



ANNUAL REPORT, 2024

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UK Charity Commission No. 1153655

ABOUT NATRON HEALTHCARE

Natron Healthcare (NHC) was founded in 2008 to bring basic healthcare and healthcare education to two Maasai communities in a remote region of Longido district in northern Tanzania. Our project area comprises two villages, Magadini (Makat) and Wosiwosi (Naipandi). At that time – with about 6000 people - there was no reliable healthcare service for great distances and this caused people extreme hardship: if you could not walk eight hours to a government clinic, you had to get better - or die. In particular many small children and pregnant women suffered from this situation.



Mabel "girl" Nekeko with Kisiaya

Rather than impose a new system, we chose to work with existing medical and social organisations in the area to facilitate, improve and expand their services. We also worked with the village communities to encourage their understanding of health issues and to support their right to adequate, accessible care.

As we move into 2025, we remain flexible and responsive to Tanzania's own changing needs and our own changing capacity to ensure our work remains not only sustainable and impactful, but integrated into communities and the evolving healthcare system.

ABOUT THIS REPORT:

This report comprises a summary of our work during 2024; a review of meeting our stated 2024 goals; a statement of goals for 2025 and a review of the finances. Several of the internal sources noted here are available on our website: www.natronhealthcare.org.

SUMMARY OF 2024:

As we have acknowledged in previous reports, NHC is prioritizing focused local support over in-country visits; as effective as we know our localized teaching is, the costs have become prohibitive, requiring aggressive fund-raising we're currently unable to take on. We know our Tanzanian colleagues Rehema Simon and Boniface Ngimojino are well placed to carry much of our work forward. We have continued to chart a path toward local sustainability and feel, generally, pleased with progress despite some difficult, practical obstacles.

As the **Mabel Rankin Scholarships** continue into their fifth year, we have three important developments to share. Penny determined to find an English tutor for the girls and eventually we employed Barnabas "Baharti" Kissiri to lead **a ten-day course in Magadini** during the June school holidays. Bahati was himself tutored by Penny and a UK-based teacher, Yvette Sullivan, via Zoom to be an even better sensitive, inquiring, respectful teacher. (We vividly remember poor past experiences with domineering Swahili-speaking men). Given the very poor quality of English language education at Magadini Primary School – and how this essentially set up the girls to flounder or fail in secondary where all classes are taught in English – we included the primary school teachers as well as the Mabel girls in the course, giving them four days to themselves. We also included some senior boys and girls at the primary school.



Baharti (seated, centre) with English language students in Magadini

By all accounts, the week was a huge success. At the end of his time, we received, unsolicited, the following from Grace John, the deputy headteacher: *"For sure we thank Natron health care, for this opportunity, we learn many, many things that we were not aware with, we interact with each other, we enjoyed together, The Guy Teacher Bahat Barnabas was a good and incredible teacher, Dr Penny and Melanie thank you very much, may God be with you All,*

Magadini primary teat,(sic) and Natron health care school girls, and boys. With two hands 🙌🙌we gives thanks to you and your fellow for makes this happen". [Link here to Baharti report](#)

We may now be able to measure this impact qualitatively, thanks to the work of our new trustee, Sue Webber.

After the results came out in February, 2025, and taking a real interest in the girls, Sue went to the National Examinations Council of Tanzania website and, with her skills, she created an Excel spreadsheet to track each Mabel girl and her progress. While she notes their very disadvantaged starting point in her report, Sue's work clearly shows a steady incline for the girls as individuals throughout their schooling: *"I can say that, almost without exception, **the Mabel girls make very encouraging academic progress** during their time at secondary school. And one would hope, in terms of confidence and aspiration, they have all benefited greatly from secondary education."*

In addition to qualifying each girl's progress, Sue also took an overview:

2021 cohort. Our pioneers! All four girls started secondary schooling with the lowest academic grades in all subjects, bar one girl starting with good Kiswahili and decent English. One of the four did not complete her schooling. The other three all made progress, ending with five or more subjects at higher grades. All had good behaviour grades.

2022 cohort. Both girls show good improvement across most subjects in their school reports; and clear improvement in some subjects in national examinations.

2023 cohort. Their results in FTNE Form Two National Examinations are very encouraging. The three girls scored C or D grades (F = bottom) in four, five and six out of nine subjects respectively. We are very hopeful that these results reflect the benefit gained from the English training provided to them, other cohorts and some primary teachers in summer 2024.

