

# D-TREE 2022 ANNUAL REVIEW

Milestones, Progress  
and Impact







# NEW LEADERSHIP PERSISTENT MISSION

REFLECTIONS FROM THE CEO

## ABOUT D-TREE

Everyone deserves access to affordable high-quality healthcare. But many countries around the world face significant challenges in their healthcare systems and too many people suffer or die from preventable causes.

D-tree leverages digital innovation to transform health systems for the better, making people's care more personalized, more accessible, and more coordinated. We partner with governments from ideation to implementation, combining a deep understanding of local contexts with global expertise to build human-centered, government-aligned digital health programs. Our programs are designed to scale and integrate into health systems to ultimately lead to sustainable, long-term improvements in health outcomes for all.

 @DtreeInt  /company/d-tree [www.d-tree.org](http://www.d-tree.org)

D-tree's very first annual report should have been signed by Marc Mitchell, our visionary founder who pioneered digital health in the poorest countries to build a world where everyone, no matter where they live, has access to the healthcare they need to live longer, healthier lives.

In his absence, I feel humbled to be writing this letter. When I joined D-tree in September 2022, I met with the teams in our country offices in Eastern and Southern Africa to learn about the complex and unique contexts we operate in. I left feeling so inspired by our work and proud of how we save lives. I have worked in global health for over 20 years and what D-tree does is unique and instrumental to changing the way healthcare is delivered.

One of the most exciting milestones from last year was the opening of our office in Zambia, a country that is still plagued by a high disease burden and poor access to quality healthcare. We are now striving to replicate and adapt our approach in the country to improve the current situation.

In other country programs, early childhood development became a greater focus for us in 2022. Poor developmental outcomes for children can last a lifetime and perpetuate an intergenerational cycle of poverty and marginalization, and we are testing innovative delivery models for community-based services to support positive child development from birth to make children survive and thrive.

Digital solutions generate lots of data, and if used responsibly, offer tremendous

opportunities to further improve health outcomes. In 2022, we worked with the Government of Zanzibar to ensure that data is both leveraged and protected, and at the global level, we are proud to have endorsed the **Health Data Governance Principles**.

As 2023 begins, we have revisited our 2020–2025 Strategic Plan and Priorities. While our direction remains unchanged, we plan to leverage innovation and data science more strategically with our partners as tools to change people's lives for the better. In addition, I am committed to nurturing a culture of work-life balance and equity in terms of compensation, and development for our staff and moving the needle on locally-led, globally connected solutions.

I am a strong believer in the opportunities that digital will continue to offer for improving people's health, but digital health is not a panacea for decades-old health problems. Digital in itself cannot fix social injustices or deeply rooted inequalities, but it can certainly mitigate the effects and accelerate positive change. As D-tree, we will always stand with those in need and advocate for a human rights-based approach to reduce injustices in access to health, changing the way people experience healthcare.

Thanks to all the partners and funders who made the achievements possible. I look forward to a continued partnership to improve health outcomes for all!

**Riccardo Lampariello**, CEO



# 2022 HIGHLIGHTS

Together with funding and collaborative partners and our team, we took important steps that got us closer to our vision of a world where everyone, no matter where has access to the healthcare they need to live longer and healthier lives. In Tanzania, Zanzibar, Malawi and Zanzibar we leveraged technology and strengthened health systems, putting people at the center of care and ensuring they receive the right care at the right time.



FEB

## NEW PROGRAM: KIZAZI KIJACHO LAUNCHES IN TANZANIA

Innovations in early childhood development played an increasingly important role in our programs. Significant progress has been made in reducing under-five mortality in recent years, but poor developmental outcomes for children under five can last a lifetime and perpetuate an inter-generational cycle of poverty and marginalization.

In Swahili, Kizazi Kijacho means the Next Generation and together with research and implementation partners, we are testing innovative delivery models for community-based early childhood development services that can advance and accelerate the impact of the field in low and middle-income countries.

