



We are TLM

CARING FOR CHILDREN WITH CANCER IN TANZANIA

2015 Tumiani la Maisha ANNUAL REPORT



Vision Statement

TLM is committed to all children with cancer in Tanzania having easy access to locally based high quality curative and palliative treatment leading to survival outcomes similar to resource rich settings.

Mission Statement

Working within the National Health Framework in Tanzania, to provides continuing medical education for local professionals, implement programs to deliver top quality care, both medical and psychosocial, and extending out-reach until all children with cancer in Tanzania have been reached.

TLM AT A GLANCE

Tumaini La Maisha (TLM Tanzanian), is a small charity with a very big mission. Supporting the provision of high quality care for all children with cancer in Tanzania is our goal. Since our inception in 2011, we have partnered with the Tanzanian Ministry of Health and Social Welfare (MOHSW) to ensure a holistic approach to the care of all paediatric oncology patients. We work with Muhimbili National Hospital (MNH), the largest Government run hospital in the country, to provide both clinical and non-clinical services to patients and their families. Our support includes chemotherapy and other medications; pathology services; visiting medical experts and a locally based paediatric oncologist; a locally based paediatric haematology oncology master's program (hosted at the Muhimbili University of Health and Allied Sciences, MUHAS) and a number of psychosocial programs including a family hostel, school and play therapy, care-giver life skill counseling, and palliative care services.

A Brief Look Back At 2015

Tumaini La Maisha Strategic program for phase two commenced this year. A 5 year strategic plan, 2015 to 2020, was rolled out, as part of a five year program. This report covers the first implementation year.

Our plans for commencing the phase two of the program was to continue providing clinical support, expand the psycho-social support of patients and their families by providing nutrition, counselling programs, transportation and on-site housing services for the children and their family members. All 512 361 new cases, children who attended our services were provided all medical care and treatment free of charge. A total number of ninety nine patient and families were transported to and from the hospital (those who had financial difficulties), the children were supplied with nutritional supplement food and all the children of school going age were able to attend age appropriate classes supported by the project.

Integrated specialized paediatric oncology training for doctors, nurses and healthcare workers was conducted onsite from visiting doctors and nurses from all over the world, organized by TLM. Two nurses were sent for a short course in Ireland at Our Lady's Children Hospital in Crumlin-Dublin as well as sponsoring 1 doctor for a masters course in pediatric oncology at MUHAS.

We started to roll out the program for paediatric oncology expansion two other peripheral centers, which are KCMC, and Sengerema Hospitals. Weekly online meetings are held, where we collaboratively decide which cases of childhood cancer they treat locally and which they should refer they to Muhimbili National Hospital. We provide pathology, protocol and treatment support to both these centres. We hope to add further centres to this programme until we have access to every child with cancer in Tanzania.

TLM Operational Performance in 2015

A message from CEO



It has been another exciting year at TLM. Many many positive improvements and milestones reached. In partnership with the Tanzanian government and it's many health care institutions we are slowly but surely increasing access to paediatric cancer care services to the many children in need.

Old programmes have been improved and new programmes added – including our outreach work with regional and district hospitals and our MNH based clown doctor entertainment programme. And we are also slowly seeing the positive results in terms of lives saved. As you can see from our early days to now we have made steady improvements on the outcomes we are reporting.

We are also delighted to announce the development of partner charity bodies both in the UK and in Ireland – called ‘ Their Lives Matter’ and a corresponding website www.wearetlm.org that covers the activities of all 3 Charities.

But much remains ahead of us to be done. Too many of our little friends are still arriving too late for us to help. Many more are not reaching our door at all.

Our 5 year strategic plan – of which 2015 is year one – we have set ourselves the task of reaching centres across Tanzania in order to achieve two goals – one is to reduce the number of children who arrive in a palliative condition (this currently sits at a very sad 35%); the second is to reach children who currently don't make to our services at all.

Exciting times ahead. I hope you will continue to be by our side as we continue this journey and battle for these special and incredibly brave children.

Hapa Kazi (kwa Watoto wazuri) tu!

Dr Trish Scanlan

Strategic Framework

Our 2015 plans (which formed year two of an overall 5 year program) include:

At Muhimbili National Hospital: continuing to provide clinical support, expand the psycho-social support of patients and their families by providing nutrition and counseling programs, transportation and on-site housing services for the children and their family members. In addition we included the provision of integrated specialized training in pediatric oncology for medical professionals, laboratory scientists, nursing staff and pediatric pathologists.

In Tanzania generally: scaling up outreach services to support both follow up care and the preventative approaches, creating increased public awareness of common childhood cancers with more robust standards for early detection and referral.

