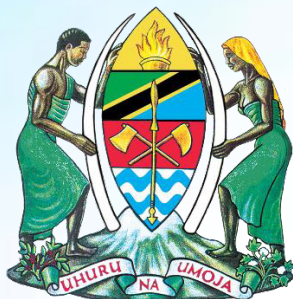


JAMHURI YA MUUNGANO WA TANZANIA



WIZARA YA AFYA

MAADHIMISHO YA WIKI YA AFYA KITAIFA – 2025

TAREHE 3 – 8 APRILI, 2025

**KITABU CHA MAWASILISHO YA MDAHALO WA WAZI KWA UMMA
UNAOFANYIKA TAREHE 4 APRILI, 2025**

&

**DARASA HURU KWA UMMA LINALOFANYIKA TAREHE
5-7 APRILI 2025 KWA NJIA YA MTANDAO**

KITUO CHA MIKUTANO CHA JAKAYA KIKWETE – DODOMA

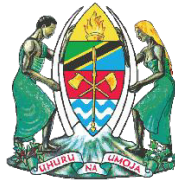
TULIPOTOKA, TULIPO, TUNAPOELEKEA: TUNAJENGA TAIFA LENYE AFYA



**World Health
Organization**



JAMHURI YA MUUNGANO WA TANZANIA



WIZARA YA AFYA

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KITUO CHA MIKUTANO CHA JAKAYA KIKWETE – DODOMA

**KITABU CHA MAWASILISHO YA MDAHALO WA WAZI KWA UMMA
“SYMPOSIUM” UNAOFANYIKA TAREHE 4 APRILI, 2025**

&

**DARASA HURU “MASTER CLASS” KWA UMMA LINALOFANYIKA TAREHE
5-7 APRILI 2025 KWA NJIA YA MTANDAO**

MADA YA MDAHALO WA WAZI “SYMPOSIUM”

TULIPOTOKA, TULIPO, TUNAPOELEKEA: TUNAJENGA TAIFA LENYE AFYA

Kamati ya Maandalizi ya Mdahalo wa Wazi “Symposium”

Mwenyekiti: Tumainiel Macha

Katibu: Simon Nzilibili – MoH

Wajumbe: Dkt. Otilia Gowelle – MoH
Dkt. Ona Machangu – MoH
Dkt. Elizabeth Shayo – NIMR
Dk. Vivian Wonanji – MoH
Dkt. Emmanuel Mkeni – MoH
Asnath Mpelo – MoH
John Yuda – MoH
Dkt. Norman Jonas – MoH
Dkt. Chacha Mangu – MoH
Dkt. Pius Kagoma – OR - TAMISEMI
Prof. Stephen Kibusi – UDOM
Dkt. Shakilu Jumanne - UDOM
Dkt. Witness Mchwampaka
Dkt. James Kengia – OR-TAMISEMI
Dkt. Golden Masika – UDOM

WIZARA YA AFYA

MAADHIMISHO YA WIKI YA AFYA KITAIFA

MWAKA 2025



MHE. JENISTA J. MHAGAMA (MB)
WAZIRI WA AFYA



Dkt. GODWIN O. MOLLEL (MB)
NAIBU WAZIRI WA AFYA



Dkt. SEIF A. SHEKALAGHE
KATIBU MKUU



ISMAIL H. RUMATILA
NAIBU KATIBU MKUU

Foreword



As the Chief Medical Officer, I am delighted to provide foreword in this important document that outlines key presentations with research evidence and innovation for improving the health of Tanzanians. The Tanzanian Government through the Ministry of Health and the global universe has been commemorating the World Health Day which usually takes place on 7th April each year. The event serves to raise awareness about critical health issues, recognize health workers' contributions, and advance discussions on effective health promotion strategies. Having recognized the importance of making informed decision making and advancement in science and technology in care and treatment, the Ministry of Health has organized **a one-day** Symposium aiming at sharing significant research evidence for improving the health and welfare to Tanzanians. The symposium serves as a platform for dialogue, exchange, and knowledge sharing among different stakeholders. During the symposium, health practitioners, policymakers, researchers, implementing and development partners, diaspora and academia come together to discuss and deliberate on best practices, groundbreaking evidence, and innovative solutions that demonstrate the immense potential of improving the health of Tanzanians.

As part of a week-long commemoration of National Health Week, the theme of this year is 'Tulipotoka, Tulipo, Tunapoelekea: Tunajenga Taifa Lenye Afya'. This theme reflects the historical background, the shortfalls, strengths, opportunities and progress we have achieved so far through targeted interventions in key priority areas of concern as per Sustainable Development Goals. The symposium has three subthemes as follows:

- i. **Advancement in Healthcare Service Delivery**
- ii. **Integrated Health Services Delivery**
- iii. The role of research evidence in improving the health of Tanzanians

During this symposium, a total of nine presentations will be made reflecting important board areas of research and innovations. This will be preceded with a **keynote address** focusing on the role of research in improving the health of all Tanzanians. Each thematic area will be summed up with a panel discussion on key issues emanated and deliberations. Thus, this Symposium provides opportunities for strengthening collaboration between health practitioners, researchers, academia, and local and international organizations in commemorating International Health Day.

As a Chief Medical Officer, I look forward to the interactive sessions, through sharing experiences and learnings in the presentations and discussions as the ultimate goal is to improve the health of Tanzanians. Welcome All.

Dr. Grace Magembe
CHIEF MEDICAL OFFICER – MOH

PROGRAMU YA MDAHALO

SHEREHE ZA UFUNGUZI

Mwezeshaji: Balozi Dkt. Mpoki Ulisubisya – Mkurugenzi Mtendaji wa Taasisi ya Mifupa ya Muhimbili - MOI

Muda	Tukio	Mhusika
01:30 - 02:25	Washiriki kuwasili na kujisajili	Kamati ya Ukaribisho
02:25 - 02:30	Mgeni Rasmi kuwasili	Mwenyekiti wa Maadhimisho
02:30 - 02:35	Wimbo wa Taifa	Kamati ya Itifaki
02:35 - 02:40	Utangulizi na utambulisho	Mwenyekiti wa Kamati ya Mdahalo
02:40 - 02:45	Neno la ukaribisho	Mganga Mkuu wa Serikali
02:45 - 02:50	Salam kutoka Chuo Kikuu cha Dodoma	Prof. Lughano Jeremy Kusiluka - UDOM
02:50 - 03:05	<i>WHO remarks on Ending Preventable Maternal Mortality (EPMM) and Every New Born Action Plan (ENAP)</i>	Dkt. Edwin Swai - WHO
03:05 - 03:35	Wasilisho Kuu "KeyNote": Matumizi ya tafiti katika kuboresha Afya kwa wote nchini	Prof. Said Aboud-NIMR
03:35 - 03:50	Ufunguzi wa Mdahalo	Mhe. Jenista Muhagama - Waziri wa Afya
03:50 - 03:55	Neno la shukrani	Naibu Katibu Mkuu OR-TAMISEMI
03:55 - 03:00	Picha kwa makundi yaliyoandaliwa	GCU-MoH
03:00 - 04:30	CHAI	WOTE

MADA 1: UBORESHAJI WA UTOAJI WA HUDUMA BOBEZI ZA AFYA NCHINI

Mwenyekiti: Prof Abel Makubi, Mkurugenzi Mtendaji wa Hospitali ya Benjamini Mkapa - BMH

Watunza Kumbukumbu: John Yuda, MoH na Dkt. Chrisogone German, MoH

Muda	Mawasilisho yatakatayofanyika	Wawasilishaji
04:30 - 04:55	Matumizi ya sayansi katika kuboresha huduma za Figo: Uchujaji wa Damu na Upandikizaji wa Figo nchini	Profesa Masumbuko Mwashambwa - UDOM
04:55 - 05:20	Matumizi ya sayansi katika kuboresha utoaji wa huduma bobezi za upandikizaji wa Uloto kwa Watoto wenye magonjwa ya Damu na Saratani	Dkt. Shakilu Jumanne - UDOM
05:20 - 05:45	Matumizi ya teknolojia katika ufanisi wa matibabu ya magonjwa ya moyo nchini	Dkt. Angela Muhozya - JKCI
05:45 - 06:15	Maswali na Majadiliano	Prof. Stephen Kibusi - UDOM

MADA 2: UTOAJI WA HUDUMA JUMUISHI ZA AFYA

Mwenyekiti: Prof Kawshik Ramaiya, Katibu Mkuu wa TANCDA na TDA Tanzania

Watunza Kumbukumbu: Dkt. Clarer Jones, MoH na Dkt. Mercy Chiduo, NIMR

Muda	Mawasilisho yatakayofanyika	Wawasilishaji
06:15 - 06:40	Huduma jumuishi za Tiba Asili katika Hospitali za Rufaa za Mikoa Tanzania	Dkt. Winifrida Kidima - MoH
06:40 - 07:05	Mchango wa Huduma jumuishi za Afya Ngazi ya Jamii katika kuwezesha huduma za Afya kwa Wote	Dkt. Norman Kyala - MoH
07:05 - 07:30	Mwenendo wa Magonjwa Yasiyo ambukiza na Viashiria vyake nchini (STEP SURVEY)	Dkt. Mary Mayige wa NIMR na Dkt. Ubuguyu wa MoH
07:30 - 08:00	Maswali na Majadiliano	Dkt. Paul Kazyoba - NIMR
08:00 - 09:00	CHAKULA CHA MCHANA	WOTE

MADA 3: TAFITI NA MABORESHO KATIKA SEKTA YA AFYA TANZANIA

Mwenyekiti: Dkt. Basiliana Emidi, Meneja na Afisa Tafiti Mkuu kutoka Taasisi ya Tafiti za Binadamu - NIMR

Watunza Kumbukumbu: Dr Nura, FELTEP, Dr Caroline DCS

Muda	Mawasilisho yatakayofanyika	Wawasilishaji
09:00 - 09:25	Umuhimu wa 'Afya moja' katika kudhibiti magonjwa ya milipuko nchini	Dkt. Chacha Mangu - MoH
09:25 - 09:50	Maoni ya Wana-Diaspora juu ya Huduma za Afya Nchini	Prof. Gideon Mlawa – TUHEDA UK
09:50 - 10:20	Historia na Maboresho ya sekta ya Afya Tanzania kuelekea kuwa na Afya kwa Wote.	Dkt. Ntuli Kapologwe - MoH
10:20 - 10:50	Maswali na Majadiliano	Dkt. Leonard Subi – Kibong'oto

SHEREHE ZA HITIMISHO LA MDAHALO

Mwezeshaji: Balozi Dkt. Mpoki Ulisubisya – Mkurugenzi Mtendaji wa Taasisi ya Mifupa ya Muhimbili - MOI

Muda	Tukio	Mhusika
10:50 - 10:55	Mgeni Rasmi kuwasili	Mwenyekiti wa Maadhimisho
10:55 - 11:00	Maoni na Maazimio ya Mdahalo	Mwenyekiti wa Mdahalo
11:00 - 11:05	Kumkaribisha Mgeni Rasmi	Mganga Mkuu wa Serikali
11:05 - 11:20	Kufunga Mdahalo	Katibu Mkuu – MoH

Wasilisho Kuu

Wasilisho: Matumizi ya tafiti katika kuboresha Afya kwa wote nchini

Jina: Prof. Said S. Aboud; MD, MPhil, MMed, PhD

Cheo: Mkurugenzi Mkuu

Taasisi: Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu (NIMR)

Barua pepe: said.aboud@nimr.or.tz

Katika miongo kadhaa iliyopita, Tanzania imepiga hatua kubwa kuelekea kufikia ajenda ya afya kwa wote kwa kuimarisha mifumo ya afya, kuboresha upatikanaji wa huduma muhimu za afya na kukuza ufahamu wa afya kupitia juhudi shirikishi. Wizara ya Afya imesisitiza umuhimu wa kutumia njia mbalimbali za kuimarisha afya za watazania ambazo "zimetokana na kuongozwa na shahidi za kitafiti zilizotengenezwa nchini Tanzania" ili kuhakikisha hakuna mtu anayeachwa nyuma.

Katika muktadha huu Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu (NIMR), chini ya Wizara ya Afya, ina jukumu la kuratibu, kukuza utafiti na kutafsiri matumizi yake katika kuboresha Sekta ya Afya na utoaji wa huduma za afya za kila siku nchini. Kujikita katika mbinu za kitafiti zimeleta maendeleo makubwa katika kufikia malengo ya mfumo wa Afya kuanzia kwenye utoaji wa huduma, utawala bora, ushirikishwaji wa Wadau katika kuongeza usawa wa utoaji wa huduma za Afya nchini Tanzania. Uchambuzi huu unaonesha mafanikio yaliyofikiwa hapo juu ukisisitiza hitaji la uvumbuzi zaidi katika sekta ya afya.

Kwa kutumia takwimu za Tanzania na kusoma/kuelewa machapisho ya kiafya, Taasisi inaangalia namna ambavyo Mikakati iliyotumia shahidi za Kisayansi zilivyoboresha huduma za afya, uwezo wa wafanyakazi wa afya, mifumo ya habari, upatikanaji wa dawa kwa watumiaji, ufadhili katika sekta ya afya, pamoja na uongozi / utawala/ usimamizi bora katika kuendeleza afya kwa wote.

Keynote Speech

Title: *The role of research in advancing health for all in Tanzania*

Name: *Prof. Said S. Aboud MD, MPhil, MMed, PhD*

Position: *Executive Director*

Institution: *National Institute for Medical Research*

Email: said.aboud@nimr.or.tz

During the past decades, Tanzania has made significant strides towards achieving the health-for-all agenda by strengthening health systems, improving access to essential healthcare services and promoting awareness through collaborative efforts.

The Ministry of Health has emphasised the importance of interventions that are "inspired and guided by locally generated evidence" to ensure no one is left behind. In this context the National Institute for Medical Research (NIMR), under the Ministry of Health, plays a pivotal role in coordinating research and translating findings into health policy and practice.

This commitment to an evidence-based approach has driven significant progress in achieving key health system targets, spanning service delivery, governance, and stakeholder engagement to enhance health equity in Tanzania. This analysis reflects on past achievements while underscoring the need for further research-driven innovations in the health sector.

Using Tanzanian data and case studies, it examines how evidence-based initiatives have strengthened health services, workforce capacity, information systems, access to medicines, health financing, and leadership/governance in advancing health for all.

MADA 1: UBORESHAJI WA UTOAJI WA HUDUMA BOBEZI ZA AFYA NCHINI

Mwenyekiti/Chairperson: Prof. Abel N. Makubi
MD, MMed (Int.med), MSc (Haem), Dip Card, PhD (Card), FRC, FESC

Mkurugenzi Mtendaji wa Hospitali ya Benjamin Mkapa na Katibu Mkuu Mustaaifu wa Wizara ya Afya (*Executive Director of Benjamin Mkapa Hospital and former Permanent Secretary (PS) of the Ministry of Health*)

Wasilisho: Matumizi ya Sayansi Katika Kuboresha Huduma za Figo; Tulipotoka, Tulipo na Tunapokwenda Katika Uchujaji Damu na Upandikizaji Figo Tanzania

Jina: Prof. Masumbuko Yatembela Mwashambwa

Cheo: Professor Idara ya Upasuaji

Taasisi: Chuo Kikuu cha Dodoma

Barua pepe: Masumbuko.mwashambwa@udom.ac.tz.

Utangulizi na Umuhimu: Magonjwa ya figo ni tatizo kubwa la kiafya duniani, yakikadiriwa kuathiri watu milioni 850 (10% ya watu wote) mwaka 2019, ikilinganishwa na milioni 422 wenye kisukari, milioni 42 wenye saratani, na milioni 36.7 wenye VVU. Takriban watu milioni 1.4 hufariki kila mwaka, sawa na 2.4% ya vifo duniani, vingi vikitokea kwenye nchi maskini. Kwa ujumla inakadiriwa kuwa asilimia 4.5 hadi 13 ya watu duniani wana matatizo ya figo, Africa ndiyo yenye idadi ndogo. Aidha, zaidi ya 75% ya visa vya figo kushindwa kwa ghafla (AKI) hutokea katika jamii, ambapo takriban watu milioni 13.5 huathirika kila mwaka.)

