



**Report of
Disease Specific Control Programmes
(Malaria, HIV/AIDS and Tuberculosis)**

**JOINT ANNUAL HEALTH SECTOR REVIEW 2010
TECHNICAL REVIEW MEETING
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Report presentation



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Introduction



- TWG 07 Disease Control Technical working Group addresses Strategy 8 of HSSP III:
 - **priority diseases** (Malaria, HIV and TB)
 - **neglected tropical diseases**
 - **non communicable diseases as outlined.**
- Milestones of 2009 JAHSR did not include disease control
- Strategic plans of national programmes used to monitor progress



DCP-TWG



- The TWG has conducted four meetings in 2010
 - Three meetings involved core members from priority disease programs
 - One meeting with all members and HMIS TWG.
- The TWG has developed TORs and agreed to reach out to Neglected Tropical Diseases (NTD) and Non Communicable Diseases (NCD)
- This progress report focuses on the three priority diseases: Malaria, HIV/AIDS and Tuberculosis.
- The progress report on neglected tropical diseases and non communicable diseases will be included in subsequent reports.



Progress report-MALARIA



- **Long Lasting Insecticidal Treated Nets**
- **Indoor Residual Spraying (IRS)**
- **Use of SP for Intermittent Preventive Treatment**
- **Coverage with Effective Malaria Treatment**



Long Lasting Insecticidal Treated Nets



- The percentage of **households** owning at least one Insecticide Treated Net (ITN) has increased from **39.2 percent in 2007/08 to 63.4 percent in 2009/10.**
- The percentage of children **under five years** who slept under ITN increased **25.7 percent in 2007/08 to 64.1 percent in 2009/10.**
- The percentage of **pregnant women** who slept under an ITN increased from **26.7 percent in 2007/08 to 57.1 percent in 2009/10.**



Indoor Residual Spraying (IRS)



- This intervention is targeted to cover the highly endemic regions in the country in order to reduce the magnitude of the disease burden.
- The high burden malaria regions in Tanzania are Kagera, Mwanza, Mara, Lindi, Mtwara and Ruvuma
- Indoor Residual Spraying is done one region (Kagera) since 2007 and in 2010;
- IRS will be expanded to two other lake regions of Mwanza and Mara.
- Lindi, Mtwara and Ruvuma will have this intervention when financial resources become available



Intermittent Preventive Treatment



- The Use of 2 doses Sulphadoxine /Pyrimethamine (SP) in pregnancy results in improved maternal and foetal outcomes
 - reduction of maternal anaemia by 50% and an increase in average child birth weight
- The coverage for IPTp1- is 67% and IPTp2 is 45%



Progress report -HIV/AIDS



- PMTCT Services
- Condom availability and accessibility
- STI Services
- Counselling and Testing
- Care, treatment and support
- *Challenges facing the health Sector response to HIV and AIDS*



PMTCT services

- Number of health facilities offering PMTCT services increased from 5 in 2004 to 3,626 by December 2009, equivalent to 78.6% of all ANC facilities in the country
- 68% of all estimated HIV pregnant women received prophylaxis for PMTCT (58,833/86,000)
- Uptake of Counselling and Testing in PMTCT sites is 98%



Condom availability and accessibility

- Significant increase of distribution through health facilities and social marketing –from 500,000 pieces in 1989 to 180 million pieces in 2009.
- Condom use on increase
 - 46% of women and 49% men 15 -49 yrs used a condom at last higher risk sexual inter course in 2007/8
 - In contrast to 42% women and 47% men in 2003/4



STI Services

- STI services coverage has increased from 53 facilities in 12 regions in 1995 to over 3,682 facilities in 2010 (70% of all public facilities)
- Remarkable decline in prevalence of syphilis in ANC attendees:
 - 2000-8.2%
 - 2004-7.3%
 - 2005-6.9%
- Over 8,000 health care workers trained on



Counselling and Testing

- Number of health facilities providing VCT increased from 520 in 2005 to 2,134 in May 2010
- Provider initiated counselling and testing now routine in all health facilities
- Number of people who have ever taken the HIV test increased from 2million in 2005 to 11.3 million in may 2010



Care, treatment and support

- The number of health facilities providing care and treatment has increased from 4 in 2005 to 909 by May 2010.
- The number of patients enrolled on care and treatment has increased from nil in 2004 to 664,115 by May 2010.
- The number of AIDS patients on ART has increased from 2000 in 2003 to 341,667 by May 2010.