Our report will be broken down into five major segments, the Clinical Care; Non Clinical care; Medical Education, Outreach Services; and Fundraising.

Projects In Review

Objectives/ Target	Program Activities Implemented	Key Achievements
Clinical Resources	<p>Procurement of drugs</p>  <p>Pathology services</p>  <p>Haematology services</p>  <p>Palliative care services</p>  <p>Specialist Paediatric oncology services</p>	<p>All chemotherapy and other specialist drugs were procured for the children treated at Muhimibili National Hospital, and provided at no cost to the patients family.</p> <p>All Immunohistochemistry testing and paediatric pathology sub-specialist opinions were provided free of charge by TLM through our partner hospital in Dublin (Our Lady's Children's Hospital in Crumlin OLCCH).</p> <p>Specialist Flow Cytometry services were run by MNH staff but the reagents, supervision and all back up services (when the machines failed) were provided free of charge by TLM through OLCCH</p> <p>Our palliative care doctor attended all children with this special need throughout the year</p> <p>A Paediatric oncologist was available and always accessible to discuss complex cases. This specialist was provided by TLM.</p>



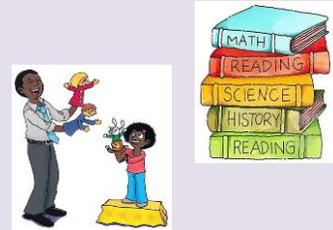
Protocol Development



Cancer treatment protocols were adapted and improved throughout the year by TLM specialists.

Non-clinical support program

School and Play Therapy Program implemented



Two play therapy staff enrolled for a course on early childhood development and successfully completed the course

A team of clowns (called the clown doctors as they are specially trained to entertain children in hospital) joined our team. Squeals of laughter, and general joy and merriment follow whenever they visit.

Nutrition Program implemented



Our fresh food supplemental nutritional program began this year. All the children at the ward and at the hostel receive morning and evening nutritious smoothies and special porridge. More was available for those children in most need.

Outpatient and Family Housing Programme



For long staying patients between treatments or especially those who come from upcountry can now stay at the hostel are now able to attend clinic and follow up treatment easily. Our hostel had 100% occupancy throughout 2015.

Transport Services



TLM provides support to families both reaching our doors and returning home once the treatment is complete. We have partnerships with two local airlines to facilitate speedy transport when critical children are in our care. Otherwise we fund the cost of local bus tickets and other travel related expenses.

Medical Education and development of Expert Services

MSc in Paediatric Oncology/Hematology started



The first intake of students completed their training this year – congratulations to both Dr's Shakilu and Dr Laiti.

Second intake of masters Paediatric oncology started this year, one medical doctor was enrolled for the course.

Paediatric Life support training



Each year a team comes from Dublin and both nurses and doctors from MNH participate in a week of training. It is extremely well attended and has improved the emergency care of critically ill children on Upendo Ward.

Lab Scientists Training Program



The chief of the national children's haematology laboratory in Dublin returned again this year to continue his collaboration with the local haematology laboratory team. He provides a one week on site course followed by active virtual supervision and expert mentoring.

MILESTONE & CHALLENGES

Important Milestones in Detail

2015 was an exciting year for TLM due to the following achievements;

Outreach



TLM with the support of Mo Dewji Foundation and Precision Air funds incur all transportation cost for all discussed patient from their respective areas to Muhimbili National hospital and back home after they complete the treatment.



The first 'Paediatric Oncology Early Warning Signs' training session was coupled with intensive teaching on Burkitt's Lymphoma this year. It was held in the Mwanza region. TLM in partnership with IMA World health trained in 8 different centres.

Nutritional Program



In 2015 Vodacom Foundation came on board to sponsor the Nutrition program with the aim to support the Children to sustaining the cancer treatment without losing weight or have infectious .The program also supports families who cannot afford to buy food supplements for their kids.

The program involves the preparation and distribution of the food supplements as smoothies twice a day and nutritional Porridge once daily to every child admitted in Upendo and Tumaini Ward, as well as those and stay at Ujasiri House all located at the Muhimbili National Hospital. According to TLM statistical data we are able to support 100 kids who able to tolerate the treatment from the beginning until complete the last cycles.





Establishment of TLM two entities in Ireland and UK (There lives matter)

In 2015 two new entities formed registered one Ireland and another in the UK with the core objective being to assist and support Tumaini La Maisha with the expanding plan for children's oncology in Tanzania. Their Lives Matter Ireland and UK had their official launch on the 13th of October 2015. Although governed by separate laws and guided by separate management boards these two NGO's were designed with the aim of supporting all the activities conducted by 'Tumiani la Maisha'. It was felt that a recognizable English name should be chosen with the same acronym (TLM) should be used and '**Their lives Matter**' was the obvious choice. These three organisations plans to work together to cure children's cancer in Tanzania.