Malengo: Kuchambua hali ya sasa ya huduma za figo nchini Tanzania, ikijumuisha uchujaji damu na upandikizaji figo, pamoja na mafanikio, changamoto, na maeneo ya maboresho.

Mbinu na Taratibu zilizotumika: Taarifa zimekusanywa kupitia mapitio ya nyaraka za kitaifa kuhusu huduma za dialysis, machapisho na kumbukumbu za wagonjwa waaliopandikizwa figo

Matokeo: Huduma za figo nchini zimeimarika kwa kasi. Takriban wagonjwa 3327 wanapata huduma za hemodialysis kote nchini, kutoka kwenye vituo zaidi ya 24 vya umma vilivyowekewa mashine 597 za kisasa. Huduma za upandikizaji figo zimeanzishwa katika MNH, Mloganzila, na BMH, ambapo jumla ya wagonjwa 151 wamepandikizwa figo: 89 MNH Upanga, 12 Mloganzila na 50 BMH. Kati ya hawa, 86-90% wanaendelea vizuri, 16% walipata matatizo madogomadogo, na 7-14% walifariki. Mafanikio haya yametokana na uwekezaji katika miundombinu, ununuzi wa vifaa vya kisasa, mafunzo kwa wataalamu, na ushirikiano wa kimataifa.

Hitimisho na Ushauri: Tanzania imepiga hatua kubwa katika kuboresha huduma za figo, ikiwemo kufanikisha upandikizaji figo ndani ya muda mfupi hatua ambayo haijafikiwa na nchi nyingi za Afrika. Pamoja na changamoto zilizopo, msingi wa

mafanikio upo na unaonyesha matumaini makubwa ya kuendeleza huduma hizi kwa ufanisi zaidi.

Title: *The use of science in improving kidney services in Tanzania; past, present and future of hemodialysis and kidney transplant services*

Name: Prof. Masumbuko Yatembele Mwashambwa

Position: Associate Professor of Surgery

Institution: University of Dodoma

Email: Masumbuko.mwashambwa@udom.ac.tz

Introduction: *Kidney diseases are a major health burden worldwide. In 2019 850 million people (10% of population) were affected. This was twice as much as Diabetes mellitus (422 million), twenty times to all cancers (42 million) and HIV/AIDS (36.7 million). Approximately 1.4 million people die annually (2.4% of all causes of deaths), most occur in the lower- and middle-income countries. An actual prevalence varies, ranging from 4.5 to 13%, with Africa having the lowest. Furthermore, there are about 13.5 million cases of acute kidney injury, the majority (75%) from the community. Tanzania started renal service less than two decades, this analysis aims to put forward current situation and way forward.*

Main objective: *To analyze existing kidney services provision in Tanzania; hemodialysis and kidney transplant, record success, challenges and areas of improvement.*

Methodology: *Review of articles, patients' records and reports from various stakeholders, including the Ministry of Health.*

Results: *Kidney services in the country have rapidly expanded. In Tanzania there are 3327 patients on hemodialysis, from 24 hemodialysis centers with 597 hemodialysis machines. Kidney transplant (KT) services are offered at Muhimbili National Hospital (Upanga and Mloganzila) and Benjamin Mkapa Hospital in Dodoma. One hundred and fifty-one cases have undergone KT (89 MNH Upanga, 12 Mloganzila and 50 BMH). Of these cases 86-90% are well, 16% had minor complications and 7-14% died due to various reasons. Investment in infrastructure, availability of medicines and equipment, human resource training and international collaboration were the main pillars of success. A key challenge is lack of donors.*

Conclusion: *Tanzania has taken a significant leap in initiating kidney services. Despite challenges, KT services in particular, took the shortest time after initiation of hemodialysis services, many African countries are still struggling. With this good beginning, continued improvement will perfect kidney service in the country.*

Wasilisho: Matumizi ya Sayansi kuleta Mageuzi katika matibabu ya Magonjwa ya Damu na Saratani kwa Watoto - Uzoefu kutoka Mradi wa Upandikizaji Uloto Hospitali ya Benjamin Mkapa Dodoma

Jina: Dr. Shakilu Kayungo Jumanne

Cheo: Muhadhiri Mwandamizi na Kaimu Amidi wa Shule kuu ya Tiba na Afya ya Kinywa

Taasisi: Chuo Kikuu cha Dodoma

Barua pepe: Shakilu.jumanne@udom.ac.tz

Utangulizi na Umuhimu: Upandikizaji uloto “BMT” kama tiba ya magonjwa ilitumika mara ya kwanza mwaka 1960 huko nchini Marekani na imeendelea kuwa tiba bobeezi kwa magonjwa ya damu na saratani. Matumizi ya tiba hii katika nchi zinazoendelea hasa barani Afrika yamekuwa yakitiliwa shaka hasa kutokana na wasiwasi juu ya usalama wake, gharama kubwa na uwepo wa matitizo mengine mengi makubwa ya kiafya yanayohitaji tiba pia. Mwaka 2023, Tanzania iliingia kwenye orodha ya nchi sita barani Afrika kuanzisha tiba ya upandikizaji uloto kwa watoto wenye ugonjwa wa Siko Seli (Seli mundu). Matibabu haya yalianzishwa katika hospitali ya Benjamin Mkapa kwa kushirikiana na Chuo kikuu cha Dodoma, na Shirikia la kiitaliano litwalo Help3

Malengo: Kutathmini uwezo na matokeo ya awali ya matibabu ya Upandikizaji uloto kwa watoto ishirini(20) wenye ugonjwa wa Siko Seli katika hospitali ya Benjamin Mkapa

Mbinu na Taratibu zilizotumika: Hatua za maandalizi za kutoa tiba hii zilianza mwaka 2018 zikihusisha maeneo makuu mawili,(1) kuboresha miundo mbinu ya hospitali kukidhi vigezo vya upandikizaji uloto (ikiwemo kuboresha wodi maalum, huduma za uchunguzi na upatikanaji wa damu salama), (2). Kutoa mafunzo kwa timu ya upandikizaji uloto ikijumuisha wataalam mbali mbali. Wodi maalum iliandaliwa, vifaa kwa ajili ya vipimo maalum pamoja na vitendanishi vilinunuliwa na jumla ya watoa huduma 10 walipata mafunzo mahsusi kuhusu tiba hii. Mgonjwa wa kwanza alipatiwa tiba ya upandikizaji uloto kuanzia mwezi Februari, 2023 kwa kutumia miongozo maalum ya matibabu kuhakikisha usalama wa mgonjwa na tiba ya ugonjwa wa Sikoseli.

Matokeo: Kuanzia mwezi Februari, 2023 hadi Machi, 2025, jumla ya wagonjwa 20 (13 wa kiume, 7 wakike)wenye wastani wa umri wa miaka 8 walipata tiba ya upandikizaji uloto. Wote walionyesha dalili za uloto kuota na kuondosha ugonjwa wa Siko Seli ambapo chembe sahani na chembe nyeupe za damu (kama viashiria vya kupona) zilifikia kiwango cha kuridhisha kuanzia siku ya 20 na 28 kutoka siku ya kupandikizwa uloto. Wagonjwa wote 20 walihimili matibabu haya bila shida yoyote kubwa na kupata maudhi kidogo kutokana na matibabu ambayo yalidhibitiwa kwa tiba. Mpaka kufikia mwezi Machi, ikiwa ni wastani wa siku 326 tangu kupandikizwa uloto kwa wagonjwa wote 20, hakuna mgonjwa yoyote alieonyesha dalili za ugonjwa wa Sikoseli na 7 kati yao hawakuwa kwenye matibabu yoyote. Wastani wa gharama za tiba hii unakadiriwa kuwa shilingi milioni 60 (55-75) kutegemea muda wa tiba mgonjwa atakao tumia.

Hitimisho na Ushauri: Matokeo ya mradi huu yameonyesha kuwa tiba ya upandikizaji uloto inaweza kutolewa hapa Tanzania kwa usalama mkubwa kwa kuwa na kitengo maalum na wataalam husika. Gharama za tiba hii ni kubwa kwa mtu mwenye kipato cha kawaida kumudu lakini ni nafuu sana tiba hii kuanyika hapa nchini ukilinganisha na kupata tiba hii nchi za nje. Gharama za tiba hii ambayo huondosha ugonjwa kabisa ni nafuu ukilinganisha na tiba za kawaida za kupunguza makali ambazo mgonjwa hutumia kwa maisha yake yote.

Title: Transforming Care for Childhood Cancer and Blood Disorders through Advancement in Science – Experience from Benjamin Mkapa Hospital Bone Marrow Transplantation Program

Name: Dr. Shakilu Kayungu Jumanne

Position: Senior Lecturer and Acting Dean of the School of Medicine and Dentistry

Institution: University of Dodoma

Email: Shakilu.jumanne@udom.ac.tz

Introduction and rationale: Bone marrow transplantation (BMT), also known as Hematopoietic Stem Cell Transplantation (HSCT) was first used as a curative option in 1960 and has since been a standard of care rescue therapy for several benign and malignant disorders in high-income settings. However, the feasibility of HSCT in LMICs is often questioned over safety concerns, high costs, and presence of other competing health priorities. In 2023, Tanzania became the 6th African country to establish a matched sibling donor allogeneic HSCT for Sickle cell disease in a collaborative project involving Benjamin Mkapa Hospital, the University of Dodoma, and an Italian charity – Help3 Onlus

Objective(s): To evaluate the feasibility and treatment outcomes of the first 20 HSCT cases conducted in Dodoma.

Methodology/Approach: The preparatory phase started in 2018, with a focus on two key priority areas: upgrading the hospital infrastructure (special ward, diagnostic services, and blood bank) to meet minimum HSCT standards and training a multidisciplinary team of experts. A specialized ward was renovated and installed with essential HSCT requirements, an initial team of 10 staff underwent an intensive training program and procurement of required laboratory and blood bank equipment and reagents. The first case was transplanted in February 2023 using a myeloablative conditioning regimen including Busulfan, Rabbit Antithymocyte Globulin, and Cyclophosphamide, with bone marrow as the stem cell source from HLA-matched sibling donors. Methotrexate and cyclosporine were used for GVHD prophylaxis, while Levetiracetam, Acyclovir, Bactrim, and fluconazole were used as prophylactic antimicrobials.

Results: Between February 2023 and March 2025, 20 patients (13 males, 7 females; median age 8 years) underwent HSCT. Nine-teen achieved complete engraftment (median ANC: day +28, PLT: day +20) with manageable HSCT-related complications, including febrile neutropenia episodes, mucositis, grade 2 aGVHD (CTCAv5), and other infections (1 fungal, 1 HPV, 1 Falciparum malaria). Bacterial isolates during febrile neutropenia included Coagulase-negative Staphylococci and Pseudomonas/Acinetobacter species all controlled by course of antibiotic therapy. At a median follow-up of +326(24-786) days, all patients remained SCD symptom-free, with 7 completing immunosuppressive therapy. Average cost: 60M TZS (range: 55–75M) depending on complications acquired

Conclusions & Recommendations: Bone marrow transplantation is a feasible therapy to pursue in Tanzania when performed at a dedicated center by a trained team. The cost of the procedure can be prohibitive for out-of-pocket payments but is much lower than any overseas option. Conventional supportive SCD care, in the long term, is equally expensive compared to HSCT which is a curative option.

Wasilisho: Matumizi ya teknolojia katika ufanisi wa matibabu ya magonjwa ya moyo nchini

Jina: Dr Angela Paul Muhozya (MD, MMED, FCVA).

Cheo: Daktari Bingwa Mbobezi wa Usingizi wa Moyo na Mkurugenzi wa Upasuaji wa Moyo

Taasisi: Taasisi ya Magonjwa ya Moyo ya Jakaya Kikwete

Barua pepe: angela.muhozya@jkci.or.tz

Utangulizi na Umuhimu: Maendeleo ya teknolojia katika matibabu ya moyo

Malengo: Teknolojia ilivyoboresha na kuongeza ufanisi katika utoaji wa huduma za moyo

Mbinu na Taratibu zilizotumika: Uhakiki wa taarifa, mahojiano, teknolojia zinazotumika kwa sasa.

Matokeo: Kuboresha huduma za matibabu ya moyo nchini

Hitimisho na Ushauri: Wizara ya afya chini ya uongozi wa serekali ya awamu ya sita umewekeza kwa kiwango kikubwa katika teknolojia iliyoboresha ubora lakini pia kutanua uwigo na upatikanaji wa huduma za matibabu ya moyo nchini

Title: *Technology use in expansion and advancement of cardiovascular interventions in Tanzania*

Name: *Dr Angela Paul Muhozya (MD, MMED, FCVA).*

Position: *Consultant Cardiovascular Anaesthesiologist and Director of Cardiac Surgery*

Institution: *Jakaya Kikwete Cardiac Institute*

Email: angela.muhozya@jkci.or.tz

Background/Introduction and rationale: *Technology advancing cardiovascular interventions.*

Objective: *Technology advancement contributing to more accessible and quality cardiovascular interventions*

Methodology/Approach: *Review of current work from JKCI, client's data collected and expert's work contributions.*

Results: *Advancing cardiovascular interventions in Tanzania*

Conclusions & Recommendations: *Ministry of health under the current government leadership has invested extensively in advanced technology of prevention, treatment and management of cardiovascular diseases. This has resulted in accessible but also topnotch cardiovascular interventions of international standards.*

Mwongoza Majadiliano na Maswali: Prof. Stephen Kibusi

Profesa wa Afya ya Jamii na Mkuu wa Shule Kuu ya Uuguzi na Afya ya Jamii katika Chuo Kikuu cha Dodoma
(Associate Professor of Public Health the Dean of School of Nursing and Public Health at the University of Dodoma)

MADA 2: UTOAJI WA HUDUMA JUMUISHI ZA AFYA

Mwenyekiti/Chairperson: Prof. Kaushik Ramaiya

Mkurugenzi Mtendaji na Daktari Mshauri katika Hospitali ya Shree Hindu Mandal – Dar Es Salaam na Katibu Mkuu wa Chama cha Kisukari Tanzania (TDA), Tanzania NCD Alliance (CEO & Consultant Physician at Shree Hindu Mandal Hospital & Hon. General Secretary of Tanzania Diabetes Association (TDA), Tanzania NCD Alliance (TANCDA)

Wasilisho: Huduma Jumuishi za Tiba Asili katika Hospitali za Rufaa za Mikoa

Jina: Dr. Winifrida Benedict Kidima

Cheo: Kaimu Mkurugenzi Msaidizi, Kurugenzi ya Huduma za Tiba, Sehemu ya Tiba Asili na Mbadala

Taasisi: Wizara ya Afya

Barua pepe: winifridakidima@afya.go.tz

Utangulizi na Umuhimu: Zaidi ya asilimia 60 ya Watanzania hutumia dawa za tiba asili kujitibu dhidi ya magonjwa mbalimbali. Wizara ya Afya inaendelea kuboresha huduma za tiba asili nchini kuendana na Sera ya Afya ya Mwaka 2017 na Mpango Mkakati wa Sekta ya Afya wa Tano (2021/22-2025/26) unaosisitiza kuimarisha ujumuishwaji wa huduma za tiba asili zilizothibitishwa kisayansi kwa manufaa ya wananchi. Umuhimu wa huduma jumuishi za tiba asili umesisitizwa pia katika Mpango Mkakati wa Tiba Asili wa Shirika la Afya Duniani (2014-2025) katika utekelezaji wa Bima ya Afya kwa wote. Idara ya Tiba kupitia Sehemu ya Tiba Asili na Mbadala ilianzisha huduma jumuishi za tiba asili mnamo Mei 2023 kwa kuwajengea uwezo jumla ya watumishi 21 wa afya katika hospitali saba (7) za Rufaa za Mikoa ya Dodoma, Mbeya, Mwanza, Morogoro, Arusha, Tanga na Temeke-Dar es Salaam.

Malengo: Lengo la andiko hili ni kutathmini matokeo ya huduma jumuishi za tiba asili katika hospitali 7 za rufaa za Mikoa.

