

# Plant a Tree

## Fundraising Proposal

An Initiative To Pay Health Insurance for Infants with Spina Bifida



[www.ch-tanzania.org](http://www.ch-tanzania.org)

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## 1.0 ORGANIZATION PROFILE

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Founded in 2018, Child-Help Tanzania was appointed to represent Child-Help International activities in Tanzania, such as medical and surgical materials distribution to health care centers, training and coaching of service and health providers, awareness and advocacy, and provision of transit homes for parents and children with Spina Bifida and Hydrocephalus. Child-Help Tanzania was then registered in 2019 and became one of the five divisions of Child-Help International, other divisions being Child-Help Belgium, Child-Help France, Child-Help Germany and Child-Help Netherlands.

The organization was registered under the Non-Governmental Organization Act, No. 24 of 2002. by number 00NGO/R/0855 on December 2019.

### 1.1 Mission

To enable a generation where children with spina bifida and hydrocephalus become thriving adults in an inclusive society by working with parties worldwide.

### 1.2 Vision

By 2050 all children with spina bifida and hydrocephalus should have a fair start in the world.

### 1.3 Focus Areas

- Life-long care
- Medical and surgical materials supply and distribution
- Policy advocacy and Capacity Building
- Economic empowerment

### 1.4 Child-Help Tanzania's Credibility

Child Help Tanzania has experienced, committed, dedicated and qualified staff in Health Issues, Disability, Human Rights, Gender and Equality, Good Governance and Social Accountability. It has also clear policies, systems and procedures to facilitate and support smooth implementation of the project.

The organization has worked, and still works with different partners including to improve the lives of children with spina bifida and hydrocephalus. The partners are KCMC Hospital, MOI, Bugando Referral Hospital, Haydom Hospital, Zanzibar Parents Association, ASBAHT, NED etc.

Overall responsibility for this project will be vested on the Executive Director who will act as the Project Manager with the assistance of Program Officer who will act as the Project Coordinator in the implementation of the campaign.

## 2.0 PROJECT BACKGROUND

### 2.1 Hydrocephalus And Spina Bifida

Hydrocephalus and spina bifida is one of the most common and disabling congenital defects, affecting approximately one in 1,000 children born in Tanzania. Due to advancements in medicine and technology over the past 40 years, the predicted lifespan of a child born with this disability has improved considerably. The focus of treatment now lies in the ongoing medical and rehabilitative management of the disability, including multiple and complex neurological, surgical, orthopedic, gastrointestinal, and urological surgical procedures, as well as long-term use of orthotic aids and mobility devices and ongoing physiotherapy regimens.

### 2.2 Health Insurance Access to PWDs in Tanzania

Tanzania has the mandate to achieve Sustainable Development Goals (SDG) toward Universal Health Coverage (UHC), leaving no one behind. To attain this goal, the government signed and rectified the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) and the elective procedure (2006) and adopted the East African Policy on PWPDs (2012). And established the Disability Policy in 2004 and formulated the Tanzania National Health Policy 2017 to ensure access to healthcare services available for all people with and without physical disability (SIDA, 2014).

Healthcare access is the core challenge for PWPDs, which needs attention. People with Physical Disability (PWPDs) have their own health needs related to their impairments, such as physical medicine and rehabilitation. The global report shows that in 2013, among the 43 nations, 42% of people with disabilities against 6% of people without disabilities recognized their health as deprived, and 64% of PWPDs who need rehabilitation services could not access them (UN, 2018). In addition, 29% of the birth of PWPDs not attended by qualified healthcare workers, whereby around 22% of married women with disabilities had unfulfilled family planning (UN, 2018). Over 70% of PWPDs have poor health (UN, 2018).

Although healthcare access is a fundamental human right, many barriers to accessing healthcare services among PWPDs have been reported. Cost is often one of the critical barriers. There is evidence that half of PWPDs (51-53%) cannot afford healthcare costs, while for people without disability, the proportion is only one third (32-33%). Equally, the report shows that most PWPDs live in extreme poverty in Tanzania.

Regardless of the efforts made by the government of Tanzania and various stakeholders to improve access to healthcare services for PWPDs (IDS, 2020), it is still inaccessible to children with Hydrocephalus and spina bifida and other disabilities.





## 2.0 PROJECT BACKGROUND

### 2.3 A Sad Story of Abel Enock Clement

I was 28. Abel was my first child. And I didn't know what to expect during delivery. But something didn't feel right in the room after the nurse took him away. A baby had just been born, but no one was smiling. After my incision had been closed, I was wheeled into a recovery room. My husband Enock Clement was there waiting, standing silently by the window.

