# **TANZANIA Work Plan**

FY 2020

Program Year 2

## October 2019-September 2020









This report is made possible by the generous support of the American People through the United States Agency for International Development (USAID). The contents are the responsibility of Act to End NTDs | East, led by RTI International in partnership with The Carter Center, Fred Hollows Foundation, IMA World Health, Light for the World, Sightsavers, Results for Development, Save the Children, and Women Influencing Health, Education, and Rule of Law (WI-HER) under cooperative agreement No. 7200AA18CA00040 and do not necessarily reflect the views of USAID or the United States Government.

## Act | East PROGRAM OVERVIEW

The U.S. Agency for International Development Act to End Neglected Tropical Diseases (NTDs) | East Program supports national NTD programs in reaching World Health Organization goals for NTD control and elimination through proven, cost-effective public health interventions. The Act to End NTDs | East (Act | East) Program also provides critical support to countries on their journey to self-reliance, helping them create sustainable programming for NTD control within robust and resilient health systems. The Act | East Program is being implemented by a consortium of partners, led by RTI International and including The Carter Center; Fred Hollows Foundation; IMA World Health; Light for the World; Results for Development (R4D); Save the Children; Sightsavers; and Women Influencing Health, Education, and Rule of Law (WI-HER).

In Tanzania, Act | East Program activities are implemented by IMA World Health.

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## **ACRONYM LIST**

ALB Albendazole

APOC African Programme for Onchocerciasis Control

CDD Community Drug Distributor

DBS Dried Blood Spots

DSA Disease-specific Assessments

ELISA Enzyme-linked Immunosorbent Assay

EU Evaluation Unit

FLHW Frontline Health Worker

FY Fiscal Year

HMIS Health Management Information System

HSS Health Systems Strengthening

IR Intermediate Result

IVM Ivermectin

JAP Joint Application Package

JRSM Joint Request for Selected Medicines

LF Lymphatic Filariasis

M&E Monitoring and Evaluation MDA Mass Drug Administration

MOHCDGEC Ministry of Health, Community Development, Gender, Elderly and Children

MSD Medical Stores Department

NIMR National Institute for Medical Research

NTD Neglected Tropical Disease

OV Onchocerciasis PZQ Praziquantel

R4D Results for Development SAC School-age Children SCH Schistosomiasis

SSTEAC SCH/STH Technical Expert Advisory Committee

STH Soil-transmitted Helminths
TAS Transmission Assessment Survey
TF Trachomatous Inflammation—Follicular

TIS Trachoma Impact Survey

TOEAC Tanzania Onchocerciasis Elimination Expert Advisory Committee

TZNTDCP Tanzania Neglected Tropical Disease Control Program

USAID U.S. Agency for International Development

WHO World Health Organization

WI-HER Women Influencing Health, Education, and Rule of Law

ZTH Zithromax®

## **NARRATIVE**

#### 1. NATIONAL NTD PROGRAM OVERVIEW:

#### Structure of the TZNTDCP

The Tanzania Neglected Tropical Disease (NTD) Control Program (TZNTDCP) is under the Ministry of Health, Community Development, Gender, Elderly and Children's (MOHCDGEC's) Office of the Chief Medical Officer, Directorate of Preventative Services, and is housed at the Tanzania National Institute for Medical Research (NIMR).

A National Program Manager is responsible for coordination at the national level and offers technical assistance and supportive supervision to regional and district levels. They are assisted by the NTD Secretariat for overall program coordination and management. This role is currently under transition, but a temporary NTD secretariat is in place. At regional and district levels, there are NTD teams, headed by two NTD coordinators, one from the health and the other from the education departments.