MAR

## ORGANIZATIONAL: NEW COMPENSATION PHILOSOPHY AND FRAMEWORK

We were excited to roll out our Compensation Philosophy and Framework. As we have tripled in size over the past three years, we needed and wanted to be more transparent around compensation. An important step to ensure equity and fairness across the organization!

APR

## EXPANSION: OPENING THE DOORS TO OUR NEW OFFICE IN ZAMBIA

Drawing on our experience from other countries in the region, we have been building relationships with stakeholders in Zambia to support the government in the digital transformation of their primary health system. In April 2022, we opened the doors to our new office and started operations with three staff members. More from Chewe Mulenga, our Country Director in Zambia [here](#).



JUN

## NEW BRAND: LAUNCH OF REFRESHED BRAND AND NEW WEBSITE

The global digital health field and D-tree as an organization have continuously evolved over the past few years. To match this, our brand and website also needed to evolve.

In June, we shared our reconfirmed, refreshed brand and website. Reflections on the process [here](#).



JUL

## NEW PROGRAM: MOMENTUM LAUNCHES IN MALAWI

In Malawi we kicked off work as the digital health partner for the USAID MOMENTUM Tikweze Umoyo program, a 5-year health program aimed to improve the health status of women and children, thereby contributing to reduced maternal, newborn, and child mortality.

## WE WERE GROWING!

We had exciting internal growth in 2022. Over a period of seven months (March through September 2022), we grew from 41 to 69 staff members. This included the addition of our new office in Zambia, as well as doubling the size of the Mainland Tanzania team.

# 2022 HIGHLIGHTS

## WELCOMING RICCARDO LAMPARIELLO, D-TREE'S NEW CEO

We welcomed our new CEO, Riccardo Lampariello, to usher in the next phase of D-tree's growth. In 2022, he visited all our country offices and the global support team.

Get to know Riccardo [here](#) and read Erica's, former CEO, last blog as D-tree's CEO [here](#).



SEP



## CONFERENCE: UN GENERAL ASSEMBLY (UNGA) 77

UNGA77 marked a historical moment in the UN's midpoint of efforts toward achieving the Sustainable Development Goals. We joined the discussions, learned about others' successes and shared ours.

Our senior data lead, Tracey Li, joined a panel hosted by [the Africa-Europe Foundation](#) exploring the use of AI to achieve the Sustainable Development Goals.

Learn about our key takeaways [here](#).



OCT

## DIGITAL HEALTH WEEK: ENDORSING THE HEALTH DATA GOVERNANCE PRINCIPLES AND DRIVING CONVERSATIONS ABOUT HEALTH DATA GOVERNANCE K

Ethical and responsible data governance structures that respect people's dignity, privacy and agency is key for successful digital health interventions. We are proud to have endorsed the [Health Data Governance Principles](#) in 2022.

During [Digital Health Week](#), we hosted a session on data governance focusing on country-level perspectives. With diverse perspectives from Zanzibar, Rwanda, Kenya and Guyana, one overarching theme emerged: the point of data governance is to enable data to be used in impactful and responsible ways.

Read our reflections from the session [here](#) and watch it [here](#).



DEC

## NEW RESEARCH:

### A human centred approach to technologies in health care delivery among mothers, children and adolescents

This formative research is providing insightful information that we will use as we continue to develop and implement Afya-Tek.

The research found that people's ideas about health problems depend on their age and social group. Health care workers face many challenges at work, such as not having good ways to keep track of patient information and everyone involved in showed interested in using technology to make things better coordinated.

Photo: Fondation Botnar

## NEW RESEARCH:

### Machine learning for maternal health: Predicting delivery location in a community health worker program in Zanzibar

Knowing which pregnant women are more likely to deliver at home is crucial for health workers to be able to better tailor care in low- and middle-income countries. Together with researchers from Harvard School of Medicine, we published explorative research looking at how machine learning can predict if a pregnant woman is likely to deliver in a health facility or at home.

AUG



# OUR WORK



## Skilled & Supported Health Workers

Health workers sit at the heart of health system strengthening and changing the way people experience care. Investing in and providing health workers with the tools they need is therefore an essential part of achieving health for all. Throughout 2022, we worked side-by-side with governments to strengthen their health workforces and provide digital tools that guide service delivery and ultimately improve the quality of care.

