



ROTARY FAMILY HEALTH DAYS (RFHD) PROGRAMME SUMMARY

MOZAMBIQUE

2023

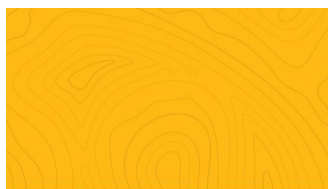
GISELA BETTENCOURT | RFHD Country Chair, MOZAMBIQUE



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Highlights

- This was the first time the Rotary Family Health Day was in Mozambique. We could set up all the necessary structures according to RFHA and Rotary District.
- We had the blessing and support from the Minister of Health Dr. Armindo Tiago, giving us all the support from the National Government and also local authorities at different levels to provide essential care at the Family Health fairs.
- The local authorities were involved during the concept and launch of Rotary Family Health Days in Chimoio and Boane. In Manica, we had the presence of the Secretary of State of Manica Dr. Edson da Graça Macuacua, and also representatives from the Provincial Governor, Municipal and Provincial Health Department for the RFHD launching on 2nd of December.
- Rotarians from both Districts were involved, 9210 and 9400, including the Rotary Clubs of Chimoio and Chimoio-Planalto for the launch in Chimoio City, and Rotary Clubs of Maputo, Maputo-Metro, Matola, and Polana for the Fair in Boane District.
- The second day of the Health Fair in Chimoio included the disabled people in partnership with the Provincial directorate of children, gender, and social action and Partners, after their commemoration of the International Day of People with Disability (3rd of December).
- The campaign had the participation of most of the NGO's health partners from the National Health System, who were engaged in the coordination and organization: UNICEF, Bill & Melinda Gates Foundation, VSO, Pathfinder, ECHO/Abt, Save the Children, GCR, and also NGO's and local Community-Based Organization.
- Monitoring and evaluation data were collected with volunteers from Rotarians, Rotaracts, and other NGOs from the NGOs, such as VSO and scouts.
- The local TV and Radio Media were present at the Rotary Family Health Days.



RFHA CEO Sue Paget with the Secretary of Manica Dr. Edson Macuacua and DG Manuela Matambro from District 9210.



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Positive Impact

Hosting a global-scale program like the RFHA is an honor for Rotarians in Mozambique, especially for both Districts 9210 and 9400. This was one of the programs presented at Rotary International's presidential visit when RIP 2021-22 Shekhar Mehta visited Maputo in March 2022, and we believe this was the beginning of a new era of opportunities for projects with impact in Mozambique.

Through RFHA Inc and RFHD, Rotarians and partners can work together to provide sustainable life-saving care and education across Mozambique. This large-scale program, allows multiple sites to operate and benefits thousands of people.

Rotarians in Mozambique have been carrying out projects with significant social impact in their communities. The RFHD, however, brought even more recognition for Rotary International and its Action Groups in different areas, from the local authorities.

During the first phase of the pilot project, the primary objective was to create an organizational structure at Rotary clubs and Districts levels, in partnership with the Rotary Family Health Action Group, the selection of a national coordinator and both district coordinators, the establishment of a legal entity, the opening of a special bank account for the project, the involvement of Rotarians, the establishment of public and private partnerships, and the launch of the RFHD. Within four months, all of these goals were achieved.

As a national program, RFHD united all Rotarians in Mozambique for the same purpose. Under the support of the Minister of Health, Dr. Armindo Tiago, we were able to establish partnerships and agreements across different national spheres. Partnerships with provincial representatives, such as the support of the Secretary of State for the Province of Manica Dr. Edson Macuacua and the Governor of the Province of Manica Excia. Francisca Tomás. Furthermore, we collaborated with the municipal level from Chimoio city and Boane village, private partners and international and national nongovernmental organizations to organize the launch of Rotary Health fair Days.

This first edition helped Rotarians better understand Rotary and the impact and value of what Rotary Family Health Day can have on their communities. The concept is now clearer to Rotarians, with more learning and experience.

Gender inclusion was a key component for RFHA and Bill and Melinda Gates foundation partnership. It was evident that some of the partners involved brought screening material for female diseases such as cervical cancer, family planning, and HPV screening, along with other social inclusion projects. We can also mention that more than half of the volunteers at the fair were women.

Executive Summary

This global Rotary Action Group for Family Health & AIDS Prevention is a mobilizing partner of Rotary International and is dedicated to disease prevention and treatment, bringing preventive community health care to Africa and India. In partnership with the Bill and Melinda Gates Foundation, RFHA has decided to expand this large-scale project to 11 African countries, including Mozambique.

Globally, RFHA oversees a network of Program Directors and teams in each country where we operate. In Mozambique, the national coordinator is Rotarian Dra. Gisela Bettencourt, the current President of the Rotary Club of Chimoio-Planalto, and District Coordinators were nominated by the Governors of Districts 9210 and 9400. From 9210, Rtn. Dr. Khanyisa Bomba is the coordinator of the central and northern regions of Mozambique. Dr. Igor Capitine, currently the President of Rotary Club of Polana,, is the coordinator of the southern regions of Mozambique, D. 9400.

At the three-day fair, RFHDs offer comprehensive, integrated, and preventive health programs for communicable and non-communicable diseases. Citizens can receive free health screenings, lifesaving immunizations, education about disease prevention, and referrals for follow-up care. As part of the strategy, the Ministry of Health has been involved from the beginning, ensuring that services provided are consistent with the national health program. It is for this reason that the services offered at the fairs are provided by a common agreement with the public partners, the health care providers.

A special inclusion in the Mozambique edition of RFHD was the Polio Vaccination Campaign. These interventions are especially relevant given the return of Polio cases, especially in the center and north regions. Collaboration with UNICEF and health services would enable us to develop awareness, vaccination, and social mobilization materials for upcoming vaccination campaigns.

Amidst a tight timetable, Rotarians launched RFHD in 2022. The launch included the selection of two sites for RFHD. Chimoio, in the Manica province, hosted the official national launch on the 2nd of December, and the fair lasted for two days. A second fair was also launched in Boane village, in Maputo's province, on December 3rd.

The program was implemented through several contacts with strategic partners, including mobilizing Rotarians to participate. Public authorities and non-governmental organizations praised this initiative. The realization of this project would not have been possible without everyone's support.

Our team at RFHA wishes to thank all its partners, Rotarians, and funding partners for their support, specially for the Bill and Melinda Gates Foundation. Through this time, the RFHA team has provided both on-site and virtual support, headed by Sue Paget. As a result of much collaboration, the launch of RFHD in Mozambique was certainly a success.

Background

Rotarians for Family Health and AIDS Prevention Inc. (RFHA)

Rotarians for Family Health & AIDS Prevention (RFHA) is a global Rotarian Action Group and mobilizing partner of Rotary International. RFHA creates the design, obtains the resources and has overall management responsibility for Rotary-led disease prevention and treatment programmes such as the Rotary Family Health Days. RFHA's mission is to save and improve the lives of children and families who do not have access to preventative health care and education. This is done through the mobilization of Rotarians, national and global partners. RFHA's direct impact is the **strengthening of infrastructure on health care delivery systems** worldwide.

RFHA's role in the RFHD programme is to act as the lynchpin organisation to initiate the programme, obtain buy-in from partner organisations and funding sources and to co-ordinate the work with all implementing partners leading up to and over the three-day event. RFHA further provides mechanisms, tools, platforms and training to assist the three Rotary Districts and clubs in the roll out of the RFHD's as well as developing a comprehensive Media and Communications strategy delivered through a dedicated Media team.



Impact:
Strengthening the
infrastructure on
health care
delivery systems
worldwide

Rotary Family Health Days: A Public Private Partnership

The services offered by the campaign are integrated with National Health System programs and objectives: SRH, Care & Treatment for HIV, Prevention and Counseling (HIV testing, STIs, breast cancer, cervical cancer, HPV, Malaria), MMC, Immunization (Covid, Polio, and others), dental and eye care, dietetic education, screening and prevention of chronic diseases as hypertension and diabetes. Liaison between the Provincial Council on AIDS and other IPs and NGOs was a priority.

The Minister of Health requested the program to do something unique from other health fairs. This was because, in this edition of the pilot project, campaign actions against Polio would be included. This is because the country has been conducting vaccination campaigns against the disease since confirmed cases of the disease have returned to some regions in the center and north. Rotarians almost rejoiced at this request, because eradicating Polio has been Rotary's flagship project for more than 40 years. In its most basic sense, Rotarians are social mobilizers. A second request was to raise awareness of sexually transmitted diseases and early pregnancy among girls. In order to accomplish this, some of the pregnancy items were donated to the fair's girls. Health and medical services were also complemented by social services, including raising awareness about domestic violence and issuing identification cards.