The TZNTDCP works through the Regional Health Management Teams, Council Health Management Teams, and local communities to plan and implement NTD control activities and is led by national, regional, and district coordinators at each respective level. At the district level, there are cascade leaders and zonal managers who provide frontline health workers (FLHWs) with supportive supervision and aid in data collection. For mass drug administration (MDA) at the community level, community drug distributors (CDDs) are trained to distribute medicines to households and report accordingly. One FLHW is responsible for supervising 15 to 20 CDDs. For school-based interventions, mainly targeting soil-transmitted helminths (STH) and schistosomiasis (SCH), primary school teachers help distribute the medicines and report to the health facilities. The TZNTDCP conducts control and elimination activities for five NTDs: lymphatic filariasis (LF), trachoma, onchocerciasis (OV), STH, and SCH.

#### 2. INTERMEDIATE RESULT 1 (IR1) PLANNED ACTIVITIES: LF, TRACHOMA, OV

#### Lymphatic Filariasis

#### Proposed FY20 Activities for LF

Following achievements made during FY18 and FY19, including lessons learned and best practices, Act | East, in collaboration with the MOHCDGEC and partners, will conduct the following activities in FY20:

- MDA: Ivermectin (IVM) + Albendazole (ALB) MDA for LF is planned in 15 districts, including 9 supported by Act | East. Concerted efforts are taking place to improve MDA treatment coverage, including intensified social mobilization campaigns in targeted communities and microplanning and reporting on MDA at the sub-district level. These approaches build on lessons learned from previous years.
- Disease-specific Assessments (DSA): Re-pre-transmission assessment survey (TAS) is planned for 8 implementation units, TAS1 is planned for 8 evaluation units (EUs), and TAS2 for 3 EUs. Prior to the surveys, staff will be trained or retrained on use of FTS and incorporating best practices into TAS surveys. Additionally, 66 districts grouped into 49 EUs are scheduled for TAS3 in FY20. EUs are grouped based on previous IUs, however Act | East and the TZNTDCP are in discussions about two EUs with multiple IUs that may need to be split based on TAS1 and TAS2 results.

- **Investigations of failed DSAs:** For the investigation of failed DSAs, the Act | East team will follow the plan of action below:
  - Conduct a subdistrict-level coverage review at the health facility level to determine areas that need coverage improvement.
  - Identify any communities/groups of people who have not received treatment, e.g., fishermen in Pangani.
  - Conduct a targeted social mobilization campaign for those who may have missed treatment: village to village, folk media, village criers, hamlet-level meetings, public address systems, etc.
  - Prepare micro-plans for August–September MDA, with clear micro-targets (proper CDD ratio, CDDs given clear treatment targets, etc).
  - Conduct refresher trainings for CDDs and MDA supervisors to ensure adequate MDA preparation and implementation.

#### During MDA:

- Provide intensified supportive supervision, with a focus on areas of need identified in coverage review done during pre-MDA planning.
- Ensure directly observed therapy.
- Conduct a full campaign for up to 7 days, which is longer than previous campaigns.
- Ensure no stock-outs of MDA supplies. This is always a programmatic goal, but given the remote nature of some districts, this has happened in the past.

#### Post-MDA:

- Conduct a sub-district analysis of reported MDA coverage, at the health facility level.
- Conduct a coverage survey to better understand compliance. These investigations will inform programmatic decisions in FY20.
- Dossier: In FY20, Act | East will provide support to TZNTDCP to convene experts and stakeholders to review the available information, including all surveys to date, the Health Management Information System (HMIS), the status of the data repository, and the narrative write-up. Support includes technical assistance for updating the LF dossier based on FY19 achievements and a workshop for both LF and trachoma to review the document. The review will also indicate the progress in morbidity management and disability prevention data collection and will guide estimation of the number of persons in need of hydrocele surgery and lymphedema care.