**WE STRENGTHEN AND EMPOWER NATIONAL HEALTH WORKFORCES BY CREATING DIGITAL TOOLS AND DATA-DRIVEN PERFORMANCE MANAGEMENT SYSTEMS TO ENABLE HEALTH SYSTEMS TO DELIVER QUALITY CARE TO ALL.**

**By 2030, the World Health Organization expects to see a shortage of 10 million health workers.** This will mainly affect low- and middle-income countries, leading to increased pressure on already overstretched health workers. It's more important than ever to respond to this challenge to ensure the health workforce is well-trained, equipped, supervised and compensated.

## OUR 2022 IMPACT

**1.7 million**

registered to receive healthcare, including 40,400 pregnant women and 227,510 children

**555,271**

health visits

**86%**

of pregnant clients delivered in health facility

**93%**

of clients completed health facility referrals

**227,510**

children served by health workers supported by D-tree

**3,589**

health workers supported







Health workers provided essential services to people who needed them the most in 2022 – from maternal and child health services to family planning. Our flagship projects **Afya-Tek** and **Jamii ni Afya**, greatly improved the lives of people in Tanzania and Zanzibar, working across the healthcare systems. We conducted multiple trainings for health workers and their supervisors so that they could continue to improve their skills and provide quality services. The trainings for supervisors focused on developing mentoring skills and we worked with health workers to strengthen their interpersonal and problem-solving skills during household visits. Trusted health workers with excellent interpersonal and technical skills save lives every year in low- and middle-income countries.

Meanwhile, we have expanded our focus on early childhood development and will continue to do so in 2023. Together with the Ministry of Health in Zanzibar, we integrated educational content into Jamii ni Afya, now guiding the community health volunteers in educating and encouraging parents about purposeful play and communication as well as informing them about key

developmental milestones for their children and how to reach them. We are also part of a consortium, Kizazi Kijacho, conducting a Randomized Controlled Trial to understand the effectiveness of innovative digital tools in supporting community health workers to provide parenting guidance. The results will be available later in 2023 and will guide future work.

“**DIGITAL TECHNOLOGIES HAVE THE POTENTIAL TO REVOLUTIONIZE THE WAY WE NURTURE AND SUPPORT THE HOLISTIC DEVELOPMENT OF CHILDREN. WE WANT TO SEE MORE INVESTMENTS IN INNOVATIVE APPROACHES TO EARLY CHILDHOOD DEVELOPMENT TO ENSURE THAT EVERY CHILD IN TANZANIA DOES NOT ONLY SURVIVE BUT ALSO THRIVES.**”

**Gloria Kahamba, Country Director, Tanzania**



## Sustainable Digital Health Transformation

At the heart of our approach is to engage with governments and relevant ministries in the countries we work in to create a vision of how digital technology can support their healthcare systems. This work continued in 2022 and we deepened our relationships with government partners in all our geographical areas.

### **WE SUPPORT GOVERNMENTS TO DEVELOP THE POLICIES, SYSTEMS AND LEADERSHIP REQUIRED TO FACILITATE AND ACCELERATE THE SUSTAINED ADOPTION OF DIGITAL HEALTH INTERVENTIONS AT SCALE.**

Working with governments to create a supportive and enabling environment for digital health transformation continued to be a priority for us. We have aligned key decision-makers and worked with partners to update national policies to reflect digital health priorities.

In Zambia, our focus in 2022 was to gain a deep understanding of the digital health landscape. We took the first important steps toward the development of digital tools to support HIV prevention and conducted a landscape analysis of the existing digital systems supporting HIV prevention and treatment in Zambia, and the results will inform future efforts. This work has given us a deep understanding of the digital health landscape, connected us to key stakeholders,

## OUR 2022 IMPACT

**3** investment roadmaps for sustainable deployment of digital health initiatives

**10** new partnerships with various ministries for scaling and sustaining our efforts

and enabled a quick integration into the digital health ecosystem – all of which will be essential for expanded and sustainable impact on people’s health in 2023.