A formal invitation to establish RFHD in Mozambique was given by CEO Sue Paget in July 2022 to the governors of District 9210 and District 9400, DG Manuela Matambo and DG Kokie Makunyane-Quashie. In order to implement the program on a nationwide basis, a national coordinator and district coordinators were appointed, divided into two districts. RFHA and RFHD were introduced to Rotary clubs so they could take part in the 2-year trial project and accept to participate.

The legal structure was established, along with the signing of memorandums of understanding between Rotary International Districts from Mozambique and the RFHA, obtaining a letter of support from the Minister of Health, and the approval and support of various public spheres, including approval and support from the Secretary of State and Governor of the Province of Manica, as well as the public health sector. The RFHA and RFHD were presented and invited to key stakeholders including the US Ambassador for Mozambique, USAID, CDC, Peace Corps, GPEI members (WHO, UNICEF, Bill and Melinda Gates, GAVI), local partners, NGOs, and media outlets. Due to a successful bank account opening and timely funding, we were able to start the project on time.

Rotarians and others associated with the fair were visited in Chimoio, Beira, and Maputo between the time of the fair's formalization and execution to explain the concept of the RFHA and RFHD. Next, the coordinating team conducted training sessions on monitoring and evaluation, for the clubs for better planning and execution.

A number of planning meetings were held with different project partners and the media as part of the social mobilization process.

Rotarians' commitment to the organization was evident during the launch of the Fair. For the Rotary Family Health Fair's official launch, all logistics, media coverage, and outreach were organized by them. Our official launch in Chimoio was attended by Sue Paget, RFHA CEO, and Andrea Thompson of the Bill and Melinda Gates Foundation.

One of the most important observations was how the Rotarians set up and supervised the fair on both days. The Provincial Health Services, the Provincial Directorate of Health, Chimoio Provincial Hospital, the District Health Services, the HIV and AIDS Provincial Services, the Gender, Children, and Social Action Provincial Services, as well as other partners who contributed and shared information on health-related activities, highlight the variety of health services available to the population.

Despite the fact that the mobilization wasn't as strong as expected, the fair had the presence of hundreds of people. The choice of location was a learning experience for this first edition. In spite of all challenges, Rotarians and volunteers contributed greatly to the monitoring and evaluation process.



RFHD Program Model



Primary Partners and Funders

- Minister of Health
- Secretary of Province State of Manica
- Provincial Health Department Manica and Maputo
- Health Provincial Services of Manica and maputo
- City Councilor from Chimoio and Boane
- Bill and Melinda Gates Foundation

Media Support Partners

- SOLIDAR
- TVM
- RÁDIO MOÇAMBIQUE
- RÁDIO COMUNITÁRIA GESON

Implementing and Support Partners

- HOSPITAL PROVINCIAL DE CHIMOIO
- VSO
- CDS
- FDC
- ANDA MANICA
- EMOSE
- KUBATSIRANA
- CMS
- MCD
- AMODEFA
- Save The Children
- Solidar
- Red Cross
- ADPP
- Dreams
- Kenguelekeze
- EcoSIDA
- GCR
- Centro Salvatorianos de Messica
- Farmácia Central
- Civil identification services

Planning and Implementation of the Rotary Family Health Days

Determining the Dates

Upon receiving the proposal, we felt that the launch should be carried out by the end of the year. As a first step, we needed to secure public approvals to hold the fair, partner support, convene and transport the population, and most importantly, construct the financial infrastructure to receive funds. It was also important to consider the rainy season's approach, which could disrupt the event.

Both sites were expected to launch by mid-November. As a result, we had to postpone until December due to the completion of the structure. In Chimoio, a date was proposed in collaboration with the Provincial Services to Combat HIV and AIDS, along with other public partners, so that the government could already carry out its campaign on December 1st to fight HIV-AIDS, while Rotary would organize a health fair incorporating different health services for the population for the following dates. The two-day health fair event ended up coincident with the International Day for Persons with Disabilities on December 3rd, and the Provincial Directorate for Children, Gender and Social Action joined us on the second day of the fair so that, after their public acts of the day, people would be able to take advantage of the health services available.

As a result, the launch of the RFHD in Mozambique was scheduled for the 2nd and 3rd of December in the city of Chimoio. On the 3rd of December, clubs in the province of Maputo also held an RFHD fair in Boane.

Selecting the Sites

There are few clubs in Mozambique, which are mostly distributed in three provinces. Based on the two Rotary Districts, the coordinators selected Chimoio and Maputo as the sites for the first pilot RFHD fair. In Beira, the program was presented to clubs as well, but they opted to wait until the next edition.

Together with local authorities, particularly municipalities, the sites were selected. There should be a list of conditions so that we can offer a more diverse range of services.

Mapping the Sites

The fair was launched at two locations. There is one in District 9210, in the city of Chimoio, and one in District 9400, in the village of Boane.



Training the Teams

The RFHA provided us with full training support. A wide range of training support materials was developed for Rotarians, partners, and the involvement of key partners.

At the invitation of the Minister of Health, Dr. Armindo Tiago, Sue Paget accompanied by Gisela, the National Coordinator, and Igor, the District Coordinator, were present at the Minister of Health's building to introduce RFHA Inc. and the concept of RFHD.

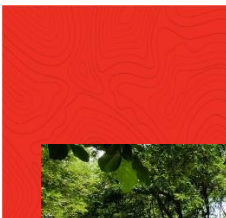
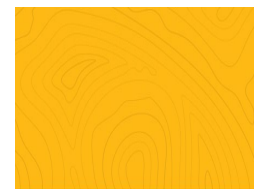
In addition to being didactic and comprehensive, the material provided by the RFHA team was easy to understand. Using the Portuguese-translated materials, coordinators then distributed the information to Rotarians during specific project meetings. Also, the material was used to engage some partners in understanding the Rotary Family Health Day's impact and the work it does.

The Launch

It was planned that the RFHD would be launched in Mozambique on December 2nd in Chimoio, the hometown of District 9210 Governor Manuela Matambo, with the CEO of RFHA, Sue Paget, in attendance.

A press conference was held before the launch day to explain to the public the launch of this project in Mozambique. DG Nela, Sue, and Gisela attended a conference for national and community radio, followed by a national outreach interview on the national TV network.

The launch ceremony was attended by Dr. Edson Macuacua, the Secretary of State for the Province of Manica, Representative of the Minister of Health, Chief Physician Dr. Flávio, the Provincial Health Director of Manica, Dr. Firmino Jaketa, as well as DG Manuela and Sue Paget. The launch of this national program in our city was a delightful moment for our city and our partners. Media representatives from radio and television were also present.



Engaging with Primary Partners and Funders

As a national program, the RFHA team and the national coordination of the RFHD outlined their strategy to obtain the blessing and support of the Minister of Health first. As a result, our performance would be in line with national health guidelines and we would have the support of the Ministry and its provincial delegations.

RFHA Inc. CEO Sue Paget meeting Dr. Armindo Tiago, Minister of Health of Mozambique



As part of coordination with national partners, the US Ambassador, USAID, CDC, and PEPFAR were explained the concept of Rotary Family Health Day. As a result, they could support the program together with their local partners.

Our team made special contact with the GPEI members in Maputo, explaining the RFHD concept and how we intend to raise awareness and mobilize the community against Polio. A key role was played by UNICEF and the SPS in this regard. The Bill and Melinda Gates Foundation, our partner and funder, has always been actively involved with the fair organization, with their national representative Andrea Thompson providing all efforts and input to launch the RFHD in Mozambique. It was a pleasure to have her presence at the second day of the fair in Chimoio.



National coordinator visiting GPEI HUB in Maputo Meeting

RFHA and RFHD coordinators meeting with CDC and Peace Corps representatives in Maputo



A number of key partners were sought out at each launch site, including public partners (health departments, municipalities, sports associations, traffic police, firefighters, etc.) and partners operating in the medical and social spheres, as well as media, companies, and national and international non-governmental organizations. In each site, Rotarians organized it directly.

