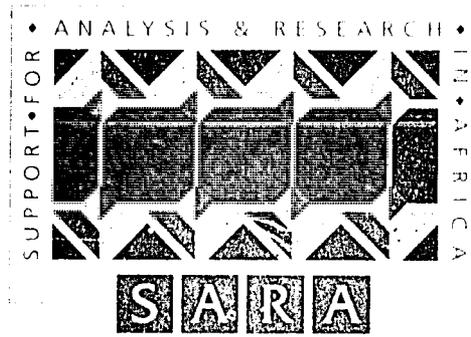


- PN-ABS-462 ism 89974



SOUTIEN POUR
L'ANALYSE ET LA RECHERCHE
EN AFRIQUE

Needs Assessment for the Organization of the AFR/ARTS Proposed Consensus Workshop on the Prevention and Control of Malaria in Africa

*Dar es Salaam and Arusha, Tanzania
Nairobi, Kenya*

June 4-11, 1994

**Sambe Duale, MD, MPH
Research Manager, SARA Project
Tulane University**



The SARA Project is operated by the Academy for Educational Development with subcontractors Tulane University, JHPIEGO, Macro International, Morehouse School of Medicine, Population Reference Bureau, and Porter Novelli. SARA is funded by the U.S. Agency for International Development (AFR / ARTS / HHR) under Contract number ACF-0483-C-2178-00 (Project number 698-0483).

PW-ABS-462

ISSN 89911

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Abbreviations

AFR/ARTS	Office of Analysis, Research, and Technical Support of the Bureau for Africa
CRHCS	Commonwealth Regional Health Community Secretariat
ESA	Eastern and Southern Africa
ESARO	Eastern and Southern African Regional Office
ECSA	East, Central and Southern Africa
ESAMI	Eastern and Southern African Management Institute
HHRAA	Health and Human Resource Analysis for Africa
IIMN	Insecticide-Impregnated Mosquito Nets
IPH	Institute of Public Health
JICA	Japan International Cooperation Agency
MOH	Ministry of Health
NIMR	National Institute of Medical Research
REDSO	Regional Economic Development Service Office
RHRP	Reproductive Health Research Program
SARA	Support for Analysis and Research in Africa
STIFL	Swiss Tropical Institute Field Laboratory
WHO	World Health Organization

Executive Summary

This report presents the outcomes of my trip to Dar es Salaam and Arusha, Tanzania, and Nairobi, Kenya, June 4–11, 1994. The main purpose of the trip was to assess the technical and logistical needs for the AFR/ARTS proposed consensus workshop on malaria control in Africa which has been tentatively scheduled September 26-29, 1994, in Dar es Salaam, Tanzania.

Because of limitations in meeting and accommodation facilities, especially the lack of service to provide simultaneous English–French translation, this report proposes that Dar es Salaam should not be considered for as a venue to organize an Africa-wide meeting on malaria prevention and control in Africa. The report suggests that it is still possible to organize a small, focused meeting to discuss the role of insecticide-impregnated mosquito nets as an intervention for malaria prevention. Such a meeting should present an opportunity for the dissemination of the findings of the Bagamoyo Bednet Project to Tanzanian officials, program managers, and researchers, in the presence of a limited number of outside experts working on IIMN in other regions and countries. The Institute of Public Health of the Muhimbili Medical College should be able to host such a meeting.

The report presents also the outcomes of my visit and discussion in Arusha with the Commonwealth Regional Health Community Secretariat for East, Central, and Southern Africa, and the Eastern and Southern African Management Institute about the ongoing and/or potential collaboration between SARA and these two African institutions.

Finally, the report discusses my contact with the Regional Office for East and Southern Africa of UNICEF and the USAID Mission in Kenya about potential collaboration for the organization of the consensus workshop on malaria control in Africa.