We believe that alignment and close collaboration with the government is key for the sustainable digital transformation of health systems. In Zanzibar, we supported the Ministry of Health to develop a costed operational, investment and resource mobilization plan for the implementation of **Jami ni Afya**, with the goal of fully handing over the program to the government by 2026.

Fragmentation of digital healthcare services is a challenge in most countries. We work actively with our partners to respond to this issue. We were excited to see the Government of Tanzania taking important





steps toward a more coordinated system by endorsing the Unified Community System, which will harmonize community digital health interventions in the country. We will continue to support these efforts by developing integrated modules within the Unified Community System, roll it out in communities and providing technical support to the government.

A similar process is underway in Malawi where D-tree works in partnership with the Government. DHIS2 (District Health Information System 2) has been selected as a platform to be used for the development of the Integrated Community Health Information System (iCHIS). We are collaborating with several partners and funders to support the Government of Malawi to advance this initiative and roll out of a unified government-owned digital tool to all communities in the country.

“

**COMMUNITY HEALTH VOLUNTEERS ARE PERFORMING THEIR DUTIES WITH GOOD HUMOR AND WITH DESIRABLE COMPETENCE IN LINE WITH PROVISION OF ASSIGNED MINIMUM INTERVENTION HEALTH CARE PACKAGES. BY DOING SO, THEY HAVE MANAGED TO REDUCE THE MORBIDITY AND MORTALITY OF MOST PREVENTABLE CONDITIONS AND SUCCEEDED TO REFER PREGNANT MOTHER AND THOSE AT RISK TO NEARBY HEALTH FACILITIES. SO EVEN NUMBER OF FACILITY DELIVERY HAS BEEN TREMENDOUSLY INCREASED.**”

Hon, Nassor Ahmed Mazrui,  
Minister of Health, Revolutionary  
Government of Zanzibar

#### DHIS2

**DHIS2 (District Health Information System 2)** is an open-source software platform that helps collect, manage, and analyze health data. It was created to help organizations to better track and monitor health indicators.

DHIS2 provides tools for collecting data in the field and managing that data at different levels of the health system, and visualizing the data for decision making. It can be customized to fit the specific needs of a health system, and is used in a variety of settings, from small clinics to large national health systems.





## Data for Health Impact

Data continues to play a significant role in the digital health space, and the pandemic demonstrated the value of sharing de-identified health data, both within but also across national borders, so that it can be used to improve health outcomes. The important discussion about ethical and responsible health data governance structures to build public trust and safeguard data continued and innovations in data science showed great potential.



**WE WORK TO FULLY REALIZE THE POTENTIAL OF DATA TO STRENGTHEN HEALTH SYSTEMS AND SAVE LIVES, WHILE ENSURING THAT DATA IS USED IN A FAIR AND ETHICAL WAY THAT RESPECTS EVERYONE'S RIGHT TO PRIVACY, DIGNITY AND AGENCY.**

In 2022, we continued to create and implement health data frameworks and improve data use capacity. We worked at the global level to push for the adoption of the **Global Health Data Governance Principles**, and look forward to continuing to contribute to this critical global conversation in 2023 together with the **Transform Health Coalition** and partners. At the country level to support locally-appropriate guidance for data use. We worked closely with the Ministry

of Health in Zanzibar to operationalize its Data Protection and Sharing Framework. We have also developed and tested innovations in data science.

The health data collected under our programs provide great potential to improve the health outcomes of people and we explored how we responsibly can use this data to better provide tailored care and support health workers. With the data from Jamii ni Afya, we explored how machine learning can be used to identify pregnant women at risk of delivering at home, and then using the digital tool to guide community health workers to provide these women with more intensive support to encourage facility delivery.







**Digital Solutions  
Fit for Context**

Digital solutions often fall short as they are not well rooted in local contexts and needs. In 2022, we continued to grow our in-country tech teams and built scalable technology to help governments provide health for all.