#### **Trachoma**

#### **Proposed FY20 Activities for Trachoma**

Following achievements made during FY18 and FY19, including lessons learned and best practices, Act | East staff, in collaboration with the MOHCDGEC and partners, will conduct the following activities in FY20:

 MDA: Zithromax® (ZTH) MDA for trachoma will take place in the six endemic districts in August 2020: Ngorongoro, Kiteto, Simanjiro, Longido, Chamwino and Kongwa. The TZNTDCP is focusing on responding to districts with failed TSS and also address low-coverage by reviewing micro-

- level MDA coverage at all health facilities to ensure that all the district sub-units reach the MDA coverage target. Sub-units that did not reach the target will conduct MDA mop-up activities.
- DSA: During FY20, trachoma surveillance surveys will be conducted in 18 EUs, which include 9 planned under ENVISION but not completed before the end of the project. Trachoma Impact Surveys (TIS) will also take place in 5 EUs. Additionally, the Act | East team will facilitate a trachoma graders refresher training. Two of the TIS in Songwe and Kalambo have taken place since the submission of this work plan and both passed. As noted above, two districts did not pass TSS.
- **Dossier:** Act | East will support a data review meeting to convene stakeholders to review the progress of data entry and update the dossier. The LF and trachoma dossier development workshop is planned for June 2020.
- Investigations of failed DSAs: If any trachoma-endemic districts fail DSA in FY20, the Act | East team will follow the plan of action below:
  - TZNTDCP will write an expression of interest to the Task Force for Global Health for potential operational research on investigating chlamydia infections in failed TIS communities, complementing work done in Mpwapwa and Nkasi Districts in 2016/2017.
  - Before the next MDA round :
    - Conduct cluster-level analysis of trachomatous inflammation—follicular (TF) prevalence in all failed TIS districts to determine clustering. This will be compared with MDA coverage.
    - Conduct a subdistrict-level coverage review at the health facility level to determine areas that need coverage improvement.
    - Identify any communities/groups of people who have not received treatment, e.g., fishermen in Pangani.
    - Conduct a targeted social mobilization campaign: village to village, folk media, village criers, hamlet-level meetings, public address systems, etc.
    - Prepare micro-plans for August–September MDA, with clear micro-targets (proper CDD ratio, CDDs given clear treatment targets, etc.).
    - Conduct refresher trainings for CDDs and MDA supervisors to ensure adequate MDA preparation and implementation.
  - During MDA:
    - Provide intensified supportive supervision, with a focus on areas of need identified in coverage review done during pre-MDA planning.
    - Ensure directly observed therapy.
    - Conduct a full campaign for up to 7 days.
    - Ensure no stock-outs of MDA supplies.

- Post-MDA:
  - Conduct a micro-analysis of reported MDA coverage, at the health facility level.
  - Conduct a coverage survey (this is planned for September 2019, to validate reported coverage).
  - Activities conducted during the investigation will inform FY20 activities.

#### **Onchocerciasis**

#### **Proposed FY20 Activities for OV**

Following achievements made during FY18 and FY19, including lessons learned and best practices, Act | East, in collaboration with MOHCDGEC and partners, will conduct the following activities in FY20:

- MDA: Act | East will continue to support IVM MDAs in all 28 OV-endemic districts—once per year in 19 districts (in August), and twice per year in 9 districts (February 2020 and August 2020). The TZNTDCP is also following up with WHO for guidance on re-starting MDA following elimination mapping/data review of suspected formerly hypo-endemic districts that benefited from IVM under the LF program but have now stopped LF MDA. This guidance will be a primary focus of the FY19 Tanzania Onchocerciasis Elimination Expert Advisory Committee (TOEAC) deliberations to inform the FY20 MDA plan for OV.
- M&E: 15 districts are targeted for elimination mapping. This activity will leverage experience
  obtained from the FY19 elimination mapping survey and will also be guided by the
  recommendations of the July 2019 TOEAC meeting.
- **TOEAC:** the TOEAC will meet in February 2020 and will follow up on recommendations made at the July 2019 meeting .
- OV lab analysis: ELISA analysis of backlog of 10,000 dried blood spots (DBS) in the Tanga lab.

#### **Learning Questions**

The Act | East Program proposes focusing on three learning questions in Tanzania in FY20. These questions are preliminary and will be agreed upon in consultation with USAID and pending the finalization of the Act | East Program-wide learning agenda. Once finalized, additional information around the proposed activities to assist in answering these questions will be developed.

