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5 key words:

Namibia  
CHW  
Results  
Communities  
Close Out

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## AIDSTAR-Two Project Trip Report

### Brief Summary of Trip

Teri Brezner traveled to Namibia to conduct the final closeout activities and conduct a results meeting in each of the two communities (Onderombapa and Rosh Pinah). Major stakeholders attended the meetings in both communities and impact stories were presented by the community health workers, local clinic nurses and community members. The future sustainability of the Centership activities in Onderombapa is dependent on additional funding for the local NGO CoHeNa to provide ongoing support. In Rosh Pinah, a public-private-partnership agreement has secured funding for CHW stipends for the period of one additional year. The CHWs have also been trained on how to maintain and manage a community garden. The produce of this garden is expected to provide a small livelihood income to each of the CHWs within 4 -6 months. AIDSTAR-Two funding for this activity will end in September. AIDSTAR-Two recommends that the mission continue funding a local NGO like CoHeNa to provide guidance and support for the Centership program for future sustainability following the closeout of AIDSTAR-Two project.

### Five Key Words

Please include the **five key words** that should be used to label this trip report in Institutional Memory and IM/DEC (for example, common key words include: HIV/AIDS, AIDSTAR-Two, USAID, Country trip took place, TWG sponsoring activity) :

1. *Centerships*
2. *Community Health Workers*
3. *Namibia*
4. *USAID*
5. *Income Generating Activity*

### 1. Scope of Work:

Destination and Client(s)/ Partner(s)	Namibia
Traveler(s) Name, Role	Teri Brezner - Project Officer, AIDSTAR-Two
Date of travel on Trip	August 9 – 22, 2013
Purpose of trip	The purpose of this trip was to carry out close out activities for the project, including conducting a results meeting in each of the two communities.
Objectives/Activities/ Deliverables	<ul style="list-style-type: none"> <li>- Conduct results meeting in each of the two communities.</li> <li>- Review sustainability activities in both communities and discuss and coordinate continued support with local partners.</li> <li>- Review health information and collection processes in both community and provide guidance and support for improving data collection.</li> <li>- Meet with Community Health Workers and local clinics in both communities to discuss current work and identify additional support needed.</li> <li>- Carry out general close out activities for the project with</li> </ul>

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	communities and with MSH Namibia.
Background/Context, if appropriate.	The AIDSTAR-Two project has been managing the Namibia Centership activity with field support funding from the USAIA Namibia mission since September 2011. This trip was the final TDY for AIDSTAR-Two as the AS-Two project is closing out in September 2013. The purpose of this trip was to present the final results of the Centership Activities in both communities and to perform the final close out activities.

**2. Major Trip Accomplishments:** Should include the major programmatic goals realized, relevant metrics, and stories of impact from the trip.

### Results Meeting in Onderombapa

- The results meeting was held on August 15<sup>th</sup> at the Centership building.
- Key stakeholders who attended included: the USAID mission director and program staff, the local clinic nurse, a representative from the MoHSS, the Executive Director, Field Promoter and Regional Director from CoHeN. All 17 CHWs and select members from the community also attended.
- Approximately 10 CHWs got up to give testimonies of their experiences and two community members shared stories about the impact CHWs had on their health.
- Susan Chira, the local clinic nurse described the following 3 impact stories from the Centership project and the involvement of CoHeNa.
  - o 1<sup>st</sup> Example: A child who had TB at age 9 and was turned away by his mother. A CHW found him and brought him to the clinic; he resumed his treatment and is now cured!
  - o 2<sup>nd</sup> Example: The CHWs found a 5 month old child who received no immunizations. They brought him into the clinic and provided health education to his mother. He has now completed all his immunizations up to 9 months and the mother is bringing him in regularly for check ups
  - o 3<sup>rd</sup> Example = During their home visit rounds the CHWs found a mother in labor who didn't want to go to the hospital. They spoke with her and explained the benefits of going to the clinic and escorted her there. She was eventually transferred to the hospital in Gobabis because there were complications. Six weeks later the mother has brought in the baby to the clinic to be immunized.
- Other results Susan Chira highlighted include:
  - o number of diarrhea cases has gone down significantly
  - o the community is working together to build communal toilets (currently none exist) due to the health education they received from the CHWs on health and hygiene
  - o The referral slip system MSH implemented during our last visits is being used and is working very effectively. The system has helped the CHWs to work more effectively as a team and has improved the caseload for Susan.
  - o Susan Chira credited the majority of the improvements to the involvement of CoHeNa
- The CHWs performed a role play on detecting a TB case. Rosalia Indongo from USAID said she had "Goosebumps" because the counseling and education they did in the role play was exactly how it should be done.
- Dr Cordelia Simbisai Zvavamwe PhD, provided an overview of the partnership between AIDSTAR-Two/Centerships and CoHeNa. Their involvement has made a remarkable difference in the performance and retention of the CHWs.