Medical and career Support

Another remarkable achievement is the completion of our first paediatric haematology oncology master's programme. Dr's Shakilu Jumanne and Rehema Laiti completed the 2 year intensive training programme. Dr Shakilu who officially graduated in December, 2015 was honored with an outstanding performance by Muhimbili University of Health and Allied Training (MUHAS). In 2013 the MSc in Paediatric Haematology/Oncology program commenced and was sponsored by the Karimjee Foundation and this was borne out of the need to improve expertise locally as services expanded and need increased. Local and international teams of experts visit Upendo ward allowing almost all training to stay in Dar es Salaam thus contributing to the care of all the children both present and future as they guide the students through the programme.



Challenges:

Challenges faced in this year

- ✓ **Late presentation** is being encountered as the biggest challenge and a burden in most of the Tanzanian families. Apart from poverty and ignorance, most of the hospital or medical centers available in remote areas don't have advance investigation equipment's for the early detection of the Childhood Cancer. Its takes almost 3 to 6 months for the child to be referred to Muhimbili National

Hospital and in some cases the disease has already progressed significantly. Leading to reduced survival rate.

Malnutrition seems to be the most common problem for children with cancer which contribute to the incidence and severity of treatment side effects and increase the risk of infection, thereby reducing chances for survival.

Lack of specialist Doctors,

Currently, Tanzania has only one specialist doctor qualified as a paediatric oncologist while the demand is too high due to large number of children suffering from cancer in Tanzania ,though Muhimbili National Hospital plays a big role to provide Doctors for consultation services in this Unit.

Upcoming Programs:

We expect to implement the following in the following year,

- Lab Scientists Training Program and services
- Paediatric Intensive care Unit
- Nursing Training
- Emergency life support training and adding additional person
- Play therapy and child life training
- Outreach programme expansion
- Expand social activities

IMPLEMENTING PROGRAMMES



Events



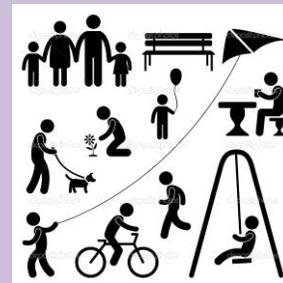
Online donation



Grant application



Fundraising



red

We are child centered



TLM Core Strengths



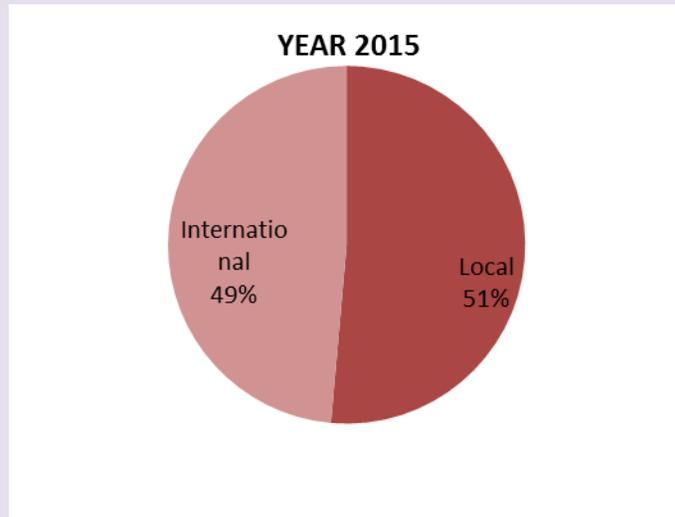
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**Developing Medical
and Non- Medical Personnel**



**Building collaboration relationships
(MNH and 3TLM Entities)**

Partners and Stakeholders paying for children's cancer services in Dar es Salaam



For the year ended 2015 TLM received a total of Tshs 570,976,882 from partners and stakeholders with 49% coming from International Donors and 51% from Local donors.

FINANCIAL REPORT IN BRIEF

The importance of financial reports and ratios cannot be expressed enough and in this brief report it will highlight on what is happening or going on, in terms of financial sustainability of the organization, its efficiency and effectiveness by answering the following questions:-



Will our organization have the money it needs to continue serving the kids tomorrow as well as today?



Does our organization serve as many kids as possible with its resources for the lowest possible cost?



Is our organization doing a responsible job of managing its money?

I. Financial Indicators

The following sections will highlight the indicators showing where do we get our money and continue to get the money and manage it efficiently in other word our long term sustainability tis can be deduced from the acid test or quick ratio among other rations please see table one. What we do to strengthen ourselves financially and continue doing so.