**OUR APPROACH PUTS EQUAL EMPHASIS ON PEOPLE, HEALTH SYSTEMS AND TECHNOLOGY. WE WORK WITH PARTNERS AND GOVERNMENTS TO DEVELOP TAILORED SOLUTIONS FOR THEIR CONTEXT, BASED ON LOCAL NEEDS.**

In all our geographical areas, we participate in national digital health coordination as active members of the Ministry of Health Digital Health Technical Working Groups and help guide strategy developments and

“ WE SEE PROSPECTS FOR CONTINUOUS IMPROVEMENT OF MATERNAL, CHILD, AND ADOLESCENT HEALTH OUTCOMES THROUGH AFYA-TEK, PARTICULARLY ON THE INCLUSION OF ACCREDITED DRUG DISPENSING OUTLETS (ADDOS) INTO PUBLIC HEALTH SERVICE PROVISION. ADDOS HAVE BEEN CAPTURING POINTS FOR PATIENTS; LINKING THESE OUTLETS WITH COMMUNITY HEALTH WORKERS, THE AFYA-TEK MODEL PROVIDES COMPREHENSIVE COMMUNITY HEALTH SERVICES NECESSARY TO IMPROVE PROMPT ACCESS TO CARE. ”

Dr. Angel Dillip,  
Afya-Tek Project Director

implementation and share good practices with other practitioners and experts.

In 2022, we were among the first to adopt the Zanzibar Health Interoperability Layer, a central piece of Zanzibar’s Digital Health Infrastructure. This will make Jamii ni Afya’s current integration with the DHIS2 in Zanzibar more sustainable as it will allow future integration of digital health components.

In Malawi, we have developed a tool for HIV service delivery based on OpenSRP FHIR Core. The system is complex and links HIV positive and exposed people to each other to ensure that women and their babies jointly attend appointments for example, which is crucial for early detection of HIV in babies. We are early adopters of FHIR and this gives us the opportunity to gather and share early implementation experiences on the potential of FHIR.

We also took crucial steps toward improving supervision for community health workers in 2022. In Zanzibar, we built and deployed a supervisor tool which has been published as a reference app of the **Community Health Toolkit (CHT)**.

We were pleased to be testing an outlier detection algorithm that identifies when

**FHIR**

**FHIR (Fast Healthcare Interoperability Resources)**

FHIR is a standard for exchanging health information in a computer-readable format. It is designed to make it easier for healthcare systems and applications to share and exchange data with each other.

One of the benefits of FHIR is that it allows for more efficient and accurate sharing of health information between different healthcare providers, which can improve patient care and outcomes. Last year, we saw increased uptake of FHIR by large organizations such as the World Health Organization.

data reported by a Community Health Worker looks abnormal. We tested it on data from the **Jamii ni Afya program** and the findings showed that the algorithm has great potential to systematically monitor data at the level of individual community health workers. We hope to be able to incorporate it into our monitoring systems in the future.

**OUTLIER DETECTION ALGORITHM**

An outlier detection algorithm is a method used to identify data points that are significantly different from the majority of other data points in a dataset. Outlier detection algorithms aim to identify these unusual data points so that they can be examined further or removed from the dataset to improve the accuracy of analyses.



# CONTINUED PARTNERSHIPS AND NEW OPPORTUNITIES

To carry our work of government-led sustainable digital health transformation, we prioritize building and maintaining strong partnerships with funders and implementing partners. Collaboration is at the core of who we are and how we work. We are grateful to the following funding and collaborative partners for making our work possible!

## GOVERNMENT PARTNERS

Government of Malawi, Government of Tanzania, Government of Zambia, Revolutionary Government of Zanzibar.