The organization of Chimoio was improved by establishing individual and group contacts. With the Provincial Health Services (SPS) and Provincial Health Directorate of Manica (DPSM), we met with all the key health sectors that could act and offer their services. In attendance were representatives from the sectors of SPS, DPS, District Health Services, Women and Social Action, Chimoio Provincial Hospital, including the Nutritional Status and Cooking Demonstrations department, Maternal and Child Services, Extended Vaccination Program, HIV department, Tuberculosis, Ophthalmology, Analysis Lab, Blood bank, oral health, and youth and sports departments.

In order to create an interesting network with different actors, we contacted representatives of national and international NGOs among the NGO partners. It is worth noting that the direction of VSO (Voluntary Service Overseas) brought together several international non-governmental organizations, including Save The Children, Solidar, Echomoz, Pathfinder,

Tearfund, The Big Hand, among others, as well as the launch of RFHD and participation in the two-day family health fair.

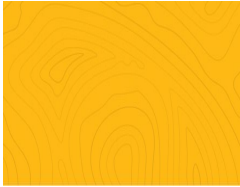
Other NGOs, such as FDC, CMS, AMODEFA, TCHOVA, DREAMS, KUBATSIRANA, GESSIARA, ADPP, Centro Salvatoriano de Messica, also participated in the organization and execution of the activities, each offering their materials and services.

FAMOD (Forum of Mozambican Associations of People with Disabilities), the Provincial Department of Child, Gender, and Social Action, and other groups involved in the International Day of People with Disabilities collaborated with us on the second day of RFHD.

In order to reach the media, local television stations -TVM, allowed us to conduct a nationwide interview on the Bom dia Manica program, which included a health fair and call to participation. In addition to its network of contacts, Solidar contributed its list of information partners, including local and community radio stations.

A number of companies were present, including Emose, Coca-Cola and Services for Issuing Identity Cards.

We are very grateful for the voice of the Provincial Coordinator of the VSO, who was the MC for the two days of the fair.



Planning meeting with health sector partners.



Media Strategy and Plan

Partnerships were also carried out to support media and dissemination efforts. Before the launches, we had access to TV and radio, which were very valuable and important partnerships.

Social mobilization was carried out within the spheres of coexistence of public agencies and NGOs.

Communities were mobilized by the Municipal Health Council, involving their leaders in social mobilization.

Virtual media, such as online posts on social networks, were made but not on an official RFHD Mozambique channel, as we do not have it yet, so we share the information provided by the official pages of RFHA Inc.

Despite our best efforts, we were not able to mobilize the number of people expected for the fair days due to the short time for planning and publicity. Throughout the days, we had a noticeable presence, but we were expecting more people to seek additional health care. Maybe this lack of presence could be influenced by an urban square rather than a community neighborhood. Another external factor that may have divided the public was other social events being held on the same days.

Our media and publicity efforts were also fully supported by the RFHA, who provided all the necessary images and materials. As a result, the editing and preparation of the

material were facilitated, and the RFHD identity was maintained in both releases.

We managed to make the banners, posters for the launch day, but we couldn't have them earlier so we could do more advertising in the city.

We had hoped to use a sound vehicle from Council Social Communication to spread the message about launching the fair through the media, but its effectiveness was not as great as we had hoped.





Interview on the show Bom dia Manica live on TVM.



Press conference at the launch of RFHD in Maputo.



Monitoring and Evaluation

The Overall Summary

Mozambique was the first country funded by the BMGF to utilise digital M&E tools for their Rotary Family Health Days. Implementation of the digital M&E process entailed.

Virtual training of the M&E coordinators representing Chimoio and Maputo prior to the launch of the RFHDs in Mozambique

- Translation of the M&E templates to Portuguese with the assistance of the M&E coordinators
- Walk through of the data collection process for both sites prior to the health days with the M&E coordinators
- Monitoring of data collection on site on both sites

RFHA data collection from sites was managed on paper and the collation done digitally. The M&E system is now digital allowing volunteers to capture information on a mobile device. This ensures data security and significantly improves the accuracy levels of the data captured during RFHD. Mozambique RFHD were used to pilot the digital M&E tools. The pilot was successful with a few challenges noted which will address the roll out of the digital process in other countries supported by the BMGF funding.

The monitoring and evaluation process will be crucial to analyzing the fair's impact and determining the public's general health. A key component of the project will be to share data with partners, especially with public health authorities.



Observations

The pilot was a success albeit not without challenges as detailed below which contributed to loss of data

Site selection

- Sites selected where open and crowd control was not applied which led to loss of registrations

Translation

- Translation was done at the very last minute, bearing in mind the templates had been shared well in advance to allow the translation

Selection of data collection team

- Management of the data collection team was non existent
- Recruitment had to be done on the 1st day with volunteers that had not been trained

Training and Testing

- M&E training was not implemented with the data collection team as advised in Chimoio prior to the family health day which meant introduction to the tools was done at the site. This left little to no room for testing or familiarization with the system

Capacity

- The number of data collectors was not sufficient to cover the each service station which potentially led to loss of data

Data collection

- Given that there was limited capacity, the sites relied on data captured by the health service providers which was not aligned to the RFHDs requirements (Age and gender aggregation)

Recommendations

Site selection

- Adherence to the recommended site layout is needed as well as the guidance on the management of the site for effective data collection

Selection of team members

- Recruitment and selection of the data collectors is vital and needs to be done in consideration of the tasks that need to be accomplished on the day

Training and testing

- M&E coordinators need to conduct training at least a week prior to the RFHD to allow for testing to take place

Capacity

- A data capturer needs to be allocated to each health station, therefore consider the number of health stations planned for and plan to make accommodations

Data collection

- Site managers need to own the data and therefore the data collection process, there should be no reliance of other data sources

Data Insights

The total attendance count of **657** for the RFHD was recorded in Chimoio and Maputo in December. Chimoio RFHDs were held over two days while Maputo implemented the initiative on one day

Service providers and volunteers

- Statistics not available as site registration was not completed for Chimoio and it was not complete for Maputo

Registration

- Female attendants made up for **58.8%** of the total number of attendants. This percentage does not include attendance for the 1st RFHD in Chimoio where the M&E digital tools were not used to capture registration data
- The highest number of attendants were in the **24-49** age bracket

Consent

- **17** consents to the impact survey were recorded from Maputo and none from Chimoio

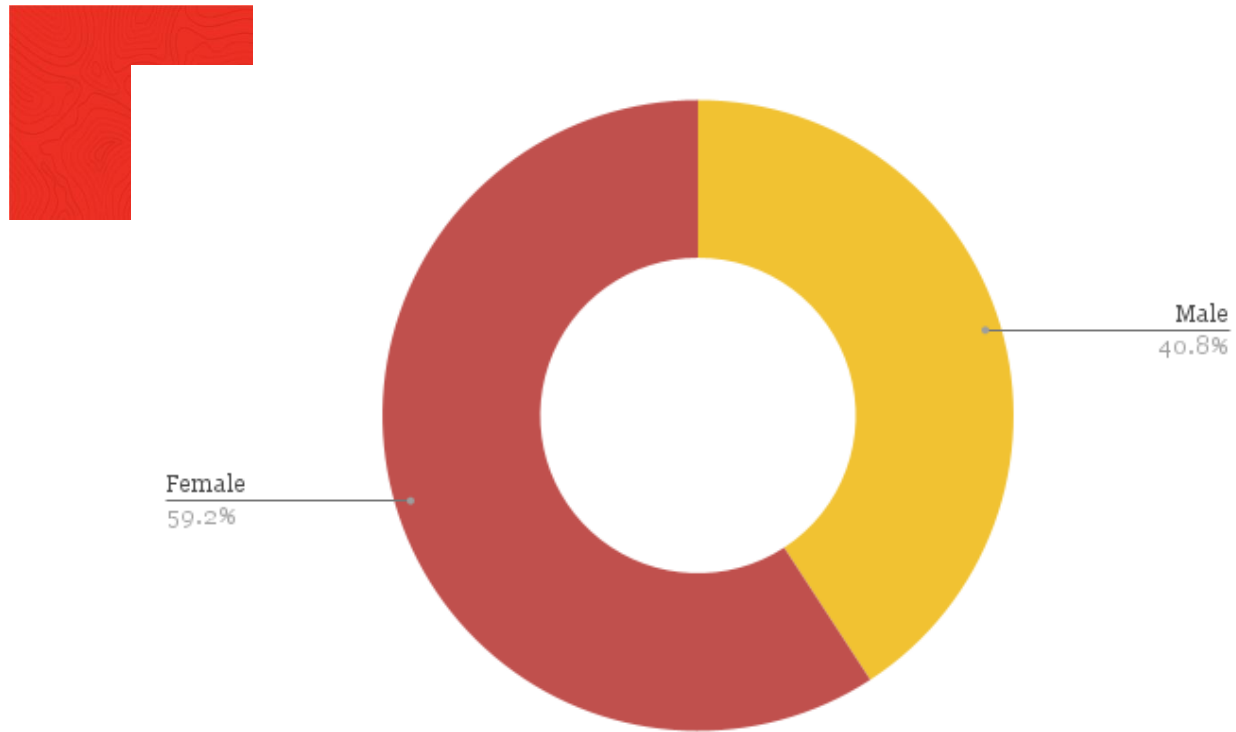
Services (Core and Add on)