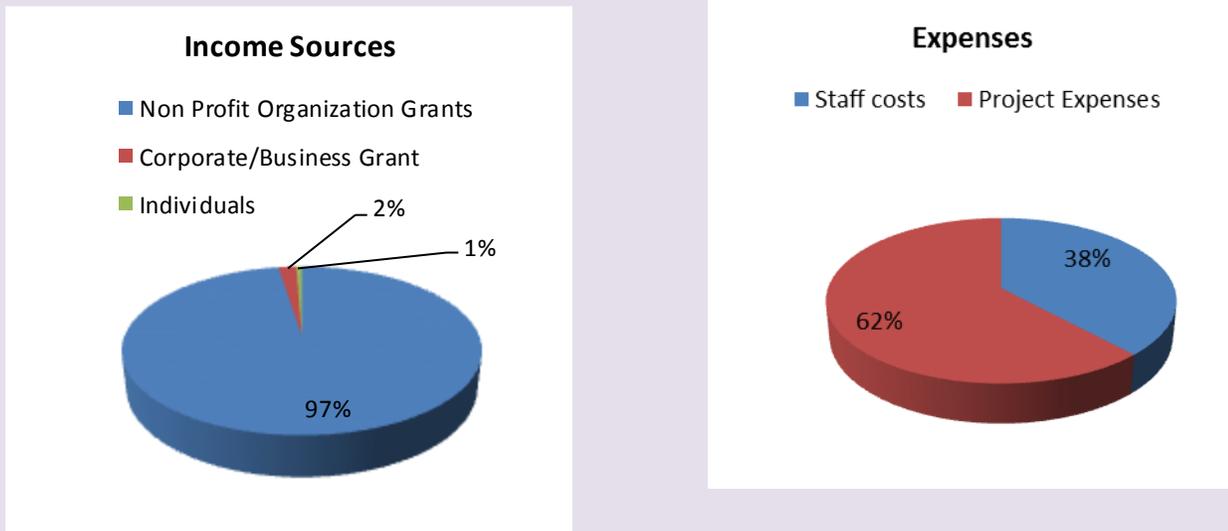
For a quick snap short of the costs involved in the treatment of childhood cancer, an average cost per child receiving Leukemia treatment at Muhimbili National Hospital, which is one of the most expensive treatment is at approximately a minimum of USD 10,000 to of which Tumaini La Maisha covers USD 2,000 and the reminder by the Hospital, in comparison to Europe of USD 130,000.

http://ijp.mums.ac.ir/article_7791_bcf8b7c64e6d66906087f42fb6355ca8.pdf

For a detailed financial report, please visit our website www.wearetlm.org for the Project audited report

As per approved budget the total amount of receipts and payments was Tshs 570,976,882 and Tshs 409,512,566. Figure 1 shows the Distribution of Income Sources for year 2015 and distribution of Program expense.

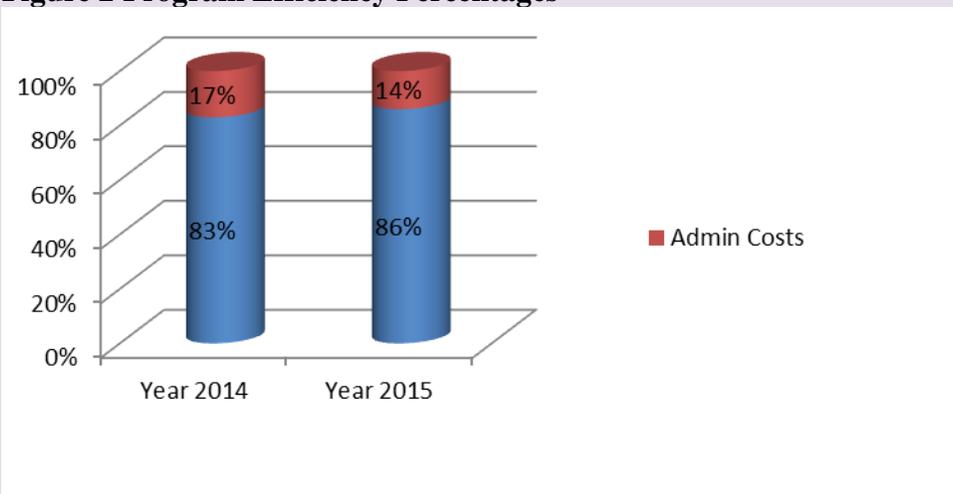
Figure 1 revenue and expenditure distribution for year 2015