I. Purpose and Objectives of the Trip

The Office of Analysis, Research, and Technical Support of the U.S. Agency for International Development's Bureau for Africa (AFR/ARTS) has proposed to organize a "Consensus Workshop on the Prevention and Control of Malaria in Africa", especially to review the available research findings on the use of insecticide-impregnated mosquito nets. AFR/ARTS has requested that the Support for Analysis and Research in Africa (SARA) contractor assist with the planning and organization of the proposed workshop. The purpose of this trip was to assess the technical and logistical needs for organizing the consensus workshop in Dar es Salaam. The trip also took me to Arusha, Tanzania, to discuss collaborative activities between SARA and the Commonwealth Regional Health Community Secretariat for East, Central, and Southern Africa (CRHCS/ECSA). I passed through Nairobi to discuss potential collaborative efforts for the malaria workshop with the REDSO and USAID Missions in Kenya and with the UNICEF/ESARO.

The main objectives of the trip to Dar es Salaam, Tanzania, were

- ◆ To seek clearance from the Ministry of Health of the Tanzania Government for the organization of the workshop;
- ◆ To confirm the clearance from the USAID Mission in Tanzania for the organization of the workshop;
- ◆ To identify a local collaborating institution to coordinate the preparation and organization of the workshop with SARA/Tulane;
- ◆ To assess and identify a workshop site, taking into consideration the following elements:
 - ◆ lodging for participants (availability, rate);
 - ◆ meeting rooms: plenary, small working-group rooms;
 - ◆ meals;
 - ◆ audio-visual and didactic materials;
 - ◆ local transportation;
 - ◆ secretariat support;
 - ◆ modes of payment for services;
 - ◆ bilingual English-French translation;
 - ◆ communications—phones, fax, telex; and
 - ◆ transport options in and out of Dar es Salaam.

II. Visit to Dar es Salaam, Tanzania

A. USAID Mission

I met with Dale Pfeiffer, Mission Director, and Dana Vogel, Population Officer, to discuss the proposed malaria consensus workshop. I understand from our discussion that the Mission has offered clearance for a small focused workshop where experts will review and discuss the available research findings on insecticide-impregnated mosquito nets (IIMNs) from the Bagamoyo Bednet project and other research programs elsewhere in Africa, and make some practical recommendations to guide IIMN programs. One area of interest is the potential role that social marketing can play to increase and improve use of IIMN. Malaria is just one of the myriad of health problems that Tanzania faces. USAID has chosen to concentrate its resources mainly in Family Planning and HIV/AIDS prevention and control. The Mission will be interested in the findings of the CRHCS and SARA collaborative study on the magnitude and consequences of induced abortion and contraceptive use in ECSA.

The Mission is not in favor of a broader regional malaria meeting being held in Dar es Salaam. If the workshop agenda is broadened to include other malaria-control interventions besides IIMN, the Mission strongly recommends that AFR/ARTS consider another venue such as Arusha, Nairobi, or Lilongwe which have more facilities to host such regional conference.

The Mission has cautioned about the potential logistical challenges that one might face in organizing a regional conference in Dar es Salaam. The Mission is not in a position to provide any logistical support. The Institute of Public Health, which SARA/Tulane is considering to handle the logistics in Dar es Salaam, might need to hire a travel agency for support. The cost for logistics should be weighed carefully.

B. Ministry of Health

Prof. J. Minjas took me to the Ministry of Health to meet with Mr. Rogatian M. Shirima, Principal Secretary of the MOH, and Prof. Idris A. Mtulia, Chief Medical Officer of the MOH.

The Principal Secretary pointed out that malaria is one of the Government's top public health priorities, and the MOH would welcome a malaria meeting aimed at providing governments, private institutions, and the community with relevant and new information on how to tackle the malaria problem in Africa. The MOH accepts the proposal that a Consensus Workshop on Malaria Prevention and Control in Africa be organized in Tanzania. But the Principal Secretary cautioned that the organizers of the workshop should not expect financial support from the MOH

because the Ministry had undergone a large budget cut of about 40 percent. The MOH, however, offers clearance and political support for the meeting.

