FAMILY PLANNING AND REPRODUCTIVE HEALTH
TANZANIA

Family planning is key to Tanzania’s broad-based development, saves lives by helping reduce maternal morbidity and mortality, and increases newborn and child survival rates. The Government of Tanzania recognizes the need to address rapid population growth; however, shortages in funding, human resources, and private sector engagement remain a challenge. High prevalence of adolescent pregnancy is also an issue, and while modern contraceptive use has grown in recent years, there has been limited change in the country’s unmet need for family planning.

USAID began supporting family planning in Tanzania in the late 1980s with a focus on increasing the prevalence rate of modern contraceptives, proving instrumental in building Tanzania’s national program. USAID’s family planning programs are integrated with other health services and contribute to the goals of reducing maternal mortality and improving child survival. Current interventions in Tanzania include:

- Improving access to and use of quality family planning services in public and private health facilities—particularly for long-acting and permanent methods—and expanding choice of method
- Bringing services to communities and underserved populations via mobile and outreach teams
- Increasing commodity security by improving forecasting of available supply and adequate ordering of contraceptives, strengthening the country’s integrated logistics system, and leveraging other donor support for commodities
- Training and supporting health workers on technological advances in family planning, service integration, comprehensive post-abortion care, preventing and mitigating gender-based violence, and preventing mother-to-child transmission of HIV
FAMILY PLANNING OVERVIEW

FUNDING LEVEL
• $25 million in FY 2020

MAJOR PARTNERS
• Ministry of Health Community Development, Gender, Elderly and Children
• Ministry of Health, Zanzibar
• Abt Associates
• Chemonics
• Deloitte Consulting, Ltd.
• Elizabeth Glaser Pediatric AIDS Foundation
• EngenderHealth
• fhi360
• Jane Goodall Institute
• Jhpiego
• Palladium
• Pathfinder International
• President’s Office-Regional Administration and Local Government
• PwC
• T-MARC
• The World Bank

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- Conducting national mass media campaigns to improve knowledge of modern contraception and promote use of family planning services
- Engaging in advocacy efforts with government decision-makers to create awareness of the need for family planning in order to attain long-term socioeconomic growth by harnessing the demographic dividend
- Using social marketing to promote the adoption of oral contraceptive pills and condoms in the private sector
- Increasing youth-focused programming in family planning and reproductive health.

The above interventions support USAID’s broader strategy of providing quality integrated services, promoting health-seeking behaviors, strengthening health systems, meeting the needs of youth, and addressing gender issues in Tanzania.

FACING CHALLENGES

Although support for family planning has improved over the past decade, more efforts are needed to address adolescent pregnancy rates. Domestic funding for family planning remains low, especially for commodities and outreach services. USAID is working to assist the Government of Tanzania at the national, regional, and district levels to strengthen its focus on family planning, especially as a means for achieving economic growth and reducing poverty. Other challenges include human resources shortages, limited engagement of the private sector, and inadequate use of data for improved programming. USAID’s supply chain, health systems strengthening, and social marketing programs work to address these needs.

PAST INVESTMENTS
IMPACT

The latest 2015-2016 Demographic and Health Survey indicates that modern contraceptive use has increased from 27 percent to 32 percent over the preceding five years. It was estimated at 38% in 2019, with implants, injectables and oral contraceptive pills the three most popular methods. Fertility trends have declined from 5.8 children per woman in 1996 to 5.2 in 2015-16, although maternal mortality has increased from 529 cases per 100,000 live births to 556 over the same period. Sustained efforts to improve Tanzania’s health supply chain have improved national distribution, but getting commodities to the “last mile” from the district level to the facility level remains a challenge. Family planning outreach services, public sector capacity building, social marketing, and behavior change communications are also having a positive impact as indicated by an increase in service quality and greater contraceptive use in rural areas.