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- Both Ida and Rosalia from USAID were impressed with the results shared by the CHWs, the nurse and community members and indicated that they would provide additional funding to the community through a new mechanism following the closeout of the AIDSTAR-Two project.

### **Results Meeting in Rosh Pinah**

- The results meeting was held on August 19<sup>th</sup> at the OVC Center for Hope where the Centership Community Garden is located.
- Key stakeholders who attended the meeting included: the Acting USAID mission director and program staff, the MSH Acting Country Director, the local clinic nurse, a representative from the MoHSS, all 15 CHWs and significant number of community members.
- Each community health worker shared their experience of working as a CHW and the impact they had on the community. Many expressed their sincere gratitude for the garden and their plans for its future sustainability.
- Two community members give testimonies regarding the impact of the programs:
  - o First impact story: during one of their home visits, a group of CHWs discovered a young child who was disabled. They referred him to the clinic and he was connected with the Ministry of Social Services. He later received a grant from a foundation to fund his wheelchair and support for his family
  - o Second impact story: A mother had a child who was sick and was visited by a CHW. The CHW referred her to the clinic where her child received treatment. After a few days the symptoms of the child's illness had not subsided. The CHW returned to follow up on her referral. The mother was consoled by the CHW and referred to the clinic again. Thanks to this referral, the child was transferred to the hospital in Gobabis for additional treatment. The mother said the CHWs helped her to stay calm and answered her questions and if it weren't for them she may not have gone to the clinic to save her child's life.
- Sister Karrol, the local clinic nurse highlighted the impact of the CHWs in the community and how the data that they collect month to month has shown that certain health issues like diarrhea are decreasing thanks to the education the CHWs are providing to the community.
- Emmanuel, the trainer for the community garden gave a presentation on the garden and discussed the results of the training he provided. All CHWs passed their exam and in only a week were able to see the germination of the first seeds they planted. The garden is expected to yield a monthly income of \$500 N for each of the CHWs. Many of the seeds have begun to germinate and the first produce should be ready for distribution by the end of September.

### **Future Sustainability**

- The public private partnership for Rosh Pinah has been finalized and signed by each of the partners including, the MoHSS, USAID, MSH, RoshSkor and the Centership Committee President. The MoHSS will continue to provide new trainings for the CHWs on topics that they will in turn present to the community. RoshSkor will assume the payment of the stipends for the CHWs for the period of one year, at which point the agreement will be reevaluated.
- The community garden in Rosh Pinah is also expected to produce a sustainable income for each of the CHWs while also providing nutritious food for community members.
- In Onderombapa, CoHeNa helped implement a small income generating activity for the CHWs to farm goats. Thus far the herd has produced two kids. The CHWs will continue to manage the goat project and use the profit gained from the sale of the goats for their income and to fund future Centership activities. While the project is currently in good standing, the current drought in Namibia presents a potential challenge to the sustainability of the project.

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- Based on the results from the results meeting in Onderombapa, it was evident that the partnership with CoHena has made a significant impact on the success of the Centership project. CoHeNa lacks additional funding to support the Centership after the end of AIDSTAR-Two. Based on their performance and their proximity as a local NGO, AS-Two recommends additional funding for CoHeNa to support the project.
- Both project sites have made significant progress in the last year and have the potential to become fully sustainable with additional technical support to build their capacity in relation to their respective livelihood projects.
- In 2015, the Namibian Ministry of Health will roll out the Health Extension Worker program. The CHWs in both communities are currently trained and well positioned to compete for these positions. Additional funding and support to help maintain their current skills and build their capacity in community health could further advance their potential to fill these positions in the near future once the program has rolled out to their region.
- USAID expressed their interest to provide additional technical support to the Centerships following the close out of AIDSTAR-Two.