- 1. What are the reasons behind failing re-pre-TAS, understanding that in Tanzania all existing LF districts have failed pre-TAS in previous rounds?
- 2. How can we maintain optimal MDA coverage in communities that have persistent transmission/repeated low uptake such as in "hard to reach" groups like fisherman?
- 3. Where TIS surveys have repeatedly failed in Maasai communities, what are the subdistricts of high TF prevalence with adequate MDA coverage and why is that the case?

### 3. SUSTAINABILITY STRATEGY ACTIVITIES (IR2 AND IR3)

#### **Data Security and Management**

#### **Proposed FY20 Activities for Data Security and Management**

Following achievements made during FY18 and FY19, including lessons learned and best practices, Act | East, in collaboration with MOH and partners, will conduct the following activities in FY20:

- Improve district capacity in using the country-specific NTD database: Act | East will continue to provide support to the 47 districts using the NTD database for reporting and MDA coverage analysis, via supportive supervision.
- Improve reporting on NTD indicators at the health facility level: Act | East and the TZNTDCP will continue to work with the HMIS section of the MOHCDGEC to improve reporting on NTD indicators from health facilities. It is envisioned that key indicators collected from the point of care (outpatient and inpatient departments) will be linked to the prevalence survey indicators that are collected periodically.

#### **Drug Management**

#### **Proposed FY20 Activities for Drug Management**

Following achievements made during FY18 and FY19, including lessons learned and best practices, Act | East staff, in collaboration with the MOHCDGEC and partners, have convened to conduct the following activities in FY20:

- Drug transportation from the national warehouse to regions All medicines, after clearance from the port, are stored at the Medical Stores Department (MSD) and transported to the districts by MSD before MDA activities. MSD transport to districts can be delayed because of late arrival in country, changes in MOHCDGEC/TZNTDCP MDA planning, or general timing issues with MSD. The transportation of NTD drugs is usually combined with other, non-NTD medicines, and MSD will often wait until the truck is full before shipping. Furthermore, MSD sometimes closes for consecutive weeks to conduct inventory checks. In FY2O, if there are delays in transport before MDA activities, Act | East will provide support for drug transportation and hire private transporters to move the drugs to the regions. This strategy will only be considered if there are delays in receiving the drugs from outside of Tanzania, or if customs clearance is slow and the drugs are released 2 weeks or less before MDA campaigns.
- **Transport from region to distribution points :**The transport of medicines from the district to community levels is normally conducted by District Medical Officers using district vehicles
- Reverse supply chain: Based on previous experience in FY20, Act | East will support reverse supply chain activities in 8 districts conducting IVM/IVM+ALB/ZTH MDA. This represents 18% of 42 districts conducting this MDA.
- Mentorship on JRSM and other WHO reporting tools: Act | East provides mentorship to the NTD Secretariat and TZNTDCP staff to prepare the JRSM and other WHO reporting tools, the annual work plan, the Joint Reporting Form, the Epidemiological Reporting Form, and the TAS eligibility forms. Act | East assists the MOHCDGEC to coordinate with other implementing partners to ensure that the TZNTDCP's requirements are included in these tools. For FY20 medicine needs, the JRSM was submitted in April 2019. It is expected that the next Joint Application Package (JAP) will be submitted to WHO in April 2020. This submission will include the Joint Request for Selected Medicines (JRSM) for 2021.

#### Mainstreaming and Health System Strengthening (HSS) Activities (IR2)

#### **Proposed FY20 Activities for HSS**

In FY20, the Act | East team will work with the TZNTDCP to incorporate design elements from the sustainability framework into the National NTD Master Plan and to revise the HSS-related activities based on findings of the planned assessments. Technical assistance will be provided by the HSS Advisor and through short-term technical assistance from HQ, with a focus on mainstreaming gender into NTD programing, improving domestic resource mobilization, and strengthening NTD advocacy capacity. In addition, preparatory work will be conducted for establishing a bilateral sustainability agreement between USAID and the Government of Tanzania. The document will outline agreed-upon formal commitments in support of the national NTD program (TZNTDCP) from both parties.

