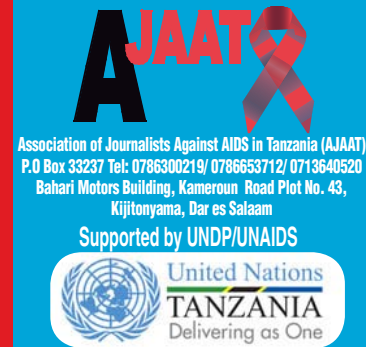


# Tanzania AIDS Week in Review



## A friend in need is a friend indeed: WAMATO saves PLHIV in Mbezi



School kids and beneficiaries at WAMATO



Mama Basila Chuwa

**A** social organization for humanitarian services based in Dar es Salaam's suburb of Mbezi Beach known as 'Kikundi cha Akina Mama na Watoto' (WAMATO) has embarked on delivering health services, particularly to the people living with HIV and AIDS (PLHIV) in the area.

The group of elderly women of Mbezi Beach organized themselves in 1996 and now it is one of the strongest NGOs in Dar es Salaam that offers humanitarian services to children, who were orphaned by HIV and AIDS pandemic

The group led by Mama Basila Chuwa, her founder chairman; delivers ARVs, food and medical care to more than 60 PLHIV, including children, men and women in the area.

From its on the spot visit at the centre, AIDS WEEK is reliably

informed that children are being offered school uniforms, food, text books and learning materials to pursue their education at different school levels in Dar es Salaam.

These efforts are commendable and should be complimented by good Samaritans living in Dar es Salaam and all over the country.

According to Mama Chuwa WAMATO also started a nursery and primary school in 2000 and at the moment the school has enrolled 300 children.

She says the group also offers meals at the school. This helps most of the children from poor families to get food. It also helps the children to stay at school and concentrate with studies.

Mama Chuwa says, the school called Bajeviro Nursery and Primary school has educated more than 1,200 children for the last ten years and most of them are pursuing secondary school education.

Few of them have already in universities.

Currently, WAMATO is being funded by a Canadian NGO. However, the funder has indicated signs to pull out helping the group, by March next year. This is putting the group in dilemma.

"Because of that reason, WAMATO is now facing a dilemma, it does not know how it would continue helping women and children living with HIV and AIDS as well as offering humanitarian assistance such as food, medical care and school uniforms to the hundreds of orphan students," she says.

She adds by saying that the people she helps are very poor indeed living below poverty line and if the aid is cut off, definitely her group will suffer a lot.

She urges NGOs and other humanitarian groups to come to her rescue to help these children, men and women who are destitute

and need to be helped.

Speaking to this reporter, one of the beneficiaries Maria Magdalena (65) says she started living positive three years ago and from the day she joined the centre, her living has been reasonably good.

She says she gets humanitarian assistance such as medical care, food and ARVs from WAMATO. "My health has improved considerably over the last three years," says Magdalena, vividly seems healthier.

Talking about her ordeal and how she got the pandemic, Magdalena reveals that she got the disease from her daughter who had acquired the virus before

"She was pregnant, and during delivery, I helped her in delivering a baby girl at home and without using protective gears, I got infected with the disease unknowingly," she recalls.

She says her daughter, who later died left with her six grandchildren to care the smallest being the three years old. All of them get humanitarian assistance from WAMATO.

This has increased a burden of rearing them. Although they are getting humanitarian assistance from WAMATO, it is still worse and they have to work themselves in order to survive.

A site visit to the home of Magdalena has revealed that she is living in a very bad condition and her grandchildren re indulged in child labour by doing meager jobs in order to survive.

Without being helped, they would suffer immensely.

SOURCE: AIDS WEEK, NASSER KIGWANGALLAH

### Our Vision:

A recognized strong media association in and out the country that can bring about enhanced and effective HIV and AIDS media coverage and contribute to a reduction of the spread of HIV in Tanzania

# Dk. Fatma Mrisho Aula

**M**wenyekiti Mtendaji wa Tume ya Kuthibiti UKIMWI Tanzania (TACAIDS), Dk. Fatma Mrisho amechaguliwa kuwa Mwenyekiti wa kamati kuu Tendaji ya masuala Wanawake, Wasichana, Usawa na jinsia na UKIMWI katika Kanda ya Mashariki na Kusini ya Afrika baada ya Mkutano uliofanyika hivi karibuni mjini Johannesburg, Afrika ya Kusini kati ya tarehe 27 na 28 Septemba 2011.

