



**„Sub-Saharan Africa:
Young people and local communities
commit to a healthy future - without
alcohol and other drugs“**

Programme Country

Tanzania

Partner

Blue Cross Society Tanzania (BCST)

International Blue Cross

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1. Who we are

The International Blue Cross (IBC) is a non-governmental organisation that works towards giving people all over the world better prospects by mitigating drug- and alcohol-related illness, as well as societal problems. As an umbrella organisation and international development cooperation partner, we are currently active in 37 countries through our



affiliated member organisations. Our work has a long-standing tradition: it goes back to 1877, the year the Blue Cross was founded by the Swiss pastor Louis-Lucien Rochat. Together with other dedicated people he took care of people affected by alcohol, who did not have any support at that time and were excluded from society.

With time, the work of the Blue Cross became known beyond the Swiss borders, which eventually led to the founding of an international umbrella organisation, the International Blue Cross (IBC). Since that time IBC has been active in the implementation and promotion of **alcohol- and drug prevention** programmes. We offer **therapy and counselling services** for affected people and also work in the areas of **political consultancy and lobbying** all over the world. IBC advocates for the globalisation of justice, which includes all people - also those, who are most excluded from society.

**A society free of violence, oppression and addiction-related illness
– this is our vision.**

In the last few years, we have mainly focused on implementing activities in developing countries, and thereby especially prevention programmes for children and young adults aimed at supporting disadvantaged boys and girls in- and outside of school.

Sustainability is a key factor in all our programmes. We ensure it by guiding people towards **helping themselves** while simultaneously implementing lobbying activities with policy-makers. IBC orientates its work at the **UN development goals**,¹ and holds consultative status with the United Nations Economic and Social Council (UN ECOSOC). IBC is **ZEWO-certified**², which guarantees the correct use of our donations.

¹ See UN Agenda 2030: <https://17ziele.de/>

² ZEWO is the Swiss national donation certification body

2. Programme context

Alcohol and drug use are among the biggest obstacles to the sustainable development. 8000 people die daily from the consequences of consuming alcohol. As the third leading risk factor for poor health globally, the harmful use of alcohol accounts for the death of yearly 2.5 million people, including 320 000 young people between 15 and 29 years of age.³ Protective measures against alcohol harm are insufficient in most countries.

Besides the direct aversive consequences on individuals and population's health, the harmful consumption impedes the UN Agenda 2030 which specifies 17 Sustainable Development Goals (SDGs) to be reached until 2030 to assure a more equitable and sustainable future for all people worldwide. In African countries in recent years, **per capita alcohol consumption has risen alarmingly**. This has a devastating effect **on people's social life and health**.

Our programme promotes the following UN sustainable development goals:

3) Good Health and Well-being

4) Quality Education

5) Gender Equality

16) Peace, Justice and Strong Institutions

As other African countries, Tanzania is experiencing strong population growth. Young people under the age of 25 account for 60 percent of the total population. They are particularly susceptible to drug and alcohol consumption. There are several reasons, in addition to poverty and youth unemployment, why alcohol consumption among young people has risen:

- Problems in the family and socialisation
- Peer pressure
- Lack of awareness of the dangers of alcohol
- Easy access to alcoholic beverages
- Insufficient implementation of the laws by the state authorities

Alcohol consumption in Tanzania is at a problematic level and shows unhealthy patterns. **Compared to the African average of 6,3 litres, the per capita consumption of alcohol in Tanzania is with 9,4 litres of pure alcohol per year very high.**⁴ If only people who drink alcohol in general are taken into account, it lies at 26 litres annually. Especially in the young age group between 15 and 19 years, drinkers engage in highly problematic consumption

³ Global Strategy to reduce the harmful use of Alcohol, World Health Organization, 2010

⁴ The Alcohol consumption per capita (APC) is an indicator for consumption levels in a country, taking into account the entire adult population above 15 years, also those who do not drink alcohol

patterns – especially young men drink excessively, 70 % of them engage in heavy episodic drinking.⁵

Almost 7 % of the population have an alcohol use disorder, with 2,4 % being alcohol-dependent, compared to the African average of 3,7 % and 1,3 % respectively. More than 7 % of the deaths annually are alcohol-attributable in Tanzania. In general, alcohol harm is a much bigger problem among the male population, roughly 62 % of women abstain completely from drinking alcohol, whereas only 32 % of men renounce alcohol in general. Men show more often an alcohol use disorder (11,5 %) and alcohol dependence (3,9 %) than women (2,2 % and 0,9 % respectively). Nevertheless, alcohol harm is not a “men’s problem” in Tanzania. **As the alcohol consumption of a man has an impact on the social and economic situation of his family and often contributes to or causes violence, poverty and bad mental and physical well-being of those dependent on him, mainly his wife and children.** Alcohol- and other drug consumption often not only go along with violence, but in specific with sexual and gender-based violence (SGBV) towards women and girls.