- **1489** services were provided to individuals including minors accompanied by caregivers
- Service stations recording the most attendants were vitals signs monitoring and family planning
- Polio and Measles vaccination stations recorded the lowest number of attendants on the day
- **267** add on services were provided in Chimoio and Maputo

59 referrals in total were provided following screening

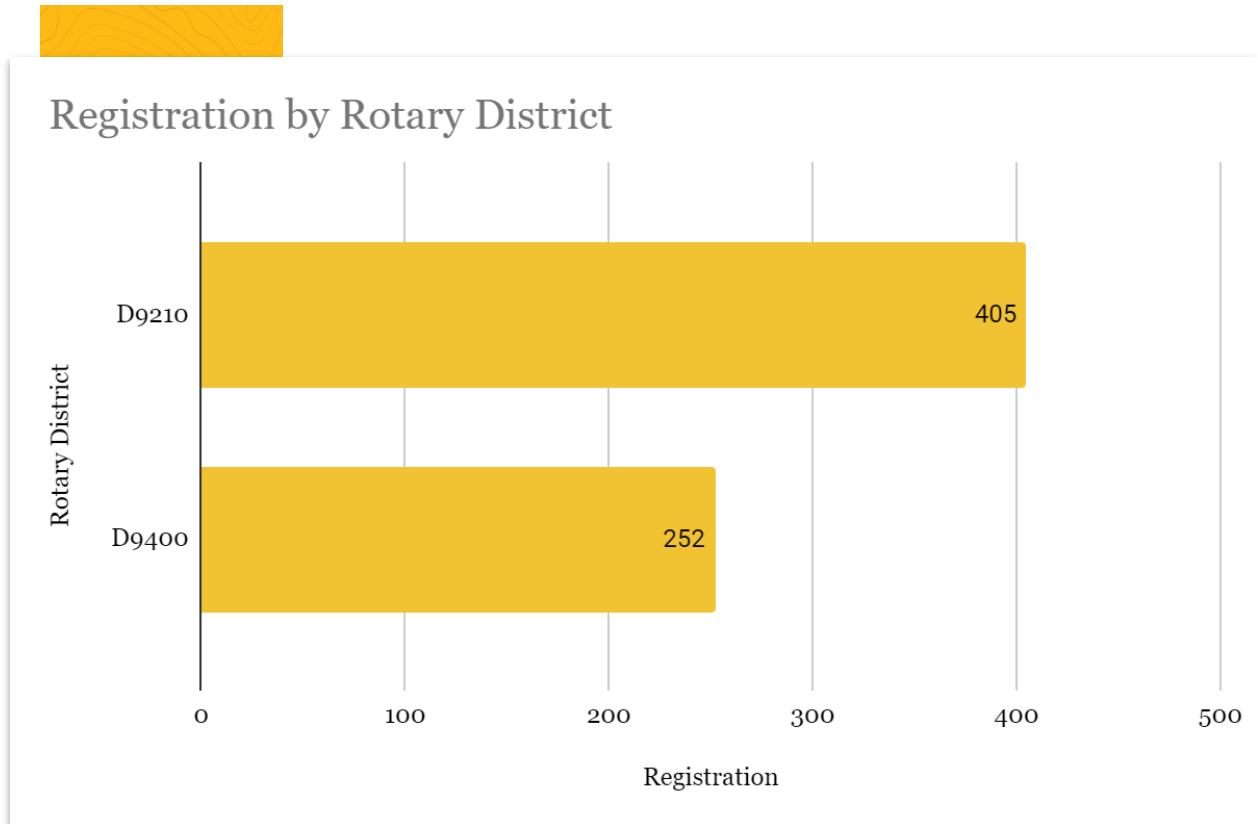
Registrations by Rotary District

A total of 456 health seekers were registered during the RFHD held in Chimoio and Maputo in December. 59.2% of the attendants were female (This percentage however does not take into consideration the attendance for Chimoio of the 1st day as the gender aggregation was not recorded).

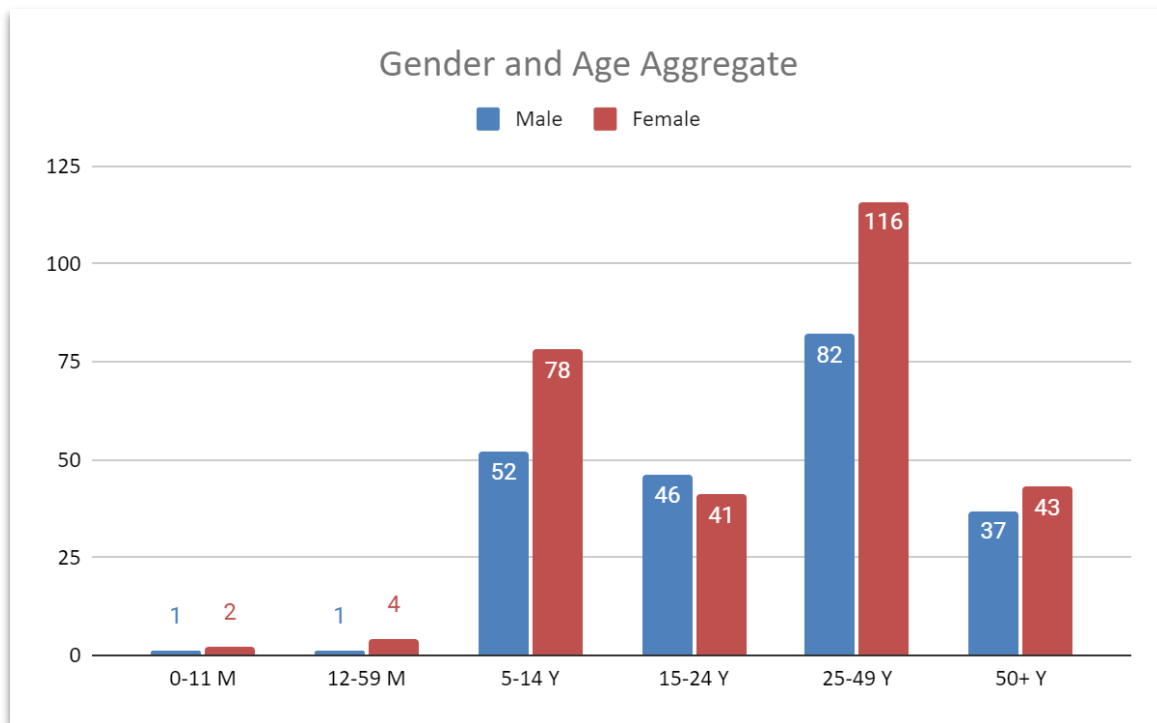


Registrations by Rotary District

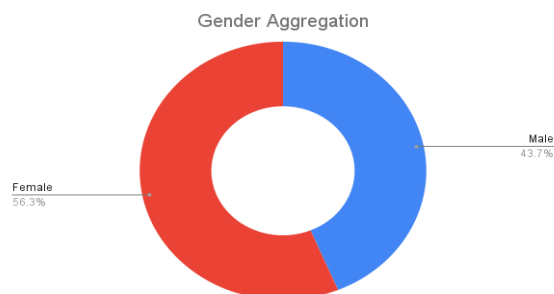
Chimoio held RFHD over two days registering 405 health seekers while Maputo held RFHD over one day registering 252 health seekers.



The below is a breakdown of health seekers aggregated by gender and age group as recorded in both sites. Chimoio did not record the gender and age group aggregation of the health seekers for the first day. A majority of the attendants were aged 25 - 49 years with the female gender recording the highest attendance. The number of children aged 4 and below was the lowest in the attendance.