Mbinu na Taratibu zilizotumika: Tathimini hii imefanyika kwa kupitia taarifa na ripoti za utekelezaji wa huduma hizi kwa kila robo mwaka.

Matokeo: Matokeo yanaonyesha kwamba dawa aina 26 za tiba asili zilizokidhi vigezo vya usalama na ubora zimeatumika katika huduma hizi. Wastani wa wagonjwa 124 wametibiwa kwa kipindi cha kila robo mwaka na kufanya jumla ya wagonjwa waliotibiwa kufikia 868 tangu huduma hii ianzishwe mnamo Mei 2023 kufikia Machi 2025. Magonjwa ambayo yametibiwa ni pamoja na vidonda vya tumbo, pumu, mfumo wa upumuaji, homa ya matumbo, mvurugiko wa homoni kwa wanawake, maambukizi ya mfumo wa mkojo, bawasili, athritisi na tezi dume. Vilevile huduma hizi zimeingiza mapato ya jumla ya shilingi 26,118,529.

Hitimisho na Ushauri: Kutokana na hayo Serikali itaendeleza kuboresha huduma za tiba asili kwa kuchochea tafiti na ubunifu ili huduma za tiba asili ziwe na ubora, usalama na ufanisi.

Title: Integrative Health Services Using Traditional Medicine Services in Regional Referral Hospitals

Name: Dr. Winifrida Benedict Kidima

Position: Acting Assistant Director – Directorate of Curative Services, Traditional and Alternative Medicine Section

Institution: Ministry of Health

Email: winifridakidima@afya.go.tz

Background /Introduction and rationale: Over 60 percent of Tanzanians use traditional medicine to treat a wide range of illnesses either before or after consulting modern medical facilities for definitive treatment. The Ministry of Health (MoH) continues to promote traditional medicine services in the country in accordance with the 2017 Health Policy and the Fifth Health Sector Strategic Plan (2021/22-2025/26) that aims at enhancing the integration of evidence-based traditional and alternative medicine into health services for the public. The resolutions of World Health Assembly recognize the importance of traditional medicine and its integration into national health systems to enhance health and well-being worldwide in achieving Universal Health Coverage. Accordingly, in May 2023, the Department of Curative Services, Traditional and Alternative Medicine Section in the MoH introduced integrated health services using traditional medicine in seven Regional Referral Hospitals in Dodoma, Mbeya, Mwanza, Morogoro, Arusha, Tanga, and Temeke-Dar es Salaam.

Objective(s): The purpose of this report is to evaluate and assess the outcomes of integrated health services in the seven referral hospitals.

Methodology/Approach: This assessment was carried out by analysing the quarterly implementation reports of the integrated health services.

Results: The findings show that 26 different types of natural remedies that met safety and quality standards were used in these services. From May 2023 to March 2025, the integrative health service served a total of 868 patients, with an average of 124 patients every three months. The ailments treated included peptic ulcers, asthma, upper respiratory infections, typhoid fever, hormonal imbalances in women, urinary tract infections, haemorrhoids, arthritis and benign prostate hypertrophy. These services have also resulted in a total revenue of 26,118,529 shillings.

Conclusions & Recommendations: Against this backdrop, the Government will continue to support traditional medicine services by promoting evidence-based services to ensure safety quality and efficacy.

Wasilisho: Mchango wa Huduma Jumuishi za Afya Ngazi ya Jamii katika Kuwezesha Huduma za Afya kwa Wote Nchini Tanzania

Jina: Norman Jonas Kyala

Cheo: Mratibu wa Huduma za Afya Ngazi ya Jamii

Taasisi: Wizara ya Afya

Barua Pepe: Norman.kyala@afya.go.tz

Utangulizi na Umuhimu: Upatikanaji wa huduma ya afya kwa wote (UHC) unahitaji juhudi madhubuti kuhakikisha kila mtu anapata huduma bora za afya kwa usawa. Nchini Tanzania, afya ya jamii imekuwa mhimili muhimu wa huduma ya afya ya msingi (PHC) tangu utekelezaji wa sera ya ujamaa wa vijiji miaka ya 1960 na kampeni za afya miaka ya 1970. Hata hivyo, kwa miongo kadhaa, juhudi nyingi za afya ya jamii zilikuwa zimetawanyika, zenye mwelekeo wa magonjwa mahususi, na zikiendeshwa na wafadhili bila uratibu madhubuti. Katika kukabiliana na changamoto hizo, Wizara ya Afya ilizindua Mpango wa Wahudumu wa Afya Ngazi ya Jamii Ulio Sanifiwa na Kuratibiwa (ICCHW) mwaka 2024, ikiwa ni hatua ya kimkakati ya kuimarisha nafasi ya afya ya jamii katika kufanikisha UHC.

Malengo: Kuwasilisha mchango wa huduma za afya ya jamii katika kuimarisha UHC

Mbinu na Taratibu Zilizotumika: Huduma za Afya Ngazi ya Jamii imejengwa juu ya historia tajiri ya Tanzania katika afya ya jamii, kuanzia Azimio la Arusha la mwaka 1967, Mkutano wa Alma-Ata wa 1978, hadi kikao cha wadau cha Bagamoyo mwaka 2012. ICCHW inalenga kuajiri jumla ya CHWs 137,294, wawili (mwanamume na mwanamke) kwa kila Kitongoji na Mtaa. Wahudumu huchaguliwa na jamii kwa vigezo maalum, wakiwemo kuwa wakazi wa eneo husika, kuaminika, na kuwa na elimu ya sekondari. Mafunzo ya miezi sita yanayotolewa yanazingatia umahiri na yamejikita katika kuweesha CHW kutoa huduma za msingi za afya, lishe na ustawi wa jamii ndani ya jamii.

Matokeo: Mpango wa Wahudumu wa Afya Ngazi ya Jamii (CHW) umeleta mageuzi ya kimfumo katika utoaji wa huduma za afya nchini Tanzania kwa kujenga mfumo jumuishi, unaoratibiwa kitaifa na kuzingatia usawa wa kijinsia, kijamii na kijiografia. Mageuzi haya yamehakikisha kuwa huduma za afya ngazi ya jamii si tu sehemu ya huduma ya afya ya msingi bali pia ni chombo muhimu cha kufanikisha huduma ya afya kwa wote (UHC). Kupitia mpango huu, CHWs wanaunganishwa rasmi katika mfumo wa afya wa taifa kupitia sera, taratibu za usimamizi, ufuatiliaji wa kimkakati na matumizi ya mifumo ya kidijitali kama DHIS2.

Uteuzi wa CHWs unatekelezwa kwa kushirikisha jamii kwa kutumia vigezo vilivyo wazi na vinavyozingatia usawa na uadilifu. Mtu anapaswa kuwa na elimu ya angalau kidato cha nne, awe mkazi wa kudumu wa mtaa au kitongoji husika kwa angalau miaka mitatu, awe na sifa za kuaminika kijamii, asiwe na historia ya makosa ya jinai, na awe na utayari wa kutoa huduma kwa kipindi kisichopungua miaka mitano. Baada ya uteuzi, CHWs hupata mafunzo ya miezi sita yaliyo boreshwa kwa msingi wa umahiri katika maeneo saba ya kipaumbele: elimu ya afya na uhamasishaji, afya ya uzazi na watoto, magonjwa ya kuambukiza na yasiyoambukiza, lishe na udumavu, ustawi wa jamii, usafi wa mazingira, na magonjwa mapya. Lengo ni kuwajengea uwezo wa kutoa huduma jumuishi kwa kuzingatia muktadha wa jamii wanayoihudumia.

Ugawaji wa CHWs unafanyika kwa uwiano wa jinsia, ambapo wawili (mmoja mwanamume na mmoja mwanamke) wanapangwa kwa kila Kitongoji au Mtaa. Kwa jumla, nchi inahitaji wahudumu 137,294 ili kufikia maeneo yote 64,384 ya vijijini na 4,263 ya mijini. Wakiwa sehemu ya mfumo rasmi wa afya, CHWs hutoa huduma jumuishi zinazogusa maeneo yote ya mnyororo wa huduma: kuhamasisha (mfano: chanjo, lishe, elimu ya afya), kinga (mfano: utoaji wa vyandarua, uchunguzi wa shinikizo la damu na kisukari), tiba ya msingi (mfano: matibabu ya malaria na kuhara).

Mpango huu shirikishi umeongeza ufanikishaji wa upatikanaji wa huduma bora, usawa wa kiafya, na uthabiti wa mfumo wa afya unaomfikia kila mwananchi moja kwa moja hadi ngazi ya kaya.

Hitimisho na Ushauri: Mpango wa ICCHW ni hatua ya kimkakati kuelekea huduma jumuishi, zinazomlenga mtu na zinazoongozwa na jamii. Kwa kuwaweka CHWs ndani ya mfumo rasmi kwa kutumia sera, rasilimali na mifumo ya taarifa za kidijitali, Tanzania inaondoa changamoto za kihistoria na kuweka mfano bora kwa nchi nyingine zenye kipato cha chini na cha kati. Wigo wa huduma unaoendana na nguzo kuu za UHC: upatikanaji, usawa, ubora, na uendelevu wa huduma kwa wote.

Title: *The Role of Integrated Community-Based Health Services in Advancing Universal Health Coverage in Tanzania*

Name: Norman Jonas Kyala

Position: Coordinator of National Community Based Health Services

Institution: Ministry of Health

Email: Norman.kyala@afya.go.tz

Introduction and Rationale: *Achieving Universal Health Coverage (UHC) requires deliberate efforts to ensure equitable access to quality health services for all. In Tanzania, community health has been a pillar of primary health care (PHC) since the implementation of villagization policies in the 1960s and national health campaigns in the 1970s. However, for decades, most community health efforts were fragmented, disease-specific, and donor-driven with minimal coordination. To address these challenges, the Ministry of Health launched the Integrated and Coordinated Community Health Worker (ICCHW) Program in 2024 as a strategic step to strengthen community health in achieving UHC.*

Objective: *To present the contribution of community health services in advancing UHC.*

Methodology/Approach: *Tanzania's community health system builds on a rich legacy, from the 1967 Arusha Declaration and the 1978 Alma-Ata Conference to the 2012 Bagamoyo Stakeholder Meeting. The ICCHW Program targets recruitment of 137,294 CHWs—two (one male, one female) per Kitongoji or Mtaa. CHWs are selected by the community based on clear criteria, including local residency, trustworthiness, and secondary education. They undergo six months of competency-based training designed to equip them with practical skills in primary health care, nutrition, and social welfare.*

Results: *The ICCHW Program has brought systemic reforms by creating an integrated, nationally coordinated structure that considers gender, social, and geographical equity. CHWs are formally embedded within the health system through supportive policies, supervision structures, strategic monitoring, and digital systems like DHIS2. The selection process ensures social acceptance and accountability. Training covers seven priority modules: health promotion, RMNCAH, infectious and non-communicable diseases, nutrition, social welfare, environmental health, and emerging diseases. With equitable deployment (two CHWs per hamlet/urban cell), Tanzania aims to serve all 64,384 rural hamlets and 4,263 urban Mitaa. CHWs provide*

promotive (e.g., immunization and health education), preventive (e.g., blood pressure screening), basic curative (e.g., malaria and diarrhoea treatment), rehabilitative, and palliative services. The inclusive model increases service coverage, health equity, and community-level resilience cornerstones of UHC.

Conclusion and Recommendations: *The ICCHW Program is a strategic step toward people-centered and community-driven integrated health services. By embedding CHWs into the formal health system through strong policy, financing, and digital monitoring, Tanzania is overcoming historical inefficiencies and offering a replicable model for other low- and middle-income countries. The wide scope of community-delivered services aligns directly with the pillars of UHC: availability, equity, quality, and sustainability for all.*

Wasilisho: Utafiti wa ufuatiliaji wa Viashiria hatarishi na tathmini ya Hali ya Magonjwa Yasiyoambukiza Tanzania (STEPS Survey)

Jina: ¹Mary T. Mayige & ²Omary Ubuguyu on behalf of the STEPS Survey Technical Committee

Cheo: ¹Mtafiti Mkuu na Mkurugenzi wa Taarifa za Utafiti na Kurekebu Tafiti & ²Mkurugenzi Msaidizi wa Huduma za Magonjwa Yasiyoambukiza na Afya ya Akili

Taasisi: ¹Taasisi ya Tafiti ya Magonjwa ya Binadamu – NIMR & ²Wizara ya Afya

Barua pepe: maryma13@yahoo.com & oubuguyu@gmail.com

Utangulizi: Ukubwa wa tatizo la magonjwa yasiyoambukiza (MYA) unaendelea kuwa tatizo la msingi la afya ya Jamii nchini, ambalo linachangia kwa kiasi kikubwa madhara na vifo vitokanavyo na magonjwa haya. Kwa mujibu wa matokeo ya utafiti wa ufuatiliaji wa viashiria hatarishi na tathmini ya hali ya magonjwa yasiyoambukiza nchini (STEPS Survey) kwa mwaka 2011 Zanzibar na mwaka 2012 kwa Tanzania Bara inaonesha MYA na viashiria vyake vipo kwa kiasi kikubwa. Ripoti hii itaelezea utafiti ulivyofanyika na matokeo ya utafiti kwa mwaka 2023.

Malengo: Utafiti umefanyika ili kuwezesha kupata takwimu za kitaifa za viashiria hatarishi vya Magonjwa yasiyoambukiza kwa Tanzania kwa ujumla, Tanzania Bara na Zanzibar.

Njia Zilizotumika (Methods): Huu ni utafiti wa majumbani uliohusisha kaya ambapo sampuli ilipatikana kutokana na vigezo vilivyozingatia mgawanyo katika hatua za makundi matatu. Walengwa walikuwa watu wote kwenye jamii waliokuwa na umri wa miaka 18 hadi 69 ambao wakati wa utafiti katika kaya zilizoteuliwa walitambuliwa kama wakazi wa kaya hizo. Taarifa za Sensa ya watu na makazi za mwaka 2022 zilitumika kutengenezea mwongozo wa utambuzi wa kaya kwa ajili ya Utafiti huu (STEPS Survey 2022/23). Jumla ya watu 4,320 walishiriki utafiti huu kwa mgawanyo wa washiriki 3,780 kwa Tanzania Bara na washiriki 540 kwa Zanzibar. Takwimu zilikusanywa kubainisha viashiria hatarishi ambavyo vinajumuisha hali ya tabiabwe, ulaji usiofaa, matumizi ya tunbaku, pombe na hali ya sonona pamoja na masuala ya unene na uzito uliokithiri kwa kutumia mifumo rasmi na mbinu kutokana na miongozo ya Shirika la Afya Duniani (WHO STEPS). *methodology.* Takwimu zilikusanywa kwa kutumia mfumo wa kieletroniki wa Open Data Kit (ODK) eSTEPS software. Utafiti ulifanyika kuanzia mwezi Septemba 2022 hadi Septemba 2023.

Matokeo: makadirio ya matokeo ya hali ya magonjwa yasiyoambukiza na viashiria hatarishi yatawasilishwa.

Hitimisho: Utafiti umebainisha ukubwa wa tatizo la shinikizo la damu, kisukari, hali ya changamoto za afya ya akili, sonona, ajali za barabarani, ajali ambazo hazikuhusisha ajali za barabarani pamoja na ukubwa wa vihatarishi vya magonjwa ya moyo. Utambuzi wa viashiria hatarishi umezingatia upimaji wa tabia au hali ambazo zinaweza kuchochea uwezekano mtu kupata magonjwa yasiyoambukiza. Uchambuzi wa hivi viashiria hatarishi utasaidia kutambua makundi ya kijamii yaliyo kwenye uhatarishi mkubwa na hivyo kubainisha mbinu za kuzuia magonjwa haya.

Title: STEPS Survey of non-communicable diseases, mental health, oral health and injuries in Tanzania

Names: ¹Mary T. Mayige & ²Omary Ubuguyu on behalf of the STEPS Survey Technical Committee

Position: ¹Principal Research Officer and Director of Research Information and Regulatory Affairs & ²Assistant Director of Non-Communicable Disease

Institutions: ¹National Institute for Medical Research & ²Ministry of Health

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Introduction: The burden of non-communicable diseases (NCDs) remains a public health concern in Tanzania, contributing to high morbidity and mortality. STEPS surveys conducted in 2011 and 2012 in Zanzibar and mainland Tanzania indicated a high prevalence of NCDs and related risk factors. This paper describes the methodology and results of the 2023 STEPS survey on NCD risk factors.