II. Efficiency Indicators

This indicator highlights the portion of the total Income allocated to Children with cancer and their families. The international Benchmark standard is 75%, for the year 2015 TLM efficiency indicator was at 86% an increase of 3% from 2014. This serves to indicate that TLM managed to use only 14% of total revenue for 2015 on administration costs, while the rest was direct costs to the children. Figure 2, shows the comparison of this index for years 2014 and 2015

Figure 2 Program Efficiency Percentages

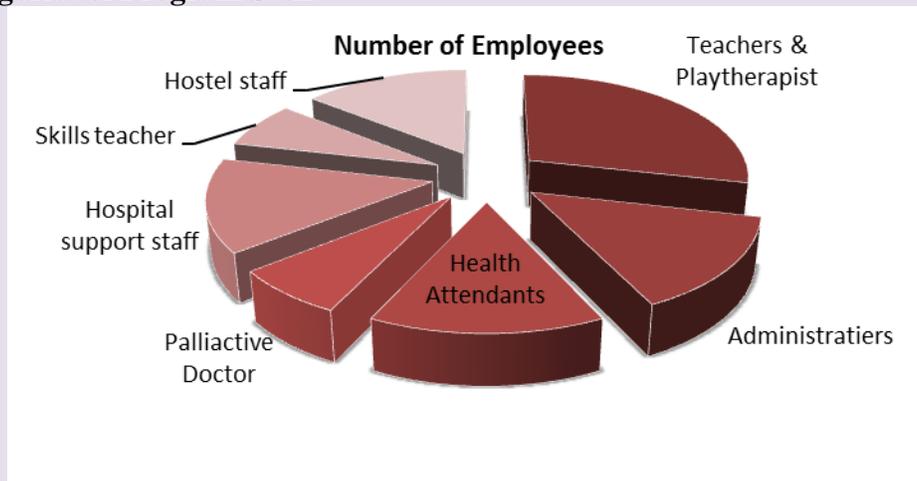


III. Why our staff are so important....

Pertaining to TLM Staff, the total number of paid staff for 2015 was the same as in 2014. The following figure shows the distribution of the human resources in different departments (Figure 3). For volunteers

we have medical volunteers and non-medical volunteers who participate in the program, some on long term and short term as shown in the Figure 4

Figure 3: Categories of Program Staff



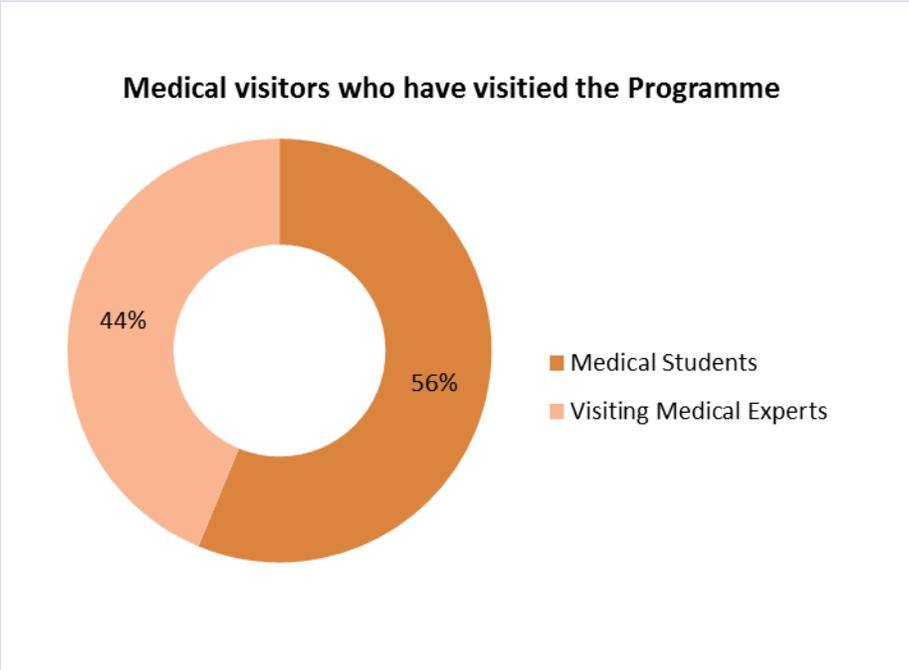
Visitors and Volunteers

A Total number of 90 non-medical volunteers and visitors participated in the program activities for year 2015, with both term volunteers and short term volunteers. From the volunteers that we have received majority were women comprising of 67%. We also had medical volunteers who participated in the program 54 being medical students and 42 being visiting medical experts

Figure 4: Categories of Non-Medical Visitors and Volunteers



Figure 5 Category students and visiting medical experts



IV. TLM Support Service Indicators

The TLM contribution to treatment costs and care per child is approximately at Tshs. 655,185 per year. In the year 2014 new cases of 423 were supported by the project and in year 2015 this figure had risen to 512 new cases which is a percentage increase of 17%, while in 2013 to 2014 it was only an increase of 4% (see Table 2).

