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*Community Case Workers trained by the Community Health and Social Welfare Systems Strengthening Program.
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TANZANIA

COMMUNITY HEALTH AND SOCIAL WELFARE SYSTEMS STRENGTHENING PROGRAM

The Community Health and Social Welfare Systems Strengthening Program (CHSSP) implements its activities in line with the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) goals to assist the Government of Tanzania (GoT) in controlling the HIV epidemic through a systems strengthening approach. The program activities center on a cascade approach that strengthens the capacity of systems and structures through two objectives:

- **Higher performing human resources for community health and social welfare services (who are able to support adolescent girls and young women (AGYW), most vulnerable children (MVC), and people living with HIV (PLHIV) to know their status, improve retention and adherence, and achieve viral suppression and preventing new infections and promoting overall wellbeing).** The objective includes activities that address the expansion of the social welfare workforce at the community level to support AGYW, MVC, PLHIV and their families, particularly in communities most affected by HIV and AIDS.
- **More functional, better coordinated community structures and systems to better serve priority and key populations.** This objective includes activities that focus on creating an enabling policy environment and strengthening coordination, partnerships, and organizational leadership and management capacity of community structures, such as multi-sectoral AIDS committees (MACs), Violence Against Women and Children Protection Committees (VAWC-PCs), civil society organizations (CSOs), and PLHIV clusters at council, ward and village levels.

RESULTS (From 2014-2018)

- Introduced National Integrated Case Management System (NICMS), which is an HIV-sensitive integrated case management system essential for expanding access to HIV diagnosis and treatment, enhancing antiretroviral therapy (ART) retention, improving referral completion rates, reducing loss to follow-up, decreasing stigma and discrimination, and supporting issues of disclosure within families in order to serve the identification of estimated 800,000 orphan and vulnerable children/most vulnerable children (OVC/MVC) in Tanzania. (Source: USAID Fact Sheet, 2018)
- Conducted and finalized NICMS training to 214 case managers, 1,267 Community Case Workers (CCWs) supervisors, 1,737 Lead Community Case Workers, and 14,293 CCWs.
- Developed and handed over 15,525 sets of the NICMS data collection tools over to the Government of Tanzania which have helped in the identification of 731,327 Orphans and Vulnerable Children (OVC)/MVC and their families of whom 444,652 OVC/MVC are on ARTs. (Source: USAID - Kizazi Kipya)
- Conducted the Organizational Capacity Assessment (OCA) to 50 USAID - Kizazi Kipya CSO sub-grantees to ensure MVC are properly identified and linked to care by the 15,560 CCWs trained by CHSSP.
- Out of the 50 CSOs, CHSSP trained 31 CSOs on resource mobilization, supported two CSOs to obtain funds from various donors; conducted financial management to 48 CSO, installed QuickBooks software to 25 CSOs, and trained 22 CSOs on participatory monitoring and evaluation enabling them to develop their M&E plans.
- VAWC protection committees have been established in 52 councils and supported the completion of referrals for 44,914 OVC/MVC and their families to appropriate services from a total of 731,327 OVC/MVC and their families identified during the year.
- Printed and disseminated the National Gender Operational Plan for HIV Response 2016–18 in Tanzania Mainland and National Multi-sectoral HIV&AIDS Stigma and Discrimination Reduction Strategy 2013–17 in 54 councils to support in reduction of stigma and discrimination in the community.
- Established/revitalized and equipped 54 MACs at council level, 270 MACs at ward level, and 1,350 MACs at village level, which are all now capable of coordinating HIV and AIDS interventions.
- Printed 1,000 copies of the MAC guidelines to improve coordination and availability of HIV/AIDS service and distributed/disseminated 700 copies to TACAIDS, members of parliament, RAS offices, other stakeholders, zonal offices, and 54 councils, which mobilized 1,142,732 community members to test for HIV out of whom 29,433 (2.6%) were identified as HIV positive and initiated ART.
- Collaborated with the National Council of People Living with HIV/AIDS in Tanzania to develop PLHIV Cluster Management Handbook and conducted assessments for 54 PLHIV clusters using the handbook. Supported 50 PLHIV clusters to develop resource mobilization interventions, which enabled them to come up with income generating activities.
- CHSSP will work with USAID - Kizazi Kipya to train approximately 4,000 more community case workers, reducing the human resources gap and providing one community case worker for every 20 households.

BUDGET \$35,996,686

DURATION

November 2014 – November 2020

ACTIVITY LOCATIONS

CHSSP implements its activities in 106 councils across 24 regions of Tanzania, with zonal offices in:

- Dar es Salaam
- Dodoma
- Mbeya
- Mwanza

IMPLEMENTING PARTNERS

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