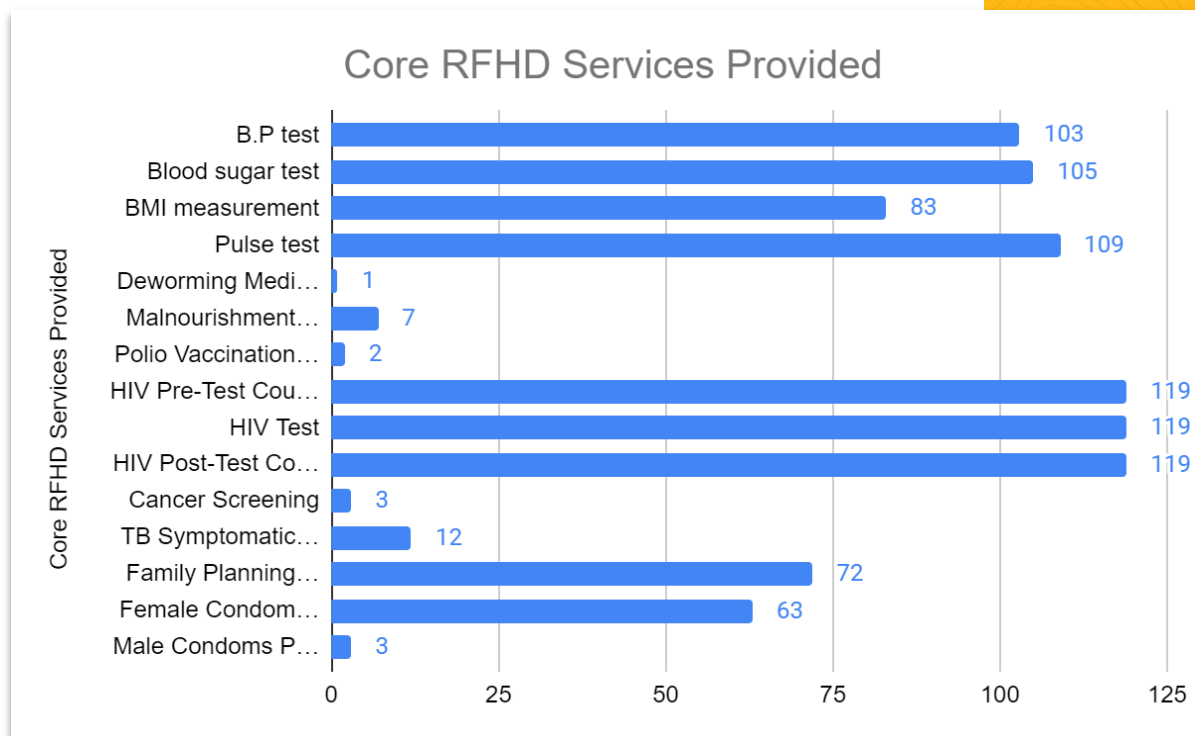
58.8% of the registered health seekers were female (this is excluding the recorded attendance of the first RFHD in Chimoio)





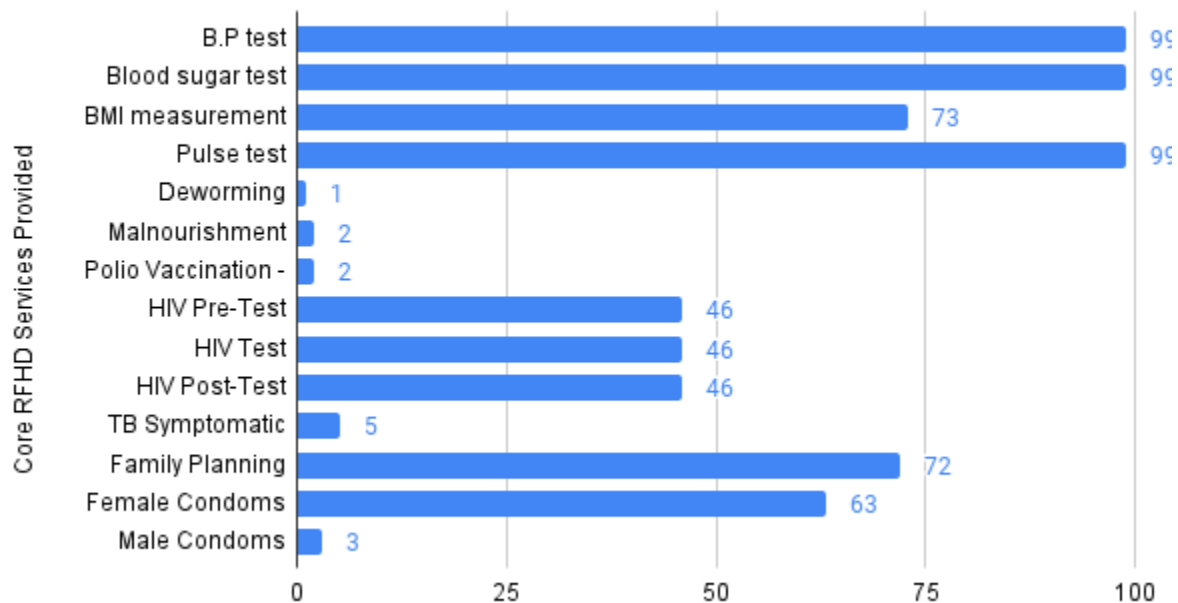
Core RFHD Services Provided by Public partnership

1489 core services were provided to the communities in Mozambique. The most recorded services were under vital signs monitoring where the Department of Health provided the screening for each registered health seeker.

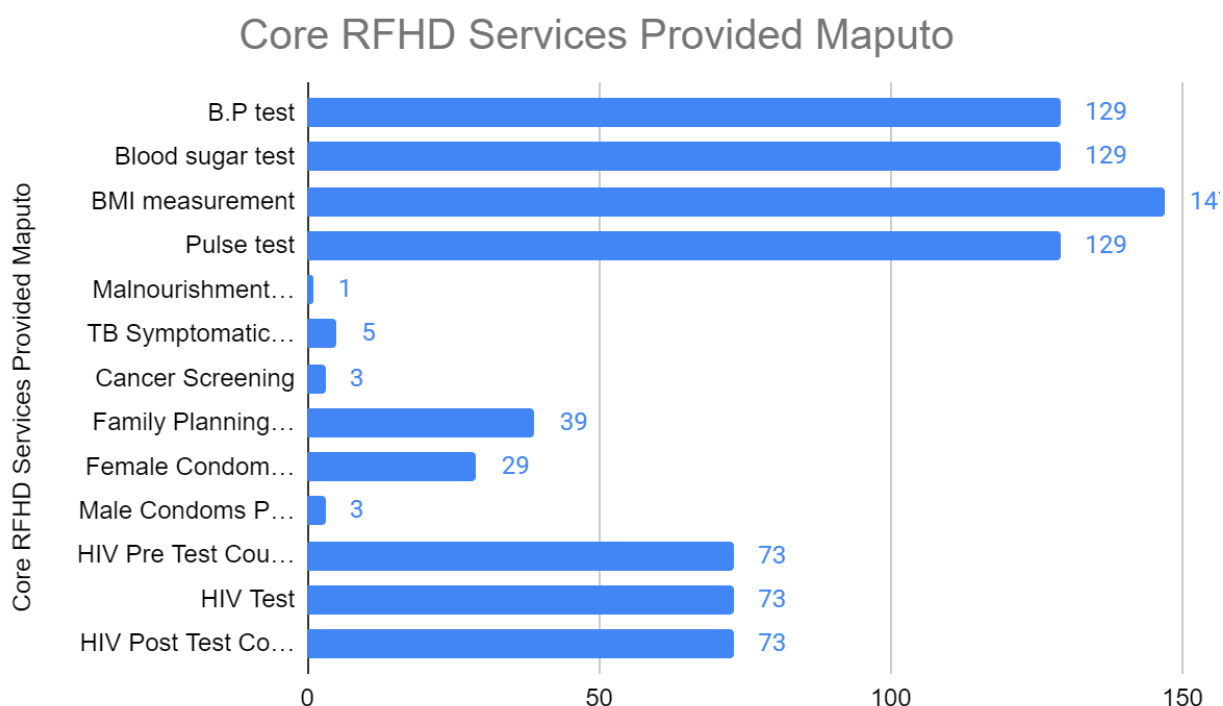


Chimoio recorded **656** services provided to health seekers over the two RFHDs. A majority of the core services provided were around vital signs monitoring followed closely by family planning.