V. Statement of Financial Position 2015

The following Table (Table 1) shows TLM's financial position for the year 2015. Since there is no shareholder and there is no equity share capital in Non for profit organizations, net asset in this report indicates the total number of donation fund which we have received from donors in the year 2015 and 2014.

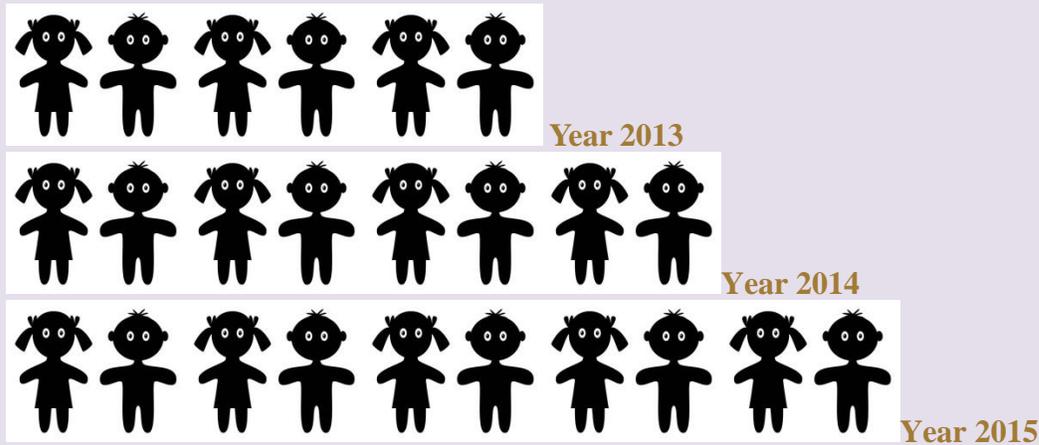
Table 1

	YEAR 2015	YEAR 014
ASSETS	TZS	TZS
Non-current Assets		
Property and Equipment	20,859,740	22,275,000
	20,859,740	22,275,000
Current Assets		
Receivables	292,200	
Cash and cash equivalents	196,764,018	37,845,843
	197,056,218	37,845,843
Total Assets	217,915,958	60,120,843
LIABILITIES		
Current Liabilities		
Payables and accruals	2,022,673	5,691,874
Total Liabilities	2,022,673	5,691,874
NET ASSETS	215,893,285	54,428,969
EQUITY		
Accumulated Fund	215,893,285	54,428,969
Total Equity	215,893,285	54,428,969

2015 IN NUMBERS

A. Number of Children Receiving Support From the Program

Figure 6



In the year 2015 we have had a total of 512 new cases at Muhimbili National Hospital, with a percentage change of an increase of 17%, while in the year 2013 to 2014 was 10%. As shown in the Table 2.

Table 2: Number of New Cases supported by the Programme over the years

Year	2013	2014	2015	% change 2014-2015
No. of New Cases	382	423	512	17%
Cumulative No.	382	805	1,317	

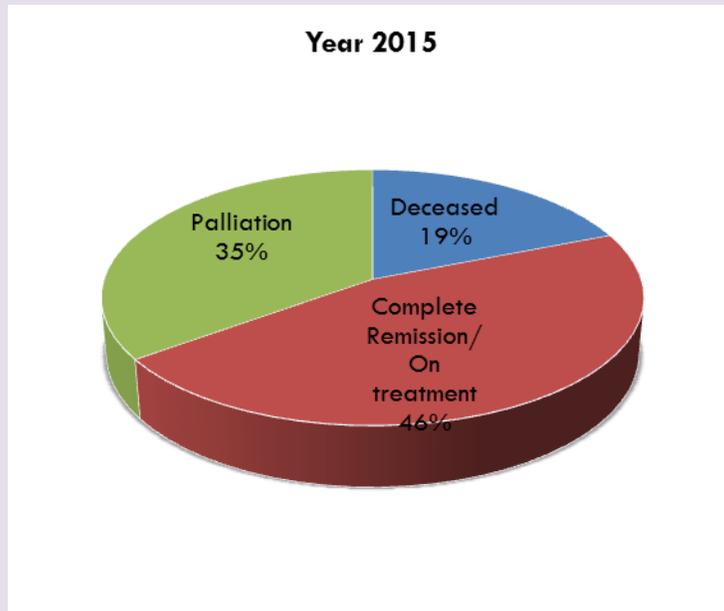
B. Categories of children Receiving care and support from the Program

The program supports all children and their families receiving cancer treatment at Muhimbili National Hospital. The categories of children that fall into this care include those that are newly diagnosed, those undergoing treatment, those on complete remission and those on palliative care.

