



Dear donors and supporters,

We are all living through a surreal and challenging time. I had hoped to write to you upon my return from my planned March trip to Tanzania, but that trip was cancelled due to the coronavirus pandemic. First, let me say that I sincerely hope that you and your loved ones are well. I am currently in self-quarantine in California after my return from Ethiopia (I was on my way to Tanzania). Thankfully, to date we have not heard of any infections among our Karimu family.

In this update let me first cover Karimu's response to the pandemic and then I will provide a brief update of the other projects. It is, unfortunately, a long email and, for this reason, let me add an "executive summary" here followed by the more extensive explanation.

Karimu has kicked off a task force to help the in-country wards, villages, and medical leadership minimize transmission of the coronavirus in the communities we are engaged with. We are working specifically on 3 fronts:

1. Supporting broad community transmission prevention initiatives
2. Providing supplies and interventions to the clinics and medical staff
3. Taking care of our local Karimu staff who are driving our projects on the ground

Our 2020 projects are going well with some already completed and several just started or about to start. Unfortunately, while we believe that we can continue with the current plans for now, adjustments and some delays will be necessary in order to practice transmission prevention according to the Tanzanian government and World Health Organization guidelines.

As I am sure you are aware, there is and will be a global need for those who are blessed with more to contribute to those who have less. We thank you for your ongoing generosity, whether with Karimu or other worthy non-profit organizations. If ever there was a time to come together globally, it is now. We pray for the safety of our loved ones, our communities, and the world.

In solidarity and hope,

Nelson Mattos
Karimu, Chief Operating Officer

Karimu's response to the pandemic

As of this writing (3/22/2020) there have been 12 identified cases of COVID-19 in Tanzania, but none in the Ayalagaya and Arri wards where Karimu is active. The government of Tanzania is taking steps to prevent transmission. These include:

- Surveillance of potentially infected passengers is heightened at all ports of entry
- 30-day ban on public gatherings to include schools, football leagues, sports, music events, political meetings and community events.
- Requiring hospitals, clinics, dispensaries, small markets, private offices, public offices, churches to provide hand washing facilities and people to wash their hands before entering
- Providing guidance to medical practitioners on COVID-19
- Distributing information about the virus, transmission, and prevention
- Requesting the cancellation of public meetings of 10 people or more
- Asking the public to practice physical distancing by staying 2 meters apart from others
- Asking the public to avoid shaking hands and touching their faces

- Encouraging hand washing with soap
- Requesting the use of face masks for those displaying Coronavirus-related symptoms

Our immediate concern in Ayalagaya and Arri wards is that once the virus infects one person, the risk of transmission is extremely high. Most communication is face to face and physical touch is commonly part of respectful greetings. Public transit is usually via crowded minibuses. Efforts are still underway to instill regular hand washing practices throughout the ward and medical facilities are underfunded and require interventions to improve health outcomes.

The local leadership does appear to be complying with new government guidance and trying to respond swiftly. We are aware that the monthly market and religious gatherings have been cancelled. Hand sanitizer or washing stations are appearing at clinics and banks. And the local schools are all closed. However, the word has not filtered throughout the community, particularly in rural areas, where there is little to no media delivery.

Karimu is currently working with the in-country wards, villages, and medical leadership to determine how Karimu can best support efforts to minimize transmission of the virus. We are working specifically on **3 fronts**:

1. Supporting broad community transmission prevention initiatives

A top priority is to support public education efforts. All villagers must understand how to prevent transmission of the virus, how to recognize if you are sick with the virus, and how to care for people who come down with the virus. In particular, we need to assure that rural village members are receiving information and that the community at large is taking the situation seriously. We will be developing a complete list of specific actions over the coming days and weeks. In the meantime, we are addressing the most urgent requests we have received:

- Provide hand washing stations (soap and buckets with a stand) in suggested areas
- Fund and install posters on notice boards for the public and in health facilities to easily identify infected members of the community.
- Donate sanitizers and dispensers in suggested areas
- Fund the acquisition of face masks for those who may have become sick

2. Providing supplies and interventions to the clinics and medical staff

In addition to the above, we will accelerate the delivery of certain planned interventions, such as patient screening, that will support efforts to minimize transmission. We are also working directly with the government to open the newly built Gajal dispensary this month.

- Donate face masks, gloves, and glasses for healthcare providers who will attend the sick



Newly built Gajal Dispensary

3. Taking care of our local Karimu staff who are driving our projects on the ground

Karimu is training in-country staff about the virus, its transmission, and how to protect themselves from infection. New procedures are being implemented for hand washing upon office entrance, sanitizing office equipment, maintaining space between employees including working from home, preference of phone contact where possible, cancellation and avoidance of large meetings, tracking personal contacts, and avoiding crowded public transit. No employees will come to the office if they have flu-like symptoms and any employees being exposed to others with such symptoms must self-quarantine for 14 days. Additionally, employees in high risk categories (over 65, immunocompromised, and respiratory compromised) will be assigned to work that does not require public interactions.