### **3. Next steps:** Key actions to continue and/or complete work from trip.

Description of task	Responsible staff	Due date
Procure irrigation drip for community garden in Rosh Pinah	Teri Brezner	September 15 <sup>th</sup>
Provide copies of signed PPP to all partners	Teri Brezner	September 6 <sup>th</sup>
Final report	Teri Brezner	September 6 <sup>th</sup>
4 page Summary of Project Results	Teri Brezner	October 3rd

### **4. Contacts:** List key individuals contacted during your trip, including the contacts' organization, all contact information, and brief notes on interactions with the person.

Name	Contact info	Home organization	Notes
Mr. Haufiku (National MOHSS)	dhaufiku@mhss.gov.na	MOHSS	Meet for out brief meeting on August.20 <sup>th</sup> 2013
Evans Sagwa (MSH)	esagwa@msh.org	MSH Namibia	Attended our in brief meeting with USAID August 12, 2013, attended Rosh Pinah Results meeting on Aug. 19, 2013
Barry Primm, Mission Director	bprimm@usaid.gov	USAID Namibia	Attended our in brief meeting with USAID August 12, 2013, attended Onderombapa Results Meeting on August 15, 2013 & Rosh Pinah Results meeting on Aug. 19, 2013
Rosalia Indongo TB/HIV advisor	<a href="mailto:rindongo@usaid.gov">rindongo@usaid.gov</a>	USAID Namibia	Attended our in brief meeting with USAID August 12, 2013, attended Onderombapa Results Meeting on August 15, 2013
Ida Lamperth - Technical Program Assistant	61-273752	USAID Namibia	Attended our in brief meeting with USAID August 12, 2013, attended Onderombapa Results meeting on August 15, 2013 & Rosh Pinah Results meeting on Aug. 19, 2013

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			and USAID out briefing on August 20, 2013
Susan Chira - Local clinic nurse, Onderombapa	81-3629285	MOHSS, Onderombapa Clinic	Met on Aug. 14 to discuss status and activity of CHWs in Onderombapa. Attended Onderombapa Results meeting on August 15, 2013
Dr Cordelia Simbisai Zvavamwe PhD - Executive Director	Email: cordelia@iway.na Phone: 264 61 237908/9 Mobile: 264 81 280 2516	CoHeNa	Meet on Aug. 12 to discuss results of CoHeNa's work to revitalize Centership CHWs in Onderombapa. Attended the Results meeting in Onderombapa on August 15, 2013
Sister Karrol - Local Clinic Nurse, Rosh Pinah	81 305 8682	MOHSS, Rosh Pinah Clinic	Met on Aug. 17th to discuss project status. Attended Rosh Pinah Results meeting on Aug. 19, 2013
Stefan Saayman - RoshSkor Manager	81 239 1208	RoshSkor	Met on Aug. 16 to discuss PPP transition for the next year.
Davies M. Nkalamo	nkalamod@mweb.co m.na	MoHSS	Attended Rosh Pinah Results meeting on Aug. 19, 2013 as MoHSS representative

**5. Description of Relevant Documents / Addendums:** Give the document's file name, a brief description of the relevant document's value to other staff, as well as the document's location in eRooms or the MSH network. Examples could include finalized products and/or formal presentations, TraiNet Participant List, Participant Contact sheet, and Meeting/Workshop Participant Evaluation form are examples of relevant documents.

File name	Description of file	Location of file
Results Meeting Agenda - Onderombapa	Final agenda for Results Meeting that took place in Onderombapa on August 15th	P Drive
Results Meeting Agenda – Rosh Pinah	Final agenda for Results Meeting that took place in Rosh Pinah on August 19th	P Drive
Fully Executed PPP	Public Private Partnership Agreement between USAID, MoHSS, RoshSkor, Centership CHWs	P Drive

**MEMORANDUM OF UNDERSTANDING**

**Between**

**THE GOVERNMENT OF THE REPUBLIC OF NAMIBIA  
MINISTRY OF HEALTH AND SOCIAL SERVICES - THROUGH THE  
KARAS REGIONAL HEALTH DIRECTORATE**

Herein represented by Mr. Andrew Ndishishi in his capacity as **Permanent Secretary  
of the Ministry of Health and Social Services (“MoHSS”)**,  
being duly authorized hereto

**And**

**UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT**

Herein represented by Mr. Barry Trimm, as the **Acting Mission Director of the  
United States Agency of International Development (“USAID”)**,  
being dully authorized hereto

