Tanzania

Country Focus Areas

- Improve efficiency by scaling up output-based payment mechanisms.
- Continue to strengthen the alignment of partners and reduce fragmentation through health basket funding.
- Preserve government budget allocations for health in addition to increased donor resources.
- Strengthen direct health facility financing, in order to empower primary health facilities to provide services, improve the quality of care, and address health system bottlenecks.
- Track progress and help decision makers at all levels to reduce maternal and neonatal mortality by utilizing data from quarterly RMNCAH scorecard.

RMNCAH-N Core Indicators

Maternal mortality ratio: 556 per 100,000 live births

Neonatal mortality ratio: 25 per 1,000 live births

Under-five mortality ratio: 67 per 1,000 live births

Adolescent birth rate: 132 per 1,000 women

Percent of births <24 months after the preceding birth: 18.8%

Stunting among children under 5 years of age: 34%

Moderate to severe wasting among children under 5 years of age: 4.4%

Health Financing

Core Indicators

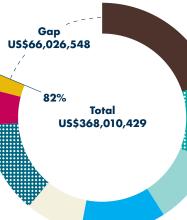
Health expenditure per capita financed from domestic sources: **US\$14.42**

Ratio of government health expenditure to total government expenditures: 9.52%

Percent of current health expenditures on primary/outpatient health care: 46.89%

Incidence of catastrophic and impoverishing health expenditures: **3.79%** catastrophic 1.38% impoverishing





GOVERNMENT PEPFAR (INCLUDING USAID-PEPFAR) WB/GFF/ USAID/PON GAVI BASKET FUND GFATM (EXCLUDING WB) UNFPA USAID -- GAP

Tanzania is embarking on its mid-term review of its One Plan II investment case. As part of this review, they are conducting an updated annual resource mapping. Based on initial estimates, compared to the previous year estimates, the gap has increased from 5% to 18%, with GFATM funds reduced. The governments of Canada, Denmark, Ireland, and Switzerland; KOICA; UNICEF; and the World Bank and the GFF flow funds through

Tanzania's "Health Basket Fund," which links payment to results. Although World Bank funds flow through the Basket Fund, this data has been shown separately for the purpose of this resource mapping pie.

Investment case for RMNCAH-N or equivalent (e.g., national healthplan)

Set of evidence based priorities financed

Results monitoring strategy and framework in support of IC*

Country-led multi- stakeholder platform (e.g., new or established from an existing platform)

Government focal point

An inclusive country platform process with CSO engagement

Health financing reforms identified

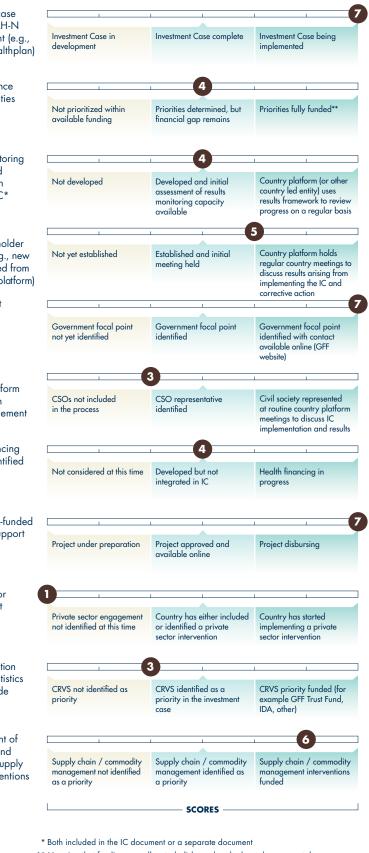
World Bank-funded project in support of the IC

Private sector engagement

Civil registration and vital statistics (CRVS) made a priority

Management of medicines and supplies / supply chain interventions

Monitoring the Country-Led Process



** Meaning that funding was allocated, disbursed and released – payment done *** ANC4 = four antenatal care visits

ART = antiretroviral therapy; ARV = antiretroviral; DTP3 = vaccination for Diphtheria. Tetanus, and Pertussis; ORS = oral rehydration solution; PMTCT = prevention of mother-to-child transmission; PNC = postnatal care.