including;

1. OVC_SERV

This count the number of beneficiaries served by PEPFAR OVC programs for children and families affected by HIV .OVC_SERV is assessed at the individual level.

2. TZ_NUT

This count on OVC under the age of 5 (0-4) who received nutrition services (NACS) outside the service delivery points.

3. TZ_ECON

This indicator takes count of beneficiaries (Caregivers and OVC aged from 15-18) who received a minimum economic strengthen services under USAID Kizazi Kipya project.

4. OVC _HIV STAT

It is a measure of self-report of HIV status and is not an indicator of HIV tests performed or receipt of testing results. Facility-level HIV testing data are captured with another PEPFAR indicator (HTS_TST).

Beneficiaries reached by USAID Kizazi Kipya during FY 2019 (By each indicator)

During this annual reporting period, COCODA through Community Case Workers (CCWs), achieved to conduct household visits to 2375 households of Njombe TC, 2666 households of Njombe DC and 217 households of Makambako TC and delivered the health, psycho-social support, and economic strengthening services.

However, those household visited were managed to be provided with different key services that contributing towards the key project indicators to beneficiaries such as OVC_SERV to 507 (Makambako TC), 6356 (Njombe DC) and 6359 (Njombe TC). TZ_ECON to care givers 155 from (Makambako TC), Care givers 2185 (Njombe DC) and Care givers 2399 from (Njombe TC). TZ_NUT 234 (Makambako TC), 2171 (Njombe DC) and 2509 (Njombe TC). All these activities were implemented by COCODA under the supervision of PACT Tanzania Southern Cluster.

Education and vocational training.

In this annual reporting period COCODA in collaboration with LVs and Community Case Workers achieved to provide education services to OVC who were supported in vocational training at FDC Njombe through different courses. Moreover different services which were provided to OVC including education needs and scholastically materials such as; School uniform and school fees, those material were supported through Worth Yetu groups whereby 775 OVC was from Njombe TC, 39 OVC from Makambako TC and 746 OVC from Njombe DC.

Nevertheless; 25 OVC out of 31 who were supported to VETA at vocational training Centre FDC Njombe were supervised and it was observed that, through the toolkit provided by USAID Kizazi Kipya project they can manage to earn 70-100 Tshs per month which helped them to handle their families as the picture below shows one of OVC who were supported by USAID Kizazi Kipya project continue working in her residential after completing the tailoring course and provided with toolkit



The picture above shows OVC out of school conducting tailoring (left) and COCODA staff (right side) during supportive supervision at Mfriga Ward- Madeke village Njombe District Council

Shelter support.

In order to ensure that households grow better CCW in partnership with COCODA staff has been providing education for caregivers on how to improve housing by connecting them with various groups of entrepreneurship. Community Case Workers in collaboration with Livelihood Volunteers and other shareholders has achieved to provide Shelter services to 10 OVCs Njombe Town Council, 14 OVC from Njombe DC and 2 OVC from Makambako TC this service were provided to OVC and their care takers who were referred by the USAID KIZAZI KIPYA Community Case Workers in different ways, trough VSLG groups and individual people who sensed the need of the OVCs.

Psychosocial support.

Likely wise, in this financial year psychosocial support has been a very important service to USAID Kizazi Kipya because it makes people feel better and continue with their life despite of being vulnerable. Therefore; in this annual report of 2019, COCODA managed to provide psychosocial support to **3** OVC from Njombe TC, 2 Njombe DC and 1 Makambako

Nutrition and food security (TZ_ NUT).

In order to ensure that, families and OVC improve their health Community Case Workers (CCWs) in collaboration with District Nutrition officers at Health facilities have continued in providing education on importance of food balanced diet using the food groups available in local areas so that Households can change attitudes of nutritional foods as Njombe Regional is a lead on stunting about 53.6%. A total number of 3372 OVC from Njombe District Council, 1966 OVC from Njombe Town Council and 108 OVC from Makambako Town Council were assessed their nutritional status by using MUAC tape in this Assessment SAM were 0, MAM 0 and those were in good nutritional condition.