Objectives: The survey was conducted to provide nationally representative data on the NCD risk factors in Tanzania, Mainland, and Zanzibar.

Methods: The survey was a household-based study that employed a three-stage cluster sampling design. The target population consisted of all individuals, both women and men, aged 18 to 69 years, who were usual residents of the selected households. The Tanzania Population and Housing Census 2022 was used as the sampling frame for the 2022/2023 STEPS survey. The overall estimated sample size was 4,320 respondents (Mainland = 3,780 and Zanzibar = 540). Data were collected on the levels of major NCD risk factors, including physical inactivity, unhealthy dietary practices, smoking, harmful alcohol consumption, depression, and overweight/obesity, using the standardized WHO STEPS methodology. Data were collected electronically using Open Data Kit (ODK)-based eSTEPS software. The survey was conducted from September 2022 to September 2023.

Results: Estimates of NCD prevalence and associated risk factors and determinants will be reported.

Conclusion: This survey highlights the prevalence estimates of hypertension, diabetes, mental health issues and depression, road traffic injuries, non-road traffic accidents, and the burden of cardiovascular risks in Tanzania. Risk factor analysis identified and quantified common behaviours and conditions that increase the likelihood of developing non-communicable diseases. Analysing these risk factors will help identify high-risk groups and inform targeted prevention strategies.

Keywords: STEPS Survey, non-communicable diseases, mental health, oral health and injuries.

Mwongoza Majadiliano na Maswali: Dkt. Paul Kazyoba

Afisa Mkuu wa Utafiti katika Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu (Chief Research Officer at the National Institute for Medical Research)

MADA 3: TAFITI NA MABORESHO KATIKA SEKTA YA AFYA TANZANIA

Mwenyekiti/Chairperson: Dkt. Basiliana Emidi

Afisa Mkuu wa Utafiti katika Taasisi ya Taifa ya Tafiti za Magonjwa ya Binadamu (NIMR) na Meneja wa Kituo cha NIMR Dodoma (*Principal Research Officer at the National Institute for Medical Research (NIMR) and a Centre Manager of NIMR Dodoma*)

Wasilisho: Umuhimu wa 'Afya moja' katika kudhibiti magonjwa ya milipuko nchini

Jina: Chacha David Mangu

Cheo: Mwana-epidemiolojia Mwandamizi na Afisa mfuatiliaji wa magonjwa

Taasisi: Wizara ya Afya

Barua pepe: chacha.magu@afya.go.tz

Utangulizi na Umuhimu: Zaidi ya 60% magonjwa yayoibukia na kusababi milipuko duniani kote yanatoka kwa wanayama. Na kati ya hayo, zaidi ya 75% hutokea kwa wanyamapori. Magonjwa haya hutoka kwa wanyama kuja kwa binadamu kutokana na kongezeka kwa mwingiliano katika ya binadamu na wanyama kupitia shughuli za kiuchumi kwenye maeneo wanayoishi wananyama (mf. Uwindaji) au wanyama wanaobeba magonjwa kusogea karibu na makazi ya watu. Mabadiliko tabia nchi imekuwa ni moja ya sababu kubwa zaidi ni kwa nini magojwa haya hutokea. Dhana ya "Afya Moja" inahusisha utendaji wa pamoja kati ya sekta ya wanayama, afya ya binadamu na mazingira. Afya Moja ni mbinu unganishi na jumuishi inayolenga kuboresha afya ya binadamu, wanyama na mazingira. Mbinu hii inatambua afya ya binadamu, wanyama wa kufugwa, wanyama pori, mimea na mazingira kwa ujumla yana uhusiano wa karibu na kutegemeana.

Matokeo: Vichocheo vya kutokea kwa magonjwa hayo ni pamoja na ongezeko la watu, ukuaji wa miji, mabadiliko ya tabianchi na kupanuka kwa shughuli za binadamu katika makazi ya wanyamapori ambapo huongeza mwingiliano baina ya watu na wanyama. Hivyo basi udhibiti wa magojwa hayo unatakiwa kulenga maeneo nyeti yanayowakutanisha binadamu na wanyama. Kupunguza mwingiliano, ufuatiliaji wa magonjwa kwa wanyama, na kushughulia vigezo vya kijamii vinavyoongeza mwingiliano (socioanthropologica factors) ni moja mbinu zinazotumika kuzuia wanadamu kupata magonjwa hayo. Kwa upande mwininge, uwezo wa ugunduzi wa ugonjwa kwa haraka kupitia vipimo vya maabara na kushi kuwapatika wagonjwa matibabu husika kwa haraka ili kupunguza vifo na kuendea ugonjwa kwa jamii. Hata hivyo, ni muhimu tambua umuhimu wa tafiti za kisayansi na ubunifu katika utengenezaji wa chanjo na tiba za magonjwa haya ili kuongeza utayari ndani ya nchi katika kupambama

Hitimisho na Ushauri: Kwa sasa Tanzania iko katika hatua nzuri yenye uweza wa kuoambana na magonjya wa mlipuko kwa dhana ya afya moja. Uwepo wa wataalam, maabara, na uratibu mzuri uliopa na rasilimali fedha zinazowekezwa na serikali pamoja na wadau katika jitihada za udhibiti magonjwa. Hata hivyo, tafiti za ugunduzi wa chanjo na madawa bado ziko nyuma sana. Aidha, mafanikio ya dhana ya inakuja pale wadau wote wa Afya Moja wanapokubali kufanya kazi kwa pamoja ili kuhakikisha kuwa maeneo yote yanayopaswa kufanyiwa katika yanatekelewa ipasavyo.

Title: Enhancing Pandemic Preparedness and Response Through One Health Approach

Name: Chacha David Mangu

Position: Senior Epidemiologist and Disease Surveillance Officer

Institution: Ministry of Health

Barua pepe: chacha.magu@afya.go.tz

Background/Introduction and rationale: More than 60% of the emerging diseases which causes outbreaks globally come from animals. Out of those, more than 75% are caused by wild animals. Such diseases affect humans because of the increased interactions between animals and humans as a result of economic activities in areas where animals inhabit (e.g. hunting) or when animals carrying pathogens encroaching into human habitat. Alteration in ecosystems has been one of the major reasons as to why such diseases occur. The concept of One Health involves collaborative work between animal, human and environmental sectors. This approach takes into consideration the fact that human health, domestic animals, wildlife, plants and environment are interrelated.

Results: Factors causing the emerging of outbreak prone diseases includes growth in people's population, rural urbanization, climate change and increase in human activities in wildlife habitations which increases the contact between humans and animals. Therefore, prevention strategies should focus on the strategic areas of human-animal interface. Reducing interactions, animal disease surveillance, and dealing with anthropological factors which increases the contacts are among the strategies that can reduce the risks of transmission of zoonotic infections. In other hand, the capacity to diagnose diseases timely and rapidly through laboratory tests and providing treatment to patient diagnosed to have the disease in timely fashion to reduce mortality in the community. However, it is important to understand the importance of scientific research and innovation in vaccine and therapeutics manufacturing for zoonotic diseases so as to improve the preparedness in fighting epidemics.

Conclusions & Recommendations: Currently, Tanzania is in a good position to fight against outbreak prone diseases in One Health Approach. Coordination of experts and stakeholders with capabilities to respond to epidemics and other outbreak in One Health approach is key. Enhancing laboratory capacity and financial resource allocation by the government are part of the effort to diseases prevention response. However, research development for therapeutic and vaccines is still inadequate. Success for One Health approach are realized when all the stakeholders agree to work together to ensure that all the respective areas are worked upon.

Wasilisho: Umuhimu na Mchango wa Diaspora katika sekta ya afya Nchini

Jina: Prof. Gideon Gabriel Mlawa

Cheo: *Director of Medical Education BHRUT, RCPE Regional Advisor for Greater London Consultant Physician in Diabetes and Endocrinology/GIM*

Taasisi: *Tanzania UK Healthcare Diaspora Association*

Barua pepe: gideon.mlawa@nhs.net

Utangulizi na Umuhimu: Wanadiaspora wengi waishio nje ya Nchi walianza kuchangia na wanaendelea kuchangia kuboresha sekta ya afya Tanzania bara na Visiwani kwa kupitia njia mbalimbali kama kutuma misaada ya pesa kwa familia zao na pia kujisuhisha katika uwekezaji wa biashara Nchini..Mchango mkubwa katika sekta ya afya ambao wana -diaspora wanachangia kwa kuleteta ujuzi katika afya walioupata kutoka nchi walizohamia/walizoenda kusomea.Ujuzi na elimu hiyo ni katika sehemu tatu:1.Tiba, 2.Elimu ya Afya 3. Utafiti na maendeleo

Malengo: Kuelezea Mchango wa Diaspora katika sekta ya Afya

Mbinu na Taratibu zilizotumika: Ripoti na kazi za wanadiaspora walizozifanya na wanzazoendelea kuzifanya kwa sasa kuchangia na kuboresha huduma za afya Tanzania bara na Visiwani.Mifano michache ni kazi zaTUHEDA katika ushirikiano wao na hospital mbalimbali Tanzania bara na Visiwani.Taarifa zimpatikana kupitia kwenye mitandao na kuongea na wadiaspora katika sekta ya afya.

Matokeo:

Tulipo: Wanadiaspora katika sekta ya afya walioko Uingereza (TUHEDA) wanaendelea kutoa mchango Chanya katika kuboresha huduma za Afya Tanzania kwa kupitia maeneo muhimu matatu: Elimu ya Afya, Tiba ,utafiti na maendeleo. Mchango huo umekuwa ukifanyika kwa kushirikiana na taasisi (institutions) za Tanzania bara na visiwani kama MOI, JKCI, Mnazi mmoja, Benjamini Mkapa, Tumbi, Mbeya hospitali ya Rufaa, Muhimbili. Ushirikiano wa kubadilisha ujuzi na elimu umekuwa ukifanyika kwa njio ya mtandao na kufanya mafundisho ya uso kwa uso. Wanadiaspora wa sekta ya Afya Marekani wamefungua mkondo/program wa interventional Radiology Tanzania na Africa Mashariki.

Tulipotoka: Diaspora wengi walirudi nchini kwao wakiwa na elimu ya juu ya kitabibu na ujuzi walioupata wakiwa nje ya nchi. Walihusika katika kutengeneza miundombinu, kutambulisha mazoezi ya kitabibu, na kushughulikia changamoto muhimu za kiafya. Kufadhili miradi na kuchangia vifaa vya matibabu.

Tunapoelekea: Wanadiaspora wataendelea kuchangia katika kuboresha sekta ya afya nchini kwa kupitia: Utetezi wa sera-kutoa ushauri kwenye sera ya afya nchini kwao na ulimwenguni, kutetea usawa katika upatikanaji wa huduma za afya, kuunga mkono programu za elimu ya afya, na kusisitiza utekelezaji kwa vitendo kwa kutumia msingi wa Ushahidi (evidence-based practice). Kwa mtizamo wa pande mbili kama walio ndani na nje, unawawezesha kuelewa na kushughulikia changamoto za kipekee zinazokabiliwa na mifumo tofauti ya afya. Kujenga uwezo-kupitia programu za mafunzo, ushauri, na uhamishaji wa maarifa, kuwawezesha watoa huduma za afya wenyeji na kuboresha utoaji wa huduma za afya. Kujihusisha na mipango inayozingatia kuimarisha ujuzi na uwezo wa wafanyakazi wa huduma za afya kwenye mikoja ambayo haijahudumiwa.

Hitimisho na Ushauri: Wanadiaspora wa sekta ya afya wanaendelea kutoa mchango Chanya katika kuboresha sekta ya afya Nchini. Serikali kupitia wizara ya afya na taasisi mbali za afya zishirikiane na kuwawezesha wanadiaspora wa sekta ya afya kuleta ujuzi na Elimu yao Nchini. Diaspora wa sekta ya afya watumike kama kichochezi na Daraja kati ya taasisi za afya Tanzania bara na Visiwani na taasisi za nje afya ambapo wanadiaspora wanaishi. Ushirikiano kati ya Diaspora wa sekta ya wafya na watalaam wa afya utatoa faida kwa pande zote mbili,na juu ya yote wagonjwa watafidika zaidi.

Title: The role of Medical Diaspora communities in supporting Health Service in Tanzania

Name: Prof. Gideon Gabriel Mlawa

Position: Director of Medical Education BHRUT, RCPE Regional Advisor for Greater London and Consultant Physician in Diabetes and Endocrinology/GIM

Institution: Tanzania UK Healthcare Diaspora Association

Email: gideon.mlawa@nhs.net

Background /Introduction and rationale: Diaspora communities based in Global North and Global South have always contributed to their countries of origins in Africa including Tanzania mainland and Zanzibar through remittances as well as knowledge and skills. The Medical Diaspora communities are positively contributing to their countries of origin through social and financial remittances as well as knowledge and skills transfers.

Objective(s): To describe the contribution of medical diaspora to healthcare service in Tanzania mainland and Zanzibar.

Methodology/Approach: Online resources and getting information from medical diaspora members/healthcare professionals.

Results: The Tanzania Medical Diaspora Communities continue to be actively involved in supporting and improving healthcare in Tanzania mainland and Zanzibar in 3 main areas: 1. Medical Education 2. Clinical care and 3. Research and Development. Tanzania UK Healthcare Diaspora (TUHEDA) was formed in 2017 and is made up of healthcare professionals (Nurses, Midwives, Pharmacists and Doctors) and entrepreneurs based in UK, Tanzania and other countries. Some of the objectives of TUHEDA after its inception was to support and improve healthcare in Tanzania mainland and Zanzibar through collaboration and partnerships. The collaboration which TUHEDA has been and continues to be involved is at 3 levels namely peer to peer, institution to institution and Government to Government.

TUHEDA has collaborations with different institutions in Tanzania mainland and Zanzibar through share learning in Medical Education, Clinical care and research activities. The collaborations are bi-directional and mutually beneficial. TUHEDA healthcare professionals and members based in UK have facilitated teaching programs in collaboration with MOI, Mnazi Mmoja Hospital, JKCI, Benjamin Makapa and Tumbi Hospital both on line and face to face. One of the successful collaboration via virtual online shared learning is -Strengthenin health workforce CApacity through Global LEarning(SCALE) led by Professor Gideon Mlawa based at Queens Hospital in East London..In June 2024 a team of healthcare professionals from Queens

Hospital East London visited Tanzania and hosted ministry of Health, attended 2 days symposium in Dar and Zanzibar.

This initiative has created a community of practice and has enabled the sharing of best clinical practices, protocols and pathway. The learning has been reciprocal and mutually beneficial. These partnerships schemes and collaborations are benefiting healthcare professionals through skills and knowledge sharing but above all will improve patient care and outcome

The Medical diaspora community in America led by Professor Frank Minja are facilitating the training program in Interventional Radiology in East Africa through in-country training and program has produced qualified graduates providing Interventional Radiology service in Tanzania as well as African countries.

Conclusions & Recommendations: In summary medical diaspora professionals have and continue to contribute positively to the health sector in Tanzania. Those who returned to the country/home brought with them advanced medical skills and knowledge acquired abroad. They played a key role in establishing healthcare infrastructures, introducing new medical practices and addressing and addressing critical health challenges.

The government through ministries of health (Zanzibar and Tanzania mainland) and medical institutions should tap into diaspora skills by facilitating and supporting collaboration and partnership schemes. The collaboration between medical diaspora healthcare professionals and their counter is mutually beneficial and bi-directional, will benefit clinicians but above all improve patient care and outcome. Medical Diaspora Healthcare professionals can be used as catalyst and a bridge between medical institutions in Tanzania mainland, Zanzibar and medical institutions where the medical diaspora work or are based. Global Health collaboration and partnership schemes improve Global Diplomacy and Global Peace.

