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Chargé d'Affaires, Inmi Patterson, shakes hands with Community Health Volunteer, Joyce Paulo, during a Boresha Afya – Southern Zone event commemorating the United States Government's partnership with the Tanzanian Government and civil society to strengthen the delivery of health services.

Photo: Stephen Mhando (Deloitte)

TANZANIA

BORESHA AFYA – SOUTHERN ZONE

USAID Boresha Afya (“Improve Health”) – Southern Zone program works to address health service gaps across the regions of Iringa, Njombe, Morogoro, Lindi, Mtwara, and Ruvuma. The program utilizes a client-centered approach to deliver services in geographic areas with high prevalence of HIV, TB, Malaria, and unmet needs for family planning and maternal/child health services. The program also supports the integration of various health services within facilities, thereby improving efficiency, optimizing resource allocation, and ensuring clients are able to access a wide variety of services from a single location.

HIV, Malaria, and tuberculosis (TB) are among the leading causes of morbidity (i.e. illness or disability) and mortality in Tanzania. This is exacerbated by the lack of access to maternal/child health and family planning services for Tanzanian citizens, especially for women and adolescents. Poor access to high quality comprehensive and integrated health services also remains a challenge, with limited coordination between facilities and communities resulting in inadequate support structures for patients and diminished health outcomes.

Program objectives include:

1. Improving the enabling environment for the provision of health services
2. Improving the availability of integrated health services within facilities
3. Increasing access to health services at the community level

To achieve these objectives, the program collaborates with the Government of Tanzania and other partners to plan, implement, and monitor service delivery while improving the availability of gender and youth health services. In addition, the program implements numerous models for integrating services in facilities, and engages with communities to bring health care closer to those in need. The program also addresses several cross-cutting issues, such as nutritional support, capacity building, equity, sustainability, and maximizing available resources.

RESULTS

- As of March 2019, the Program is supporting integrated health service delivery in 1,597 health facilities across the six regions in the following areas: TB (1,209), Malaria (1,199), HIV (599), Family Planning (1,224), and Maternal and Child Health (86).
- In Quarter II (January – March 2019), a total of 190,358 clients received HIV testing services, of which 4 percent were found positive. A total of 180,862 HIV positive clients are currently on treatment, whereas 2,621 new/relapsed TB cases have been detected and treated. In addition, 99 percent of all TB cases were screened for HIV, from which 27 percent were diagnosed with HIV, and 100 percent of all identified TB/HIV clients were initiated on Anti-Retroviral Therapy (ART) to slow the spread of the disease.
- 251,781 clients received at least one form of modern family planning method, and 2,329 clients received MNCH services.
- Out of 1,395,155 suspected malaria cases, 100 percent were tested either by mRDT or microscopy, from which nearly 39 percent were confirmed with malaria. Each person confirmed with malaria was initiated on anti-malarial treatment.

BUDGET

\$145 million

DURATION

October 2016 – September 2021

ACTIVITY LOCATIONS

Iringa, Njombe, Morogoro, Lindi, Mtwara, and Ruvuma

IMPLEMENTING PARTNER

Deloitte Consulting Limited

PARTNERS

Family Health International (FHI 360), Management and Development for Health (MDH), and EngenderHealth

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