Some of you may be wondering if Karimu is considering direct monetary donations to villagers. Karimu's approach is to support projects that uplift entire communities rather than individuals. That will continue to be the case as we address the threat of this pandemic, however we may provide non-monetary assistance, for example, hand washing supplies. In addition, Karimu typically requires that the community contributes to the cost of projects. That will not be the case for pandemic response within the community.

Additionally, you may wonder how donations you may have given to a specific project will be used. The vast majority of donations to Karimu have been general donations that were not assigned to a specific project some of which we will now use for the pandemic response as needed. Project specific donations, however, will continue to be used only for those projects, but the project may not happen in 2020 as planned pending the impact of the pandemic to the local region.

Finally, you know that we lead an annual volunteer trip to work with the community bringing energy, forging friendships, and staying connected with the priorities of the community. The pandemic calls into question our June/July trip. International travel at present is limited and risky. We do not know, at present,

whether it will be safe to travel to Tanzania this summer. We will monitor the situation and make a final determination by May 2020. However, we have communicated to those volunteers who signed up for the trip that any payments toward the trip that Karimu has collected will be refunded in full to anyone choosing to not travel this year.

If you have any questions about Karimu's actions during this pandemic, please get in touch with us.

Update on our 2020 Project Plans

For our current Karimu projects, we believe that they can continue for now. Adjustments can be or are being made to practice transmission prevention according to the government and World Health Organization guidelines. Projects that require gathering large groups, such as savings group training, will necessarily be deferred. We want to continue to support the economy by keeping people employed recognizing that, like elsewhere in the world, an economic crisis will follow the medical crisis.

Sanitation

- Dareda Kati primary school bathrooms - we have started the construction of the school bathrooms. The foundation work is underway and is being done by the community.



- Ufani primary school bathrooms - we will start constructing them once the Dareda Kati bathrooms are finished.
- Water Maintenance - a lot of progress was made in the management of the water resources by the community. They now have a well defined process for incident reporting and follow up, and water champions who are responsible for the proper use and maintenance of each water point, and are now implementing budget tracking / accounting of water project to ensure full transparency of the fees collected and the expenses with maintenance.

Healthcare

- Gajal Dispensary - The building construction is complete, the government has begun delivery of equipment, and the fence around the Gajal dispensary has just been completed. This facility is beautiful. We are trying to open the Gajal dispensary this month.

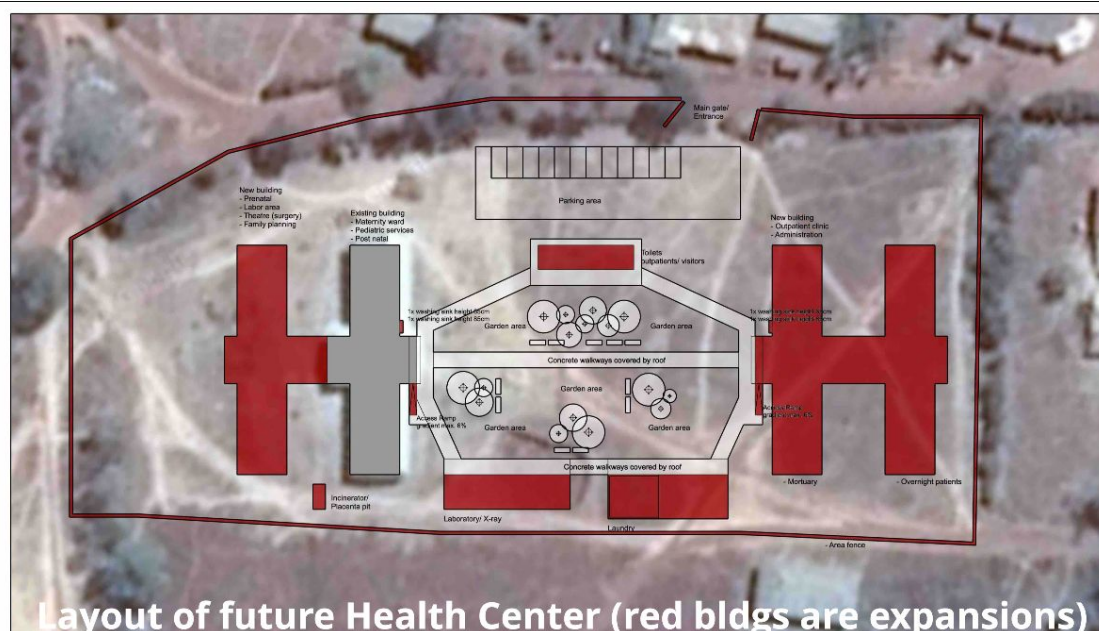


- Doctors and Nurses Housing - Construction for the Doctors and Nurses housing at Dareda Kati is well underway and being prioritized as we will need stable clinic staffing.