Mwongoza Majadiliano na Maswali: Dkt. Leonard Subi

Mkurugenzi Mtendaji wa Hospitali Maalum ya Taifa ya Magonjwa ya Kuambukiza - Kibong'oto (Executive Director of the National Specialized Infectious Diseases Hospital - Kibong'oto)

**PROGRAMU YA MDAHALO HURU "MASTER CLASS" KWA UMMA
TAREHE 5-7 APRILI 2025**

KWA NJIA YA MTANDAO

**MADA KUU: TULIPOTOKA, TULIPO, TUNAPOELEKEA; TUNAJENGA TAIFA LENYE
AFYA**

TAREHE 5 APRILI, 2025

Wawezeshaji: 1. Dr. Chacha Mangu – MoH
2. Dr. Pius Kagoma-PORALG

Wachukua Kumbukumbu: 1: Dr. Alex Sanga – MoH
2: Sarah Malima-PORALG

Muda	Tukio	Mhusika
10:30 - 11:00	Washiriki kujiunga katika Mtandao	Kamati ya Mdahalo/Mialiko
11:00 - 11:05	Utangulizi na utambulisho	Mwenyekiti wa Kamati ya

		Mdahalo
11:05 - 11:10	Neno la ukaribisho na ufunguzi	Mganga Mkuu wa Serikali
11:10 - 11:30	Mafanikio Miaka ya 50 ya Huduma za Chanjo Nchini	Dkt. Georgina Joachim – MoH
11:30 - 11:50	<i>Fueling Health; The Vital role of Nutrition in PHC</i>	Luitfrid Nnally – OR-TAMISEMI
11:50 - 12:10	Ubunifu katika kupambana na matatizo ya mgongo wazi na vichwa vikubwa kwa Watoto	Peter Kaja - MoH
	Maboresho ya upanuzia wa huduma za dharura ndani nan je ya Hospitali	Dkt. Erasto Sylvanus – MoH
12:10 - 12:30	Uboreshaji wa huduma za Wagonjwa Mahututi na Majeruhi nchini	Sixtus Safari – Rais wa TCCNA
12:30 - 12:50	Omnichannelling UHI for UHC in Tanzania. The Case for Telehealth Models of Care	Gwamaka Eliudi Mwasakifwa - Vortex Health Pty Ltd Tanzania
12:50 - 01:20	Maswali na Majadiliano	Wawezeshaji
01:20 – 01:30	Majumuisho na kufunga	Mkurugenzi wa Huduma za Afya Lishe na Ustawi wa Jamii – OR-TAMISEMI

TAREHE 6 APRILI, 2025

Wawezeshaji: 1. Ziada Sellah – Mkurugenzi wa Huduma za Uuguzi na Ukunga - MoH
2. Dkt. Paul Chaote – Mkurugenzi Msaidizi wa Afya – OR – TAMISEMI

Wachukua Kumbukumbu: 1: Peter Kaja – MoH
2: Louis Nicas-PORALG

Muda	Tukio	Mhusika
10:30 - 11:00	Washiriki kujiunga katika Mtandao	Kamati ya Mdahalo/Mialiko
11:00 - 11:05	Utangulizi na utambulisho	Mwenyekiti wa Kamati ya Mdahalo
11:05 - 11:10	Neno la ukaribisho na ufunguzi	Mganga Mkuu wa Serikali
11:10 - 11:30	Safari ya matumaini kutoka Udhumbi mpaka Ukomo wa UKIMWI	Dr Prosper Faustine - MoH
11:30 - 11:50	Maboresho ya utoaji wa dozi moja katika chanjo ya kuzuia Saratani ya Mlango wa kizazi	Mr Chagalucha - NIMR
11:50 - 12:10	Strengthening PHC for UHC; Addressing unfinished agenda	Dr. Paul Chaote/Dr. James Kengia - MoH
12:10 - 12:30	Maboresho ya matumizi ya sampuli za kinyesi	Dr. Bariki Mtafya - NIMR

	katika kugundua Kifua Kikuu kwa Watoto.	
12:30 – 12:50	Omnichannelling UHI for UHC in Tanzania. The Case for Telehealth Models of Care	Gwamaka Eliudi Mwasakifwa - Vortex Health Pty Ltd Tanzania
12:50 - 01:20	Maswali na Majadiliano	Wawezeshaji
01:20 – 01:30	Majumuisho na kufunga	Mkurugenzi wa Tiba - MoH

TAREHE 7 APRILI, 2025

Wawezeshaji: 1. Dkt. Golden Masika – UDOM
2. Dkt. Elizabeth Shayo – NIMR

Wachukua Kumbukumbu: 1: Ligmaz Koyo – MoH
2: Best Yoram-PORALG

Muda	Tukio	Mhusika
10:30 - 11:00	Washiriki kujiunga katika Mtandao	Kamati ya Mdahalo/Mialiko
11:00 - 11:05	Utangulizi na utambulisho	Mwenyekiti wa Kamati ya Mdahalo
11:05 - 11:10	Neno la ukaribisho na ufunguzi	Mganga Mkuu wa Serikali
11:10 - 11:30	Uendelezaji wa ubora katika utoaji wa huduma jumuishi za HIV, TB na Malaria wakati na baada ya ujauzito kwa akina mama	Dkt. Leonard Katalambula - UDOM
11:30 - 11:50	Mafanikio ya Utoaji wa Huduma za Kibingwa katika ngazi ya Wilaya kwa magonjwa ya Rheumatic Heart Disease, Sickle Cell Disease and Diabetes type 1: Uzoefu wa mkakati wa PEN PLUS	Dkt. Mary Mayige - NIMR
11:50 - 12:10	The role of social welfare services in PHC; Opportunities, challenges and wayward	Subisya Kabuje – OR-TAMISEMI
12:10 - 12:30	Utoaji wa huduma jumuishi za Afya kwa watu wenye VVU, Kisukari na Shinikizo la damu nchini.	Prof. Sayoki Mfinanga - NIMR
12:30 - 01:00	Maswali na Majadiliano	Wawezeshaji
01:00 – 01:10	Majumuisho na kufunga	Mkurugenzi wa Huduma za Kinga – MoH

BIOGRAPHIES



Balozi Dk. Mpoki Ulisubisya

Ni kiongozi mashuhuri wa huduma ya afya na uzoefu wa zaidi ya miaka 25 unaohusiana na dawa za kliniki na afya ya umma. Kama Katibu Mkuu wa zamani wa Wizara ya Afya ya Tanzania, aliongoza mageuzi ya sekta ya afya, ikiwa ni pamoja na kuanzishwa kwa vituo vya afya zaidi ya 3,800 nchini kote. Hisia zake za kidiplomasia zilionyeshwa zaidi wakati wa uongozi wake kama Balozi Mkuu wa Tanzania nchini Canada, ambapo aliendeleza ushirikiano mkubwa wa kimataifa.

Kwa sasa anahudumu kama Mkurugenzi Mtendaji wa Taasisi ya Muhimbili

Orthopaedic na Rais wa Chuo cha Wanaesthesiologists wa Mashariki, Kati, na Kusini mwa Afrika (CANECISA), Dk. Ulisubisya ametoa mchango mkubwa katika maendeleo ya huduma za afya za kikanda. Utaalamu wake katika anesthesiolojia na utunzaji muhimu, uliosaidiwa na MBA kutoka Chuo Kikuu cha Mzumbe, umemwezesha kufanikiwa kuongoza mipango mikubwa ya afya ya umma, ikiwa ni pamoja na mpango wa msingi wa mama kwa afya ya mama na mtoto mchanga.

Katika kazi yake yote, Dk Ulisubisya amekuwa muhimu katika kuimarisha usalama wa afya wa Tanzania, kuboresha viwango vya chanjo hadi zaidi ya 95%, na kupata rasilimali muhimu za Mfuko wa Global Fund kwa mipango muhimu ya afya. Mtindo wake wa uongozi unasisitiza ushirikiano jumuishi na ustahimilivu wa mfumo endelevu wa afya, na kumfanya awe mtu anayeheshimiwa katika huduma za afya za Kiafrika.

Dr. Mpoki Ulisubisya is a distinguished healthcare leader with over 25 years of experience spanning clinical medicine and public health. As the former Permanent Secretary of Tanzania's Ministry of Health, he spearheaded transformative health sector reforms, including the establishment of over 3,800 health facilities nationwide. His diplomatic acumen was further demonstrated during his tenure as Tanzania's High Commissioner to Canada, where he fostered strong international partnerships.

Currently serving as the Executive Director of Muhimbili Orthopaedic Institute and President of the College of Anaesthesiologists of East, Central, and Southern Africa (CANECISA), Dr. Ulisubisya has made significant contributions to regional healthcare development. His expertise in anesthesiology and critical care, complemented by an MBA from Mzumbe University, has enabled him to successfully lead major public health initiatives, including the groundbreaking m-mama program for maternal and newborn health.

Throughout his career, Dr. Ulisubisya has been instrumental in strengthening Tanzania's health security, improving vaccination rates to over 95%, and securing vital Global Fund resources for essential health programs. His leadership style emphasizes inclusive collaboration and sustainable health system resilience, making him a respected figure in African healthcare.



Prof. Said S. Aboud MD, MPhil, MMed, PhD

Ni Mkurugenzi Mkuu wa Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu (NIMR). Kitaaluma ana Shahada ya Udaktari wa Falsafa katika Biolojia ya Maambukizi kutoka Taasisi ya Karolinska nchini Swiden, Shahada ya Uzamili ya Tiba (MMed) kwenye Microbiology na Immunology kutoka Chuo Kikuu cha Dar-es-salaam, Shahada ya Uzamili ya Falsafa (MPhil) kwenye Sayansi ya Afya (Immunology) kutoka Chuo Kikuu cha Bergen Nchini Norway na Shahada ya Udaktari wa Tiba kutoka Chuo Kikuu Cha

cha Dar-es-salaam. Prof. Aboud ana uzoefu wa zaidi ya miaka 20 katika tafiti za VVU na UKIMWI zikiwepo za utambuzi wa VVU na ufuatiliaji wa magonjwa, upimaji wa usugu wa dawa za VVU, VVU na lishe, pathogenesis ya VVU na genotyping na chanjo ya VVU. Prof. Aboud anauzoefu mkubwa kwenye tafiti za Afya na usimamizi wake. Prof. Aboud amehusishwa katika majaribio ya kisayansi 20 yanayofadhiliwa na NIH, EDCTP and BMGF. Amewasimamia wanafunzi 31 kwenye maandiko ya vitabu vya Shahada ya Uzamili (MMed / MSc) na Udaktari wa Falsafa (PhD) pamoja na uzoefu wake mkubwa wa utafiti kwenye Malaria, Kifua Kikuu, Usugu wa vimelea vya magonjwa na uchunguzi wa kimaabara. Prof Aboud aliwahi kufanya kazi katika Chuo Kikuu cha Muhimbili cha Afya na Sayansi Shirikishi (MUHAS) akikaimu nafasi ya Naibu Makamu wa Chuo - Mipango, Fedha na Utawala, Kaimu Mkurugenzi wa Mipango na Uwekezaji, Naibu Makamu wa Chuo - Huduma za Hospitali, Mkurugenzi wa Utafiti na Machapisho na Mkuu wa Idara ya Microbiology na Immunology. Amehudumu na anaendelea kuhudumu katika nyadhifa mbalimbali za kiutawala zinazohusiana na tafiti za Tiba, Dawa na Udhubiti wa maabara katika taasisi kadhaa nchini Tanzania na nje ya nchi. Prof Aboud ana machapisho 205 kama mwandishi wa kwanza ama mshiriki kwenye majarida yenye hadhi ya juu ya kimataifa. Ana uzoefu mkubwa katika usimamizi wa maswala ya kitaifa na kimataifa katika tafiti za Tiba, dawa na maabara.

Is the Director General of the National Institute for Medical Research (NIMR). He holds a Doctor of Philosophy (PhD) degree in Infection Biology from Karolinska Institute in Sweden, a Master of Medicine degree (MMed) in Microbiology and Immunology from the University of Dar es Salaam, a Master of Philosophy degree (MPhil) in Health Sciences (Immunology) from the University of Bergen in Norway, and a Doctor of Medicine degree (MD) from the University of Dar es Salaam. Prof. Aboud has 20 years of experience in HIV research including HIV diagnosis and disease monitoring, HIV drug resistance testing, HIV and nutrition, HIV pathogenesis and genotyping and HIV vaccinology. Prof. Aboud has immense experience in clinical research and management. Prof. Aboud has been involved in 20 clinical trials funded by NIH, EDCTP and BMGF. He has mentored and supervised 31 MMed/MSc dissertations and 5 PhD theses in addition to his vast research experience in malaria, tuberculosis, antimicrobial resistance and diagnostics. He has previously worked at the Muhimbili University of Health and Allied Sciences (MUHAS) in the capacity of Acting Deputy Vice Chancellor – Planning, Finance and Administration, Acting Director of Planning and Investment, Deputy Vice Chancellor – Hospital Services, Director of Research and Publications and Head, Department of Microbiology and Immunology. He has served and continues to serve in numerous administrative positions relating to clinical research, medicines and laboratory regulation in several institutions in Tanzania and abroad. He has published 205 papers as first and co-author in peer reviewed high impact factor journals. He has a huge experience in the management of national and international issues in clinical research, medicines and laboratories.



Edwin Exaud Swai MD, MSc

Is a trained Medical Doctor and a public health practitioner with over 15 years of working experience, An alumnus of the University of Dar-es-Salaam (Muhimbili University College of Health Allied Sciences (MUCHAS), Tanzania, the University of Heidelberg, German, and the International Program for Public Health Leadership at the University of Washington, USA. In his career pathway, Dr. Swai had the opportunity to work with public institutions, International NGOs, and UN agencies. Currently, working with World Health Organization, Tanzania under the cluster of Universal Health Coverage Life Course as a Technical Officer for RMCHAH, Nutrition, and Healthy Ageing and as a Team lead for the WHO field Office in Dodoma, Tanzania. He has also interest on infectious diseases (HIV, TB), Non-Communicable Diseases (Reproductive Cancers and Perinatal Mental Health), Public Health Emergencies and Health System Strengthening.



Prof. ABEL N. MAKUBI

Prof. Abel Nkono Makubi ni Mkurugenzi Mtendaji wa sasa wa Hospitali ya Benjamin Mkapa na Katibu Mkuu wa zamani wa Wizara ya Afya (MOH) nchini Tanzania. Pia alishika nyadhifa za Mganga Mkuu wa MOH, Mkurugenzi Mkuu wa Hospitali za rufaa za Bugando na Taasisi ya Mifupa ya Muhimbili nchini Tanzania. Akiwa Chuo Kikuu cha Afya Muhimbili (MUHAS) na Chuo Kikuu cha Kikatoliki cha Afya (CUHAS), alihadhiri hadi kuwa Profesa Mshiriki wa Tiba ya Ndani (Haematology and Cardiology).

Prof. Abel Nkono Makubi anatambulika kama Daktari Bingwa, Mwanataaluma, Mtafiti, Mlezi na kiongozi Mwandamizi katika Sekta. Mafunzo yake ya Kitalaamu na uongozi yanajumuisha programu katika taasisi chuo Kikuu Cha Dare Salaaam, Harvard nchini Marekani na Taasisi ya Karolinska nchini Uswidi. Akiwa na uzoefu wa kimatibabu na kitaaluma kwa zaidi ya miaka 22, Prof. Makubi amefanya utafiti wa kina katika

Magonjwa HIV//TB, Magonjwa ya Damu, Magonjwa ya Moyo na Mifumo ya Afya. Akiwa ametumikia nchi kama Mganga Mkuu na Katibu Mkuu wa Wizara ya Afya, Prof Makubi alitimiza majukumu muhimu katika kuandaa masuala mbalimbali yanayohusiana na Sera/Miongozo ya afya, kuimarisha Uwajibikaji na Uongozi wa Matokeo, kuboresha huduma za tiba nchini, kuthibiti milipuko ya Magonjwa, kuboresha Mashirikiano ya Wadau, Kuchangia upatikanaji wa Rasilimali na kuimarisha mifumo ya afya.