Kwa mujibu wa tangazo la TACAIDS kupitia gazeti la Mwananchi, uchuguzi wa Dk. Mrisho



*Dk. Mrisho (Hongera sana kutoka AJAAT*

wa Dk. Mrisho ni heshima kwa kanda ya mashariki na Kusini ya

Afrika, Tanzania na TACAIDS. TACAIDS. Menejimenti na wafanyakazi wa TACAIDS wanampongeza Dk. Mrisho kwa heshima aliyoiletea Tanzania.

Dk. Mrisho ambaye ni daktari wa magonjwa ya binadamu alijiunga na TACAIDS mwaka 2007. Kabla ya hapo alikuwa ni Mwakilishi Shirika la Umoja wa Mataifa juu ya idadi ya watu (UNFPA) nchini Uganda kati ya Januari 2006 na Januari 2007.

Pia alikuwa Mshauri ya UNFPA juu ya Afya ya uzazi katika kanda ya Mashariki, Kati na Magharibi mwa Afrika kati ya Juni 2000 and Januari 2005. Alikuwa Mshauri Mkuu wa Afya ya uzazi katika Wizara ya Afya,

Tnchini Ethiopia kati ya 1985 na 1993. Alikuwa Mkurugenzi wa huduma za Kinga, Wizara ya Afya, Tanzania kati ya 1985 na 1993. Kati ya 1983 na 1993, alikuwa ni Mhadhini Mkuu, Idara ya Afya ya Jamii katika Chuo Kikuu cha Madaktari, Muhimbili.

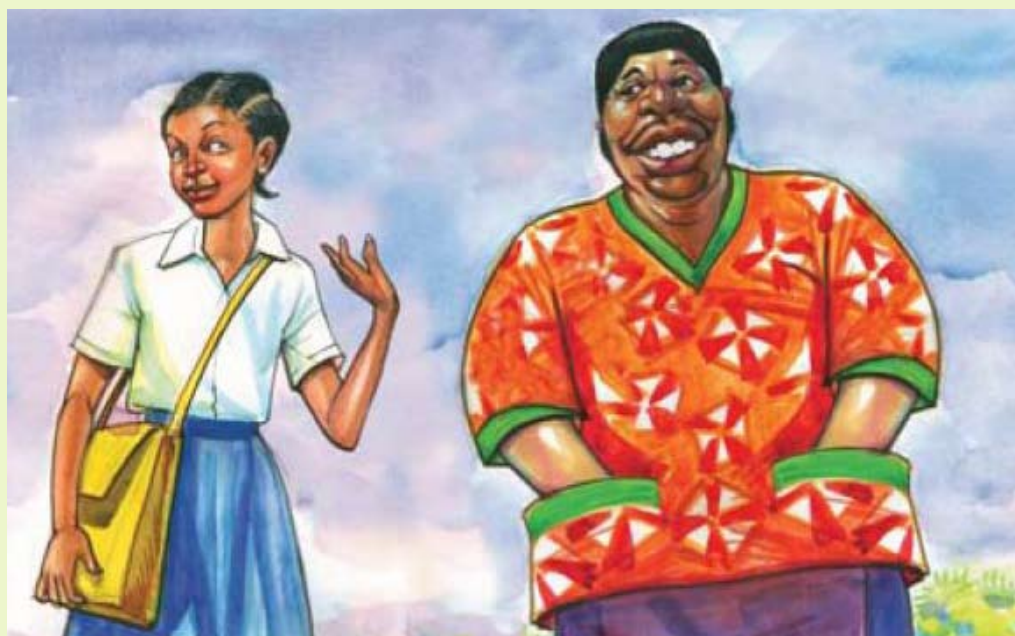
Dk. Mrisho amekuwa mjumbe katika kamati mbalimbali za Kimataifa na Kitaifa zikiwemo Shirika la Kimataifa linaloshughulikia UKIMWI (UNAIDS), Shirika la Afya Ulimwenguni (WHO) katika masuala ya Afya ya Uzazi Afya, Mjumbe wa Bodi katika Shirika la AMREF, Chama cha madaktari Wanawake (MEWATA) na Umoja wa Jumuiya ya Maendeleo ya Nchi za Kusini mwa Afrika (SADC) katika masuala ya jinsia.