2024 cohort. We do not yet have reports to assess their progress.

It is still too early to definitively draw the conclusion that each cohort, as a whole, becomes academically stronger than the previous. The girls are still too dependent on the quality of teaching at the primary level. But as Sue hints, we may already be seeing improvement due to the English tutoring. And, as Rehema has pointed out in the past, these girls start with so little confidence in themselves, very poor schooling and few role models. All of these factors amplify any improvement. The scholarship program isn't intended as a steppingstone to higher education – though we certainly need to consider what happens if one of the Mabel girls qualifies to advance.

In the end, three graduated from the secondary school in November (before the full results were out!). Natron Healthcare was invited to the ceremony, but we considered the expense prohibitive. We were happy that Grace and Kisiaya from the village were there and many photos were taken! Two fully graduated in the end.

On the downside, one of the brightest and keenest students (2022 cohort) had to withdraw

from school due to her pregnancy. It is illegal for pregnant girls to attend school. We have assured her and her family that we will support her if she decides to return. We have used this to illustrate to girls and perhaps the wider community, the advantages of Family Planning and have asked that Grace John speaks to them all in turn.

There has also been distress in the school when not a single student of either gender passed last year's national testing to allow progression to secondary school. This was due, we believe, to a new structure being introduced in Tanzania combined with the primary years and teachers being poorly prepared by their departments. Boniface has spoken to the District Education Officer, and we have a commitment that all able pupils will have a chance to re-sit this year.

We have also tightened up the disbursement process to reduce, if not eliminate, previous problems. These had really come from some of the girls' parents who had been trying to syphon off their pocket money for personal use as well as lack of clarity about the roles of project facilitators. Inevitably issues arise, but we are confident in the commitment of our team and the transparency of our systems.

The **School Lunch Program continues** to provide \$1000, annually, split into two (net) payments, in support for the purchase of specific food supplies. Although this amount (raised mostly in the US by Mel) has not increased for five years, the worth of the dollar remains strong enough to counter local inflation. We do not plan to increase this amount but remain committed to providing it for the foreseeable future.

Our ambition for **Women's Health**, including family planning, cervical cancer (CaCx) awareness and support for Traditional Birth Attendants, was thwarted as Mel had personal issues grounding her in the US for much of last year. However, we remain committed to finding a sustainable way forward by forming alliances with local partners and mentoring educators and facilitators with our methodology.

There is some good news from the Longido DMO's office with the arrival of a new (our fifth!) DMO, Dr Mathew Majan, a qualified public health consultant. We have had warm correspondence and find that we are really on the same side as to our vision of healthcare with an improved HPV vaccine rollout and now likely reaching for substantially more girls aged nine to 13. But we do know that only nine vaccines arrived in Magadini and we don't believe any went to Wosiwosi. Supply and distribution remain real issues.

The **Government dispensary opened in Magadini** in 2023 and seems to be appreciated. The young Medical Officer there received Baharti on a "school trip" and was very interested in educating the pupils. He and Bahati together worked to try to save a boy who fell off a visiting truck, the driver being unaware of him hitching a lift, and tragically the boy later died. We have given the dispensary a drug cupboard following gifts we made last year of oximeters, sphygmomanometers etc (see below).



The Government dispensary in Magadini

Natron Healthcare has not been distributing **deworming and Vit A**. This falls under the nutrition dept at Longido and Penny found difficulty in making contact and getting answers.

Very sadly, the **Flying Medical Service remained grounded** for what appears to be purely political reasons. There is no end in sight and no relief in the form of government services for the thousands of mainly Maasai people who now no longer receive regular life-saving medical attention such as pre-natal care, anti-retrovirals, TB meds and childhood vaccinations. We wonder if the boy mentioned above could have lived with faster evacuation.

We recognize – again - that **our support for Wosiwosi** has been non-existent, especially as they no longer have FMS flights. We do not anticipate being able to fund the annual trips to that remote area that we know were so appreciated and impactful. Their new dispensary is still just half built. This is an unhappy situation.