Meanwhile; during this annual reporting period Livelihood Volunteers managed to support OVC though social fund provided in Worth Yetu groups and we managed to provide support to 564 OVC (M= 253 &F=311) in Njombe Town Council, 481 OVC (M=190 &F=291) from Njombe District Council and 55 OVC (M=25&F=30) from Makambako Town Council and those OVC were supported by scholastic materials, food, soap and sugar.

III. USAID TULONGE AFYA

The USAID Tulonge Afya project catalyzes opportunities for Tanzanians to improve their health status by transforming socio-cultural norms and supporting the adoption of

healthier behaviors. By addressing key social and cultural norms and social and behavior change (SBC) needs, USAID Tulonge Afya identifies the drivers of behaviors directly tied to health and leverages social and behavior change communication (SBCC) and other mutually reinforcing approaches to achieve the following results:

- Result 1: Improved ability of individuals to practice healthy behaviors
- Result 2: Strengthened community support for healthy behaviors
- Result 3: Improved systems for coordination and implementation of SBCC interventions

Our integrated approach blends best practices from behavioral health sciences to address the complex individual-to-societal interplay that encourages change. USAID Tulonge Afya uses participatory, evidence-based, and theory-informed approaches. Through this, the project 1) addresses norms and inequities that drive poor health; 2) advance health while promoting rights; 3) use data better to support regional needs; 4) harmonize messages and media; 5) strengthen institutional capacity to manage and deliver high-quality SBC; and 6) facilitate coordination to maximize SBCC impact and efficiencies.

Under USAID Tulonge Afya, COCODA provides support across a range of health areas, which include, but not restricted to:

- i. Test and Treat awareness-raising campaign to promote HIV testing and treatment initiation
- ii. Prevention of mother to child transmission of HIV (PMTCT)
- iii. Voluntary medical male circumcision (VMMC) and early infant male circumcision (EIMC)
- iv. TB testing and treatment
- v. Youth-friendly health services, including sexual and reproductive health (SRH)
- vi. Family Planning (FP), including male partner involvement
- vii. Insecticide-treated net access and use (ITN)
- viii. Malaria care-seeking
- ix. Early initiation of Antenatal Care (ANC)
- x. Respectful maternity care
- xi. Facility-based delivery
- xii. Early childhood development, including exclusive breastfeeding, new-born care, and vaccinations

Through the network of Community Health Workers (CHWs), Community Volunteers (CVs), and Peer Champions (PCs), COCODA implements activities within two social and behavior change (SBC) platforms: an adult platform, and a youth platform by conducting target audience mobilization activities and Interpersonal Communication (IPC) sessions through the following approaches:

- i. Household visits

- ii. Community dialogues- small group dialogue
- iii. Referrals and linkages to health services, including peer navigators
- iv. Community mobilization

To support and reinforce the interpersonal communication work, COCODA works closely with local community radio by linking the selected radio stations with the target audiences.

Project Beneficiaries

The beneficiaries of this project under the two platforms are categorized as follows;

Adult Platform

1. Pregnancy and pregnancy packages

Primary audience: Pregnant women and their male partners

Secondary audiences: health providers, other key influencers (mothers, mothers-in-law, aunts, peers, community and religious leaders)

2. Parenting and caregiving package

Primary audience: parents and care givers 18-49

Secondary audiences: influential family members, traditional leaders, religious leaders

3. Furaha Yangu

Phase I: at risk men 25-35, AGYW, Pregnant women, KP, OVC

Phase II: Men 18-24, 25-49 and in highest risk occupation, pregnant women, key population, care givers of HIV exposed children, PLHIV and people with TB

Youth Platform

Primary target audience

1. Unmarried, sexually active older adolescent girls (15-19) (Subira)
2. Unmarried, sexually active emerging adult women (20-24) (Edna)
3. Older adolescent girls who have begun childbearing (15-19) (Maua)
4. Unmarried, sexually active young men (15-24) (Juma)

Secondary audiences

1. Parents
2. Female sexual partners
3. Health care providers
4. School teachers and administrators

Achievements

In this reporting period, COCODA managed to reach 32185 beneficiaries in Njombe Town Council (October 2018 to September 2019). Beneficiaries have been reached with SBCC messages of Furaha Yangu campaign through small group sessions conducted by CHWs

and CVs. Small group sessions have been conducted reaching both male and female youth through the SITETEREKI youth platform, pregnant women and their partners have been reached through the NAWEZA adult platform and Time Household Visits have been conducted for targeted audiences for the parenting and caregiving package.