"Enock" I said, and he turned around, his eyes red, his cheeks wet with tears.

For a few agonizing moments, I was by myself, left to my thoughts, a panic rising in my chest. When my husband reappeared at the doorway, he was accompanied by a different doctor, someone from the neonatal intensive care unit (NICU) who cradled Abel in his arms. With sad eyes, the man told me what my husband already knew "Mrs Enock". he said "Your son has spina bifida"

Almost immediately, the phone calls from friends and relatives began. Everyone had questions. How had this happened? What was spina bifida? Why hadn't I known about it before Abel was born? No one wanted to know how much he weighed or whom he looked like. No one ever asked if he had my eyes.

At one week old the baby started getting convulsions. The mother noticed Abel's enlarged head when he turned two weeks old. They moved from one health center to another but the seizures didn't stop. They also went to traditional healers but the boy's head kept increasing. Rahel's relatives and neighbors told her children with Hydrocephalus don't survive so she should stop wasting money on finding treatment. But Enock advised his wife to go to the district hospital, they got a referral to Amana Referral Hospital.

**Abel hasn't stabilized yet, he still gets convulsions.**



"Abel Enock with his mother who have visited Child-Help Tanzania for health support"

## 3.0 PLANT A TREE FUNDRAISER CAMPAIGN

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To address the problem, Child- Help Tanzania proposes to implement a Tree Planting Fundraiser Campaign that aims to raise TZS 58,000,000 which is equivalent to US\$ 20,016 through planting 1,220 trees in public/open spaces, public primary and secondary schools as well as in public health centers' compounds. The project will be implemented in Dar es Salaam Region.

Child-Help Tanzania will establish fourteen (14) Tree Gardens for Corporate Clients; each garden will contain 30 trees whereby each tree will be sold to corporates for TZS 100,000 which is equivalent to US\$ 40. Tree Gardens for individuals will also be established whereby 800 trees will be planted and each tree will be sold to individuals for TZS 20,000 which is equivalent to US\$ 4.

### 3.1 Campaign Objectives

Plant a Tree fundraiser campaign strives to achieve the following objectives:

- To identify 100 infants with Hydrocephalus and Spina Bifida from poor families with a need for health insurance.
- To pay health insurance for the identified 100 infants.

*Images: Tree Planting Fundraiser Campaign that took place between January 2023 and October 2023*



*Official Initiation of the Tree Planting Campaign Held at the Institute of Social Work, Dar es Salaam (January 2023-October 2023)*



*Tree Planting Campaign at Kitongo House of Hope, Mwanza (January 2023-October 2023)*



*Tree Planting Campaign at Victoria Secondary School, Vikindu-Dar es Salaam (January 2023-October 2023)*

## 3.0 PLANT A TREE FUNDRAISER CAMPAIGN

### 3.2 Expected Results

We expect that at the end of the campaign, 1,220 trees will have been planted in public spaces, public schools as well as in public health centers whereby TZS 58,000,000 will have been raised to finance health insurance to 100 infants from Dr es Salaam region for the duration of 12 months.

Environmentally, planting trees holds a significant place in creating a sustainable and thriving environment. By planting and emphasizing planting trees in schools, public spaces and health centers, we nurture a sense of environmental responsibility in students and community members, fostering their understanding and appreciation for nature's importance.

Trees in schools and health centers will not only beautify the environment, but will also provide a conducive environment for learning and working respectively. The presence of trees promotes fresh air circulation and helps combat air pollution, ultimately leading to improved concentration in performance.

### 3.3 Cost Estimation

Item	Cost	Total (TZS)
Identify target group	1,000,000	1,000,000
Health insurance	360,000 x 100 infants	36,000,000
Site Clearing	400,000 x 14 gardens	5,600,000
Consultant	1,500,000	1,500,000
Advertisement board designing, printing and installation	300,000 x 14	4,200,000
Garden Attendants & watering	150,000 x 14 gardens x 3 months	6,300,000
Administration (3%)	Utilities	3,400,000
<b>Total</b>		<b>58,000,000</b>