Prof. Abel Makubi ni mjumbe wa Chama cha Madaktari Tanzania (MAT), Chama cha Madaktari Tanzania (APHTA), Jumuiya ya Madaktari wa Moyo wa Afrika (PASCAR) ambapo pia anahudumu kama mjumbe wa Kikosi Kazi cha Magonjwa ya Moyo. Aidha Professa Makubi ni mshirika wa kitaaluma Wa Chuo cha Madaktari Mashariki ya Kati na Kusini mwa Afrika (ECSACOP) na Jumuiya ya Ulaya ya Magonjwa ya Moyo (FESC).

Prof Makubi ni mwandishi mwenza wa KITABU cha "Utoaji wa Huduma za Afya." Huduma ya Afya ya Msingi nchini Tanzania kupitia Lenzi ya Mifumo ya Afya: Historia ya Mapambano ya Afya kwa Wote. GB: CABI, 2023. 155-17.

Prof. Abel Nkono Makubi is the current Executive Director of Benjamin Mkapa Hospital and former Permanent Secretary (PS) of the Ministry of Health (MOH) in Tanzania. He also held the positions of Chief Medical Officer-MOH, Director General of Bugando Medical Centre and Executive Director of Muhimbili Orthopaedic Institute in Tanzania. While at Muhimbili University of Health (MUHAS) and Catholic University of Health (CUHAS), he lectured and excelled to become an Associate Professor of Internal Medicine (Haematology and Cardiology).

Prof. Abel Nkono Makubi is recognized for his dedication as a clinician, academician, researcher and global public health leader. His extensive training includes programs at prestigious institutions, such as the Harvard School of Public Health in the US and Karolinska Institute in Sweden. With over 22 years of clinical and academic experience, Prof. Makubi has researched extensively in the areas of public health and clinical Medicine, Having served the Country as a Chief Medical officer and Permanent Secretary of the Ministry of Health, Prof Makubi accomplished key roles in developing various health related policy/guideline issues, advancing health quality, multisectoral collaboration, resource mobilization with stakeholder engagement, strengthening health care system and achieving sustainable health solutions for Tanzania.

Prof. Abel Makubi is a member of Medical Association of Tanzania (MAT), the Association of Physicians of Tanzania (APHTA), the Pan-African Society of Cardiology (PASCAR) where he also serves as a member of the Heart Failure Task Force. He Holds fellow status at the East Central and Southern Africa College of Physicians (ECSACOP) and the European Society of Cardiology (FESC). Prof Makubi is also a former Fogarty fellow of NIH.

Prof Makubi is a BOOK co-author of a chapter on "Health-Service Delivery." Primary Health Care in Tanzania through a Health Systems Lens: A History of the Struggle for Universal Health Coverage. GB: CABI, 2023. 155-17.



Prof. Masumbuko Yatembela Mwashambwa

Ni Professor mshiriki wa upasuaji Chuo Kikuu cha Dodoma, pia ni Mpasuaji kiongozi (Lead surgeon) wa timu ya upasuaji wa figo BMH na hufanya shughuli za upasuaji katika hospitali za Mikoa za Dodoma na Iringa.

Is an Associate professor of surgery at the University of Dodoma. He is a pioneer and lead kidney transplant surgeon at Benjamini Mkapa Hospital in Dodoma, but also serves in other University of Dodoma affiliated teaching regional referral hospitals in Dodoma and Iringa.



Dkt. Shakilu Jumanne

Ni Muhadhiri Mwandamizi na Kaimu Amidi wa Shule kuu ya Tiba na Afya ya Kinywa Chuo Kikuu cha Dodoma. Dr. Shakilu pia daktari bingwa mbobezi katika magonjwa ya Damu na Saratani kwa Watoto akihudumu kama daktari muandamizi idara ya magonjwa ya watoto, magonjwa ya damu na Saratani Hospitali ya Benjamin Mkapa - Dodoma.

Is a Senior Lecturer and the current Acting Dean of the School of Medicine & Dentistry at the University of Dodoma. He also serves as a Consultant Paediatric Haematology/Oncologist at Benjamin Mkapa Hospital



Dkt. Angela Paul Muhozya (MD, MMED, FCVA).

Ni Daktari Bingwa Mbobezi wa Usingizi wa Moyo na Mkurugenzi wa Upasuaji Wa Moyo katika Taasisi ya Moyo. Daktari Bingwa wa kwanza mbobezi wa kike wa usingizi wa moyo Tanzania na Mmoja wa Madaktari wa mwanzo wa Uanzishaji wa Taasisi ya Moyo ya Jakaya Kikwete. Vilevile ni mwanachama wa vyama mbalimbali vya kitaaluma ikiwemo MEWATA, SATA, CANECSA AND WFSA.

Is a Consultant Cardiovascular Anesthesiologist and the current Director of Cardiac Surgery at JKCI. She is the first female Cardiac Anesthesiologist, one of the founders and key team members in the establishment of the Jakaya Kikwete Cardiac Institute. She as well a membwe into different professional associations such as MEWATA, SATA, CANECSA AND WFSA



Prof. Stephen M. Kibusi

Stephen M. Kibusi ni Profesa wa Afya ya Jamii (Public Health) mwenye utaalam katika usimamizi wa mifumo ya afya (Health system management) na tafiti za utekelezaji na ubunifu katika Afya ya Jamii (implementation science). Anashikilia Shahada ya Uzamivu (PhD) kutoka Chuo Kikuu cha Tokyo Medical and Dental University (Japan) na Shahada ya Uzamili katika Usimamizi wa Mifumo ya Afya kutoka Chuo Kikuu cha Dalhousie (Canada). Amapata mafunzo ya juu katika mbinu za kitakwimu kutoka London School of Hygiene and Tropical Medicine (UK 2008); mbinu za utafiti kuhusu utamaduni na afya kutoka Chuo Kikuu cha Uppsalla (Sweden 2004), na Tathmini ya matokeo ya Sera kutoka Ohio States University (USA 2020). Kwa sasa anatumikia kama Mkuu wa Shule Kuu ya Uguuzi na Afya ya Jamii katika Chuo Kikuu cha Dodoma.

Is an Associate Professor of Public Health expert in health systems management and implementation research. He holds a PhD from the Tokyo Medical and Dental University (Japan) and Masters in Health Systems Management from the Dalhousie University (Canada). He has advanced training in quantitative methods from the London School of Hygiene and Tropical Medicine (UK) 2008; research approaches on culture and health from the Uppsalla University (Sweden 2004), and Policy Impact Evaluation from the Ohio States University (USA 2020). He currently serves as the Dean School of Nursing and Public Health at the University of Dodoma in Tanzania.



Prof. Kaushik Ramaiya

Ni Mjumbe wa Bodi ya Wakfu wa Kisukari Duniani na Katibu Mkuu wa Chama cha Kisukari Tanzania (TDA), Tanzania NCD Alliance (TANCDAA) na Kikundi cha Utafiti wa Kisukari cha Afrika Mashariki (EADSG), Rais wa Muungano wa NCD wa Afrika Mashariki (EANCDAA) na mjumbe wa Bodi ya Global NCD Alliance. Dk Kaushik Ramaiya pia aliwahi kuwa Mwenyekiti wa Kanda ya Afrika Kusini mwa Jangwa la Sahara ya Shirikisho la Kimataifa la Kisukari (IDF) kutoka Mwaka 2000 hadi 2006 na kisha kama Makamu wa Rais (Ulimwenguni) wa IDF kutoka Mwaka 2007 hadi 2012.

Dk Ramaiya ni Mkurugenzi Mtendaji na Daktari Mshauri katika Hospitali ya Shree Hindu Mandal, Dar es Salaam, Tanzania. Aliteuliwa kuwa Profesa Mheshimiwa wa Tiba na Afya ya Ulimwenguni katika Shule ya Liverpool ya Tiba ya Kitropiki (LSTM) mnamo Novemba, 2018. Mnamo Machi 2023, aliteuliwa kuwa Profesa wa Heshima wa Tiba na Afya ya Ulimwenguni katika Chuo Kikuu cha London (UCL) katika Taasisi ya Afya Ulimwenguni.

Dk Ramaiya ameshiriki kikamilifu na Wizara ya Afya (MoH) na Ofisi ya Rais Serikali za Mikoa na Mitaa (PORALG) kutekeleza mpango wa Kisukari / NCD katika Hospitali za Kanda, Mkoa, Wilaya na Vituo vya Afya kote nchini Tanzania. Amechapisha zaidi ya nakala 100 za jarida zilizopitiwa na rika.

Is a Member of the Board of World Diabetes Foundation and Hon. General Secretary of Tanzania Diabetes Association (TDA), Tanzania NCD Alliance (TANCDAA) and East African Diabetes Study Group (EADSG), President for East African NCD Alliance (EANCDAA) and member of the Board of Global NCD Alliance. Dr Kaushik Ramaiya also served as Chair of sub-Saharan Africa Region of International Diabetes Federation (IDF) from Year 2000 to 2006 and then as a Vice-President (Global) of IDF from Year 2007 to 2012.

Dr Ramaiya is the CEO & Consultant Physician at Shree Hindu Mandal Hospital, Dar es Salaam, Tanzania. He was appointed Hon Professor of Medicine & Global Health at Liverpool School of Tropical Medicine (LSTM) in November, 2018. In March 2023, he was appointed Honorary Professor of Medicine & Global Health at University College of London (UCL) in the Institute for Global Health.

Dr Ramaiya has participated actively with Ministry of Health (MoH) and President's Office Regional & Local Government (PORALG) to implement Diabetes / NCD program in Zonal, Regional, District Hospitals & Health Centers all over the country in Tanzania. He has published more than 100 peer reviewed journal articles.



Dkt. Winifrida Kidima, MSc. PhD-Tropical Medicine

Dk Kidima ni Kaimu Mkurugenzi Msaidizi, Kurugenzi ya Huduma za Tiba, Sehemu Tiba Asili na Mbadala. Kidima ni mtafiti na mwanataaluma mwenye uzoefu na historia katika utafiti na elimu ya magonjwa ya kuambukiza kwa takribani miaka 20. Amefanya utafiti katika magonjwa ya kuambukiza kwenye maeneo ya epidemiolojia, udhibiti na *pathogenesis*, afya mama na mtoto, pamoja na uchunguzi wa awali wa dawa za tiba asili.

Is an Acting Assistant Director, Directorate of Curative Services-Traditional and Alternative Medicine. She is an experienced researcher with a strong history in infectious disease research and education for about 20 years. She has conducted substantial research on infectious disease pathogenesis, epidemiology, control, and maternal-fetal health, as well as preclinical investigations using traditional medicine.



Dkt. Norman Jonas Kyala

Ni Daktari bingwa wa Magonjwa ya Ndani na Mratibu wa Huduma za Afya Ngazi ya Jamii katika Wizara ya Afya, Tanzania. Akiwa na msingi imara katika Ubobezi wa tiba. Kazi yake inahusisha utengezaji wa Sera na Mikakati, utaalamu wa mawasiliano ya Elimu ya afya, Mabadariko ya Tabia. na tafiti kuhusu mifumo ya afya, ambapo ameendelea kuwa kinara wa afua za afya zinazoongozwa na jamii na kutumia majukwaa ya kidijitali kuongeza uelewa wa umma na kubadili tabia za kiafya pamoja na kuimarisha huduma za afya ngazi ya jamii kupitia mpango wa Wahudumu wa Afya Ngazi ya Jamii (CHWs).

Is a medical specialist, public health leader, and researcher currently serving as the Head of Community-Based Health Services at the Ministry of Health, Tanzania. With a strong background in internal medicine, health promotion, and epidemic preparedness, Dr. Kyala coordinates the national efforts to integrate and strengthen

the Community Health Worker (CHW) program, playing a pivotal role in advancing primary healthcare in the country. His work spans policy development, health communication and health systems research, championing community-centered health solutions and leveraging digital platforms to promote public awareness and behavioral change across Tanzania.



Dkt. Mary Mayige

Ni Mtafiti Mkuu Mwandamizi na Mkurugenzi wa Taarifa za Utafiti na Kurekebu Tafiti katika Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu (NIMR). Akiwa na elimu ya juu, ana Shahada ya Kwanza ya Tiba na Upasuaji kutoka Chuo Kikuu cha Makerere (2003), Shahada ya Uzamili ya Afya ya Umma kutoka Chuo Kikuu cha Afya na Sayansi Shirikishi cha Muhimbili (2008), na Shahada ya Uzamivu katika Epidemiolojia ya magonjwa yasioambukiza kutoka Chuo Kikuu cha Newcastle (2014), nchini Uingereza.

Dkt. Mayige amepanua utaalumu wake kupitia mafunzo maalum katika taasisi mbalimbali ikiwa ni pamoja na Chuo Kikuu cha Dar es Salaam, Taasisi ya Taifa ya Afya ya Finland (THL), Chuo Kikuu cha Cambridge Uingereza), Chuo cha Morehouse (Marekani), na Taasisi ya Uongozi (Tanzania). Uzoefu wake wa kitaaluma unajumuisha utafiti, utendaji wa kliniki, na ushauri, akilenga magonjwa yasiyoambukiza (NCDs) na uhusiano wao na magonjwa ya kuambukiza, hasa VVU. Uongozi wake unaonekana katika kuongoza miradi muhimu ya utafiti wa kitaifa, ikiwa ni pamoja na Utafiti wa Kitaifa wa viashiria vya Magonjwa Yasiyoambukiza (STEPS 2012 na 2023), mradi wa urithi wa binadamu kwa afya barani Afrika (H3A) kuhusu kisukari, na mradi wa Tanzania NCDI na PEN PLUS. Dkt. Mayige pia amechangia pakubwa katika kuandaa nyaraka muhimu za sera za kitaifa, kama vile Mipango Mkakati ya Taifa ya Magonjwa Yasiyoambukiza (NCD SP) II na III, Mpango wa Kitaifa wa Lishe wa (NMNAP II), na Mpango Mkakati wa Tano wa Sekta ya Afya wa Taifa (HSSPV).

Dkt Mayige amehudumu kama Mwenyekiti Mwenza wa Tanzania NCDI poverty commission, na ni mwanachama wa vyama vya kitaaluma, ikiwa ni pamoja na Baraza la Taifa la Chama cha Madaktari Tanzania (2023/2024), Shirika la Jenetiki za Binadamu Tanzania (Mjumbe wa Bodi), na Chuo cha Vijana cha Sayansi Tanzania (Mwenyekiti Mwenza). Dkt. Mayige pia anachangia katika usimamizi wa uhibitaji wa kitaifa kama Katibu wa Kamati ya Taifa ya Maadili ya Utafiti wa Afya, mjumbe wa Kamati ya Taifa ya Vibali vya Utafiti, na mjumbe wa Kamati ya Kitaifa ya Vinasaba vya Binadamu. Zaidi ya hayo, yeye ni Mwenyekiti wa Kamati ya Ushauri ya Viwanda ya MUHAS na mjumbe wa Bodi ya Taasisi ya Magonjwa ya Kuambukiza ya Kibong'oto. Yeye pia ni mhadhiri mgeni katika taasisi za elimu ya juu na msimamizi wa wanafunzi

wa Shahada ya Uzamili na Uzamivu. Dkt. Mayige pia ana rekodi kubwa ya machapisho katika majarida yaliyopitiwa na wataalamu

Is a Principal Research Officer and Director of Research Information and Regulatory Affairs of the National Institute for Medical Research (NIMR). Dr Mary graduated with Bachelor's degree in Medicine and Surgery from Makerere University (2003), Kampala Uganda; Masters of Public Health, from Muhimbili University of Health and Allied sciences (2008), Dar es salaam Tanzania and Doctor of Philosophy in Clinical Epidemiology, Newcastle University (2014), Newcastle, United Kingdom. Dr Mary has also participated in various short-term trainings from University of Dar es Salaam, Finish National Institute for Health (THL) Finland, Cambridge University, MoreHouse College USA and Uongozi Institute Tanzania. Dr Mary has experience in research, clinical practice, and consultancy focusing on non-communicable diseases and the interaction between non communicable and infectious diseases particularly HIV.

