In September 2016, the government of Tanzania shared an update on progress in achieving its Family Planning 2020 commitment in the 2015-2016 timeframe (commitment included for reference below).

FINANCIAL UPDATES

- In the 2015-2016 time period, the government reports its honored its commitment by disbursing 1.186 billion Tsh. In 2016-2017, the government reports increasing its allocation for family planning to 5 billion Tshs. Advocacy at the sub-national level especially in low CPR regions has steadily increased with sub-national governments continuously acknowledging the role of family planning in their development plans.

PROGRAM & SERVICE DELIVERY UPDATES

- The government of Tanzania in collaboration with family planning partners continued to provide family planning services through outreach. Forty-four mobile outreach teams provided FP services in all regions across the country and 14 bajaj teams operated in peri urban areas. For the period of July 2015 to June 2016, the total number of clients served through outreach services were 357, 244.
- A total number of 4,539 young people accessed sexual and reproductive health services in 16 selected referral public facilities after being referred by youth peer educators in their communities.
- The number of facilities that are reporting on stock status increased from 4,654 in last year to 4,840 this year. Central and zonal quarterly RMNCH commodity security meetings continued to be conducted. A youth campaign focusing on adolescent girls was conducted to Accredited Drug Dispenser Outlet sellers to be able to provider family planning education and services to young girls. The campaign was conducted in four regions of Dar es Salaam, Mwanza, Mbeya, and Shinyanga.
- In June 2016, the Ministry of Health Community Development Gender Elderly and Children launched One Plan II and disseminated to 16 regional authorities.
- In strengthening the quality of community based family planning service provision, the government in collaboration with family planning partners developed a five-day Community Based Family Planning (CBFP) refresher training package that will be used to update existing community health workers (CHWs). Forty-six CHWs and 17 CHW supervisor were refreshed using the developed training package. The post-partum family planning and post abortion family planning training packages were also developed; they are now in the pre-testing stage.
- The regional relaunching of the Green Star Campaign was conducted in the Central Zone (Singida), Southern Highlands (Katavi), and Eastern Zone (Dar es Salaam) in September 2015. These campaigns were accompanied with TV and radio spots using national and local media to increase family planning awareness.
- The government committed to improving method mix through public-private partnerships. To this end, some family planning partners have partnered with private health insurance companies, and one of them—AAR Insurance—integrated family planning services in their health benefit package, over and above their outreach initiative (called AAR Wellness Services Program).
- In the 2015 to 2016 time period, the government procured Microval, male condoms, and Injectable Depo-provera. In supporting the government to improve Tanzania’s methods mix, other family planning partners, including USAID and UNFPA, supported public facilities in procuring other commodities like Microval, male condom, circle beads, microgynon, implants, Depo-provera, emergency contraceptive pills, female condoms, and Copper T 380A.
- In fostering partnership through social marketing, private FP partners improved methods mix through social marketed FP products, such as Dume Condoms and Flex P COC Pills (TMARC), Familia brand of products such as pills, injectables, and condoms by PSI, and Trust brand of FP methods by DKT.
The following text is the commitment made by the government of Tanzania at the 2012 London Summit on Family Planning. To review the commitment online, please visit: http://www.familyplanning2020.org/entities/143.

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.