The MOH would prefer a meeting that brings together all the players in the malaria research and intervention programs in Tanzania to share their information and lessons learned. The Principal Secretary would like the researchers from the Bagamoyo Bednet Project (funded by USAID), the Malaria Vaccine Trial Project (NIMR/WHO), the Dar es Salaam Malaria Control Project (funded by JICA), the Bednet Project (UNICEF), and other projects to get together periodically to share their findings and to make recommendations for improving malaria prevention and control in Tanzania.

The Principal Secretary supports the idea of having the Institute of Public Health of the Muhimbili Medical College be the local organizing institution for the proposed malaria workshop.

In the event that the organizers decide to hold the regional workshop somewhere else, the MOH will authorize Tanzanian participants to attend, provided that the organizers are funding their participation.

C. Institute of Public Health, Muhimbili Medical College

The preparation and organization of the workshop requires that a local institution and/or individuals be hired to provide a number of technical and logistical services. Prof. J. Minjas heads a team at the IPH that has run active malaria research and control programs, including the USAID-funded Bagamoyo Bednet Project. Dr. Clive Shiff has contacted the team and it is willing to offer the services required to support the workshop.

1. Draft Scope of Work

I have reviewed the following draft scope of work with Prof. Minjas. The local coordinating/organizing institution should

1. Act as the collaborating institution and liaison between SARA/Tulane and all local officials and institutions in support of the workshop, especially all the necessary protocol to clear and secure the Government of Tanzania's support for the workshop.
2. Contribute to the agenda setting and the identification of presenters/speakers and participants.
3. Assure the liaison between SARA/Tulane and the management of the workshop site to make and secure all the necessary arrangements for lodging, meeting rooms, and all other needs for a successful conference.

Institute of Public Health

4. Provide secretarial support for the workshop.
5. Make arrangements for local transportation and field visits to Bagamoyo Bednet Project sites.
6. Assist participants with travel arrangements.
7. Provide the necessary assistance for visa and emergency healthcare needs of participants if required.
8. Prepare and submit a financial report.

2. Level of effort

The IPH will be able to provide the support services listed above. The Institute may experience some difficulties with tasks 6 and 7. Prof. J. Minjas will be the main contact at the Institute of Public Health, Muhimbili Medical College. IPH has proposed the following level of effort and estimated costs:

1.	Personnel (Prof. Minjas, Dr. Premji, & Mr. Rwegasira) 25 person-days x \$ 240 =	\$ 6,000
2.	Secretarial support (Secretary and a clerk) 20 person-days x \$ 50 =	\$ 1,000
3.	Communications (Fax, DHL, Tel....)	\$ 1,000
4.	Office/workshop supplies	\$ 1,000
5.	Local transportation & field visit	\$ 7,000
	Subtotal	\$ 16,000
6.	Muhimbili Overhead (20%)	\$ 3,200
	TOTAL	\$ 19,200

3. Local participants

If the workshop is to be held in Dar es Salaam, Tanzania, the MOH and IPH would propose that the following individuals and institutions be invited to participate:

1. The Principal Secretary of the MOH
 2. The Director of Preventive Services of the MOH
 3. The Chief Medical Officer of the MOH
-

Potential Workshop Sites

4. The Director of the National Institute of Medical Research
5. A scientist (epidemiologist or social scientist) from NIMR
6. The Principal of the Muhimbili University College
7. The Director of the IPH
8. An epidemiologist from the IPH
9. A social scientist from the IPH
10. A representative of the JICA-funded Dar es Salaam Malaria control project (a larvicide program)
11. A representative of the textiles industry
12. A representative of STIFL at Ifakera (malaria-vaccine trial)
13. A representative of the insecticide suppliers
14. A representative of UNICEF/Tanzania
15. A representative of WHO/Tanzania
16. Prof. Minjas, Bagamoyo Bednet Project
17. Dr. Premji, Bagamoyo Bednet Project
18. The Medical Officer of the Bagamoyo District
19. The Provincial Medical Officer of the Coastal Region
20. Mr. Ahmed Makemba, Bagamoyo Bednet Project
21. Mr. A. E. Temu, Bagamoyo Bednet Project

D. *Potential Workshop Sites*

Prof. Minjas, Dr. Premji, and I visited the following four potential workshop sites:

1. Kilimanjaro Hotel
2. AGIP Hotel
3. White Sands Hotel
4. Bahari Beach Hotel

Kilimanjaro and AGIP are two hotels located in downtown Dar es Salaam. The two hotels don't have appropriate meeting facilities.