**and**

**ROSHSKOR TOWNSHIP (PTY) LTD**

Herein represented by Mr. SN Saayman as the **RoshSkor Manager,**  
Being duly authorized thereto

**And**

**THE ROSH PINAH COMMUNITY HEALTH WORKERS**

Herein represented by Nyambe Erison, **Centership Committee President**  
Being duly authorized thereto

**On**

**PILOTING OF THE CENTERSHIPS PROJECT IN THE TUTUNGENI COMMUNITY  
OUTSIDE OF ROSH PINAH**

**(Hereinafter referred to jointly as “Parties”)**

## **PREAMBLE**

The Ministry of Health and Social Services (hereinafter referred to as MoHSS) of the Republic of Namibia through the Karas Regional Health Directorate – Tutungeni Clinic; and United States Agency for International Development (hereinafter referred to as USAID); Management Sciences for Health (hereinafter referred to as MSH); Rosh Pinah Community Health Workers (hereinafter referred to as CHWs); and RoshSkor; hereinafter jointly referred to as the “Parties” and in singular as a “Party”;

**RECOGNIZING** the significance and importance of cooperation between parties in promoting community health;

**DESIROUS** to enter into a Public Private Partnership (PPP) venture through this Memorandum of Understanding (MoU);

**CONSCIOUS** of the desirability of promoting to the greatest possible extent the health of Tutungeni community, by means of a friendly co-operation between them;

**CONSIDERING** the unique contributions that each Party can make in strengthening and promoting community health in Tutungeni as covered in this Memorandum of Understanding (MoU);

**NOW THEREFORE, “the Parties”**, have reached the following understanding:

### **ARTICLE 1: DEFINITIONS**

For this MoU, the following terms are defined as follows:

- a) **“Community Health Workers (“CHWs)”** refers to individuals affiliated with Centership community health activities in Rosh Pinah, who have been trained in health data collection.
- b) **“Presentation”** refers to a health presentation on the topic selected for that quarter. Health presentations that are not on the selected topic are not eligible for stipends. To be considered eligible for stipends, the presentation must have documented proof that at least 10 community members attended the presentation. 2-3 community health workers will lead each of whom is eligible for receiving stipends.

## **ARTICLE 2: GENERAL PROVISIONS**

### **2.1 PURPOSE**

The Purpose of this Agreement is:

- 2.1.1 To outline the responsibilities and expectations of each party as they relate to the implementation of a pilot Centerships Project in Tutungeni community by the CHWs;

### **2.2 SCOPE**

- 2.2.1 The Parties undertake and bind themselves to cooperate in good faith, in order to facilitate the implementation of this Agreement in a purposeful and meaningful manner.
- 2.2.2 The Parties undertake to jointly pilot the implementation of a Centerships Project in Tutungeni Community through the CWHs who serve as a link between the community and the clinic.

## **ARTICLE 3: PROJECT AREAS OF COOPERATION**

3.1 The Project determined in this document will entail the following:

- 3.1.1 Providing health education to community members;
- 3.1.2 Referring urgent cases to Tutungeni/Rosh Pinah clinic;
- 3.1.3 Collecting important health information on the health needs and challenges within Tutungeni community;
- 3.1.4 Selecting and training of community health workers.

## **ARTICLE 4: CONTRIBUTIONS AND OBLIGATIONS OF THE PARTIES**

- 4.1 **Obligations of MoHSS through Karas Regional Health Directorate and Tutungeni/Rosh Pinah clinic**

**Karas Regional Health Directorate shall:**

- Collaborate with CHWs, and RoshSkor to identify appropriate topics for community health workshops;
- Provide training to CHWs on a new topic each quarter, or coordinate with other partners to provide training on the chosen topic. and
- Attend quarterly partner meetings.

**Tutungeni clinic/Rosh Pinah Clinic shall:**

- Provide local support to the CHWs activities, including encouraging and validating health information data, and answering questions that arise during CHWs activities;
- Follow up on community members with health issues reported by CHWs and periodically accompany CHWs to visit families with reported health risks;
- Collaborate with CHWs, District, Karas Regional Health Directorate and RoshSkor to identify appropriate topics for community health workshops; and
- Attend quarterly partner meetings.
- Upon completion of AIDSTAR-Two involvement in August 2013 assume responsibility for the overall coordination of the project;

**4.2 Obligations of USAID**

**USAID Namibia would have by the time of signing this agreement:**

- Provided funding through the AIDSTAR-Two mechanism for the regular project operating costs and stipends during the six month proof of concept phase; and
- Provided technical support and resources to sustain the implementation of the Centerships Project.