## COLLABORATIVE PARTNERS

Apotheker Consultancy Ltd., AMP Health, Community Health Impact Coalition, Copper Rose Zambia, Development Media International, EDI Global, Engender Health, FAIR Centre for Experimental Research on Fairness, Inequality and Rationality, Harvard University, Ifakara Health Institute, Institute for Health Measurement Southern Africa, Institute of Tropical Medicine in Antwerp, Inspired Ideas, Kimberly Paterson at CIM, Matchboxology, Medic, Mothers 2 Mothers, Ona, On Call Africa, PACT, PATH, Rutgers University, Simprints, Singapore Management University, Tackle, Tanzania Early Childhood Development Network, UNICEF, University of Chile, WHO, Yale University, Young Women Christian Association of Zambia, ZAPHA+.

## FUNDING PARTNERS

Amref Health Africa (USAID Malawi MOMENTUM, Tikweze Umoyo Project), Baylor College of Medicine Children's Foundation - Malawi (USAID-Malawi, Client-Oriented Response for HIV Epidemic Control (CORE) Activity Component Two (2)), Centre for Infectious Disease and Research in Zambia (USAID Controlling HIV Epidemic for Key and Underserved Populations (CHEKUP) I Project), Conrad N. Hilton Foundation, Crown Family Philanthropies, Dimagi (and the Johnson & Johnson Foundation), Elizabeth Glaser Pediatric AIDS Foundation (through the U.S. President's Emergency Plan for AIDS Relief, through the United States Agency for International Development (USAID) under the USAID Afya Yangu Northern Project Contract No.: 72062122C00001), Fondation Botnar, GDI Solutions, LLC (Agency Fund), Google.org, Jhpiego Corporation (USAID Afya Yangu - RMNCAH), The Belgian Development Cooperation and the Wehubit Programme, The James Percy Foundation, Patrick J. McGovern Foundation, Stockholm University (with funding from the Swedish Research Council and UKAID), Touch Foundation, Inc., UNICEF.

We thank the numerous other donors and individuals that support our work!

Together, we have been laser-focused on creating a real difference – and that means being driven by tangible, meaningful impact on people's lives.



# FINANCIAL STATEMENTS

## STATEMENT OF ACTIVITY

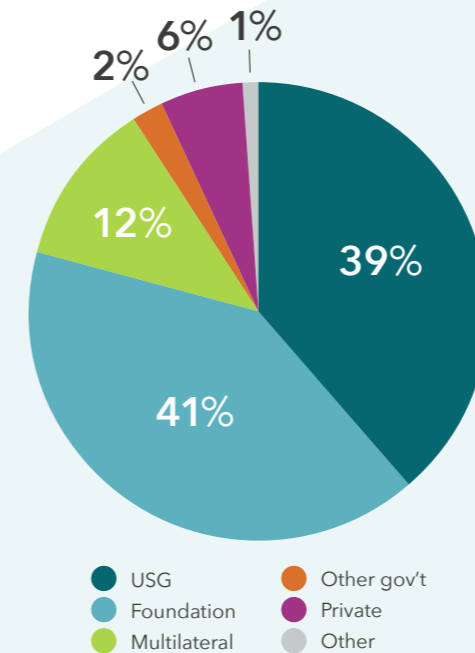
	Without Donor Restrictions	With Donor Restrictions	Total
<b>REVENUE &amp; OTHER SUPPORT</b>			
Grant and Contract Revenue	5,529,837	461,686	5,991,523
Contributions	49,552		49,552
Other	35,969		35,969
Interest	5,437		5,437
Gain foreign exchange	5,448		5,448
Net assets released from restrictions	236,949	(236,949)	—
<b>TOTAL REVENUE &amp; OTHER SUPPORT</b>	<b>5,863,192</b>	<b>224,737</b>	<b>6,087,929</b>
<b>EXPENSES</b>			
Program	4,801,200		4,801,200
General and administrative	837,217		837,217
<b>TOTAL EXPENSES</b>	<b>5,638,417</b>	<b>--</b>	<b>5,638,417</b>
Change in net assets	224,775	224,737	449,512
Net assets, beginning of year	564,568	236,950	801,518
<b>Net assets, December 2022</b>	<b>789,343</b>	<b>461,687</b>	<b>1,251,029</b>