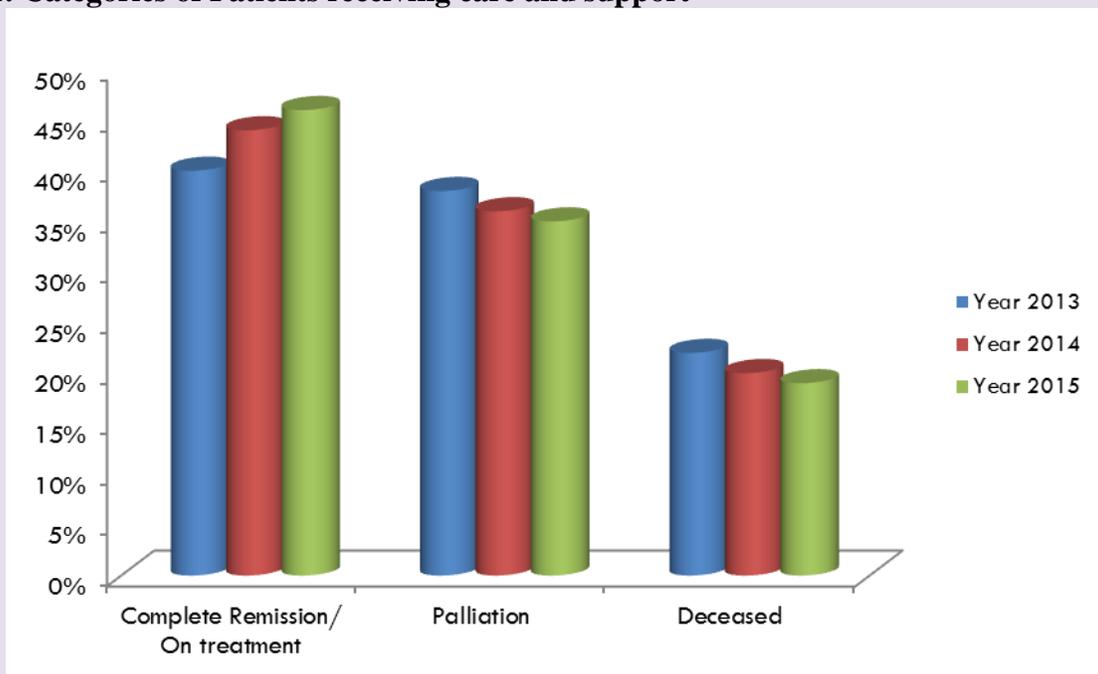
For the Year 2015, for children who were in complete remission or on treatment was 46%, those on palliative care was 35% and for those who passed away was 19% (See Figure 3). For complete remission over the past three years has been steadily increasing, this indicates that with

increased efforts from the program and our partners and donors survival rate and cure for children with cancer will continue to increase.

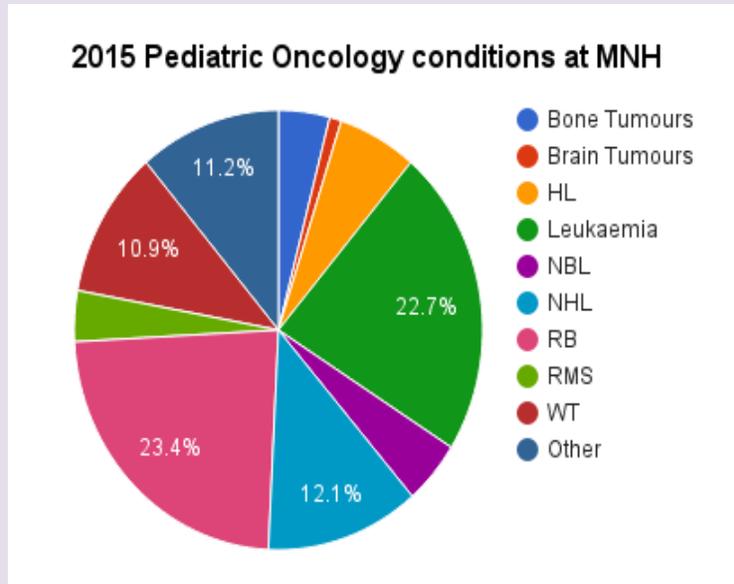
As shown in graph the number of children who are on palliation is decreasing over the years as well as the number who have lost the battle to childhood cancer, but we still have a long way to go as the decrease is not that significant and our aim is to reach the rate of survival similar to those of developed countries which is at 80%.