**4.3 Obligation of MSH, through the AIDSTAR-Two Project**

**MSH through the AIDSTAR-Two Project would have by the time of signing this agreement:**

- Provided overall coordination of the project during initial "Proof of Concept" period **November 2012-August 2013**.
- Provided stipends to CHWs, contingent upon successful data collection and presentation completion. The details of this stipend can be found in the honorarium letter provided to each CHW;
- Funded the initiative during the initial "Proof of Concept" period.
- Attended monthly partner meetings by local coordinator.

#### **4.4 Obligations of the CHWs**

##### **CHWs shall:**

- Provide health education and collect monthly health information at the household level from the Tutungeni community and submit this information to Tutungeni clinic;
- Attend trainings provided by MoHSS and other partners;
- Collaborate with Tutungeni Clinic/Rosh Pinah Clinic, District, Karas Regional Health Directorate and RoshSkor to identify appropriate topics for community health workshops;
- Conduct 1-4 workshops in the community per quarter, based on the training received from the MoHSS or other partners;
- Report on workshops to the local coordinator, and provide record of attendees from each workshop; and
- Attend quarterly partner meetings.

#### **4.5 Obligations of RoshSkor**

##### **RoshSkor shall:**

- Provide space for CHWs' meetings and trainings;
- Coordinate with local coordinator and MoHSS on training times and dates;

- Collaborate with CHWs, Health District Office, Karas Regional Health Directorate, and Tutungeni/Rosh Pinah clinic to identify appropriate topics for community health workshops;
- Upon completion of AIDSTAR-Two involvement in August 2013 assume responsibility for the funding of stipends for presentations for one year, ending August 2014. Further possible financial support will have to be negotiated by all the involved parties at that time.
- Attend quarterly partner meetings.

## **ARTICLE 5: ADMINISTRATIVE ARRANGEMENTS**

- 5.1 In order to facilitate the smooth and uninterrupted implementation of this Agreement, the Representatives of the Parties shall liaise, meet and use their best endeavors to co-ordinate, negotiate and agree on all operational and organizational aspects arising under or in connection with this Agreement.
- 5.2 The Representatives shall discuss and resolve, within the framework and spirit of this Agreement, any issues, queries or complaints by the Parties.
- 5.3 The Representatives shall keep Minutes of their meetings, which shall be adopted and initialed at each meeting between the Parties.
- 5.4 **Preconditions:** The Project will be implemented according to the stages of the financing decisions set up and taken by the Parties.
- 5.5 **Governing law:** This Agreement shall be governed by the laws of the Republic of Namibia.

## **ARTICLE 6: IMPLEMENTATION MECHANISMS OF THE CENTERSHIPS PROJECT**

### **6.1 The Partners Meeting**

- 6.1.1 The Parties commit themselves to co-share the implementation of the Centerships Project's activities through the Partners Meeting.
- 6.1.2 The Partners Meeting, shall comprise of the all the parties namely MoHSS Karas Regional Health Directorate, Health District Office, Tutungeni clinic, Rosh Pinah CHWs and RoshSkor.



- 6.1.3 The Chair to the Partners Meeting will be the Karas Regional Health Directorate
- 6.1.4 The Partners Meeting shall be conducted on quarterly basis and whenever a need arise.
- 6.1.5 The Partners Meeting, shall specifically:
- 6.1.5.1 Produce a detailed Plan of Action of the Centerships Project.
  - 6.1.5.2 Discuss and resolve all upcoming issues during the implementation period.

