



Office of the United States Global AIDS Coordinator

Providing leadership, coordination and oversight to the unified U.S. Government effort to implement the President's Emergency Plan for AIDS Relief

U.S. Department of State

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Country Profile — *Tanzania*

U.S. President's Emergency Plan for AIDS Relief



HIV/AIDS Situation in Tanzania

HIV Infected: 1.6 million¹
AIDS Deaths: 160,000¹
AIDS Orphans: 980,000¹

As the largest country in East Africa, Tanzania bears a large share of the global epidemic, with an estimated HIV prevalence of 8.8 percent among adults aged 15-49.¹ Among the 1.6 million people living with HIV/AIDS (PLWHA), 70.5 percent are 25-49 years old; 15 percent are 15-24 years, and 60 percent of new infections occur among youth aged 15-24 years.¹ Though nearly 160,000 deaths were attributed to HIV/AIDS in 2003,¹ it is estimated that only one in five cases are actually reported,

grossly understating the extent of the epidemic. Of the 800,000 women who gave birth in health care facilities, 13.3 percent were HIV-positive; among women attending antenatal clinics (ANCs) in 2002, 9.6 percent were HIV-positive.

U.S. Government Response

The U.S. Government (USG) strategy builds on existing structures and plans in concert with the Government of Tanzania and other donors. Tanzania's development of a national policy on HIV/AIDS marked a milestone in its response to the epidemic, which was reinforced by concurrent establishment of a high level, multi-sectoral commission in the Prime Minister's office (TACAIDS). On the mainland, TACAIDS is the strategic leader and coordinator. The Zanzibar AIDS Commission (ZAC) is responsible for overall leadership and coordination of the response on the islands.

The USG is an active member of a major multi- and bilateral donor support coordination group, the Development Partner Group (DPG)/ HIV/AIDS subgroup. The aim of the group is to enhance commitment and coordination among donors' efforts to support the accelerated national response to HIV/AIDS.

The USG response in Tanzania focuses on several core themes. Those include:

- ◆ Valuing and utilizing the strengths of all partners;
- ◆ Improving service delivery, including policy formulation;
- ◆ Empowering human and institutional capacity;
- ◆ Implementing the "Three Ones" – one national AIDS strategy; one national AIDS coordinating authority; and, one agreed upon national AIDS monitoring and evaluation system.

Recognizing the global HIV/AIDS pandemic as one of the greatest health challenges of our time, President George W. Bush announced the President's Emergency Plan for AIDS Relief (the Emergency Plan) in 2003 — the largest international health initiative in history by one nation to address a single disease. Under the leadership of the U.S. Global AIDS Coordinator, USG agencies implement the Emergency Plan, working collaboratively as strong, interagency country teams under the direction of the U.S. Ambassador. These teams capitalize on the expertise of each USG agency and leverage partnerships with host governments, multilateral institutions, nongovernmental organizations (NGOs) and the private sector to implement effective programs for combating HIV/AIDS and ensure efficient use of USG resources.

Tanzania is one of 15 focus countries of the Emergency Plan which collectively represent at least 50 percent of HIV infections worldwide. Under the Emergency Plan, Tanzania received \$70.6 million in FY2004 to support a comprehensive HIV/AIDS prevention, treatment and care program. In FY2005, the U.S. is committing approximately \$106.4 million to support Tanzania's efforts to combat HIV/AIDS.

¹ UNAIDS, Report of the Global AIDS Epidemic, 2004.



Emergency Plan Achievements in Tanzania

Challenges to Emergency Plan Implementation

The greatest challenge facing the health sector is inadequate human resources to deliver quality health services to the Tanzanian population. A second challenge to Emergency Plan implementation is poverty. Tanzania has formulated its second Poverty Reduction Strategy Paper (PRSP) to reinforce its commitment to overcoming poverty. Tanzania also continues to struggle with the issue of corruption, with the health care sector being ranked as the second most corrupt sector in the country by the country's Economic and Social Research Foundation (ESRF). Due in part to the vast size of the country, health services do not currently meet acceptable quality standards. Overall, while services may be available, the human and physical infrastructure is in need of some level of improvement to allow for better quality patient care.

# of individuals reached with community outreach HIV/AIDS prevention programs that promote abstinence and being faithful	1,516,500
# of pregnant women receiving prevention of mother to child HIV transmission (PMTCT) services	42,800
# of pregnant women receiving antiretroviral prophylaxis	1,800
# of individuals receiving counseling and testing	105,100
# of HIV-infected individuals who received palliative care/basic health care and support	13,400
# of Orphans and Vulnerable Children (OVCs) who were served by an OVC program	12,000
# of individuals receiving upstream system strengthening support for treatment ¹	500
# of individuals receiving downstream site specific support for treatment ²	3,900

Prevention and care results reflect accomplishments through September 2004 and combine upstream and downstream support. Treatment results reflect accomplishments through March 2005.

¹ Number of individuals reached through upstream systems strengthening includes those supported through contributions to support national strategies through national, regional, and local activities such as training, laboratory support, monitoring and evaluation, logistics and distribution systems, protocol and curriculum development.

² Number of individuals reached through downstream site-specific support includes those receiving treatment where the Emergency Plan supports programs at the point of service delivery.

Critical Interventions for HIV/AIDS Prevention

- ◆ USG efforts have supported the establishment of a national blood safety network.
- ◆ USG supported implementation of a national abstinence and fidelity for youth program called "ISHI" (which means "to live" in Kiswahili).
- ◆ USG supported the national PMTCT roll-out plan, extending services to over 100 sites across the country.

Critical Interventions for HIV/AIDS Care

- ◆ USG supported the expansion of a network of care for orphans and vulnerable children (OVC) and helped meet the needs of over 10,000 OVC.
- ◆ USG support helped establish home-based care activities across five regions.
- ◆ In conjunction with Pastoral Activities and Services for people with AIDS in Dar es Salaam Archdiocese (PASADA), thousands of people every year are provided with comprehensive care and support. Services provided include: voluntary HIV counseling and testing (VCT); home-based care; educational psychological, social and economic support to orphans and vulnerable children; diagnosis and treatment of opportunistic infections; and prevention of mother to child HIV transmissions (PMTCT).

Critical Interventions for HIV/AIDS Treatment

- ◆ USG support helped strengthen 14 sites for national roll-out of antiretrovirals.
- ◆ USG helped implement a national treatment literacy campaign to promote positive living and the benefits of early diagnosis and treatment.
- ◆ USG support strengthened the national laboratory system.