SOURCE: ADVERT, MWANANCHI

## STRADCOM Project comes to an end

**A**fter five years of working to support Tanzania government efforts through the Ministry of Health and Social Welfare in reducing spread and new infections of HIV/AIDS through Strategic Radio Communication, the STRADCOM Project implemented by Johns Hopkins University Center for Communication Programs (JHU CCP) is closing its activities in December.

According to an email note circulated to various stakeholders yesterday by one of the key leaders, in appreciation of Governments, stakeholders and partners willingness to collaborate with JHU CCP, STRADCOM Project is planning to conduct a Wrap Up event on 20th October 2011 at the Double Tree Hilton Hotel. We will show case products and activities conducted in collaboration with stakeholders



*The popular Fataki at work*

and partners in five years contributing to improving the health of Tanzanians especially on HIV/AIDS, stated the note.

According to the note, the event is expected to start at 10:00 in the morning until 13:00 and thereafter to be concluded by

lunch time.

STRADCOM project is renowned for having collaborated well with the Ministry of Health and Social Welfare (MoHSW) through its National AIDS Control Programme (NACP) to design innovative communication

and messages to fight HIV and AIDS in the country.

One of those messages was the popular FATAKI radio and TV spots that discouraged elderly men to hoodwink innocent young girls into sexual practices.

SOURCE: AIDS WEEK



A section of NACOPHA members addressing the press

## NACOPHA calls for end of personal interests among PLHIV

**P**ersonal interests within various Networks for People Living with HIV (PLHIV) have been highlighted as threat to the survival of National Council of PLHIV (NACOPHA).

During a three-day workshop in developing NACOPHA strategic plan under a technical support from USAID, and managed by the Management Science for Health (MSH) in Morogoro last week, it was exposed that as for that, some PLHIV networks did not yet recognize the council as the national body.

“There is no collaboration because of selfishness and proliferations from other organizations of

**There is no collaboration because of selfishness and proliferations from other organizations of similar interests with NACOPHA posing to work as national councils while in the actual fact they are mere NGOs**

similar interests with NACOPHA posing to work as national councils while in the actual fact they are mere NGOs,” the technical working group pointed.

On his part, the NACOPHA Chairperson, Vitalis Makayula, told the workshop that while

his institution is registered as an NGO, it works as a national council for PLHIV—this makes a challenge on how its membership structure can be.

“As a council, we include all the people living with HIV and AIDS in Tanzania and we have

to serve them all who are in networks, clusters even those who are not in the formal groups,” said Makayula. The technical group highlighted NACOPHA strength as being a recognized body by the government as an apex organization of PLHIV. The government has demonstrated a political will to support NACOPHA

They said NACOPHA enjoys support of allies who are ready to see it stands strong while the donor community recognizes it and is ready to support the council.

The 12 members’ technical working group workshop developed the 2012-2016 NACOPHA strategic plans draft. The final version will be submitted for approval to the council board and the General Assembly.

The strategic plan will create and review how NACOPHA is organizing its responsibilities, authority and accountability in order to achieve results and to visualize the state of PLHIV rights, capacity and empowerment impact.

• SOURCE: AIDS WEEK, BEN SICHALWE



*A group of senior citizen as captured in 2009 by AJAAT team during WAD held in Tanga Region*

## Senior citizens must be protected

**L**AST Saturday, Tanzania joined other countries in the world to mark the International Elders' Day. According to the United Nations, an elderly person is a person who has reached over 60 years of age.

Today, worldwide, there are around 600 million persons aged 60 years and above. Their number is expected to double by 2025 and reach two billion by 2050. The majority of them will be in the developing world. In our fast ageing world, older people will increasingly play a critical role through volunteer work, transmitting experience and knowledge, helping their families with caring responsibilities and increasing their participation in the paid labour force.

In Tanzania, like in many other African countries, older persons provide significant contributions to society. It is said that millions of people living with HIV/AIDS are taken care of at homes by their parents, mostly the elderly and on their deaths, orphaned children are left behind with their grandparents.

But despite their importance to the society, many old people in Tanzania are not getting proper care and support. As a matter of policy, people aged above 60 years are supposed to get free medical care.

Those who were in formal employment are supposed to get decent pension payment that is enough for them to afford meals, shelter and other necessary things in life.

In Tanzania, the elderly are often neglected and pensioners who were former civil servants get very little money to afford decent meals and accommodation.