White Sands and Bahari Beach are two beach hotels located about 30 minutes by car from downtown Dar es Salaam on the road to Bagamoyo. By car, the two hotels are about 10 minutes apart.

The Bahari Beach Hotel has most of its rooms booked for airline crews. It can only offer up to a maximum of 30 rooms to accommodate potential meeting participants. It can offer a group rate (more than 15 people) of \$70.00 per night including breakfast. This hotel has one small conference that can hold approximately 10 to 15 participants and is equipped with one overhead projector. If the workshop is held at the White Sands Hotel, Bahari can be used to accommodate a number of participants if required.

The White Sands Hotel is the only one among the four hotels visited that offered a number of meeting-support services such as a public-address system, slide projector, overhead projector, photocopier, computer, and printer. There is one large meeting room that can seat about 60 people and can also be split into two to three

CRHCS/ECSA—SARA Collaboration

meeting rooms of varying sizes. A workshop-secretariat space can also be arranged in one of the corners of the large conference room. The hotel can confirm the availability of about 30 rooms (single/double) at the rate of \$95 for the proposed workshop dates of September 26–30, 1994. If confirmation and a down payment in hard currency are made early, the hotel management will negotiate a discounted rate and try to free more rooms for the workshop.

None of the sites visited offers English-French translation services. Additional information on the Bahari Beach Hotel and the White Sands Hotel can be found in Annex 2.

E. WHO Representative in Tanzania

I made two attempts without success to meet with Dr. Dirk Warning, the WHO Representative in Tanzania, to inform him about the proposed consensus workshop on malaria prevention and control in Africa. The second attempt was even a confirmed appointment. I understood from the secretary that Dr. Warning was not available to discuss the proposed malaria workshop with me because he has not been informed about the workshop officially. He asked the secretary to advise me to discuss the matter with WHO/AFRO in Brazzaville.

III. Visit to Arusha, Tanzania

A. Overall CRHCS/ECSA—SARA collaboration

Since I was the first member of the SARA core staff to visit the CRHCS/ECSA, Prof. Nhonoli, Regional Secretary, and his collaborators took the opportunity to review and discuss briefly with me the following ongoing and planned CRHCS and SARA activities:

1. The implementation of the study on consequences of unsafe abortion: the study seems to be on the right track.
 2. The SARA support to CRHCS nutrition program: Ms Catherine Siandwazi, Coordinator of the Nutrition program, was on family leave. The program needs more capacity-building support activities in order to get it moving and visible.
 3. Information dissemination: CRHCS has scheduled a meeting on June 30, 1994 in Nairobi, to interview three candidates for the position of Assistant Coordinator. CRHCS would like SARA/HHRAA to be represented on the interview team. Mr. Richard Sturgis from REDSO/ESA has been approached to represent SARA/HHRAA on the interview team. The CRHCS is also getting ready for the information dissemination needs assessment to be conducted next month in collaboration with SARA.
-

Follow-up evaluation of Lilongwe Conference

Ms. R. M. Kakande, Coordinator of Nursing Affairs, asked if SARA and/or other funding institutions would be interested in supporting a research program that looks at how to use nurses and midwives better to improve reproductive health, especially the reduction of maternal mortality. This issue will be raised as part of the HHRAA/SARA discussions about human resource development for public health in Africa.

B. Follow-up evaluation of the Lilongwe Conference on Policy Implications of Reproductive Health Research Findings

The Thirteenth Meeting of the Steering Committee of the Reproductive Health Research Program (RHRP) of the CRHCS/ECSA stressed the need to include, in the RHRP Extension proposal, support for activities that will enable the program to monitor and evaluate the implementation of the Action Plans that have been formulated by the regional health community to improve reproductive health in ECSA.