Core RFHD Services Provided: Chimoio 656

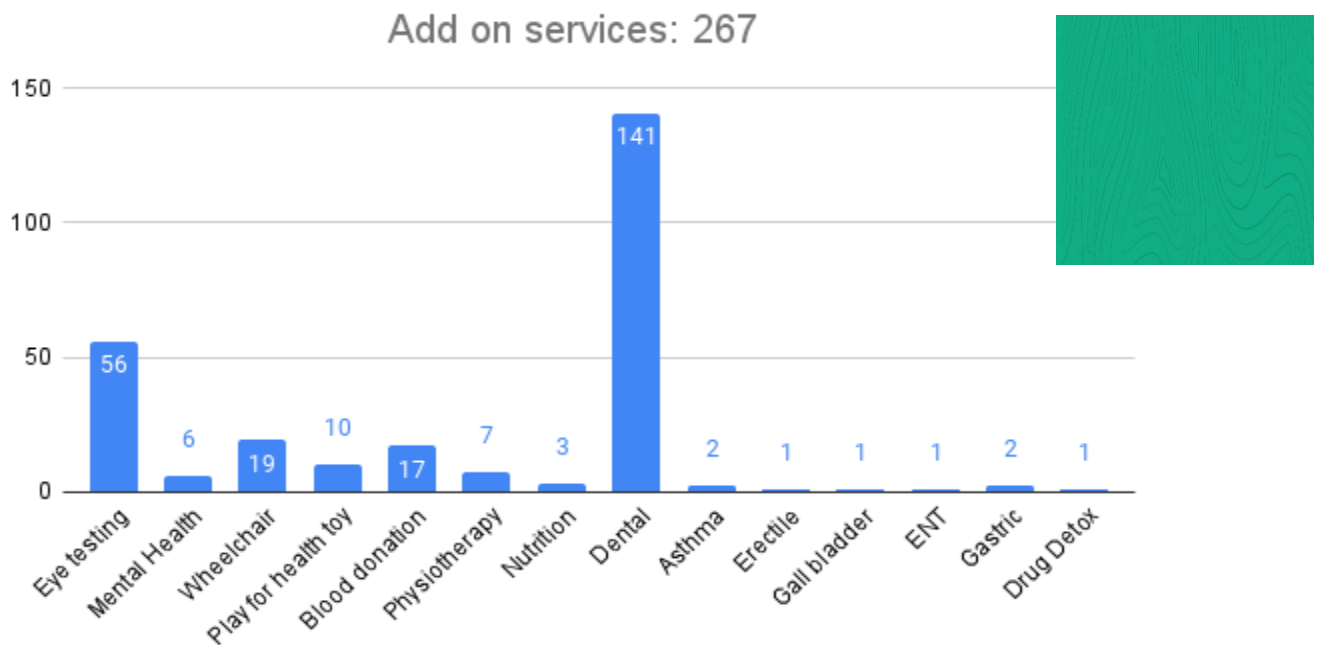


Maputo recorded **833** services provided to health seekers (Note that this number excluded HIV pre and post counselling and testing data not submitted on the portal)

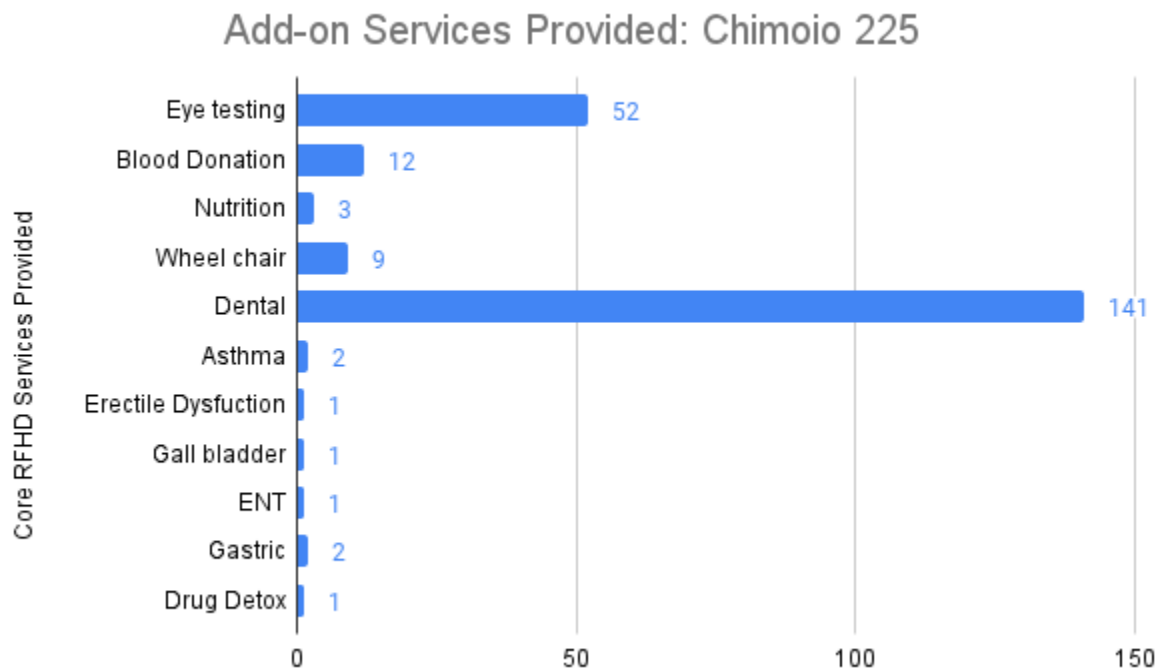


Rotary Add-on Services Provided

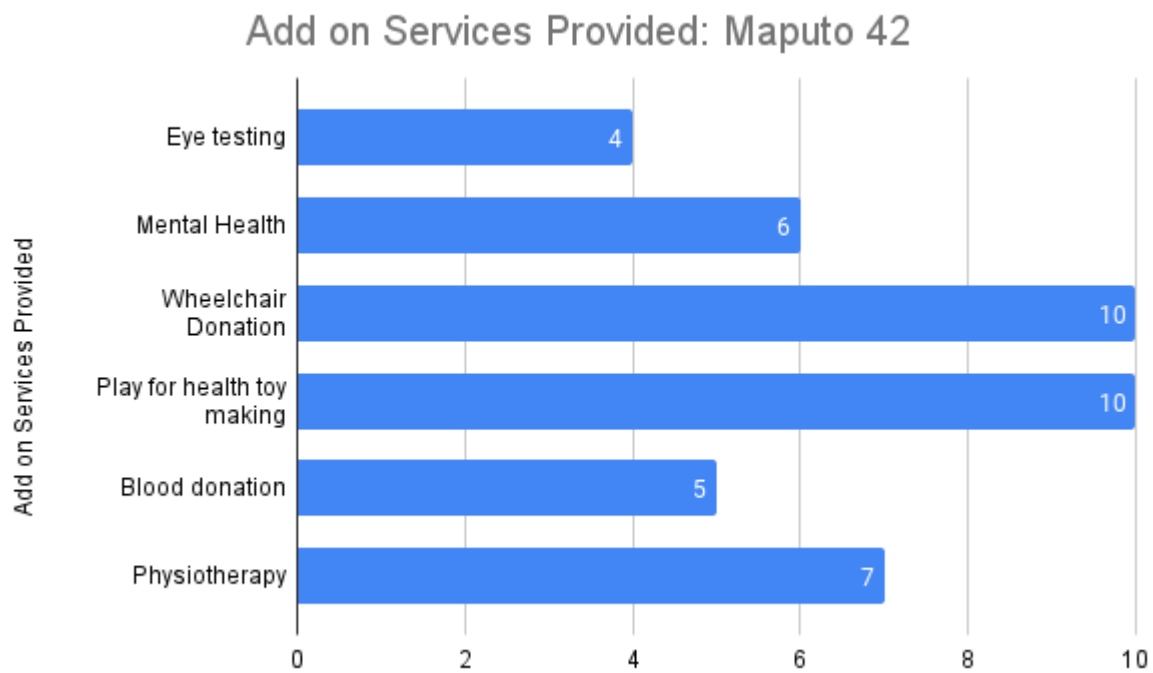
267 Add-on services were provided to health seekers in Mozambique with the highest record being on dental care.



Chimoio recorded 225 add-on services provided cumulatively in the two RFHDs held.