## **6.2 Payment Instructions**

- 6.2.1 All payments regarding the implementation of the Centerships Project during the proof of concept period shall be processed by USAID through MSH.
- 6.2.2 Funding for the stipend should cover the following expenses:
- 6.2.2.1 CHWs stipends;
  - 6.2.2.2 Materials and refreshments for trainings and workshops;
  - 6.2.2.3 Provisions and materials for the CHWs' office;
  - 6.2.2.4 Salary for a local coordinator based in Rosh Pinah;
  - 6.2.2.5 Funding covers accommodation and food in Rosh Pinah for the MoHSS regional trainer up to two nights/3 days per quarter;
  - 6.2.2.6 Funding does **Not** cover salaries, or other expenses incurred by persons affiliated by other partners engaged in this initiative;

## **ARTICLE 7: DOMICILLIUM CITANDI ET EXECUTANDI**

- 7.1 For the implementation of the present Agreement, the Parties may be notified at the following addresses:
- 7.1.1 The Ministry chooses as Domicilium Citandi et Executandi the following address:

**The Permanent Secretary  
Ministry of Health and Social Services  
Harvey Street**



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Private Bag 13198  
Windhoek  
Telephone Number: + 264 - 61 -2032019/20  
Fax: + 264 – 61 - 304145  
E-mail: [andishishi@mhss.gov.na](mailto:andishishi@mhss.gov.na)

7.1.2 USAID chooses as Domicilium Citandi et Executandi the following address:

Acting Mission Director  
USAID  
Private Bag 12028  
Ausspannplatz  
Tel: +264 61 273700  
Fax: +264 61 227006  
Email: [btrimm@usaid.gov](mailto:btrimm@usaid.gov)

7.1.3 RoshSkor chooses as Domicilium Citandi et Executandi the following address:

The RoshSkor Manager  
PO Box 40  
Rosh Pinah  
Tel: +264 63 290072  
e-mail: [Stefan.saayman@roshskor.com.na](mailto:Stefan.saayman@roshskor.com.na)

7.1.4 Rosh Pinah CHW's choose as Domicilium Citandi et Executandi the following address:

XXXXXXXXXXXXXXXXXXXXX

XXXXXXXXXXXXXXXXXXXXX

## ARTICLE 8: CONFIDENTIALITY

The Parties undertake to keep confidential any document or information exchanged or otherwise comes into their possession in the course of implementation of this Agreement, and shall not disclose in whole or part any information to a third party, without prior written consent of the other Parties.

**ARTICLE 9: DISPUTE RESOLUTION**

- 9.1 Any dispute arising from the interpretation and implementation of this Agreement shall be resolved amicably through negotiation and consultation between the Parties.
- 9.2 Should the Parties fail to resolve the dispute through negotiation and consultation, either Party will be entitled to require, by written notice to the other, that the dispute be submitted for mediation in accordance with Namibian laws.
- 9.3 The Parties agree that the outcome of such arbitration shall be final and binding.

**ARTICLE 10: COMMENCEMENT OR ENTRY INTO FORCE AND DURATION**

- 10.1 This Agreement shall commence or enter into force on the date of its signature by the Parties.
- 10.2 This Agreement shall remain in force for a **period of one year**.

**ARTICLE 11: TERMINATION**

This Agreement may be terminated by any of the Parties, by giving not less than six (6) months written notice to the other Parties, at least three (3) months prior to the date of the expiration of the Project.

**IN WITNESS WHEREOF**, the undersigned representatives, duly authorized thereto, have signed this Agreement, in quadruplicate (four originals) in the English language, each Party hereto retaining its originals.

**THUS, done** and signed at **Windhoek** on the ..... day of .....2013

pp   
 .....

**1. Mr. Andrew Ndishishi**  
**Permanent Secretary**

**For Ministry of Health & Social Services**

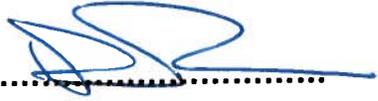
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**WITNESS**  
**Karas Regional Health**  
**Director**

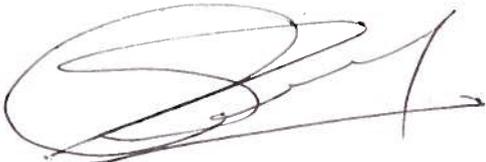




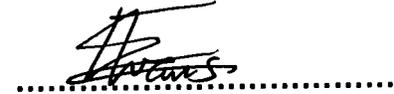
**2. Mr. Barry Primm**  
**Acting Mission Director**  
**For United States Agency for**  
**International Development**



**1. WITNESS**  
**MSH**



**3. Mr/Ms Stefan Saayman**  
**Manager For Roshkor**



**2. WITNESS**



**4. Mr. Nyambe Erison**  
**For Rosh Pinah CHW's**

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**3. WITNESS**



**4. WITNESS**