Dr. W. Mpanzu-Shumbusho, Assistant Coordinator of Health Research, was designated as the point person to discuss with me the technical and logistical support that SARA can provide CRHCS in the area of monitoring and evaluating the impact of its activities, especially the follow-up evaluation of the Lilongwe conference. It has been decided that a starting point will be to conduct a survey of the conference participants. This survey can be conducted as part of the launching activities of the Information Dissemination Program. A draft questionnaire has been prepared for this purpose (Appendix 3). The CRHCS will finalize the questionnaire based on our discussion, and then let SARA know of additional technical and logistical needs to initiate and conduct the survey.

C. Eastern and Southern African Management Institute (ESAMI)

Ms. A.R. Kakande took me for a visit of the ESAMI Headquarters and I had the opportunity to meet with Mr. Grace Musoke-Lwanga, Deputy Director-General, and Mr. Bandali G. Batchu, Team Leader for Human Resource Management.

ESAMI's mandate is to provide management training, consultancy, and research to support public- and private-sector undertakings in its service area to improve performance effectiveness and efficiency. The ESAMI programs are designed to respond to identified needs for improving the knowledge, skills, and managerial behavior of policy makers and officers in government ministries and executives and managers in the parastatal and private-sector enterprises in the region. ESAMI addresses all the sectors of development, but the program in the health sector has been limited. ESAMI would like to do more in the health sector in collaboration with institutions such as the CRHCS/ECSA.

Visit to Nairobi, Kenya

ESAMI is an African regional institution that can potentially be used as a channel for dissemination of research findings. Research findings can be used in the development of programs aimed at policy makers and program managers in the public and private sectors. ESAMI has had some collaborative activities with USAID/REDSO/ESA in the past. I recommend that HHRAA/SARA explore possible collaboration with ESAMI in the effort to improve the use of research findings in development decision-making in Africa.

IV. Visit to Nairobi, Kenya

A. Contact with Regional Office of UNICEF/ESA

UNICEF is supporting a number of malaria-prevention and malaria-control activities in various African countries. I had contacted UNICEF to explore and discuss potential collaboration on the consensus workshop on malaria control in Africa.

I had a good discussion with Dr. Kopano Mukelabai, Regional Advisor for Primary Health Care, UNICEF Regional Office for East and Southern Africa (ESARO). UNICEF sponsored a malaria meeting in Arusha, Tanzania, May 23-25, 1994. The meeting participants consisted of malaria-program managers from Tanzania, Nigeria, Zambia, Uganda, Kenya, Comoros, Mozambique, Ghana, Swaziland, Burundi, Eritrea, Namibia, Malawi, Mauritania, and Ethiopia. Selected UNICEF staff from ESARO and Country Offices and representatives of WHO headquarters and WHO/AFRO attended the meeting. The use of insecticide-impregnated materials, drug policy for malaria, and malaria vaccine trials were among the topics discussed during the meeting.

Dr. Mukelabai provided me with a copy of the meeting agenda and the list of participants. He has promised to send me a copy of the meeting report as soon as it is produced. UNICEF would like to collaborate on the consensus workshop, but the proposed September 26-29, 1994, dates would not be appropriate since UNICEF just held their May malaria meeting. UNICEF is planning a follow-up meeting in Ndola, Zambia, sometime in April next year, and would consider combining that meeting with a USAID-sponsored malaria meeting if things can be worked out to sponsor a joint meeting in the first quarter of 1995.

B. Contact with USAID Mission and REDSO/ESA

All the interested staff at REDSO/ESA that I had planned to brief about my trip were on TDY. I had a telephone conversation with Mr. Gary Newton, HPN Officer at the USAID Mission in Kenya. He is aware of the proposed consensus workshop and has been thinking about attending. He will be on TDY in the Washington, D.C.,

area June 20–24, 1994. While in Washington, he would be glad to discuss malaria research programs with AFR/ARTS if a meeting can be arranged.

