

Data Sheet

USAID Mission:	Tanzania
Program Title:	Health Status
Pillar:	Global Health
Strategic Objective:	621-011
Status:	New in FY 2005
Planned FY 2005 Obligation:	\$12,150,000 CSH
Prior Year Unobligated:	\$0
Proposed FY 2006 Obligation:	\$11,160,000 CSH
Year of Initial Obligation:	2005
Estimated Year of Final Obligation:	2014

Summary: USAID funds public sector reproductive and child health and infectious disease surveillance and response activities under the Tanzania Ministry of Health (MOH) including: immunization; Vitamin A supplementation; management of syphilis and malaria in pregnancy; reproductive health and family planning services, with emphasis on training providers for long-term and permanent methods (LPTM); and strengthening Integrated Disease Surveillance and Response (IDSR). Health activities in the voluntary sector are social marketing of condoms, oral contraceptives, insecticide-treated bednets, and behavior change communication.

Inputs, Outputs, Activities:

FY 2005 Program: Improve Maternal Health and Nutrition (\$9,300,000 CSH). USAID will work with three Tanzanian Zonal Training Centers to ensure district providers have the requisite skills in key reproductive and child health (RCH) areas. To increase access to quality long-term and permanent methods of contraception and reproductive health and family planning services in selected hospitals with particular emphasis on 10 regions which include over half the population of Tanzania, USAID will fund community mobilization, training, and social marketing interventions. USAID's partnership with the MOH will continue to strengthen its capacity to lead RCH activities with particular emphasis on improving contraceptive commodity security. USAID technical assistance will support Vitamin A and zinc supplementation and salt iodization. For child survival, USAID will continue to increase use in health facilities of focused ante-natal care (FANC) practices (i.e., management of malaria and syphilis in pregnancy), training of service providers in target regions, and integration of FANC in the pre-service curricula of nurse midwives training institutions with support to the MOH. USAID will work with district and council health teams to strengthen perinatal service delivery and capitalize on ongoing efforts for the prevention of mother to child transmission of HIV. USAID will support behavioral change interventions to increase awareness of RCH products and services including socially marketed oral contraceptives. USAID-funded data for decision making activities include collection, dissemination and use of the 2002 Census, 2003-2004 Tanzania HIV Indicators Survey (THIS), and 2004-2005 Demographic and Health Survey (DHS) data. Principal contractors and grantees are Zonal Training Centers in Arusha, Iringa, and Kigoma; Academy for Educational Development (AED)(prime), Pact (prime), John Snow, Inc.(JSI)(prime), JHPIEGO (an affiliate of Johns Hopkins University), Helen Keller International (prime), Johns Hopkins University (JHU)(prime), EngenderHealth (prime), and Opinion Research Corporation (ORC-Macro) (prime).

Prevent and Control Infectious Diseases of Major Importance (\$2,850,000 CSH). USAID will support the completion of the National Institute of Medical Research's (NIMR) current phase of infectious disease surveillance and response by expanding its geographic coverage. An assessment of lessons learned, best practices, and recommendations will be completed in 2005 to assist the Government of Tanzania, through the Global Fund to Fight AIDS, Tuberculosis, and Malaria, to bring the program to scale. Principal contractors and grantees are Abt Associates (prime) and NIMR (prime).

FY 2006 Program: Improve Maternal Health and Nutrition (\$9,300,000 CSH). USAID anticipates expanding its district-level services in three Zonal Training Centers and increasing support for LPTM and reproductive health and family planning services. USAID will shift resources from central MOH offices to

regions, districts, and communities to achieve greater impact on people and communities at the grass roots. USAID will roll out its integrated logistics system, assuring greater access to basic health commodities. The Contraceptive Security Committee, a partnership with the Tanzanian Reproductive and Child Health Services (RCHS) of the Ministry of Health, JSI, the World Bank, United Nations and other partners will address long-term needs and identify resources to meet them so that a full range of contraceptive supplies and services are available to clients. USAID plans to support national dissemination and application of data relevant to programs and policies such as the 2002 Census, 2004-2005 DHS, 2004-2005 THIS, and baseline and special surveys (Vitamin A, vasectomy use, etc.) and attempt to assess the impact of programs on fertility and mortality. Funding is also planned to develop new approaches which augment impact of family planning and child survival programs, and to promote maternal health. Implementers are the same as stated above.

Prevent and Control Infectious Diseases of Major Importance (\$1,860,000 CSH). USAID will follow up on recommendations emerging from the NIMR program evaluation to be completed in 2005. Ways of strengthening malaria prevention and treatment will receive special attention. Implementers are the same as stated above.

All family planning assistance agreements will incorporate clauses that implement the President's directive restoring the Mexico City Policy.

Performance and Results: Contraceptive prevalence reached 19.4% in 2003 - 2004, increasing 24% since the last national survey in 1999 and exceeding USAID's target of 18%. Condom sales of 36.3 million exceeded targets by almost 2% even with supply limitations. Together with the MOH, USAID is piloting the integrated logistics system and training over 500 MOH staff to upgrade the logistics system in two regions. Through organizing with the MOH, key partners, a contraceptive commodity security committee and reviewing drug stock-out surveys, USAID has identified logistics priorities for contraceptive commodity security. New project initiatives to involve men as partners in reproductive health have had promising results such as increased use of vasectomy. Immunization for measles and polio and Vitamin A supplementation reached over 80% national coverage of targeted children. By program completion, stronger national systems will support improved and decentralized delivery of health and HIV/AIDS services, and public-private partnerships. This will enable USAID to exceed its targets for increased use of these services.

US Financing in Thousands of Dollars

Tanzania

621-011 Health Status	CSH
Through September 30, 2003	
Obligations	0
Expenditures	0
Unliquidated	0
Fiscal Year 2004	
Obligations	0
Expenditures	0
Through September 30, 2004	
Obligations	0
Expenditures	0
Unliquidated	0
Prior Year Unobligated Funds	
Obligations	0
Planned Fiscal Year 2005 NOA	
Obligations	12,150
Total Planned Fiscal Year 2005	
Obligations	12,150
Proposed Fiscal Year 2006 NOA	
Obligations	11,160
Future Obligations	78,570
Est. Total Cost	101,880