## 4.0 WHY SUPPORT?



# Why Should You Support this Campaign?



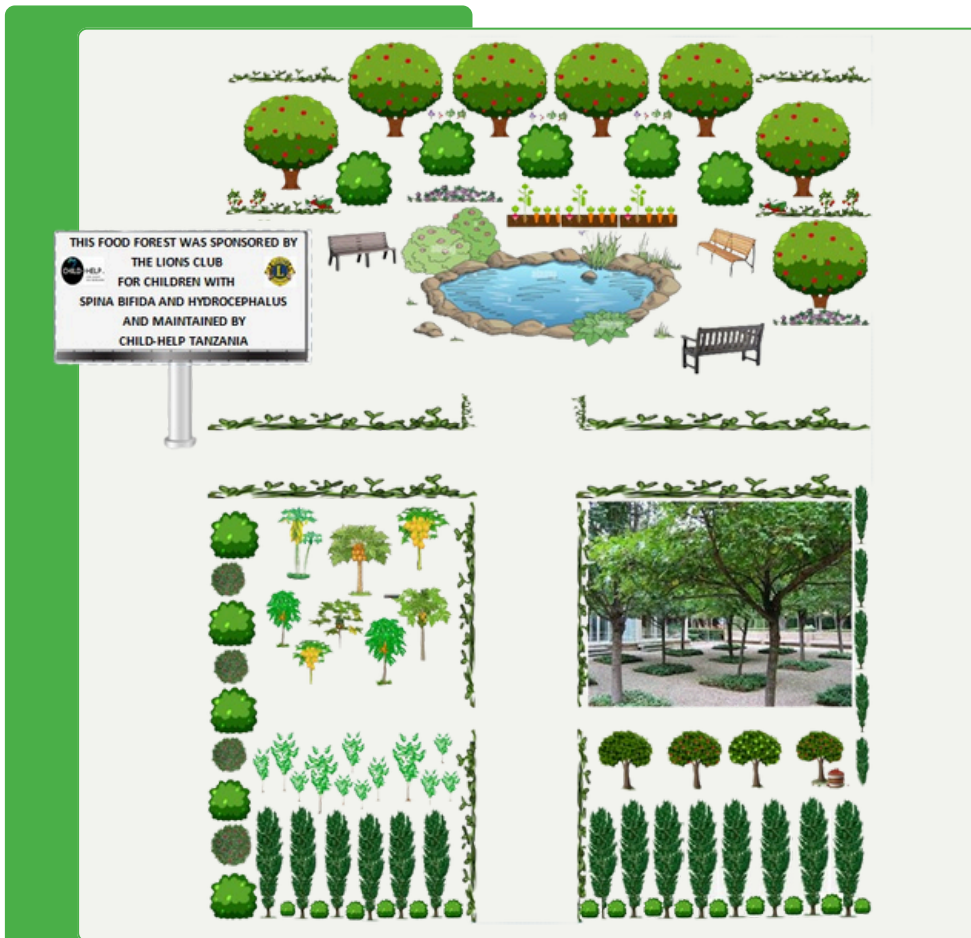
### 4.1 Sponsorship Packages

The campaign has several sponsorship packages available, participating as a sponsor will provide you with the opportunity to get your business in front of your target audience. Serving as a sponsor can provide your organization with:

Kind of Supporter	Benefits to a Supporter
<b>Corporate</b>	<ul style="list-style-type: none"><li>• Graphically design your company products/brand/service for advertisement.</li><li>• Advertise your company products/brand/service on an advertisement board installed beside the tree garden.</li><li>• Recognize your support on project events and documentation, Child-Help Tanzania website and social media platforms.</li></ul>
<b>Individual</b>	<ul style="list-style-type: none"><li>• Name tagging to a planted tree.</li><li>• Recognize your support on project events and documentation, Child-Help Tanzania website and social media platforms</li></ul>



## 4.0 WHY SUPPORT?



*Demonstration of a tree garden for **Corporate Supporters***



*Demonstration of a name-tagged tree for an **Individual Supporter***

## 4.0 WHY SUPPORT?



to conceive. It helps to prevent giving birth to children with disabilities, especially Spina Bifida and Hydrocephalus. In the womb, Folic acid helps to develop the child's nervous system. It is also an important component in the development of the brain and spinal cord during pregnancy.

### Why Vegetable and Fruit Gardens?

The concept of tree gardens basically aims at nutrition-sensitive programs in agriculture that will increase nutritious food consumption. The primary purpose is to grow specific vegetable and fruit tree gardens that will produce folate-rich foods (B9-Vitamin), and hopefully contribute to a reduction of excess morbidity and mortality caused by malnutrition amongst infants and pregnant women.

## 4.2 Tree Gardens and Nutrition

It is believed that **80%** of children born with Spina Bifida is caused by **insufficient Folic Acid** on the mother's diet. It is also estimated that 90% of children born with Spina Bifida, a condition caused by abnormal spine development, are more likely to develop Hydrocephalus, a condition caused by excess fluid in the head.

### Why is Folic Acid important to a mother?

**Folic acid**, a B-vitamin called folate found in various foods and Folic Acid supplements, is an important nutrient for women who want