We discussed the possibility of Nairobi being an alternate site for the proposed consensus workshop on control malaria in Africa. The USAID Mission in Kenya can coordinate with REDSO/ESA to provide the necessary inputs in the planning and the organization of such a regional meeting. The Mission can help with getting clearance from the Kenyan Government. If Nairobi is considered for such a meeting, the Mission will advise the organizers to plan early and to have someone come to Nairobi to make all the necessary arrangements for accommodation and logistics. The USAID Mission cannot provide logistical support for such a meeting.

V. Conclusions and recommendations

The Tanzanian Ministry of Health and the USAID Mission in Tanzania (at a certain level) have hoped that the upcoming end of the Bagamoyo Bednet Project should provide an opportunity to review lessons learned from the project, to compare findings with experience from other IIMN projects, and to make some recommendations for the future of IIMN as a malaria-prevention tool in Africa.

Dar es Salaam has limited meeting and accommodation facilities. There is no service to provide a simultaneous English-French translation if one wants to organize a bilingual meeting. For the moment, Dar es Salaam will not be, logistically speaking, a suitable venue for a large bilingual regional meeting on malaria prevention and control in Africa. Another venue and other dates should be selected for the proposed consensus workshop on malaria prevention and control in Africa. In the process of setting the agenda and choosing the new dates and venue, AFR/ARTS should explore the possibility of sponsoring the meeting together with UNICEF/ESARO and WHO/AFRO.

If funds were available, a small, focused, English-only meeting on the role of IIMN should be organized in Dar es Salaam on the proposed dates of September 26-29, 1994, to provide the opportunity for the Bagamoyo Bednet Project investigators to share their findings with interested parties in Tanzania and some invited outside experts. The Institute of Public Health of the Muhimbili Medical College should be in a position to host such a meeting. The White Sands Hotel and/or the Bahari Beach Hotel would provide a good venue for such meeting if some outside experts are invited.

Appendix 1 List of contacts

1. Prof. N. Minjas
Co-Investigator, Bagamoyo Bednet Project

2. Dr. Zul Premji
Co-Investigator, Bagamoyo Bednet Project

Institute of Public Health
Muhimbili University College
P.O. Box 65011
Dar es Salaam

3. Mr. Dale Pfeiffer
Mission Director

4. Ms. Dana Vogel
Population Officer

USAID Mission in Tanzania
ATC Building
P.O. Box 9130
Dar es Salaam

5. Mr. Rogatian Shirima
Principal Secretary

6. Prof. Idris A. Mtulia
Chief Medical Officer

Ministry of Health
United Republic of Tanzania
P.O. Box 9083
Dar es Salaam

7. Prof. A. M. Nhonoli
Regional Secretary

8. Dr. W. Mpanju-Shumbusho
Assistant Coordinator of Health Research

9. Ms. R. M. Kakande
Coordinator of Nursing Affairs

10. Prof. Stephen N. Kinoti
Coordinator of Health Research

Commonwealth Regional Health Community Secretariat
for East, Central and Southern Africa
P.O. Box 1009
Arusha, Tanzania

List of contacts

11. Mr. G. Musoke-Lwanga
Deputy Director-General

12. Mr. B. G. Batchu
Team Leader, Human Resources Management

Eastern and Southern African Management Institute (ESAMI)
P.O. Box 3030
Arusha, Tanzania

13. Dr Kopano Mukelabai
Regional Advisor for PHC

UNICEF ESARO
P.O.Box 44145
Nairobi, Kenya

14. Mr. Gary Newton
Population Officer

USAID Mission in Kenya
P.O.Box 30261
Nairobi, Kenya

Hotel information

**Appendix 2 Information materials on White Sands Hotel and
Bahari Beach Hotel**



WHITE SANDS HOTEL LTD.