These activities were implemented in all wards of Njombe Town council through household visits, small group sessions, community meetings, community events and workplace events. The target for these SBCC activities was to reach 31585 beneficiaries, COCODA managed to reach 32185 (11659 males and 20526 females) beneficiaries which is equal to 102 percent performance.



Photo: Furaha Yangu small group session at Mbega village, Matola project ward during monthly supportive supervision visit

Human resources

COCODA is equal opportunity institution employing staff from various backgrounds to implement projects. During financial year 2019, COCODA hired 36 employees to implement projects activities as well administrative functions of the organization. The table below illustrates number of staff hired by COCODA categorized by project.

In which SAUTI project had 7 staff, USAID Kizazi Kipya had 23 staff and USAID Tulonge Afya project had 6 staff.

SNo.	Project Name	Number of Staff
2.	SAUTI Project	7
3.	USAID Kizazi Kipya	23
4.	USAID Tulonge Afya	6
	Total	36

Challenges

- Shortage of condoms at the community level in areas such as hotspot areas (Bars, tea plantations, mining areas and timber sewing areas, guest houses and lodges).
- Lack of GBV data collection tool and GBV guidelines at community level.
- Improper channels in solving GBV problems arising in the community (many cases are channeled to WEOs and VEOs rather than CDOs or SWO).
- Raining problem. During raining season it was difficult to reach some areas for supervision activities as well as during provision of biomedical services. This was experienced on February, March and April.
- CHF service is not applicable to some private centers and it discourages PLHIV clients and community to contribute for CHF services.
- Long distance and lack of transports to PLHIV clients to reach CTC centers during CTC clinic days lead to missed appointment and LTF to PLHIV clients.
- Wrong addresses of PLHIV clients during CTC registration, they are using nick names and wrong address it gives hard time to CHWs to be traced when they appear as missed or LTF clients.
- Shortage of CHWs in project implementation areas hinders project activities such as enrolment of new PLHIV clients, enrollment of new household with OVCs.
- Reallocation of the CHWs who trained on CCD package to other health facilities where there is no ECD corner established, then left ECD corner with no CHWs with prior CCD knowledge.

Way forward

- Providing education support to the community level so as to be aware with GBV issues, food nutrition, economic issues, TB Screening, family planning issues and prevention of new HIV infections.
- Increasing the enrollment of CHWs to support COCODA to implement projects and bring better results in areas such as enrollment of new PLHIV clients, educating PLHIV clients and non PLHIV clients on family planning issues, GBV cases, food and nutrition's, economic issues, TB screening, missed up, provision of SBCC educations and LTF clients tracing.
- Requesting private health sectors to agree with CHF services scheme in order to provide better health services to the community.
- COCODA and other stakeholders should communicate to ensure the possibilities of collaboration in some of their activities.

Success story

A CHW HAS HEPLD ME LIVE A HEALTHIER LIFE

This is a success story about Christon Mwalongo. He is 19 years old and lives at Mbega village, Matola administrative ward in Njombe Town Council. Christon Mwalongo is a farmer who mainly cultivates maize and round potatoes. He is not married yet. He had developed some serious HIV symptoms including unending coughing, skin rashes and ulcers, and general body weakness. He was no longer able to carry out his farming activities with normal ability and vigour as would a person with perfect health.

As Furaha Yangu campaign was rolling out by performing community level activities, Christon was visited by Imelda Mgaya who is a Community Health Worker with the USAID Tulonga Afya project. He was educated and advised to visit a nearby health facility to have tested for HIV. At the first time he refused. The CHW had to pay him a visit a second time to advise him to do the same, this time he agreed but he demanded being escorted by the CHW to a health facility. They went together to Matola dispensary.

Christon Mwalongo tested positive for HIV. With advice and encouragement by the CHW and a health worker at the health facility the client was enrolled in the ART immediately. Since then he has been faithfully using the ARVs that have improved his health with time. He collects ARVs at Makowo CTC.

Christon Mwalongo shows no any symptoms for a HIV positive person. He is in good shape and well able to carry out his farming activities without any difficulties. He is very grateful for the Furaha Yangu campaign and CHW activities that has helped him live a healthier life.