3. Target group and activities

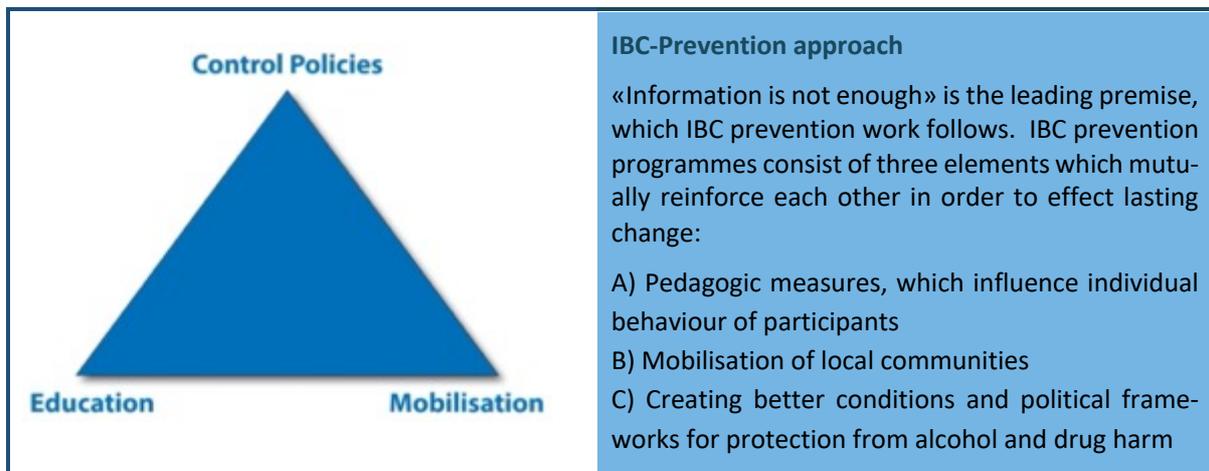
To protect young people from sliding into addiction, IBC carries out a **prevention programme** in cooperation with its local partner and member organisation, at the intersection of health- and social work. The IBC Life Skills and Peer Education programme primarily addresses students at secondary schools in Tanzania as well as street children and youth. Project activities aim for educating and equipping young people with the knowledge and skills necessary to lead a healthy life without addiction and violence. In doing so, IBC and its partner BCST work with the local media and implement lobbying activities with local politicians and stakeholders.

Young people develop key competencies

In Life Skills training sessions participants build **life competencies** useful to prevent social and health problems. The programme aims to educate and sensitise the youths to increase their awareness of the alcohol- and drug problematic and to then effect behaviour change.

This is complemented by activities aimed at creating better living conditions and improving the local legal framework. The following graphic explains this approach:

⁵ Heavy episodic drinking (HED) is a term used to define the drinking of alcoholic beverages with an intention of becoming intoxicated by heavy consumption over a short period of time. HED is defined by the WHO as drinking at least 60 grams or more of pure alcohol on at least one occasion in the past 30 days. It is one of the most important indicators for acute consequences of alcohol use, such as injuries.



In the area **A) education**, the youths are encouraged to grow into confident and healthy adults through pedagogical measures within the Life Skills training, which promotes their personal and social development and prevents social and health-related problems. This includes the practice of cognitive and social skills like communication skills, prudence and analytical capability, confidence as well as non-violent and peaceful conflict resolution and decision-making skills. The goal is, to develop those skills through active „self-study“. The training includes the following topics: **addiction, HIV, discrimination, violence and gender issues**. Participants are encouraged to link cause and effects in those areas and to reflect on them.

Trained Life Skills coaches lead weekly training sessions during regular school lessons. They are complemented by extracurricular activities like sports, art and theatre. Students as well as motor taxi drivers participate in those Life Skills trainings for at least one school year.

These measures are complemented by **B) the mobilisation of local communities**. We support local communities to contribute to social change by sensitising them on how they can improve the situation in their social environment. This for example includes educational work with adults, young people as well as policymakers. Depending on the local context, **civil society stakeholders can influence local laws** and start campaigns and initiatives, which can improve the youth protection and social environment.