Act | East will collaborate closely with the Public Sector Systems Strengthening Activity, USAID's flagship HSS project in Tanzania, and the WHO Country Office to coordinate and leverage existing resources and to better understand best practices for HSS in Tanzania.

Illustrative activities include the following:

- Sustainability and Gender assessment follow-up meeting and consultation will bring together
  key stakeholders such as the President's Office Regional Administration and Local Government,
  MOHCDGEC, Ministry of Finance, TZNTDCP, Ministry of Education, and regional and district
  officials to discuss the findings of the HSS and gender assessments and to support development
  of the multisectoral NTD sustainability plan. This meeting will focus both on the outcome of the
  assessments and development of sustainability and GESI plans for the remainder of FY20.
- National NTD Master Plan implementation support. The Master Plan was completed before the assessment in FY19. However, future activities for support from an HSS perspective will be informed by the sustainability assessment and needs expressed by the TZNTDCP. Support may involve policy analysis, or stakeholder coordination. These inputs will facilitate the TZNTDCP to implement the NTD Master Plan in a way that considers not only existing NTD programming and donor support, but also existing systems and financing architecture and policies, and supports the Health Sector Strategic Plan IV. Additionally, Act | East will support the launch of the new Master Plan included in the stop LF MDA celebration, as well as a policy workshop for 20 participants in FY20.
- Harmonization of HMIS System Meeting is a one-day meeting to ensure HMIS indicators are aligned and within the NTD database.
- Donor and cross-sectoral collaboration on NTD mainstreaming efforts is required to ensure
  high quality implementation of NTD activities that are mainstreamed into existing programs. The
  Act | East Program will support ongoing donor and cross-sector coordination efforts, such as the
  SCH/STH expert committees, through targeted technical assistance—e.g., workshops, briefs,
  coaching, and analysis—that supports stakeholders to collaborate on NTD programming.
- NTD advocacy capacity building will incorporate several elements, such as development of the advocacy kit for TZNTDCP to promote allocation of domestic resources to the program. The kit will be used at all levels, to guide advocacy efforts of the program, including in other functions, events, and avenues that are not entirely NTD specific—e.g., in Parliament, in council meetings, and at the ministerial level.
- Health financing analytics: Act | East expects that after the sustainability assessment, financing will emerge as a major factor for NTD sustainability in Tanzania. This is based on ENVISION's

experience in country and Act | East's understanding of the country context. Results for Development (R4D) will lead a health financing analytical activity as input to the country's sustainability planning process, based on priority needs.

• Health financing capacity building: R4D will provide ongoing training and support for the country team's HSS Advisor and other staff as deemed necessary. This will include contributions to those team members' technical on-boarding and ad hoc technical support and backstopping. An R4D expert will also visit the country to do more in-depth technical orientations with the team and, if needed, with government counterparts, as well as to support ongoing health financing analysis and dialogue with government and other stakeholders. This trip will also include a workshop that focuses on developing the financing portion of the NTD sustainability plan.

These activities will be coordinated by the HSS Advisor but will require technical assistance from international and local short-term experts.

#### SCH, STH, Post Validation/Verification Surveillance (IR3)

### **Proposed FY20 Activities for SCH and STH**

Following achievements made during FY18 and FY19, including lessons learned and best practices,

Act | East, in collaboration with MOHCDGEC and partners, will conduct the following activities in FY20:

- MDA: Following budget reallocations in November 2019, Act | East will support school-based MDA with PZQ+ALB in 41 districts starting in February 2020, targeting 2.25 million school-age children (SAC) with Act | East support.
- SCH/STH Technical Expert Advisory Committee (SSTEAC) meeting: The SSTEAC is scheduled to
  meet in February 2020 and will follow up on recommendations from the July 2019 meeting
  (more details provided in the budget narrative).