P.O. Box 3030, Dar es Salaam, Tanzania.
Tel: 255-51-44476/44498/35801/35825/35437
Telex: 41540 SEAROCK TZ, Fax: 255-51-44484

Dear Guest,

We wish to inform you that our room rates are as indicated below:

±87 Rooms

*50% deposit
for accommodation
costs*

NON RESIDENTS:-

DOUBLE	US.\$ 95
TWIN	US.\$ 95
TRIPLE	US.\$ 110
BABY COT	US.\$ 7

*Can confirm up to
30 Rooms*

RESIDENTS:-

DOUBLE	T.SHS. 25,000.00
TWIN	T.SHS. 25,000.00
TRIPLE	T.SHS. 35,000.00
BABY COT	T.SHS. 3,500.00

The above rates are inclusive of 20% Government levy, 5% service charge and continental breakfast. All rooms are carpeted with air condition, computerised music system, a T.V. with remote control, telephone, refrigerator, hot and cold shower.

CANCELLATION CHARGES:-

35% of accommodation rate per day will be charged for a cancellation made between 36 to 48 hours prior to booking date. While a rate of 75% will be charged for a cancellation made within 48 hours as a "NO SHOW FEE".

BOOKING AND CONFIRMATION:-

Please note that confirmed booking is one which has been paid for by a minimum of 50% of the projected bill as a DEPOSIT.

CHECK OUT TIME IS 12:00 NOON.

N.B. As a patron, the entire management and staff of White Sands Hotel are delighted to be at your service. We are determined to make your stay both memorable and enjoyable and hope that you will come back and visit us in future.

Thank you for staying with us.

M A N A G E M E N T.



WHITE SANDS HOTEL LTD

P.O. Box 3030, Dar es Salaam, Tanzania.

Tel: 255-51-44484/35801/35825/35952

Telex: 41540 SEAROCK TZ,

Fax: 255-51-39885/44476

CONFERENCE BANQUET FACILITIES RATE CARD

1.	HALL HIRE CHARGES	50,000/=	± 50 people
2.	SWIMMING POOL AREA	75,000/=	→
3.	OVER HEAD PROJECTOR	15,000/=	
4.	SLIDE PROJECTOR	15,000/=	
5.	PUBLIC ADDRESS SYSTEM	25,000/=	
6.	T V AND VIDEO	30,000/=	
7.	TEA/COFFEE (Light refreshments per person)	1,500/=	
8.	BUFFET LUNCH (with 2 NV DISHES)	6,000/=	

9. Secretariat Support (Computer, Printer, Xerox)

10. No Translation Facility

11. No Small meeting rooms, but Main Hall can be divided in Small Rooms

12. Coffee Breaks (10:00 AM, 4:00 PM) X
bundled in one package
9,000 per person

13. Secretariat space within
the main conference Hall





Bahari Beach Hotel Limited

A Bushtreker Hotel

P.O.Box 9312
Telephone: 47101,2
Telex: 41185
BAHARI TZ
Dar es Salaam
TANZANIA

No Credit Card Payment

ROOM TARIFF/WEDDING PACKAGE/LUNCH/DINNER A'LA CARTE PRICES CONFERENCE PACKAGE/COCKTAIL PARTY AND WEEKEND PACKAGE

NON RESIDENTS

Room Rate	US \$ 90	<i>\$ 70 for group of 15. ± 30 Rooms available max.</i>
Triple Room	US \$ 110	
Baby Cot	US \$ 5	
Extra Bed	US \$ 20	

RESIDENTS RATE

Room Rate	T. Shs. 20,000/=
Triple Room	" 25,000/=
Baby Cot	" 2,000/=
Extra Bed	" 5,000/=

CHILDREN RATE

Children under 3 years sharing parents room free of charge. Children from 4 years and above sharing parents room will be charged as a triple. But if an extra bed is required in a triple room then extra bed charge will be applicable.

PLEASE NOTE THAT THE ABOVE RATES INCLUDE :-

- Continental Breakfast
- Service Charge
- Government Tax

EXTRAS

- Flowers and Fruits	T. Shs. 1,800/=
- Refrigerator (if available)	" 2,500/=

BOOKING CONDITIONS

Booking shall be confirmed and guaranteed on deposit of T. Shs. 20,000/= per room. This amount is not refundable in case of NO-SHOW or CANCELLATION within 48 hours prior to the arrival date.