- Transformation of Dareda Kati Dispensary into a Health Center - the architectural layout for the expansion is done and we should start the 1st phase of the construction within the next few days. That includes:
 - Patient bathrooms
 - Laundry

- o Dedicated room for sterilization with (at least) a hand-washing sink and an autoclave
- o External hand-washing sink at different heights to accommodate both adults and children to ensure everyone coming to the clinic washes their hands
- o External incinerator and placenta pit in an enclosed area with gate to eliminate the need to openly burn material or to dispose of it in an open area
- o Wall mounted TV and media player to run educational videos about hygiene in the reception area



- Implementation of Medical Interventions recommended by the World Health Organization - The World Health Organization has published recommendations for healthcare interventions that can have a significant impact on public health for developing countries. Karimu has identified 27 of those to implement for 2020 & 2021 falling into the following categories. Those in bold will be accelerated in support of the coronavirus pandemic
 - o **Sanitation education for handwashing and safe disposal of stools**
 - o **Patient screening dealing with standardization of patient intake including taking vitals, triage, and patient separation for communicable diseases**
 - o Evaluation and management of adolescent and adult fever and appropriate referral to high level health facilities.
 - o Treatment of minor injuries
 - o Detection and treatment of childhood infections with danger signs
 - o Addressing nutritional deficiencies including identification of malnutrition, encouragement of breastfeeding, and key supplements for pregnant women and children
 - o Education for and provision of family planning options
 - o Improved screening and treatment for HIV/AIDS
 - o Prevention, rapid testing, and treatment for malaria
 - o Improved diagnosis and treatment for TB patients
 - o Improved acceptance of and vaccination of children
 - o Identification and treatment of mental disorders
 - o Management of pregnancy and complications
 - o Identification of heart diseases and appropriate referral to higher level health facilities.

Income Generation and Education

- Computer class - We completed the computer class for all teachers from Bacho Primary School and the medical staff of the Dareda Kati dispensary in early March. They worked really hard and reached a class average of 89%. This enables schools and dispensaries to qualify for receiving a

computer and printer from Karimu. No further computer classes will be held until the pandemic passes.



Computer class graduation

- School books - All primary and secondary schools now have enough books so that there is 1 book for every 2 students. Before the average was 1 book for every 6 to 10 students. School is suspended for now.



Haysam Primary School students learning from their new books

- Scholarships for teachers - This year 25 teachers from 9 different schools received a Karimu scholarship that covers 75% of the cost to obtain a university degree.
- Classroom furniture for all Ayalagaya schools - we are delaying the start of this project until the schools reopen.
- Re-construction of 3 Primary Schools

- o Haysam Primary School - the layouts are being developed by our volunteer architect.
 - o Dareda Kati Primary School - we will start only after the completion of the bathrooms, most likely towards the end of the year.
 - o Remodel of Ufani Primary School after 12 years since construction - we will start the remodeling only after the community and the school staff address the remaining maintenance issues with the existing facilities.
- Vanilla farming - Vanilla has been identified as a lucrative and viable crop for the community. We are working with Natural Extracts Industries Ltd in Tanzania (<https://www.nei-ltd.com/>) to introduce vanilla and train the community on how to cultivate it in 2020. We are in the final stages of project planning and budgeting, but will, most likely, delay the start of the project until the pandemic is over.
- Agricultural training on organic farming and disease resistant cows - We are also in the final stages of project planning and budgeting, but we will start the project only after the pandemic due to the need to bring many farmers into a classroom for training.

Financial Services

- Savings groups - 9 savings groups have joined our program and training is underway with 7 of those. We are seeing better attendance, larger loans, and more active engagement of all members based on the training. Data collection has begun and we will be able to assess group progress as we move forward. We are suspending training for the time being in accordance with the directive to cancel meetings of over 10 people. We are, however, researching how best to support our savings groups given the further aggravation of financial hardship imposed by the pandemic and the central role savings groups provide for financial safety nets.



Arri

- Survey - Our staff completed an exhaustive survey of Arri ward to better understand the situation there and to provide a foundation for prioritizing, estimating, and measuring our projects. Analysis is underway.



Fundraising

- We ran a fundraising campaign with 10 volunteer ambassadors in concert with International Women's Day and exceeded our \$5000 goal by at least 50%. We are awaiting a report on the final numbers, but are grateful for the organization by our fundraising team and the work of our ambassadors and their generous donors. Perhaps some of you receiving this update are included in those!



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