GOALS for 2025

- Fund and hold a skin-to-skin workshop in multiple healthcare facilities in Longido, with a CaCx teaching element. Distribute the Rotary-sponsored posters. Include local TBAs.
- Continue the Magadini School Lunch Program, though determine a final year.
- Continue the Mabel Rankin Scholarship for Girls, without a specified end while money is still in the account and donors are still forthcoming, though determine a final year.
- Bring Bahati back to Magadini for a reprise of the English-language workshop for Mabel girls and primary school teachers.
- Find the best way to formally inform Wosiwosi that we will not be able to continue any services.
- Continue to pursue distribution of deworming meds and vitamins for school children in Magadini and HPV vaccines for all girls aged nine to 14. Practically, this means finding a local partner to assist.
- Continue to consider “legacy” and sustainability with local organizations or other NGO partners to carry on our support work and teaching.

Review of our GOALS for 2024 and status:

- Fund and hold CaCx workshop in Longido in October (or soonest feasible date); this will include modules for TBAs, family planning and neonatal care, including distribution of the Rotary-sponsored skin-to-skin posters. *Status: pushed to mid-2025 with focus shift to skin-to-skin and support for local facilitators.*
- Continue the Magadini School Lunch Programme *Status: done and recommitted for 2025*
- Continue the Mabel Rankin Scholarships for Girls *Status: done and recommitted for 2025*

- Look for extra-curricular ways to support the English language skills of the Mabel girls *Status: done and recommitted for 2025*
- Engage Magadini Village and the dispensary in the creation of an emergency evacuation plan – including moving the TANESCO airstrip poles *Status: given on-going grounding of FMS this is not a priority.*
- Review the ways we can practically and meaningfully support Wosiwosi given our diminished role and funding *Status: We need to formally inform the village that we will not be able to continue services.*
- Continue support for distribution of deworming meds and vitamins for school children in Magadini and HPV vaccines for all girls aged nine to 14. *Status: Penny had good conversations with the District immunization officer Ms. Ndossy. We did not deliver deworming meds or vitamins.*

Other unmet goals carrying over from several years now, probably most of which, if not all, will not be fulfilled as we lack funding and capacity (though some of these could be taken on by a local partner with small funding support):

- To understand why more women are not being evacuated to primary care during problem pregnancies – what are the decision-making mechanisms hindering more positive outcomes?
- To ensure that contraception continues to be a) available and b) supplied with proper information about side-effects.
- Steadfastly support community health with further education in family planning, TBA skill-building, de-worming and Vit A distribution.
- Refresh STD and other health teaching in both communities.
- Continue to work with the TBAs, following up with skill refreshers, monitoring evacuations and referrals, as well as community attitudes.
- Create a practical, accessible manual aimed at helping healthcare workers in Maasai communities become more effective teachers. Envisioned as a collation of our numerous “tried and true” teaching modules supported by a “how to” guide focusing not only on teaching practice but building the “peripheral” skills of effective teaching such as self-reflection, empathy, curiosity and cultural sensitivity. Our goal is for the manual to reflect our visual and engaging style, and that it be available through a paywall on our website.

FINANCIAL SUMMARY FOR 2024

UK Income.

We remain banking in the UK with Triodos, in three accounts: current, main deposit, and schoolgirl bursaries. There is a slight increase to interest, as all accounts now accrue it, including the current account. Pay to TZ is of course in USD, and this year the rate was relatively stable, unfortunately dropping slightly at the end of the year with exchange rates hovering about 1.21

In 2024, total opening balance was £13,461.62, income £5,990.27, expenditure £3,969.05 and closing balance £15,482.84. Triodos interest was £242 and UK bank

charges were £1.10. All the figures show a stable financial position despite larger expenditure. Stripe provides ready access from our website, charges to them being £19. Direct payments to us may mean a little more profit for us in the end. This year it brought in £1,120

Donors to the Mabel bursary continued their commitment, but because nobody passed from the Primary school this year, we decided to repeat the successful English teaching to the school in 2025, which will benefit boys as well as teachers themselves.

We had some new personal donations, due partly to a family event; an generous old lady friend of Mabel herself; and another old friend of NHC in Chippenham churches. This meant our UK tax Gift Aid claim increased producing £1,133, which we divided one third to the schoolgirls bursary account and two thirds to the general account.

We were still using VFX for international transfers with no additional charges and very reasonable rates of exchange. However, we were dismayed that they informed us in December that charity dealings like ours are to be withdrawn . So at the start of 2025, we face a very large increase in UK bank charges, owing in part to the restrictions to international trade to avoid any money-laundering accusations. We have a quote from Triodos itself, but at an excessive rate. We shall attempt to improve this situation before our first payment of the year in late spring.