CHECK-OUT TIME

Please note that, the check-out time is 11.00 a.m. otherwise full room rate will be charged.

AGENT COMMISSION

10% commission is payable on room rate only. This commission shall be paid to bonafide Travel Agents and Tour Operators.

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GROUP RATE

For group, please contact General Manager or Duty Manager.
The above rates are subject to change without prior notice

LUNCH/DINNER/TEA/COFFEE/SNACKS/A'LA CARTE

FIXED

Lunch Per Person	TShs.3,710/=
Dinner Per Person	" 3,710/=
Tea/Coffee Snack(Sandwich/biscuits)	700/=
Snacks (Bittings)	" 2,100/=
A'la Carte Ranges	" 7,000/=

CONFERENCE USAGE

1) Pango Hall	TShs.40,000/=	<i>outside</i>
2) Conference	" 30,000/=	<i>15 people</i>

CONFERENCE PACKAGE

15% Discount is given for each room.

(Room Rate 17,870/= instead of 20,000/=).

A: Therefore, per person sharing double:-

- Accommodation	TShs. 8,935/=
- Breakfast	" 1,000/=
- AM/PM Coffee/Tea/Snacks	" 1,200/=
- Luncheon	" 3,300/=
- Dinner	" 3,300/=
- Conference Usage	" 1,000/=
	<u>13,735x2 = 37,470</u>

B: Single Occupancy :-

- Accommodation	" 17,870/=
- Breakfast	" 1,000/=
- AM/PM Tea/Coffee/Snacks	" 1,200/=
- Lunch	" 3,300/=
- Dinner	" 3,300/=
- Conference Usage	" 1,000/=
	<u>27,670/=</u>

Appendix 3 Draft questionnaire for the follow-up evaluation of the Conference on Policy Implications of Reproductive Health Research Findings in ECSA held August 17-19, 1993, in Lilongwe, Malawi.

An evaluation of the short-term impact of the Regional Conference on Policy Implications of Reproductive Health Research Findings in East, Central and Southern Africa

The Regional Conference on Policy Implications of Reproductive Health Findings in ECSA, held in Lilongwe, Malawi, in August 1993 aimed at promoting the translation of research results into policies, strategies, and programs for improved reproductive health in the region. The Commonwealth Regional Health Community Secretariat seeks your feedback on the conference and wants to learn about follow-up activities that you may have carried out. The CRHCS will use the information that you provide to guide its effort for collaborative work among member states to improve reproductive health in the region. Please complete the following questionnaire and return it to us within three weeks of the date of reception if possible. We thank you for your collaboration.

1. How relevant was the Conference to your work?
 very relevant
 somewhat relevant
 not relevant, but of personal interest
 neither relevant nor of personal interest
2. Which one of the three multi-centered studies provided the most important findings to you?
 Risk Factors for Maternal Mortality
 Patterns of Contraceptive Use and Health of Women
 Adolescent Reproductive Health Knowledge, Attitudes, and Practices

Comments:

3. Have you shared the information materials received at the conference with a wider audience?
 Yes No (go to # 5)

4. If yes, how have you done it? (check all that apply)

- Circulate and share materials with colleagues
- Photocopy additional copies for circulation
- Organize discussions/meetings/workshops
- Give the information materials to a library
- Other, specify _____

5. Have you received the booklet containing Action Plans to Improve Reproductive Health in the countries of ECSA? The plans were developed by the Regional Conference and were adopted by the 21st Conference of Regional Health Ministers held in Maseru, Lesotho, on November 15–20, 1993.

- Yes No

6. What activities have you or your institution taken or planned to implement the actions recommended by the Conference?

7. How would you like the CRHCS to assist your institution and country to implement the Action Plans?

- Support a national conference to review the Action Plans.
- Provide additional information materials to guide the implementation of the Action Plans.
- Mobilize funds to support selected pilot programs directed to some of the issues addressed in the Action Plans.
- Provide technical assistance to develop national plans and programs.
- Support additional research activities on the issues addressed in the Action Plans.
- Other, specify _____

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