Maputo recorded 42 add-on services



Health Services Provided	Number of volunteers	Sectors involved
Nutritional Status and Cooking Demonstration Services to be presented: product exhibition, nutritional tracking, nutritional lecture and cooking demonstration.	16	SPS, DPS
Mother and Child Service: provision of contraceptive methods, educational lectures, breast and cervical cancer screening.	8	SPS, SDSMAS
Expanded Program on Immunization: routine vaccination children under 23 months (Polio and others), HPV vaccination of 9-year-old girls, covid vaccination over 18 years old.	11	SPS, DPS, SDSMAS
Tuberculosis: screening and lecture	2	SPS, DPS, SDSMAS
HIV: Prevention, self-test and educational lecture. Conventional testing offer ATHIV demand and supply creation Creating demand for PrEP Creating demand for circumcision Supply of condoms and lubricants."	12	SPS, DPS, SDSMAS
Ophthalmology: visual screening, Trachoma, cataract	4	HPC
Oral health: education lecture and delivery of basic hygiene kits	4	HPC
Analysis laboratory and blood bank: diabetes screening, cholesterol and blood donation"	18	SPSM,HPC
Aerobics and physical exercises	4	DPJED

SPS – Provincial Health Services; DPS - Provincial Health Directorate; HPC - Chimoio Provincial Hospital
SDSMAS – District Health, Woman and Social Action Services



Core RFHD Services Provided by Private and NGO partners

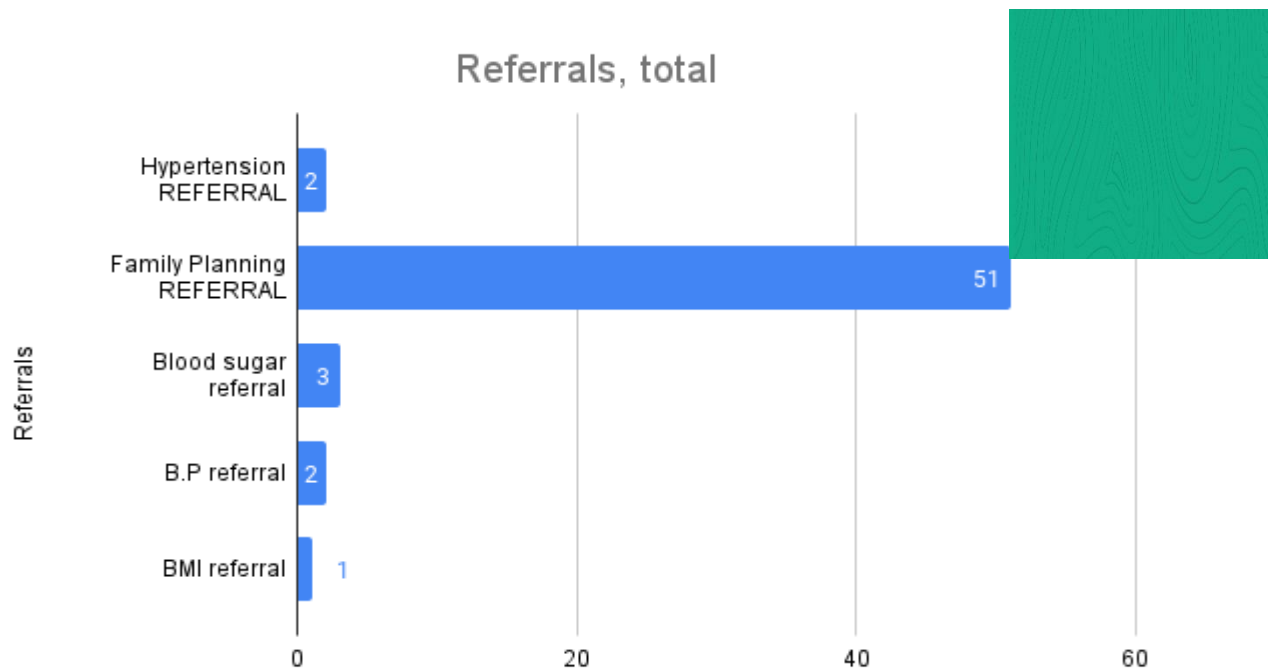
Partners	Activities roles	Number of volunteers
UNICEF	Pre-Campaign for Polio and Awareness	6
FDC - Foundation for Community Development	Malaria Prevention Services	6
CMS - Mozambique Health Committee	Helped with hypertension screening, transportation and more chairs	4
MCD - Medical Care Development	Logistics and Malaria awareness	2
AMUDEFA - Mozambican Association for Family Development	Assisted in the distribution of self-tests, lectures and conventional HIV tests	2
Tchova Tchova	Assist with sound system, gazebo, male medical circumcision equipment material.	5
VSO - Voluntary Service Overseas	Female empowerment, sexual health education, use of the digital method, distribution of reusable pads	6
Save The Children	logistics and donation of means of transportation	4
Solidar	Media support	2
Red Cross	Logistics	2
ADPP	Logistics and organization social entertainment for group of people with disability	4
Dreams	Helped with logistics, exhibition of services for the distribution of reusable pads,	6
KUBATSIRANA - Christian Ecumenical Association	Exhibition for empowering girls, HIV self-testing kits, reusable pads, female and male condoms And we will hold sessions on the correct use of condoms	12
Kenguelekeze	Actions related with HIV, TB, Malaria	2
EcoSIDA	Assisted in the distribution of self-tests, lectures and conventional HIV tests	2
Emose - Mozambican Insurance Company, S.A.	Promotion of Health and pharmacy insurance	2
GCR	Notary, domestic violence screening case report,	4
Centro Salvatorianos de Messica	Exhibition of green medicine	2
Farmácia Central	support on medication distribution	2
Civil identification services	issuing of identity cards	2
Chimoio scouts	Logistics, M&A volunteers	20

Partners present at the Launch in Chimoio.

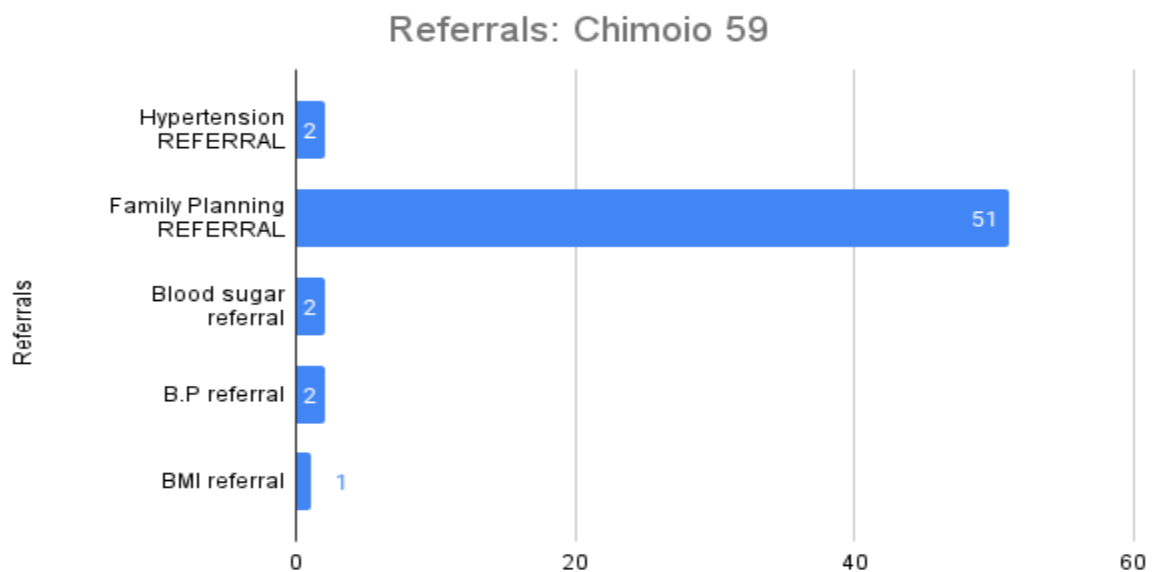


Service Referrals Provided

59 referrals were made following the screening at the RFHDs in Mozambique



Chimoio recorded the highest number of referrals totalling to 58 while there was only one referral in Maputo for high blood sugar.











Gender Intentional Components

Gender inclusion is one of the pillars of the RFHA-Bill and Melinda Gates Foundation partnership. Through women's health and health education, as well as access to information, both organizations support gender equality and/or empowerment of women and girls. The RFHD's fair days contribute to reducing gender barriers, thereby empowering both men and women through education about how to take better care of themselves.

It was important to consider these aspects when planning the fair. Volunteer girls could be included in the program, health services could be provided for girls and women, such as family treatment, sexually transmitted diseases prevention, cervical cancer screenings, distribution of reusable pads, empowering girls through digital media, counseling, and tracking domestic violence abuse.