Dr Mary has led various research projects including National surveys of Non-Communicable Diseases Risk Factors (STEPs Survey 2012 and 2023), Human Heredity for Health in Africa (H3A) diabetes project, Tanzania NCDI and PEN PLUS project among others. Dr Mary has also led and participated in drafting of National Policy Documents such as the National Non-Communicable Diseases Strategic Plan II and III and the National Multi Sectoral Nutrition Action Plan II and the National Health Sector Strategic Plan V. Dr Mary also served as the Co- Chair of the Tanzania NCDI Poverty Commission and also served in professional associations including being a member of the Medical Association of Tanzania National Council, board member of Tanzania Human Genetics Organization and Co- chair of the Tanzania Young Academy of Science. Dr Mary also serves as the Secretary of the National Health Research Ethics Committee, member of the National Research Clearance Committee, member of the National Human DNA Technical Committee, chair of the MUHAS Industrial Advisory Committee and Board member of the Kibong'oto Infectious Disease Institute. Mary also serves as a visiting lecturer for higher learning institutions and a supervisor for Masters and PhD students. Dr Mayige has published several peer reviewed publications



Dkt. Omary Ubuguyu

Ni Mkurugenzi Msaidizi wa Huduma za Magonjwa Yasiyoambukiza na Afya ya Akili kutoka Wizara ya Afya. Ametumikia Wizara ya Afya kwa zaidi ya miaka 7 katika nafasi mbalimbali ikiwemo Kaimu Mkurugenzi wa Huduma za Tiba (2021/22) na kabla ya hapo nafasi ya Meneja wa Programu ya Kuzuia na Kudhibiti Magonjwa Yasiyoambukiza kutoka mwaka 2019 – 2021. Katika kipindi cha takribani miaka 10 utoaji wa huduma katika Hospitali ya Taifa Muhimbili na Hospitali ya Rufaa ya Mkoa

Temeke, Dkt. Ubuguyu amefanya kazi kama Daktari Bingwa wa Afya ya Akili, Mtaalam wa Unasihi na Huduma za Uraibu wa mihadarati, chini ya International Centre for Credentialing and Education for Addiction Professionals kozi ambayo imempa nafasi ya kuhudumu kama mtaalam wa mbinu mbalimbali za matibabu ya kisaikolojia ikiwemo Motivational Interviewing techniques. Dkt. Ubuguyu pia ni mkufunzi (honorary lecturer) katika Chuo Kikuu cha Afya na Sayansi Shirikishi Muhimbili ambapo hupata fursa ya kufundisha na kushiriki kwenye shughuli mbalimbali za kitaasisi.

Dkt. Ubuguyu ameshiriki katika mageuzi katika kuzuia na kudhibiti magonjwa yasiyoambukiza, afya ya akili na ajali hapa nchini. Ameshiriki katika kuandaa mikakati, miongozo na mitaala ya mafunzo ya magonjwa yasiyoambukiza hususani kwenye ngazi ya afya ya msingi. Ni utendaji wake katika Wizara ya Afya ambao umemfanya Dkt. Ubuguyu kuwa miongoni mwa watu waliofanya mabadiliko ya kuibadili taswira ya agenda ya magonjwa yasiyoambukiza kutoka agenda ya matibabu pekee na kuwa agenda pana jumuishi na inayohitaji ubunifu ambayo inaangazia ustawi wa jamii ya watanzania. Kwa miaka 19 ya utoaji wa huduma, Dkt. Ubuguyu ameshiriki kwenye mikakati ya kuzuia na kudhibiti magonjwa yasiyoambukiza ikiwemo mingi uanzishaji wa huduma jumuishi za Magonjwa Yasiyoambukiza na huduma za VVU/UKIMWI, uanzishaji wa Kliniki za Methadone, uanzishaji wa Huduma za Afya ya Akili kwa wajawazito na utoaji wa huduma jumuishi za magonjwa yasiyoambukiza katika ngazi ya msingi (PEN_Plus).

Dkt. Ubuguyu ni Daktari Bingwa wa Afya ya Akili aliyehitimu katika Chuo Kikuu cha Afya na Sayansi Shirikishi, Muhimbili na ana astashahada ya Afya ya Jamii kutoka Chuo Kikuu cha St. Radboud cha Nijmegen, nchini Uholanzi (2007), pamoja na astashahada ya Uongozi kutoka Uongozi Institute na Chuo Kikuu cha Alalto cha Finland (2022). Dkt. Ubuguyu pia ana astashahada ya Kimataifa ya Matibabu ya Uraibu ya International Centre for Credentialing and Education for Addiction Professionals, Colombo Plan Secretariat.

Dr. Omary Ubuguyu serves as an Assistant Director of Non-Communicable Disease under the Ministry of Health in Tanzania. He has more than 7 years of work experiences at the Ministry of Health. Previously he served as a director of curative services from 2021 to 2022. Prior to that he served as a Program Manager for the National NCD Prevention and Control Program from 2019 to 2021. During his 10 years clinical experience, he was certified as the addiction counsellor through International Centre for Credentialing and Education for Addiction Professionals the course that gave him optimal experiences on behavioural change techniques including Motivational Interviewing techniques that he has been practicing for over the past 12 years including four years as an addiction expert at Muhimbili National Hospital, Temeke Regional Referral Hospital and in other addiction centres in the country. He was privileged to be honorary lecturer at Muhimbili University of Health and Allied Sciences, where he teaches, supervise students and participate in number of academic duties, journal clubs, research activities and writing manuscripts and doing consultant works.

Dr. Ubuguyu has implemented reforms on prevention and Control of NCDs, Mental Health and Injuries. He has been engaged in development of policy guidelines, strategies, Guidelines, Standard Operating Procedures and training materials including training manuals for Primary Health Care. It is at the Ministry of Health where

Dr. Ubuguyu makes a significant contribution to his nation by transforming the NCD agenda from curative perspective to a comprehensive, innovative and multisectoral agenda that will invest heavily on wellbeing of Tanzanians. For 19 years of service, Dr. Ubuguyu has been supporting number of initiatives on NCD prevention and Control including integration of NCDs and HIV care, establishment of perinatal mental health services and PEN-Plus initiatives.

Dr. Ubuguyu is a psychiatrist graduated at Muhimbili University of Health and Allied sciences and He has certificate of Public Health in an International Perspective course of the St. Radboud at University Medical Centre Nijmegen, in the Netherland (2007) and Certificate of Leadership under Uongozi Institute in collaboration with Aalto University of Finland (2021). He is a Certified Level II global trainer under International Centre for Credentialing and Education for Addiction Professionals, Colombo Plan Secretariat.



Dkt. Paul Kazyoba

Ni Afisa Mkuu wa Utafiti katika Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu. Ana PhD (Phytomedicine) kutoka Chuo Kikuu cha Fort Hare na alipata mafunzo zaidi ya Postdoctoral (Pharmacology) kutoka Chuo Kikuu cha Sayansi na Teknolojia cha Tshwane, Afrika Kusini. Ana uzoefu wa zaidi ya miaka 20 katika tafiti za magonjwa na utekelezaji zinazolenga magonjwa ya kuambukiza ikiwa ni Malaria, Magonjwa ya Kitropiki yaliyokuwahayapewi kipaumbele (NTD) na maambukizo ya vimelea vya magonjwa kwa ujumla. Yeye ni mmoja wa watalaamu katika shirika za kitafiti za TIBA, GREAT-LIFE, leDEA na ADP ambayo ndani yake anaongoza miradi kadhaa. Dk Kazyoba amehudumu katika ngazi tofauti za uongozi na wa hivi karibuni (2018-2023) ikiwa ni Mkurugenzi wa Kuratibu na Kukuza Utafiti NIMR, na Mjumbe wa Bodi ya Taasisi ya Afya ya Ifakara (IHI) na Kituo cha Majaribio ya Afua cha Mwanza (MITU). Pia amekua akihudumu kama mshauri wa kitalaamu kwa Makampuni ya Kibayoteki ikiwa ni pamoja na Abbott, SD Bioline/Alere, SD Biosensor, Wondfor Biotech na Bioneers.

Is a Chief Research Officer at the National Institute for Medical Research. He holds a PhD (Phytomedicine) from the University of Fort Hare and undertook a Postdoctoral fellowship (Pharmacology) from the Tshwane University of Science and Technology, South Africa. He has over 20 years of experience in biomedical and implementation research focusing on infectious diseases including Malaria, Neglected Tropical Diseases (NTD) and microbial infections in general. He is a member of research consortia namely, TIBA, GREAT-LIFE, leDEA and ADP within which he leads several projects. Dr Kazyoba has served at different levels of leadership with the latest (2018-

2023) being the Director of Research Coordination and Promotion at NIMR, and Board Member for Ifakara Health Institute (IHI) and Mwanza Interventions Trials Unit (MITU). He also serves as a consultant for Biotech Companies including Abbott, SD Bioline/Alere, SD Biosensor, Wondfor Biotech and Bioneers.



Dkt. Basiliana Emidi, Ph.D.

Ni Afisa Mkuu wa Utafiti katika Taasisi ya Taifa ya Utafiti wa Magonjwa ya Binadamu (NIMR) nchini Tanzania na Meneja wa Kituo cha NIMR Dodoma. Ana Ph.D. katika Medical Entomology, MSc katika Medical Entomology, na BSc (Hons) katika Zoolojia, Sayansi ya Wanyamapori, na Uhifadhi. Ana zaidi ya miaka 20 ya uzoefu wa utafiti na mtaalamu wa tabia za mbu na upinzani wa viua wadudu. Dkt. Basiliana amewahi kushika nyadhifa nyingine za uongozi kama vile Mkuu wa idara ya Utafiti wa Magonjwa ya Vimelea katika Kituo cha NIMR Mwanza na Mkuu wa Idara ya Ubunifu Biashara na Uhawilishaji Teknolojia Makao Makuu ya NIMR jijini Dar es Salaam. Yeye ni mjumbe wa Jopo la Ushauri la Wataalam wa Usimamizi wa afua mtambuka wa Afrika (IVM) wa Shirika la Maendeleo la Umoja wa Afrika (AUDA-NEPAD), linalozingatia teknolojia inayoibuka katika kudhibiti na kutokomeza mbu anayesambaza ugonjwa wa malaria.

Dkt. Basiliana amekuwa Mtaalamu wa Udhhibiti wa Vector kupitia Mfuko wa Kimataifa, kwa kutoa msaada wa kiufundi kwa Mpango wa Kitaifa wa Kudhibiti Malaria Tanzania chini ya Wizara ya Afya na Taasisi za Utafiti juu ya Ufuatiliaji wa mienendo ya tabia za mbu waenezao Malaria. Alishiriki katika kudhibiti mlipuko wa ugonjwa dengue na kuandaa Mkakati wa Kitaifa wa Kudhibiti wadudu dhurifu Tanzania (2019-2024). Yeye ni mkaguzi wa majarida kadhaa ya ndani na kimataifa na Kamati ya Kitaifa ya Maadili ya Utafiti wa Afya (NathREC). Amekuwa mwanachama wa sekretarieti ya NaTHREC ambapo alitengeneza Mkataba wa Huduma kwa Wateja wa NaTHREC.

Dkt. Basiliana ni miongoni mwa kundi la kwanza la wanawake 10 barani Afrika la Mpango wa Shirika la Afya Duniani (WHO) Mwele Malecela Mentorship (MMM) wanaolenga kututokomeza Magonjwa ya Kitropiki yasiyopewa kipaumbele (NTDs). Dkt. Basiliana pia ni Mhitimu wa kundi la "WomenLift Health 2023 East Africa Leadership Journey", programu iliyoundwa ili kuwawezesha viongozi wanawake katika afya ya kimataifa. Dkt. Basiliana ni Mratibu wa wanawake katika udhibiti wa vijidudu katika Jumuiya ya Kudhibiti Mosquito Pan-African (PAMCA) Tanzania. Dkt. Basiliana ni mshauri chini ya mpango wa ushauri wa PAMCA Lifther2, akisaidia wataalamu katika fani hiyo.

Dkt. Basiliana amekuwa Mtahini Mkuu wa Nje wa watahiniwa kadhaa wa PhD na kusimamia wanafunzi kadhaa katika vyuo vikuu mbalimbali nchini Tanzania. Matokeo

ya tafiti alizofanya yamechapishwa katika machapisho ya kisayansi zaidi ya 22. Dk. Basiliana amepokea sifa nyingi, ikiwa ni pamoja na "Tuzo ya Ubora wa Wanawake katika Kazi ya Udhhibiti wa mbu waenezo magonjwa" kwa mchango wake bora katika mapambano dhidi ya magonjwa yanayoenezwa na wadudu katika Afrika Kusini mwa Jangwa la Sahara, "Tuzo ya Mwanasayansi wa bora wa Kike" na "Tuzo ya Kisayansi ya Mlima Kilimanjaro" na "Tuzo ya Uhifadhi wa Ngorongoro". Pia kujishughulisha kikamilifu na vyama vya kitaaluma vya kitaifa na kikanda, akisukumwa na kujitolea kwake kudhibiti mbu na kutokomezwa Magonjwa ya Kitropiki yasiyopewa kipaumbele (NTDs).

Is a Principal Research Officer at the National Institute for Medical Research (NIMR) in Tanzania and a Centre Manager of NIMR Dodoma. She holds a Ph.D. in Medical Entomology, an MSc in Medical Entomology, and a BSc (Hons) in Zoology, Wildlife Science, and Conservation. She has over 20 years of research experience and specializes in mosquito vector behaviours and insecticides resistance. Her Post-doctoral research program also focused on Medical Entomology. Dr. Basiliana has previously holds other leadership positions such as Head of the Parasitic Diseases Research Program at NIMR Mwanza Centre and Head of the Department of Innovation Commercialization and Technology Transfer at NIMR Headquarters in Dar es Salaam. She is a member of the Africa Integrated Vector Management (IVM) Advisory Panel of Experts of the African Union Development Agency (AUDA-NEPAD), focusing on emerging technology in malaria vector control and elimination.

Dr. Basiliana has been a Vector Control Specialist through the Global Fund, by providing technical support to Tanzania's National Malaria Control Program under the Ministry of Health and Research institutions on the National Malaria Vector Entomological Surveillance. She had participated in dengue outbreak control and development of the Tanzania National Vector Control Strategy (2019-2024). She is a reviewer of several local and international journals and the National Health Research Ethics Committee (NathREC). She has been a member of the NaTHREC secretariat where she developed the NaTHREC Client Service Charter.

Dr. Basiliana is among first inaugural cohort of 10 women in Africa of the World Health Organization (WHO) Mwele Malecela Mentorship (MMM) Programme for Women in Neglected Tropical Diseases (NTDs), aimed at grooming African women as leaders in NTDs elimination. She is also a WomenLift Global Fellow of the "WomenLift Health 2023 East Africa Leadership Journey" cohort, designed to empower women leaders in global health. She is the Country Coordinator for women in vector control in the Pan-African Mosquito Control Association (PAMCA) Tanzania, where she champions women's involvement in the field. Dr. Basiliana is a mentor under the PAMCA Lifther2 mentorship program, supporting aspiring professionals in the field.

Dr. Basiliana has been a Chief External Examiner for several PhD candidates' defences and supervised several students at various universities in Tanzania. Her research have resulted in over 22 scientific publications. Dr. Basiliana has received numerous accolades, including the "Mid-career Women in Vector Control Excellence Award" for outstanding contributions in the fight against vector-borne diseases in Sub-Saharan Africa, the "First Young Women Scientist Award" and the "Mount Kilimanjaro Scientific Award" and the "Ngorongoro Conservation Prize". She remains actively

engaged in national and regional professional associations, driven by her dedication to mosquito vector control and Neglected Tropical Diseases (NTDs) elimination.