It is common to see the elderly being treated harshly by nurses and attendants at public health centres and dispensaries. Many of health facilities have ignored to implement the policy on elderly and senior citizens. In some extreme cases the elderly, particularly women, are accused of witchcraft simply because they have red eyes and end up being killed by mobs.

It was encouraging that many Tanzanian leaders used the International Day for the Elderly to condemn mistreatment of old people, especially killing them on beliefs of witchcraft.

It is hoped that campaigns in support of senior citizens will continue because the society needs them.

•SOURCE: DAILY NEWS

## Highlights of HIV/AIDS situation in Tanzania Mainland

The national prevalence stands at 5.7% down from 7% in 2004

Epidemic has stabilized around 6% among those aged 15-49 years ( Generalized Epidemic)

Wide regional variation of HIV prevalence between 0.9%-15%

Drivers of the epidemic include transactional sex; low condom use; trans-generational sex and gender inequalities.

National VCT campaign spear-headed by the Head of State has increased uptake to 37%

National HIV prevention budget is 17% of the total HIV and AIDS budget (PER 2007)

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AJAAT has vast skills in producing newsletters for individual organizations. Those interested can feel free to contact us for service-Editor

## Weekly quotable quotes!!

Governments, civil society, the private sector, research institutions, AIDS infected

people: we are all in this together. - - Belgium's Prime Minister Yves Leterme

# 50 years of Independence: Nkya endorses quality local health services

**T**HE Ministry for Health and Social Welfare (MOHSW) Deputy Minister, Dr Lucy Nkya, asked the public to utilize the available quality health services within the country instead of seeking them from other countries.

Dr Nkya revealed that in the past 50 years of independence, number of specialists had greatly increased as well as facilities and that heart surgeries were being conducted within while kidney transplants, ear, throat and nose surgeries would start.

She said that research had shown that 40 per cent of Tanzanian patients suffered from throat, nose and ear complications and the reason why the ministry saw it necessary to have trained personnel and state of the art facilities to deal with that.

“From the time we started conducting hip replacements and using artificial limbs, we have managed to save 9bn/- that was previously going to ferry patients. We have already done 324 hip replacements, 119 knee operations and 80 operations of the spine,” she explained.

The Deputy Minister said that over the years, the government had strengthened and improved the field of forensic science services where more men have become responsible to the pregnancies they had earlier refused.

MOHSW Permanent Secretary, Ms Blandina Nyoni said that the government through the Ministry of Health and Social Welfare (MOHSW) had bought six fully equipped vehicles for outreach services with the aim of reaching people who can't access health services.

“This is just one of the many initiatives that the ministry will be taking to ensure that more people are reached. Another step we have



*Dr Nkya, Deputy Minister for MOHSW*

taken is to increase the number of mobile laboratories with the same goal,” Ms Nyoni said.

Ms Nyoni told journalists on Sunday during the closing of the Health Week that much as the exhibitions were closed, the ministry had extended the various free services they were giving to yesterday evening because of the big demand.

She said the number of people who visited the Mnazi Mmoja grounds for the Week had been overwhelming and that the ministry would take advantage of world

health days like Malaria, Heart Day to set up camp to provide free services.

“As we reach the climax of our 50 anniversary of independence, we will continue striving to take health services to the people and from December 1 to 9 this year, at the Trade Fair grounds we will provide free services again,” she said.

The United Nations Children's Fund (UNICEF) Deputy Representative, Mr Mohamed el Munir Safieldin congratulated the government for the achievements

made in the health sector highlighting that ten years ago 500 children were dying every day from preventable diseases with immunisation with Vitamin A and using treated mosquito nets.

Mr Safieldin said he was thrilled that the number had reduced by 110 and that saving 110 children on a daily basis wasn't a small achievement.

“Ten years ago only 10 per cent of children under the age of five years were sleeping under mosquito bed nets treated with chemicals. Today around 64 per cent of these children are sleeping under them,” he said.

The National Institute of Medical Research (NIMR) Director General, Dr Mwele Malecela said that medical research has played a vital role in many achievements in the health sector and increased numbers of quality researchers have been the driving force.

Dr Malecela said that at the time of independence, there were no local researchers but today NIMR boasted having 159 researchers in total, 33 of them having PhDs while 73 possess Masters Degrees.

Thanks to the researches in NIMR, traditional medicines are now safe and effective to use and soon after the completion of a manufacturing plant in Mabi-bo mass production would start where the drugs would be sold very cheaply. NIMR also plans to build a laboratory in Tabora region.