Examples for this are the introduction of a minimum age for purchasing alcoholic beverages, a ban of the sale of alcohol near schools or limitations regarding marketing and promotions. To do this, the participants receive the necessary information, knowledge and tools during

the sessions of the mobilisation measures.



The youths above are from Jerico Center-Ngaramtoni with happy faces after life skills training at their Center.

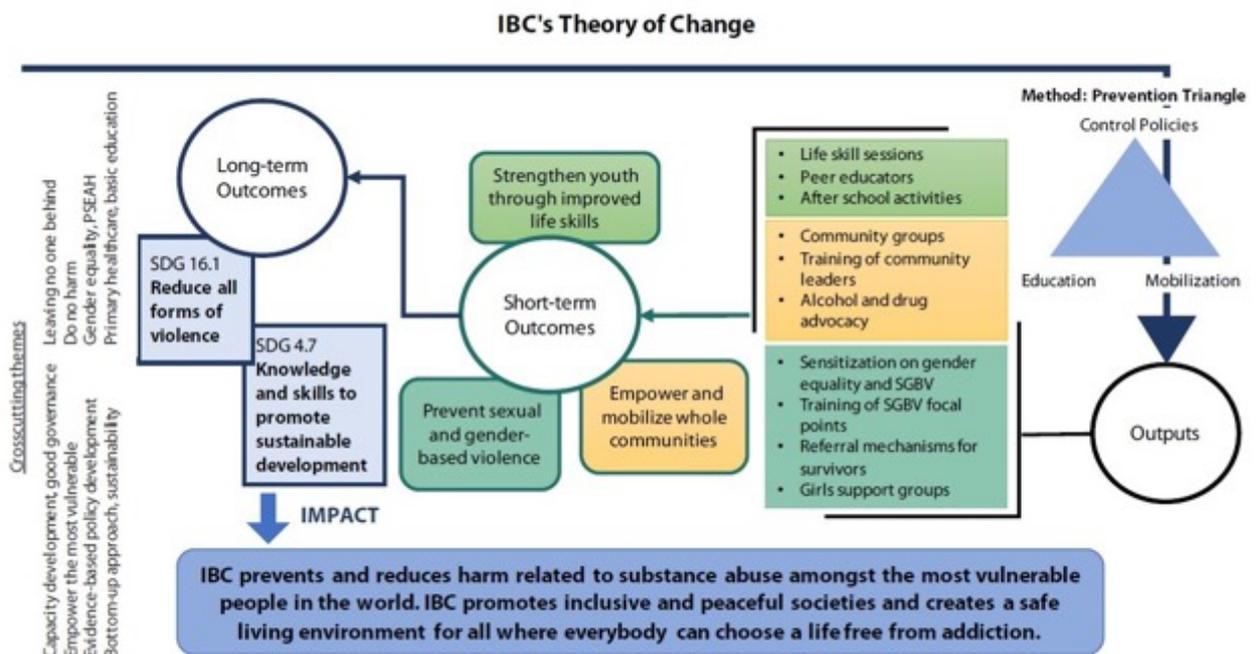
In the context of **C) policy work**, IBC uses interventions regarding alcohol policies, local educational measures, as well as media work together with its local partners to **create a better legal and societal framework for the protection of the population from alcohol- and other drug harm**. Especially young people can be deterred from consuming alcohol by stopping it from being sold to minors and by advocating for more effective laws and implementing rules and limits regarding alcohol advertising.

We are networking with local TV- and radio stations to broadcast content that raises awareness among the public with regards to the dangers of alcohol- and drug use and organise public events. **Together with decision makers, village elders, mayors, ministries and other local organisations** our programme staff develops concepts for better protection of young people.

Through the efforts of these programmes, we contribute to achieving the goals that were



set within the framework of the UN-Agenda 2030. (Picture Arusha community leaders) The awareness-raising work and the media campaigns also contribute to strengthening local institutions and maintaining efficiency, inclusivity and transparency. This graph explains the logic behind our programmes (Theory of Change):



Youth multipliers- Peer Education

In addition, the IBC prevention programme focuses on the formation of young Peer Educators. Peer Educators are multipliers and act as ambassadors by spreading their knowledge among their peers. This concept is based on the idea of the function of role models and can actively support youths in developing life competencies. Peer Educators are being trained in yearly training camps after which they are responsible for creating and leading Life Skill clubs. They receive a small compensation for their weekly organisation and leading of these



meetings. Group discussions and role plays are used as tools for raising awareness during the Life Skill club sessions.

