
By 2020, Tanzania will increase the availability of modern contraceptive methods at all levels of its health system; specifically, the government will:

- Increase its allocation for FP commodities from Tsh. 14 billion in 2017 to Tsh. 17 by 2020;
- Expand the availability of at least three modern contraceptive methods at primary level and at least five modern contraceptive methods at secondary and tertiary level facilities from 40% to 70% (in the last three months from the day of the survey); and
- Scale-up the number of health facilities providing youth-friendly reproductive health services from 30% to 80%.

Anticipated impact
Number of family planning users increases from 3.8 million (2017) to 4.3 million by 2020.

COMMITMENT 1: By 2020, Tanzania will increase the availability of modern contraceptive methods at all levels of the health system; specifically, it will ensure availability of at least three modern contraceptive methods at primary level and at least five modern contraceptive methods at secondary and tertiary levels from 40% to 70% in the last three months.

Anticipated impact
1. Stock-outs will be reduced from 60% to 30%
2. Improved supply chain management, including better forecasting and quantification, strengthened use of eLMIS from national to local level, and close monitoring of commodity distribution

Proposed actions
1. Allocate/disburse TZS 14 billion (approximately USD 6.2 million) for FP commodities from its 2017-18 budget and continue to make similar budget commitments for FP commodities through 2020
2. Apply a total market approach that encompasses improved segmentation to ensure increased access to modern FP methods across public and private sectors
3. Improve supply chain management for FP and other RMNCH commodities, including use of the new commodity monitoring tool, developed by Advance Family Planning (AFP) project.

COMMITMENT 2: By 2020, Tanzania will scale-up the number of health facilities providing youth-friendly reproductive health services from 30% to 80%

Anticipated impact
1. Reduction in unintended pregnancy, maternal mortality, and unsafe abortion among young women ages 15-19
2. Change in key policies related to teenage childbearing, such as the age of marriage act and comprehensive sexuality education
Proposed actions

1. Scale-up access of information and reproductive health services to young people and marginalized populations to ensure equity
2. Improve integration of youth-friendly services in all health facilities
3. Scale-up outreach services to youth in hard-to-reach areas, including densely-populated urban areas
4. Increase access to information through comprehensive education that focuses on sexual and reproductive health and rights
5. Promote young men’s engagement in FP
6. Reduce teen pregnancy among 15-19 years old girls
7. Ensure the revision of Marriage Act of 1971 to end child marriage

COMMITMENT 3: Increase the government allocation for FP services from the current Tsh.14 Billion to Tsh. 17 Billion by 2020

Anticipated impact

1. Increase of budget allocation for FP from Tsh. 14 billion to Tsh. 17 billion
2. Increase of the Contraceptive Prevalence Rate (CPR) from 32% to 45% for all women

Proposed actions

1. Enhance advocacy for FP financing and accountability at national and local government levels including development partners by targeting government decision-makers, parliamentarians, and councilors; include the Ministry of Finance, President’s Office – Planning Commission, and President’s Office – Regional Administration and Local Government, local and international NGOs.
2. Strengthen the participation of CSOs and community groups in social accountability efforts
3. Identify new ways to finance FP programming through innovative public-private partnerships

The following text summarizes the commitment made by President Jakaya Kikwete on behalf of the Government of the United Republic of Tanzania at the London Summit on Family Planning on July 11, 2012.

In July 2012, the Tanzanian government committed to ensure access to voluntary, quality contraceptive information, services, and supplies.

Objective

1. Doubling the number of family planning users to 4.2 million by 2020 to reach a national contraceptive prevalence rate of 60 percent.

FINANCIAL COMMITMENTS

The government will increase its financial allocation for family planning, while strengthening partnerships to continue implementing the National Family Planning Costed Implementation Program.

PROGRAM & SERVICE DELIVERY COMMITMENTS

Additionally, the government will execute a FP2020 Action Plan (2013-2015)—updated to National Costed One Plan II for Reproductive Maternal Newborn Child and Adolescent Health (RMNCAH 2016-2020)—to address regional disparities and inequalities through training, capacity-building, community-based services, and interventions targeting young people and post-partum women, with a particular focus on the Lake and Western Zones. Through public-private partnerships and training for service providers and local staff, the government will improve contraceptive commodity security, logistics systems, and method mix. Strategic communications will be used to address barriers to family planning use, through a country-wide campaign carried out at the national and sub-national level.