Dr Chacha Mangu (MD)

Ni mwana-epidemiolojia mwandamizi, anayefanya kazi kama afisa mfuatiliaji magonjwa na mratibu wa tafiti Wizara ya Afya. Ana uzoefu wa zaidi ya miaka 15 na miaka 10 ya uongozi katika tafiti za kiepidemiolojia, kiutendaji na tafiti za kitiba katika mgonjwa ya kuambukiza hasa Kifua Kikuu, VVU, na magonjwa yanayoibukia. Dkt. Chacha ni mwana kamati wa timu ya wataalamu wa Africa CDC katika kukuza tafiti za afya na ubunifu barani Afrika, kamati ya kitaalamu ya Tiba Kinga ya Kifua Kikuu nchini na kamati za ufundi za Afya Moja. Dkt. Chacha anashiriki kikamilifu katika kubadilisha matokea ya tafiti za Afya kuleta tija katika kufanya maamuzi, kutengeneza mipango ya utoaji huduma, na kubalisha sera za Afya nchini. Maeneo anayopendelea zaidi kufanyia kazi ni uundaji mifano ya mwenendo wa magojwa ya kuambukiza (infectious disease modelling), ufuatiliaji magojwa, matumizi ya vifaa vya kidigitali katika utoaji huduma na magonjwa yanayoibukia kwa mbinu za Afya moja.

Is a senior epidemiologist, working as a surveillance officer and research coordinator at the Ministry of Health. He has over 15 years of research experience with over 10 years of research leadership in epidemiological, operational and clinical research in infectious diseases in particular TB, HIV, and emerging viral diseases. He is member of the Africa CDC technical team for advancing Research and Development in Africa, the national TB technical expert committee and technical working groups for OH. Dr. Chacha is actively engaged in translating and communicating research findings into policy for decision making, and healthcare planning in the country. His interest is in infectious diseases modelling, surveillance, digital tools for healthcare and emerging diseases in One Health perspective.



Profesa Gideon Mlawa

ni Daktari bingwa aliyefunzwa nchini Uingereza katika masuala ya Kisukari na Endocrinology/General Internal Medicine. Anafanya kazi Queens Hospital London UK. Alipata digrii yake ya matibabu kutoka Chuo Kikuu cha Trakia huko Bulgaria na akaendeleza mafunzo yake na Wessex na London Deaneries, aliyebobea katika Kisukari na Endocrinology/Udaktari wa magonjwa ya Ndani.

Vipengele muhimu vya taaluma yake ni pamoja na:

- Kutumikia kama Mkurugenzi wa Elimu ya Matibabu katika Hospitali ya Queen's na Hospitali ya King George.
- Profesa Mlawa ni mwanachama mwanzilishi na mweka hazina wa Tanzania UK Healthcare Diaspora Association (TUHEDA).
- Ameshiriki kikamilifu katika mipango ya Global Health Partnership na Afrika Mashariki na alichukua jukumu muhimu katika kuunda Umoja wa Ushirikiano wa Afya kati ya Tanzania na Uingereza (TUKHA).
- Pamoja na wafanyakazi wenzake kutoka Hospitali za Queens na King George, alihusika katika shughuli za Global Health ikiwa ni pamoja na kuandaa tukio la kwanza kabisa la Diaspora huko BHRUT mnamo Desemba 2024, kutambua mchango wa wataalamu wa afya wa kimataifa katika NHS.
- Alikuwa sehemu ya ujumbe wa Hospitali ya Queens na King George nchini Tanzania na alishiriki katika kongamano 2 na taasisi za Dar na Zanzibar mwezi Juni 2024
- Anaamini kabisa kuwa “elimu ya matibabu ni safari endelevu na haina mwisho.

Professor Gideon Mlawa is a UK- trained Consultant Physician in Diabetes and Endocrinology/General Internal Medicine. He works at Queens Hospital London UK. He obtained his medical degree from Trakia University in Bulgaria and furthered his training with both the Wessex and London Deaneries, specializing in Diabetes and Endocrinology/General Internal Medicine. Key aspects of his career include:

- *Serving as Director of Medical Education at both Queen’s Hospital and King George Hospital*
- *Acting as the Royal College of Physicians Edinburgh Regional Advisor for Greater London*
- *Previously served as the Training Programme Director for Internal Medicine Trainees and as a Royal College of Physicians Tutor.*

In addition to his clinical and educational roles, Professor Mlawa is a founding member and treasurer of the Tanzania UK Healthcare Diaspora Association (TUHEDA). He has been actively involved in Global Health Partnership initiatives with East Africa and played a key role in forming the Tanzania UK Health Alliance (TUKHA).

Alongside other colleagues from Queens and King George Hospitals, he was involved in Global Health activities including organizing the first-ever Diaspora event at BHRUT in December 2024, recognizing the contribution of international healthcare professionals in the NHS. He was part of the Queens and King George Hospitals

delegation to Tanzania and took part in 2 symposia with institutions in Dar and Zanzibar in June 2024. He firmly believes that “medical education is an ongoing journey and not a destination”.



Dkt. Ntuli Angyelile Kapologwe

Is a highly accomplished and distinguished professional whose career has been marked by exceptional achievements and contributions to the fields of health systems management, reproductive health, health financing, and public and international health. With over 20 years of experience in healthcare leadership, policy development, and management, he has become a recognized expert and a transformative figure in shaping health systems across Tanzania and beyond.

Dr. Kapologwe’s academic journey began with the pursuit of a Medical Doctor (MD) degree at the University of Dar es Salaam, where he honed the foundational medical knowledge that would later inform his broader work in public health. His commitment to improving health outcomes led him to continue his education with a Master’s degree in Public Health (MPH) from Tumaini University in Tanzania. In an effort to further deepen his expertise, Dr. Kapologwe pursued additional executive training at the Swiss Tropical and Public Health Institute (Swiss TPH), where he earned an MBA in International Health Management (MBA-IHM). These qualifications positioned him to effectively address the growing complexities of global health challenges and manage health systems at a high level.

Dr. Kapologwe’s quest for knowledge did not stop there. He also obtained a Postgraduate Diploma in Strategic Leadership from Aalto University in Finland and the Uongozi Institute in Tanzania, further enhancing his leadership and management capabilities. His academic and professional aspirations culminated in a Doctor of Philosophy (PhD) in Health System Performance Implementation Research from the University of Dodoma (UDOM) in 2020, where he focused on improving the performance of health systems in Tanzania and the broader African context. In 2023, Dr. Kapologwe continued to expand his leadership expertise by completing the International Program for Public Health Leadership Certificate at the University of Washington in the United States.

Dr. Kapologwe’s career spans more than 20 years, with over 14 years in leadership roles across various sectors of healthcare. His career began with six years of service as a District and Regional Medical Officer in Tanzania. In these roles, he gained practical experience in the day-to-day operations of the country’s health system, managing the delivery of health services to local populations and addressing pressing healthcare needs at the grassroots level.

His leadership experience expanded when he was appointed as a director in two major Tanzanian government ministries: the Ministry of Health (MoH) and the President's Office - Regional Administration and Local Government (PO-RALG). These roles allowed him to shape policy, influence strategic decision-making, and improve the coordination and implementation of public health programs across the nation. As Director of Preventive Health at the Ministry of Health and Director of Health, Social Welfare, and Nutrition Services at PO-RALG, Dr. Kapologwe played a central role in the formulation and implementation of national health policies that have had lasting impacts on Tanzania's public health landscape.

In 2025, Dr. Kapologwe was appointed as the Director General of the East, Central, and Southern Africa Health Community (ECSA-HC), an intergovernmental organization consisting of nine member countries: Tanzania, Malawi, Lesotho, Eswatini, Zimbabwe, Zambia, Mauritius, Kenya, and Uganda. The organization operates across 26 African countries, both member and non-member states, and works to improve health systems and promote collaboration in tackling regional health challenges. Dr. Kapologwe's appointment to this influential position further highlights his stature as a leader in the global health community.

Throughout his career, Dr. Kapologwe has been instrumental in implementing a wide range of public health initiatives that have had a profound impact on Tanzania's healthcare system. One of his most significant contributions was his leadership in overseeing the construction of over 3,800 primary health facilities across Tanzania, with funding from both domestic and international sources. This initiative has significantly improved access to healthcare services, raising the percentage of the population living within 5 kilometers of a health facility from 50% in 2015/2016 to 85% in 2023/2024. These efforts have directly contributed to reducing health disparities and improving health outcomes in underserved communities.

In 2013, Dr. Kapologwe was a pioneer in the creation of the m-mama initiative, a digital transportation referral system aimed at improving access to emergency healthcare services in rural areas. Through public-private partnerships and blended financing, the initiative was scaled nationally and later expanded to other countries, including Lesotho, Kenya, and soon Malawi. The m-mama system has facilitated over 122,000 emergency interventions, saving more than 5,100 lives in the process. This program is a testament to Dr. Kapologwe's ability to innovate and leverage technology to address critical healthcare challenges.

Dr. Kapologwe has also been a key figure in the development of coordinated Community Health Worker programs in Tanzania, with the aim of employing 137,294 healthcare workers over a three-year period. These programs have been instrumental in improving healthcare delivery at the community level, particularly in remote and underserved areas.

In response to the global COVID-19 pandemic, Dr. Kapologwe demonstrated exemplary leadership in Tanzania's vaccination campaign, which achieved a remarkable vaccination rate exceeding 95%. His strategic planning, coordination, and leadership ensured that vaccines were delivered effectively to high-priority populations, saving countless lives and mitigating the spread of the virus. Dr. Kapologwe also played a crucial role in the response to the Marburg Virus Disease

outbreaks in 2023 and 2025 in the Bukoba and Biharamulo districts of Kagera. As Chief of Operations during these outbreaks, he successfully managed the response and contained the spread of the disease, demonstrating his capacity to handle public health emergencies with skill and efficiency.

In addition to his work in Tanzania, Dr. Kapologwe has made significant contributions to global health through his involvement in various international health initiatives. His expertise in health diplomacy has positioned him as a key figure in shaping international health policies and fostering collaboration across borders. Dr. Kapologwe has actively participated in drafting the review of the International Health Regulations (IHR 2005) and the Pandemic Treaty, working through the Intergovernmental Negotiation Body (INB) to address emerging global health threats.

He has also served as a coordinator and focal point for a range of regional and international health meetings, including the World Health Assembly (WHA), the East African Community (EAC), the Southern African Development Community (SADC), the World Health Organization - Africa Region (WHO-Afro), and the United Nations General Assembly (UNGA). Dr. Kapologwe's expertise in health diplomacy has been crucial in establishing partnerships and securing funding for health programs in Tanzania and across the African continent.

Through his leadership in the Country Coordinating Mechanism (CCM), Dr. Kapologwe has been instrumental in securing funding for the Global Fund-supported programs in HIV, tuberculosis, and malaria. He has played a key role in securing financing from the Global Fund's Cycle 7 and has contributed to large-scale programs aimed at improving public health infrastructure and access to care in Tanzania and other countries in sub-Saharan Africa.

Dr. Kapologwe's contributions to health security are also noteworthy. As a key member of the Core Technical Team for Tanzania's Development Vision 2050 (TDV-2050), he has played a crucial role in shaping the country's long-term development plan, which includes strategies for improving the resilience of the health system to global health threats. Dr. Kapologwe's involvement in drafting the Long-Term Perspective Plan (LTTP) for Tanzania ensures that the country is well-prepared for the health challenges of the next 15 years, positioning Tanzania to respond effectively to emerging diseases and health emergencies.

His leadership in public health emergency preparedness extends to his work in drafting the National Action Plan for Health Security (NAPHS), a key document that outlines Tanzania's capacity to prevent, prepare for, respond to, and recover from health emergencies. The NAPHS is crucial for ensuring that Tanzania is ready to tackle future health crises, from pandemics to natural disasters.

Beyond his work in health systems management and policy development, Dr. Kapologwe is also committed to education and mentorship. Since 2021, he has served as a part-time senior lecturer at the University of Dodoma, teaching courses on Health Financing, Leadership, and Healthcare Management for the Master of Public Health program. His dedication to fostering the next generation of public health leaders is evident in his role as a supervisor for both Master's and PhD students. Dr. Kapologwe's academic contributions help to shape the future of public health in

Tanzania and beyond, providing students with the skills and knowledge they need to tackle the pressing health challenges of the 21st century.

Dr. Kapologwe is also a founding member of the College of Public Health Physicians (CoPHP), an organization under the East, Central, and Southern Africa Health Community (ECSA-HC), which serves 13 countries across the region.

*Dr. Kapologwe has authored over 140 articles published in prestigious international peer-reviewed journals, contributing significantly to the body of knowledge on health systems management, public health policy, and global health. He has also co-edited two influential books on Primary Health Care: *Primary Health Care in Tanzania through a Health Systems Lens: A History of the Struggle for Universal Health Coverage and Leadership* and *Governance in Primary Health Care: An Exemplar for Practice in Resource-Limited Settings*. These books, available on Amazon, are widely regarded as essential resources for anyone working in the field of public health.*

In recognition of his contributions to the development of Primary Health Care in Tanzania, the Tanzania Health Summit established the Ntuli A. Kapologwe Primary Health Care Award. This prestigious award honors individuals and institutions that have made significant contributions to the advancement of Primary Health Care in Tanzania and beyond. Dr. Kapologwe's impact on the healthcare sector has also been acknowledged by Serengeti Bytes Magazine, which named him one of the 100 Tanzanian Change Makers of 2023 and 2024.



Dkt. Leonard Subi

Ni daktari na mwanasayansi Mkuu wa afya ya Jamii aliye na uzoefu wa zaidi ya miaka 22, Amehudumu katika nafasi ya Mkurugenzi katika Wizara ya Afya kwa zaidi ya miaka saba sasa, ambapo takribani miaka minne kama Mkurugenzi wa Huduma za Kinga anayesimamia Programu tano za Kitaifa za Kudhibiti Kifua Kikuu, VVU, Malaria, NTD na IVD na pia vitengo vitano vya Epidemiolojia na udhibiti wa magonjwa, Afya ya Mazingira, Elimu ya Afya kwa Umma, Afya ya Uzazi, Mama na Mtoto na Lishe. Dr Subi aliteuliwa kuwa Mkurugenzi Mtendaji wa Hospitali Maalum ya Taifa ya Magonjwa ya Kuambukiza (Kibong'oto) sehemu anayohudumu hadi sasa, ambapo amekuwa mstari wa mbele katika kuibadilisha Hospitali hiyo kongwe kuwa taasisi ya taifa ya magonjwa ambukizi inayojitegemea pia ameongoza kuhakikisha maabara ya afya ya Jamii ya usalama wa kibaiolojia daraja la tatu inakamlishwa na tayari imeanza kufanya kazi.

Dr. Subi ameshiriki katika tafiti nyingi na pia aliwahi kuhudumu kama mjumbe katika bodi mbalimbali ikiwemo NIMR, TACAIDS, TFNC, NDC Kiwanda cha Viuadudu n.k.

Aidha Dr. Subi akiwa Mkurugenzi wa Kinga ameongoza uratibu wa Tanzania katika vikao mbalimbali vya kikanda na kimataifa vya Shirika la Afya Duniani (WHO), SADC na EAC katika maamuzi ya kisera ya afya n.k

Kabla ya kujiunga na Wizara ya Afya, alifanya kazi na TAMISEMI kwa takriban miaka 15. Dk. Subi pia aliwahi kuwa kiongozi mashuhuri katika mageuzi ya huduma ya afya ya msingi tunayoyaona sasa alipokuwa DMO, RMO na Mwenyekiti wa RMOs Tanzania bara. Michango yake ya uongozi ina mafanikio makubwa katika kuifanya Tanzania ing'ae kuelekea na kufikia malengo ya UHC na SDG

Dr. Leonard Subi is a physician and senior public health scientist with over 22 years of experience, including seven years as a director in the Ministry of Health. He served nearly four years as the Director of Preventive Services overseeing the five National Control Programs for TB, HIV, Malaria, NTD and IVD and 5 Sections of Epidemiology, Environmental Health, HPS, RCH and Nutrition. He was later on also assigned to be the Executive Director of the National Specialized Infectious Diseases Hospital (Kibong'oto), where he is transforming the facility into a leading institution with a BSL3 laboratory and plans for it to become an independent National Infectious Diseases Institute of Tanzania.

Before joining the Ministry of Health, he worked with TAMISEMI for almost 15 years. Dr. Subi also served as a prominent leader in primary health care transformation we see it now while serving as a DMO, RMO and Chairperson of RMOs in Tanzania mainland. His leadership contributions have a remarkable success in making Tanzania shine towards achieving the UHC and SDG.

TULIPOTOKA, TULIPO, TUNAPOELEKEA: TUNAJENGA TAIFA LENYE AFYA



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