Polio Surveillance and Screening

Due to the recent return of positive cases spread throughout the country's northern and central provinces, poliomyelitis presents an even greater public health threat in Mozambique today.

Inclusion of Polio in our program was a personal request from the Minister of Health, something Rotarians have been doing together with GPEI partners for many years.

It was scheduled days before the launch of the fair that the 6th round of polio campaign for Manica, Tete, Zambézia and Nampula would be held. It was planned that the fair would serve as a platform in the final days of the campaign to provide more vaccination points. However, the campaign was scheduled to take place days after the family health fair.

However, Rotary worked with UNICEF and the Provincial Health Services of Manica to raise awareness and mobilize children for polio vaccination. The activities were concentrated on dissemination of polio messages through stereo; Social mobilization and awareness of the 6th round of polio campaign; Production and insertion of radio spots. Since the polio tent did not arrive in time, polio activities took place in the expanded vaccination program tent. Despite the recurring nature of this activity, we are committed to supporting national campaigns against Polio.



Challenges and Recommendations

Organizing the RFHD in Mozambique in 2022 was both challenging and exciting. Everyone involved put in a lot of work, especially Rotarians from Chimoio, Chimoio-Planalto, Matola, Maputo and Polana, in cooperation with the RFHA Inc team to provide all the necessary materials. Funds were also sent for project execution, as well as local coordinators and monitoring and evaluation teams performed their duties.

Engaging all Rotary clubs in Mozambique to launch the RFHD jointly was challenging. During the course of the project, we realized we could concentrate and have everyone's effort on two action sites, and harvest the learning for use on other sites later.

The legal process took longer than expected due to the guarantee for legal documents and opening a bank account. All seemed to fall into place toward the end, when the fair was already fast approaching. Here, I want to express my gratitude to all the Rotarians who have contributed to making the fair possible and successful in the cities of Chimoio and Boane on the 2nd and 3rd of December.

It is a fact that national health services in many parts of the country, especially in the provinces, are precarious. Public support for initiative as a Health Family Day is widespread among the sector's public, as well as among the general populace. Many factors need to be considered in order to ensure the fair's success, including the services to be offered, the selected location, the existing structure to receive people and offer services, publicity, media and social support, the motivated participation of service providers and partners, and evaluation and monitoring. It is crucial that Rotarians understand the program's concept and are willing to accept the challenge of organizing a family health fair in their city.

Public institutions provide basic health services, but we noticed that offering some specific services during the health fair was challenging because we needed a portable and fast device. There is a need for each service to be offered at the fair location. Maternity and child services, for example, required a covered tent, which the health teams lacked. Rotary had to acquire it on their behalf. To increase the understanding of nutritional factors and what can really change in a malnourished child using local inputs and other preparation methods, more teaching sessions need to be held for the people attending the culinary and nutrition demonstration area at the fair. During culinary demonstrations, the primary activity or attractiveness of this trend cannot be distributing food.

We chose sites within the city where we have some of the existing infrastructures such as electricity, water, easy access, and close to local markets. Logistics and planning would be simplified since most communities lack the basic conditions to host a large health fair. The local fair can, however, be balanced by taking into account the number of people nearby who can attend.

Media and publicity work must be done as early as possible, and in different ways, during the fair days. In order to reach the required audience, messages should be broadcast on TV, radio, social networks, at social gatherings for specific civil society groups, and on an ongoing basis. There were difficulties this time for the clubs in obtaining funds and promotional materials on time, which hampered the social incorporation process. Moreover, media partnerships and other social mobilization partnerships need to be carefully planned and monitored before the fair, so that the strategy can be developed and implemented efficiently.

A large number of public and private partners participated in organizing and implementing the fair. Collaboration with health services volunteers was made easier with direct support from the Ministry of Health and local authorities. Because this was a pilot project, many partners weren't familiar with Rotary's involvement in this type of activity, and some key partners might have been hesitant to participate because they weren't familiar with RFHD. It is a point that we will gradually develop in future editions.

As the monitoring and evaluation process was made available just a few days before the fair, Rotarians and volunteers had little time to familiarize themselves with the platform. There is a need for better organization, more time, and to look for ways to facilitate the moment of data collection, such as smartphones with internet data, or even an internet point on site to enable volunteers to access the internet. Alternatively, we observe that this team can be composed of Rotarians, Rotaractors, and volunteers from other organizations, some of which already have data collection means.

The Rotarians were presented with information about the project, its concept, monitoring, and evaluation, as well as training. The short time available prevented further exploration to improve their organization. However, everything passed as a first lesson for future editions.

Conclusion

The fair was successful despite all challenges, and each Rotarian left a satisfied and fulfilled Rotarian! With the entire structure in place and with the assistance of different supporters, we managed to provide many free health services to the population in two locations. Other than a few things that could be improved, Rotary Family Health Day in Mozambique was a success. The realization of these events would not have been possible without the contributions of everyone who contributed.

Special thanks go to Sue Paget and RFHA Inc. for believing that Rotarians in Mozambique were capable of hosting a large-scale, high-impact project such as the RFHD. The Bill and Melinda Gates Foundation was a valuable partner with them due to their belief in this cause.

DG. Manuela Matambo and DG. Kokie Makunyane-Quashie, the Governors of Rotary International Districts 9210 and 9400, deserve our gratitude as well. Our representatives at the highest level accepted this program so that Mozambique Rotarians could be part of RFHD, and they made every effort to celebrate RFHD still in 2022.

With a sincere greeting, we would like to thank the Minister of Health, Dr. Armino Tiago, for receiving and full support Rotarians to launch this nationwide initiative.

In appreciation of the support provided by our public partners, local directors, heads of departments in health services, and employees and volunteers who remained at this event. We thank national and international non-governmental organizations and private partners for accepting our challenge to organize a fair with a large number of services and volunteers. Thank you to our media and communication partners for helping us publicize our work.

The Rotarians from the clubs involved in this project are especially to be thanked for their willingness to take part, and for dedicating some of their time to this project. RFHD would not have been possible without the involvement of the national and district coordinators, club presidents, and every Rotarian who participated.

Thank you very much!

Acronyms

AGYW	Adolescent Girls And Young Women
AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Therapy
CBO	Community Based Organisation
CDC	Centres For Disease Control And Prevention
CHW	Community Health Worker
DG	District Governor
EPI	Expanded Programme On Immunization
HBV	Hepatitis B Virus
HCT	HIV Counselling And Testing
HCV	Hepatitis C Virus
HIV	Human Immunodeficiency Virus
HIVDR	HIV Drug Resistance
HTS	HIV Testing Services
IEC	Information, Education And Communication
M&E	Monitoring And Evaluation
MMC	Medical Male Circumcision
NCD	Non Communicable Diseases
NDOH	National Department Of Health
NDP	National Development Plan – Vision 2030
NGO	Non-Governmental Organisation
OVC	Orphaned And Vulnerable Children
PCA	Provincial Council On AIDS
PEPFAR	United States Presidential Emergency Fund For AIDS Relief
PIP	Provincial Implementation Plan
SANAC	South African National Aids Council
STI	Sexually Transmitted Diseases
TB	Tuberculosis
UNAIDS	Joint United Nations Programme On HIV/AIDS
USAID	United States Agency For International Development
USG	United States Government
UTT	Universal Test And Treat
VCT	Voluntary Counselling And Testing
WHO	World Health Organisation

Partner Summary

LOGO	PARTNER ORGANIZATION
	ROTARY INTERNATIONAL District 9210 District 9400 https://my.rotary.org/
 Rotary Action Group for Family Health & AIDS Prevention, Inc.	https://www.rfha.org/
	https://www.gatesfoundation.org/



Rotary Clubs Who Contributed

District 9210

Rotary Club of Chimoio

Rotary Club of Chimoio-Planalto

District 9400

Rotary Club of Maputo

Rotary Club of Maputo-Metro

Rotary Club of Matola

Rotary Club of Polana

Contact Us

WEBSITE: <https://www.rfha.org/>

INSTAGRAM: [@rfha.inc](https://www.instagram.com/rfha.inc)

ROTARY FAMILY HEALTH DAYS' COUNTRY CHAIR DETAILS:

Mrs. Gisela Manuela De França Bettencourt
President Of Rotary Club Of Chimoio-Planalto
Rotary Family Health Day National Coordinator
bettencourtgisela@gmail.com