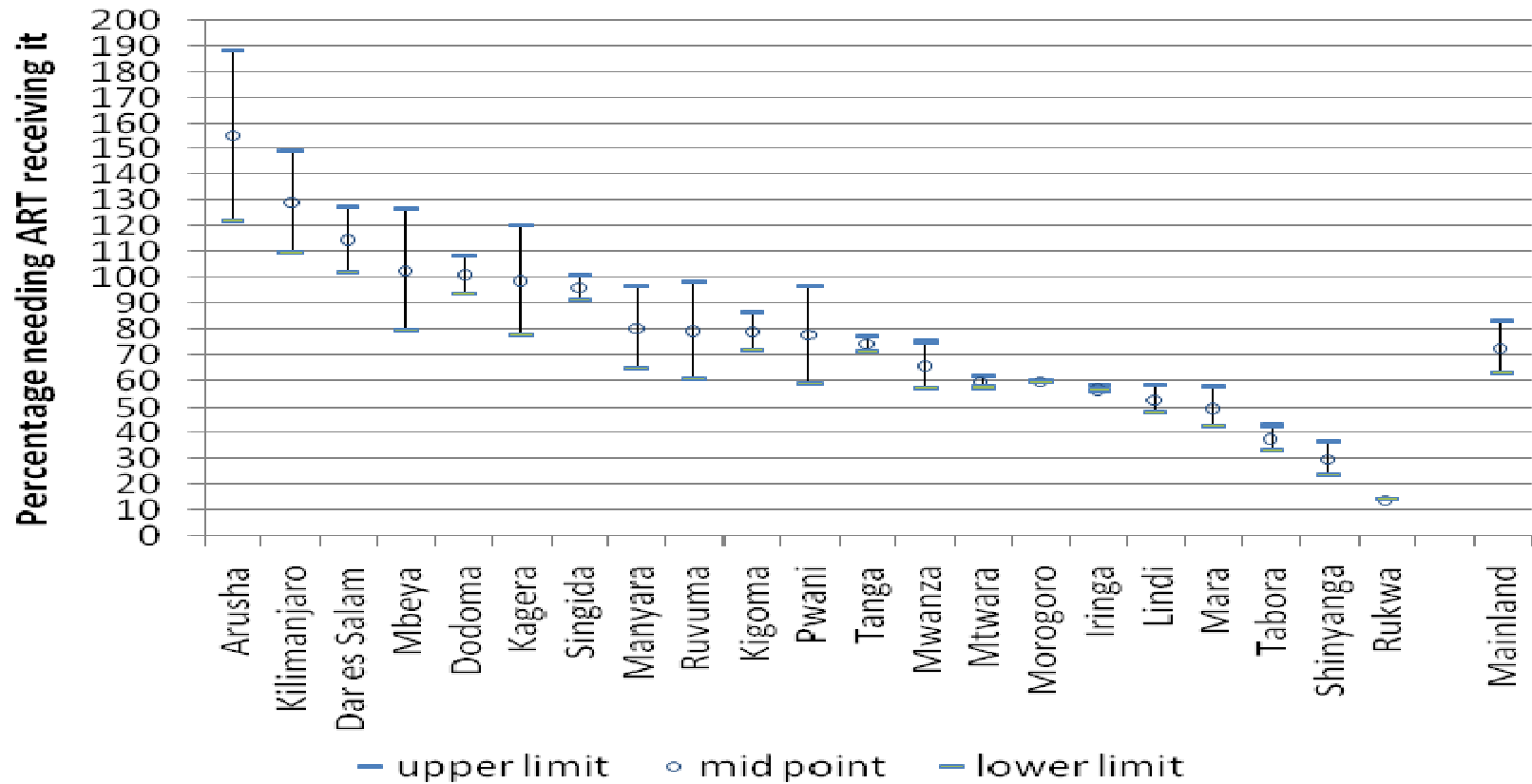


Estimates of coverage of ART by region

- Estimated coverage of ART services for adults in the Tanzanian mainland lies between 63% and 83% of the 20% of HIV infected persons who are estimated to need ART.
- Some regions have the highest estimated coverage (range 122% to 188% Arusha, Kili, Dar, and Mbeya), while others have lowest (14% - Rukwa, Shinyanga and Tabora)



Estimates of coverage of ART by region





Challenges facing the health Sector response to HIV and AIDS

- **Inadequate skilled Human resource to manage HIV intervention which are skill intensive**
- **Inadequate Infrastructure (health facilities)**
- **Inadequate logistic system for HIV commodities, supplies and medicines**
- **Stigma among HCW and Community**
- **Inadequate linkage with community Home Based**
- **Poor HMIS to track the utilization of HIV and AIDS services -most grants are performance based, difficult to show results**



Progress report -Tuberculosis



- The implementation 6 year Strategic Plan (2009-2015) with a mission of providing quality TB and leprosy services with
 - focus on universal access, equity, affordability, gender and those most at risk and
 - the goal of reducing the morbidity and mortality of tuberculosis and leprosy by 50% by 2015 compared to 2009



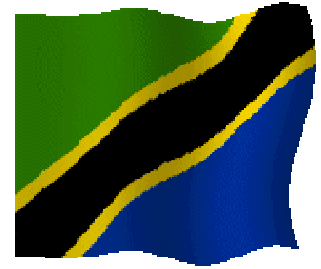
Progress report -Tuberculosis



- The new elements of the STOP TB initiative have been introduced in the program including TB/HIV, Public Private Partnership, Patient empowerment and Community involvement.
- DOTS coverage maintained 100% since 1986.
- Case detection has increased from 51% to 70%
- Treatment success increased from 81% to over 88%
- Uninterrupted availability of TB medicines and supplies
- Increased number of diagnostics centres from 508 to 720



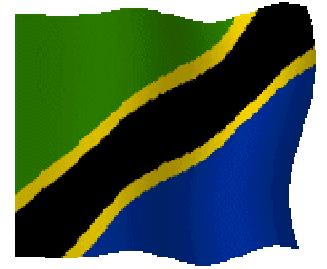
Challenges-TB



- Not all health care facilities are providing TB services
- Weak anti-TB drug management system particularly at the regional, district and health facility levels
- Weak routine surveillance system for drug resistant TB
- Insufficient implementation of Advocacy Communication and Social Mobilization (ACSM).
- Weak implementation of the laboratory external quality assurance (EQA) and inadequate laboratory network
- Lack of new diagnostic technologies especially for TB patients infected with HIV/AIDS and children
- Weak monitoring and evaluation system



Way Forward



- Active involvement of the NTD and NCD in the TWG
- Continue monitoring Disease Control strategic plans
- Ensure value for money in all disease control interventions
- Disease Control Milestones in 2010 AJHSR



Thanks for your attention