NIMR was instrumental in the research for treated mosquito nets after finding the substance that repels mosquitoes, in a connection between sexual transmitted diseases and the reduction of HIV/AIDS, that circumcision helps reduce the risk of contracting HIV/AIDS and spot testing of mucus in TB diagnosis.

• SOURCE: DAILY NEWS



## KUELEKEA SIKU YA UKIMWI DUNIANI



### SHINDANO LA WAANDISHI WA HABARI KUHUSU UPATIKANAJI WA HUDUMA ZOTE MUHIMU ZA UKIMWI KWA MAKUNDI YA WATU WALIONYIMWA FURSA NA WALE WAISHIO KATIKA MAZINGIRA HATARISHI ZAIDI NCHINI

**1.0 WAZO:** Chama cha Waandishi wa Habari za Ukimwi Tanzania (AJAAT), kupitia ufadhili wa Tume ya Taifa ya Kudhibiti Ukimwi Tanzania (TACAIDS) kinatangaza shindano la miezi mitatu kwa waandishi wa habari ya kuandika kuhusu UPATIKANAJI WA HUDUMA ZOTE MUHIMU ZA UKIMWI KWA MAKUNDI YA WATU WALIONYIMWA FURSA NA WALE WAISHIO KATIKA MAZINGIRA HATARISHI ZAIDI NCHINI. Kilele cha shindano hilo litakalohusisha waandishi wa habari za magazetini, majarida, vituo vya runinga, redio, wachora vikaragosi (katuni) na mitandao ya blogu nchini, kitakuwa wakati wa maadhimisho ya Siku ya Ukimwi Duniani, – Desemba 1, 2011. Washindi wa shindano watazawadiwa fedha taslimu, ngao na vyeti vya ushiriki.

**2.0 TAARIFA YA MSINGI:** Programu shirikishi ya Umoja wa Mataifa kuhusu virusi vya UKIMWI (VVU) na UKIMWI (UNAIDS) inatafsiri upatikanaji huduma kwa wote kuwa ni dhamira ya dunia katika kupanua upatikanaji wa matibabu, kinga, matunzo na misaada kwa waathirika wa Ukimwi. Inahusisha jamii ambapo kila mtu anaweza kupata taarifa sahihi kuhusu UKIMWI na huduma za matunzo ya kiafya.

Lakini je, kila mtu katika jamii zetu wanapata huduma za kiafya? Kila mtu anapata elimu kuhusu UKIMWI kupitia vyombo vya habari na hivyo kumwezesha kufanya uamuzi mzuri kuhusu afya zao? Bahati mbaya majibu kwa aina hii ya maswali ni hapana. Pamoja na uwezo wa huduma nyingi za afya, siyo kila mtu katika jamii yetu ana uwezo sawa wa kupata huduma hii hata kama angehitaji na kuipata.

Nchini Tanzania, kwa mfano, makundi kama ya wanaouza miili (changu doa),

wanaoishi na virusi vya ukimwi, walemavu, wanaojidunga dawa za kulevya, ombaomba, wafungwa na mashoga wanahisi kunyanyapaliwa na kubaguliwa kila siku kutokana na hisia hasi dhidi ya watu wa jamii hiyo. Hali inaweza kuwa mbaya zaidi na unyanyapaa unaohusisha Ukimwi hasa kwa wanaoishi na VVU na UKIMWI na kufanya kuwa ngumu zaidi kwa watu wa makundi hayo kupata haki za msingi na kupata huduma bora za kiafya.

Wakati huduma za UKIMWI nchini Tanzania na kwingineko inaongezeka katika baadhi ya vitengo, makundi ya waliomo kwenye mazingira hatarishi zaidi ya kuambukizwa VVU na UKIMWI yanazidi kupambana na vikwazo vya kiufundi, kisheria na vya kiutamaduni katika kupata huduma ya matunzo ya kiafya.

Zaidi ya hapo, kuna mambo yanayohusu usiri ambayo ni ya msingi kwa huduma ya Ukimwi katika visiwa vidogovidogo ambapo kila mtu anamfahamu mwenzake. Na hii inajitokeza katika maswali yanayoulizwa mara kwa mara na watu wanaohitaji huduma ya matunzo na matibabu, kwamba 'Je, nikipata huduma hii kila mtu atajua shughuli yangu?' Kwa hiyo changamoto ya kufanikisha upatikanaji huduma kwa wote haihusiani tu na upatikanaji wa huduma ya matunzo na matibabu, bali masuala kama unyanyapaa, ubaguzi na usiri.