Graph 1: Categories of Patients receiving care and support

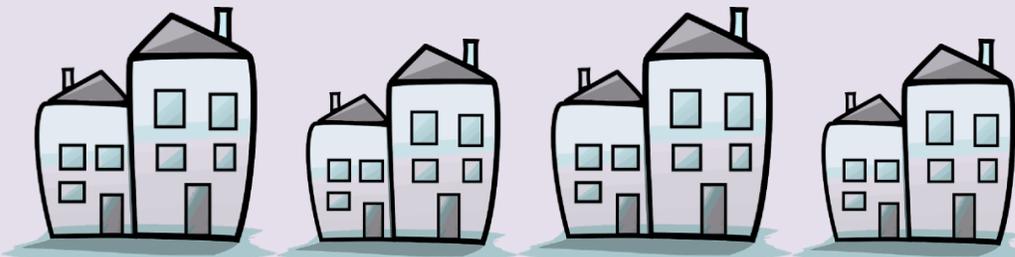


C. Total Number of patients supported by TLM by disease type



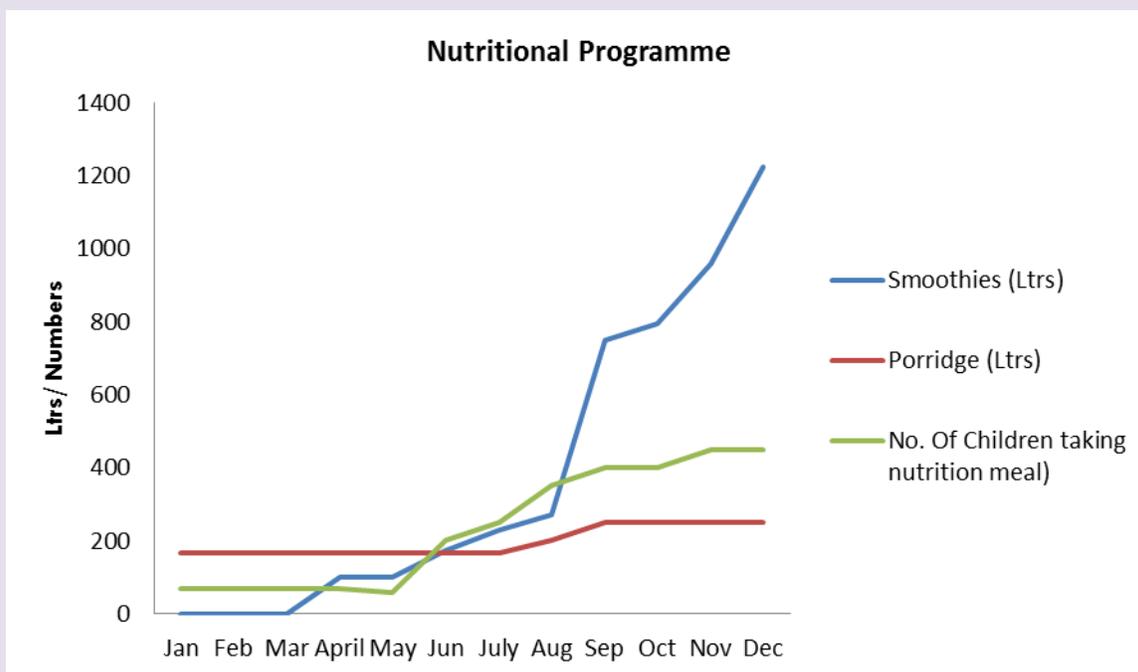
Disease	2014	2015
Leukemia	55	73
Lymphomas	46	66
Retinoblastoma	78	75
Wilms' tumor	33	35
Sarcomas	23	14
Germ Cell	4	4
Others	33	61

C. Annual Occupancy Rate at Ujasiri Hostel



Ujasiri hostel has had 100% occupancy since shortly after it opened its doors in 2013. In the Year 2015 the house has been full and has hosted a total number of more than 286 children and parents.

D. Nutritional Meals Provision



E. Transport Services provided

Table 4

Year		2014	2015
Children with Family supported with Transport	Bus	97	186
	Flight	1	5
	Ferry	1	4

F. Paediatric Oncology Training

Table 5

Year		2013	2014	2015
Status				
Doctors		0	2	1
Nurses		0	2	0

Acknowledgement and Appreciation

We are very grateful to all of our friends donors and experts. Your support ensured 2015 was another wonderful year of which TLM is immensely proud. Asante sana wote. Thank you all sincerely.

TUMAINI LA MAISHA

THEIR LIVES MATTER