## STATEMENT OF FINANCIAL POSITION

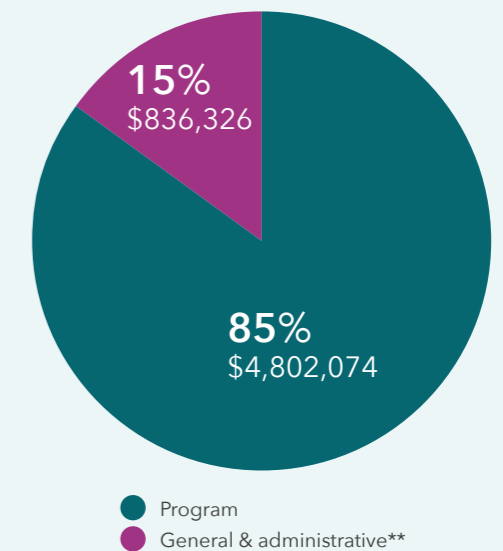
<b>ASSETS</b>	
<b>CURRENT ASSETS</b>	
Cash and cash equivalents	1,918,810
Accounts Receivable	528,411
Prepaid expenses and other current assets	43,744
<b>TOTAL ASSETS</b>	<b>2,490,965</b>
<b>LIABILITIES AND NET ASSETS</b>	
<b>LIABILITIES</b>	
Accounts payable	238,317
Accrued expenses	68,509
Deferred revenue	933,110
<b>TOTAL LIABILITIES</b>	<b>1,239,936</b>
<b>NET ASSETS</b>	
Without donor restrictions	789,343
With donor restrictions	461,686
<b>TOTAL NET ASSETS</b>	<b>1,251,029</b>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>2,490,965</b>

\* the majority of D-tree's cash and cash equivalents includes both the organization's reserve and temporarily restricted funds earmarked for specific programming and / or expense timelines for normal operations.

## REVENUE BY SOURCE FOR 2022



## TOTAL EXPENSES BY PROGRAM AND GENERAL AND ADMINISTRATIVE



\*\* General and administrative funding allows D-tree to be financially resilient and ensure robust financial, human resource and grants management systems and structures are in place that enable high-quality programming.



# A LETTER FROM **DOSTEA LONJINO**

A COMMUNITY HEALTH WORKER IN TANZANIA

Dostea Lonjino works as a Community Health Worker in Kibaha, Tanzania. She is part of **Afya-Tek**, our flagship project working to improve the primary healthcare system in Tanzania, linking communities with their healthcare providers. In this letter, Dostea, writes about what motivates her and how technology has aided her in her job.

Being a Community Health Worker under Afya-Tek has taught me so much. Not only am I able to support people in the communities but as a young woman myself I have benefitted greatly from the workshops. I have learned everything from how to protect myself from unwanted pregnancies to how to use a smartphone.

There is nothing more motivating than supporting pregnant women, mothers and children with what can be life-saving information and referrals.

Afya-Tek allows us to work faster and provide standardized and quality care. I remember in the past, we had to walk with big bags, carrying papers with us, but now, through smartphones, I arrive at a household and can efficiently and effectively conduct the visit. Through this technology, the patients' information is also much safer than before, and there is no risk at losing the information as everything is stored in the app. This means that where one health worker left off, another one can easily pick up.



**THROUGH THIS TECHNOLOGY, THE PATIENTS' INFORMATION IS ALSO MUCH SAFER THAN BEFORE, AND THERE IS NO RISK AT LOSING THE INFORMATION AS EVERYTHING IS STORED IN THE APP.**

The phones also help us to stay connected to the people we serve. If a child gets sick, the parents call me and I can quickly provide a referral to a health clinic. I strongly believe that thanks to this technology, we are saving lives of people, especially children and mothers, and I look forward to continue working with D-tree and people in the communities to improve health outcomes in Tanzania in 2023 and beyond.

With warm wishes,

**Dostea Lonjino**

Community Health Worker, Tanzania







D-tree International  
167 Washington Street  
Suite 5  
Norwell, MA02061, USA

[content@d-tree.org](mailto:content@d-tree.org)  
[www.d-tree.org](http://www.d-tree.org)

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