Peer Educators also organize leisure activities like theatre or football tournaments, as well as music or poetry events. These Peer Educators are an essential element of the programme and are vital for the sustainability of these pedagogic measures.

4. Gender component

Since the start of the programme phase 2021-2024 we integrate the focus on promoting gender equality to **prevent sexual and gender-based violence (SGBV)**. Violent behaviour towards women and girls often occurs in correlation with alcohol use in the programme country and is facilitated by the patriarchal tendency of the society. There is hardly any societal prosecution of domestic violence and/ or sexual- and gender-based violence.

Because the target group of our programme is at an age, in which the personal values of a person are fortified, we address gender roles, gender-based violence as well as rights and obligations in the family structure, and question and analyse those attitudes and values together with the youths. Additionally, Gender Focal Points act as contact persons, who can help with questions about gender-based violence and work as a mediator and link between young people affected by violence, and experts.

These contact persons have been specifically trained for this task and are present at schools and also work within local communities. Most of the time, students who participate in the Life-Skills training, take on this (voluntary) task.

5. Beneficiaries 2021-2024

The programme targets disadvantaged populations in Tanzania and focuses mainly on youths between 12 and 17 years of age. The programme beneficiaries are students at public schools in the city of Arusha as well as street children and youth.

Between 2021 and 2024, a total of 4290 youths are taking part in the Life-Skills training in Tanzania. 150 young Peer Educators are envisioned to be trained, who will be able to support their peers in their local groups well beyond the duration of the project. In the same time frame around 800 youths and adults are being sensitised for gender equality and anti-violent behaviour.

Regarding our capacity-building work in local communities, we train 3'200 citizens in different forms of political participation which work towards improving the political framework of protecting youths and the general population from the harm caused by alcohol- and drug use. Furthermore, we broadcast information about the risks and consequences of alcohol- and drug use, as well as the related issues of (gender-based) violence via radio and social media. The following table shows the distribution of the beneficiaries:

Direct Beneficiaries				Indirect Beneficiaries	Total
Participants of the Life-Skills trainings	Trained Peer Educators	People who were sensitised to SGBV	Community members who participated in empowerment training	People reached by sensitisation measures through the media	
4'290	150	800	3'200	No clear estimates	8'440

6. Partners

International Blue Cross is certified by ZEWO, the Swiss entity for setting standards and monitoring administration and fundraising of Swiss charities. ZEWO checks regularly if the use of donations is efficient, outcome-oriented and transparent. Local partner organisations are thoroughly reviewed by IBC before entering in a partnership.

IBC and its partner work together with local and international organisations, communities and institutions towards including prevention of alcohol- and other drug-related harm in local and global political agendas.

7. Programme goals

The prevention of harm caused by alcohol- and other drug use in children and youths in Tanzania is the overarching objective of the programme.

In order for the project beneficiaries to develop in a healthy way, and to enable them to discover their talents and develop their potential, their alcohol- and other drug use should be reduced and the risk behaviour associated with such use, mitigated.

Tangible objectives until the end of 2024 are:

1. Improved Life Skills

Improvement of the well-being and resilience of 4'290 children and youths through building Life Skills.

2. Gender equality and prevention of sexual and gender-based violence (SGBV)

Showing the correlation between alcohol- and drug use, and the inequality between genders through educational activities in the area of violence prevention with around 800 youths and adults.

3. Local communities are empowered to influence local politics.

Formation of citizen-groups within local communities, who receive capacity-building training via workshops to take communal action and to advocate for better regulations and laws in politics regarding alcohol. A minimum of 3200 persons are encouraged to demand their rights via the formation of citizens initiatives.



8. Budget 2023

Tanzania costs in CHF	2023
Local project costs Tansania	60,000
<i>Thereof personnel</i>	26,000
<i>Thereof infrastructure</i>	11,000
<i>Thereof material expenses</i>	23,000
- objective 1	12,000
- objective 2	6,000
- objective 3	5,000
Revision, trainings, external evaluation	8,000
Total local project costs	68,000
Online coaching local team	7,556
Project monitoring 15%	12,278
Administration 7%	6,611
Total costs in CHF	94,444

Income in CHF	2023
Fondation Widmer	15,000
Other donations IBC, BC organizations	10,000
Total Income in CHF	25,000
Gap	69,444

To continue to run our programme successfully, we need further support to complement the existing financing. If there is a need for more detailed information regarding individual programme activities, the sequence of the programme, the monitoring or evaluation of the sustainability or risk-assessment, we are happy to provide these.