We were delighted that the UK Godalming Rotary gave us a further £100 that we agreed was to go to the new dispensary at Magadini. We do not usually donate material gifts, knowing the way these tend to get broken, disappear, or be poorly used. After their donation in 2023 to provide necessary equipment of BP machines, oxygen monitors and digital thermometers, given via the Longido Health Department, we decided the 2024 money was to be a for a wooden cabinet to get medications and equipment off the floor!

UK expenses.

Apart from bank charges, all UK expenses are expended in Tanzania. During 2024 our expenses were in four main categories:

Tanzanian expenses

1.Mabel Rankin Scholarship for Girls.

Direct expenses of \$660 were paid to the girls in 2024. These did not include the main payment of \$1,120, given December 2023 and paying for eleven girls' schooling starting January 24, but did include for the seven continuing girls their main payment for 2025.

We had no new girls start in 2025, but we still paid, in addition, another sum to our advisor and translator, Boniface Njimogino, for liaison with the girls, including work discussing pregnancy in general terms, advice on our need for school reports in exchange for our bursaries, and discussion with teachers and even the District Education Officer as to why the failures for this year's primary school exams. His three-day visit was, December 2024, \$351*, to include his transport and accommodation costs, for village visit for education and discussion. We gave to Kisiaya and Grace working in the village, together, \$150. Bank charges are to be added to this expense (about \$60)

*Two thirds of this sum was for the bursaries and approximately one third for negotiating with the village to check up on the lunch program etc.

We agreed to have three girls checked over with our old friend and “colleague” Dr Steve from the Lutheran clinic at Ketumbeine in January . They had had various problems and the subsequent checks, including ultrasounds, were gratefully received by the parents, Most of the costs were covered for free, but we gave a contribution of \$24 to the clinic. Thank you, Dr Steve.

We were warmly invited to the girls’ graduation celebrations at the school, end of November, but due to the costs of transport and accommodation for our Natron advisors, we declined. We increased the small sums given to Kisiaya and Grace for their support for the ceremony at Gelai Lumbwa*. In early December during Boniface’s annual visit we presented small gifts to the graduating students which included an English/ Swahili dictionary, costing with their photos \$65.

2. English teaching workshop at Makat (Magadini) school (see above).

Expenses broken down were as follows: direct pay to Baharti, \$600 for twelve days work; his expenses for travel, accommodation and food was \$288. Extra educational supplies and books, donated to the school itself, were \$196; and facilitation by Mr Njimonimo was \$160 with added bank charges, \$15.

This totalled \$1,259. This sum was divided with some coming from the general account because training was given to the teachers as well as several boys attending the workshop, not just the Mabel account.

3.Childhood nutrition. Our UK account contributed £250 this year because of a specific donation on the UK side.

3. Dispensary. Following sending Boniface and Rehema to the opening ceremony, our relationship with Longido Health Centre remains very good , and in view of the successful educational trip to the dispensary by participants of the English course, led by Baharti, and the support of the doctor there, we gave a further £100 to the dispensary for a cupboard. (They had been storing medications etc on the floor!)

Other expenses:

We paid the costs accrued by a Longido nurse for his attention and help.

US Income and Expenditure:

We continue to use a simple savings account at Union Bank of Vermont. Nearly all the money deposited in this account is earmarked for the school lunch program with the notable exception of the Rotary gift of \$800 in 2023 which was given toward cervical cancer and skin-to-skin teaching. After printing posters in 2023, \$600 remained specifically tagged for this expense.

The balance Jan 1, 2024 was \$665 – but Mel realized an accounting error for school lunches at the end of 2023 so the actual amount was \$665+\$520 –and corrected this in early January, bringing the corrected actual balance to \$1,185. We received \$660 in donations against the expenses of \$520 school lunches (sent to Tanzania in July), two payments for our website in the US totalling \$600 (a burdensome expense) and \$200 to Boniface to top up the school lunch stipend given as a gift in the UK. These expenditures totalled \$1320.

A small donation of \$24 to Lutherans in USA for Dr Steve's attention to some schoolgirls in 2024.

This left us with a balance of \$445 on December, 31, 2024 including a tiny bit of interest and minus various fees.

Use of Rotary funds: given our promise to earmark \$600 of the Rotary funds for CaCx and skin-to-skin, we will take this instead from the UK account to pay for the up-coming (May 2025) workshop in Longido; so Mel used the US funds to pay the website management fees. This makes sense as it eliminates pointless wire transfer fees but keeps the \$600 gift intact.