Kwa hiyo, lengo la shindano hili ni kuwahamasisha waandishi wa habari wa magazeti na vyombo vya elektroniki kuandika makala na programu zitakazowawezesha watu wa makundi hayo kupata huduma bure na bora za UKIMWI na kuwawezesha kupata na kufurahia maisha chanya ambayo ni haki ya msingi kama Mtanzania mwing-

ine yeyote.

Kimsingi, shindano hili halitawataka waandishi wa habari kuandika, kupiga picha, kuandika programu za redio na runinga tu kuhusu masuala ya haki kwa wote na yanavyohusishwa na janga la UKIMWI, bali litawataka waandishi kuibua mambo ya kisera na mipango ya serikali na mamlaka zake katika kushughulikia tatizo hili. Aidha, wataitaka sekta binafsi kuonyesha wanavyoweza kufanya kueleza umma wa Watanzania ukweli kwamba upatikanaji wa huduma za VVU na UKIMWI kwa wote hasa kwa walio katika hali hatarishi zaidi unaweza kupunguza kusambaa kwa VVU nchini.

**3.0 UTANGULIZI:** Takwimu na taarifa zilizopo za mpango wa sekta mtambuka wa kinga ya VVU na UKIMWI wa 2009 – 2012 (National Multisectoral HIV Prevention Strategy of 2009-2012) unaelezea kuwa kipaumbele katika hatua za kuchukua katika jitihada za kuzuia kasi ya maambukizi ya virusi ni kupanua huduma kwa makundi yaliyomo katika mazingira hatarishi zaidi.

Makundi ya wanaouza miili yao (changu doa), wanaoishi na VVU na UKIMWI, walemavu, wanaojidunga dawa za kulevya, ombaomba, wafungwa, mashoga na kadhalika, wanatengwa katika kupata huduma za VVU na UKIMWI kwa sababu mbalimbali pamoja na ukosefu wa huduma katika baadhi ya sehemu na unyanyapaa, ubaguzi na kutokuwepo na usiri.

Kwa hiyo masuala hayo yanatakiwa kushughulikiwa mara kwa mara kwa njia ya uhamasishaji na kusambaza taarifa kwa usahihi kusudi taifa lifanikishe upatikanaji wa huduma za VVU na UKIMWI hususani kwa kundi lililo katika mazingira hatarishi.

**4.0 SHINDANO LENYEWE:** Nia ya

shindano hili ni kuwahamasisha waandishi wa habari, wapiga picha za habari, wachoraji wa vikaragosi, waandishi wa makala, makala maalum, watayarishaji vipindi na watangazaji wa vyombo vya habari kufanya uchambuzi na utafiti wa kina na kutoa makala zenye uelewa mpana na kuonyesha uhusiano kati ya haki ya kupata huduma za VVU na UKIMWI. Waandishi pia watatakiwa kuonyesha athari za kisera na kijamii kama makundi yaliyo katika mazingira hatarishi hayatapata huduma za VVU na UKIMWI, na kushauri mwelekeo sahihi na bora zaidi unaopaswa kuchukuliwa.

**5.0 MALENGO:** Shindano pia litakuwa na malengo yafuatayo:

i. Kuhamasisha waandishi wa habari wa vyombo vyao kuandika kwa upana kuhusu uhusiano kati ya upatikanaji huduma za VVU na UKIMWI kwa wote wanaoishi katika mazingira hatarishi na uwezekano wa kuongezeka zaidi kwa maambukizi ya VVU kama watanyimwa huduma hizo.

ii. Kuoanisha masuala ya jinsia katika taarifa zao ili kuzuia/kupunguza maambukizi zaidi ya VVU katika jamii ya Tanzania.

iii. Kujaribu na kuthubutu kuibua vipindii vya kisheria, kijamii na kitamaduni kwa makundi hayo kupata huduma za UKIMWI zinazokubalika kimataifa na kutafuta ufumbuzi wake.

iv. Kuziweka habari za UKIMWI katika hali ya kuvutia kwa kutumia mtindo wa uandishi wa habari unaohamasisha upatikanaji huduma za UKIMWI kwa wote nchini.