Mel uses the wire transfer company World Remit which charges \$9 per transfer and gives a reasonable rate at the other end – though if we include all fees, including the cost to the recipient of transferring the funds onward (i.e. Boniface has to receive the funds then send them on via mobile money to the school lunch committee) all the costs accrue. For this reason, Mel usually adds \$20 to each transfer to cover these.

LOOKING AHEAD TO 2025

Penny and Mel started and sustained Natron Healthcare in 2008 for deeply personal reasons: Mel had pre-eclampsia and gave birth to premature twins, and Penny's maternal grandmother had died in childbirth. We were both very committed to improving reproductive care for some of the most marginalized women on Earth. We have done a great deal, both directly in terms of educating TBAs and communities about family planning and other health issues such as anaemia and dehydration that predominantly affect women and children; and indirectly by supporting nutrition in school and girls' education.

Ultimately, we accept we must also wind down Natron Healthcare. Personal passion is a robust driver of real impact, but in the end, it is systems that sustain. We must look hard, now, to find those systems.

As we see old friends such as Father Pat, still struggling to get his planes aloft, and the Fribergs semi-retiring from their decades in Ketumbeine; as we see the reckless disbandment of USAID and the ongoing persecution of Maasai, we also see real improvement in the provision of medical care by the Government of Tanzania and we see a younger generation stepping into the space we are gently vacating.

Our goal, at this juncture, is to assess how and for how long we can administer the school

lunch program and the Mabel Rankin Scholarships – given that we know how important these are to the community of Magadini and the quantifiable positive impact. We are looking for systems to replace us even if we may continue – personally - to find funding. We are looking for local partners who share our vision and passion for health education and who see the value in the methodology we've developed.

In many ways, the path forward is as uncertain and full of potential as it was when Mel and Penny first sat down together in Magadini, and Penny said, "Well, what shall we do?" and Mel said, "Anything is better than the nothing that's here now."

Warmest wishes and thank you for your support and interest over these many years,

Mel and Penny

With special thanks to

Our work would simply not be possible without you:

Our trustees, Sue Lynch and Elfi Ing

Our new trustee Sue Webber

Rehema Simon

Boniface Njimonimo

Father Pat Patten and the pilots and medical crew of the Flying Medical Service

Dr Elisa, Lutheran Hospital, Mtu Wa Mbu

Dr. Steven Friburg and Dr Ndoipo of Lutheran Health Centre, Ketumbeine

Bethany Friburg and the women's beading cooperative.

Dr. Osmond Swai, now in retirement, and the staff, Lutheran Health Centre, Gelai Lumbwa

The District Medical Officer and District Medical Office, Longido District

The Maternal and Child Health Coordinator, Josiah Muruve, Longido District

The District Education Office, Longido District

The Regional Medical Office, Arusha Region

The District of Longido

The Chairman, teachers and Kisiaya from the Village of Magadini/ Makat

The Village of Wosiwosi

Godalming, Surrey, Rotary

St Johnsbury Rotary

Chippenham churches

Ann Strange

Linda Lotti

Pendo Laizer

Andrew and Cynthia Knight

Yvette Sullivan

Rosalind Finn

And...

All our wonderful donors

MF. PA May 25

Appendices.

A. Report from Mr. Josiah Muruve, Maternal and child health coordinator: Longido Dept of health ref the new dispensary at Magadini:

- For the period of Jan-Dec 2024 total number of 268 clients were served with different methods of family planning (both short and long term FP methods). On Antenatal care services 183 women attended at the facility and receive Comprehensive Antenatal care services including checking HB, Syphilis, HIV, malaria, nutrition services, maternal and fetal assessment etc.
- On labour and delivery services; total number of 10 women delivered at the health facility this gives us alert of need for conducting community sensitization on importance of health facility delivery some women present with minor complication and were managed accordingly.
- On family planning services I suggest securing the facility with both short term and long-term FP methods though the uptake of long term seems to be a little bit higher, also if we get funds we plan to do On job training to staff particularly on family planning, health education and counselling skills.
- There is a need of having a meeting with TBA to reassess their knowledge on what you taught them about seven years ago and also have a joint meeting with health facility staff so that they can share experience and encourage them on working together aiming at improving maternal and child health services.

B. Report from Mr Barnabas Kissiri, English teacher at Magadini primary school. Please refer to website.