**6.0 MATOKEO:** Baada ya miezi mitatu ya shindano, waandishi wa habari wa vyombo vya elektroniki – radio, runinga; wapigapicha, waandishi wa makala, makala maalum na wa mtandao wa blogu watakuwa wameandika makala za kutosha kuhusu upatikanaji wa huduma za UKIMWI kwa wote na jinsi zinavyohusiana na kuongezeka kwa maambukizi ya VVU.

**6.1 MATARAJIO:** Kupungua kwa maambukizi ya VVU na UKIMWI katika jamii ya Kitanzania na kufikia mpango wa Tanzania bila UKIMWI inawezeka.

**7.0 MWONGOZO WA MAUDHUI:** Maswali yafuatayo yanaweza kuwaongoza waandishi wa habari katika juhudi zao za kutafuta mambo ya kuandika katika makala zao/programu zao/picha zao au vikaragosi vyao:

i. Je, ni namna/jinsi upatikanaji mbovu wa huduma za UKIMWI kwa wote na uliokubalika kimataifa unaoweza kuongeza maambukizi ya virusi nchini.

ii. Je, Matatizo gani yanayomkabili mtu aliye katika mazingira hatarishi katika kupata huduma za UKIMWI?

iii. Nani na kwa namna gani serikali, mashirika yasiyo ya kiserikali na taasisi anachangia/zinavyochangia katika upatikanaji wa huduma mbovu au bora za UKIMWI kwa wote.

iv. Je, mtu anapogundua amenyimwa huduma za UKIMWI zinazokubalika kimataifa afanye nini kuepuka kuchochea maambukizi mapya ya virusi?

v. Je, kuna njia yoyote ya kisheria inayomlinda mtu asinyimwe kupata huduma za UKIMWI na kama kuna uwezekano wa utekelezaji wa sheria hizo.

vi. Je, taifa linaweza kunufaika vipi kiuchumi na kijamii kama watu walio katika mazingira hatarishi watapata huduma zote kwa urahisi bila unyanyapaa au ubaguzi?

vii. **8.0 KUNDI LENGWA:** Shindano lipo wazi kwa waandishi wote wa habari na makala maalum wa Tanzania kutoka vyombo vyote vya habari. Ni vyombo vya habari vya Kitanzania tu vinaruhusiwa kushiriki na waandishi watakaoleta kazi zao lazima wawe wnafanya kazi katika vyombo vya Tanzania.

**9.0 MUDA:** Shindano litaendelea kwa miezi mitatu (kuanzia Agosti 18 hadi Novemba 18, 2011).

**10.0 MASHARITI NA VIGezo:** Yafuatayo ni masharti na vigezo vya ushiriki.

i. Waandishi wanaopenda kushiriki katika shindano ni lazima wawe wanaiishi na kufanya kazi nchini Tanzania.

ii. Makala/habari na programu zitaka-

zowasilishwa lazima zilenge makundi yaliyomo katika mazingira hatarishi zaidi Tanzania.

iii. Kazi zitakazowasilishwa lazima zionyeshe ubunifu na si zilionakiliwa kutoka machapisho mengine. Ziwe zimetangazwa au kuchapishwa katika kipindi cha miezi mitatu ya shindano, yaani kutoka Agosti 18 mpaka Novemba 18, 2011.

iv. Ziwe zimechapishwa au kutangazwa kwenye magazeti, majarida, runinga au redio.

v. Zinaweza kuchapishwa au kutangazwa kwa lugha ya Kiingereza au Kiswahili.

vi. Kazi halisi tu zitakubaliwa.

vii. Tarehe ya mwisho ya kuwasilisha itakuwa Novemba 22, 2011.

viii. Zawadi za fedha taslimu kuanzia 300,000/= hadi 700,000/= zitatolewa kwa washindi 15 wa kwanza watakoachaguliwa na jopo la majaji kutoka wadau mbalimbali Siku ya Ukimwi Duniani. Waandishi wote watakaoshiriki watapewa vyeti vya ushiriki.

**11.0 UWASILISHAJI:** Washiriki wanaohusika kuwasilisha hadi makala/vipindi/machapisho matatu kwa ajili ya shindano na kupeleka kwa anuwani zifuatazo:

i. AJAAT Media Writing Competition-2011, Bahari Motors Building, Plot No. 43, Kameroun Street, Kijitonyama, S.L.P 33237, Simu 0713 640520/0786 300219, DAR ES SALAAM-TANZANIA

ii. Bi. Jovina Bujulu, MAELEZO/ Information Auditorium Services Centre, Samora, Avenue, DAR ES SALAAM, TANZANIA

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