

AT A GLANCE

An estimated 10.3 million Tanzanian women will be of reproductive age in 2010.

One-fifth of married women have an unmet need for contraception.

25% of all pregnancies are unintended.

Less than 7% of the total demand for FP is met by use of the most effective methods.

38% of FP users discontinue using a method within 12 months.

Addressing unmet need for FP can avert more than 5,000 maternal deaths and nearly 300,000 child deaths by the Millennium Development Goals target date of 2015.

MEETING NATIONAL GOALS AND PEOPLE'S NEEDS WITH LA/PMs

CURRENT TRENDS WILL NOT MEET NATIONAL GOALS

Based on the promising growth of the family planning (FP) program in the 1990s, the Tanzanian government set a goal in the early 2000s to achieve a 30% modern contraceptive prevalence rate (CPR) in 2010. In April 2008, this goal was revised to 60% by 2015, as part of the strategic framework in the *National Road Map—A Strategic Plan to Accelerate Reduction of Maternal, Newborn, and Child Deaths in Tanzania, 2008–2015*. Achieving this goal is fundamental to slowing the nation's population growth, meeting national development goals, and helping its citizens achieve their reproductive health (RH) intentions.

Use of modern FP methods tripled between 1992 and 2004. The unmet need for FP is currently 22% among married women, and the population continues to grow. By 2015, there will be 1.9 million more women of reproductive age in Tanzania than there are today. To meet the government's contraceptive goal, 4.8 million women would need to be using

a modern method, more than three and one-half times the estimated 1.3 million currently using such a method.

**If the most recent trend were to continue, Tanzania would be expected to reach a CPR of 27% by 2015, which is 45% of what it would take to fulfill its national goal of 60% modern method prevalence.** (See Figure 1, below.)

LA/PMs—A SMART PROGRAMMATIC INVESTMENT

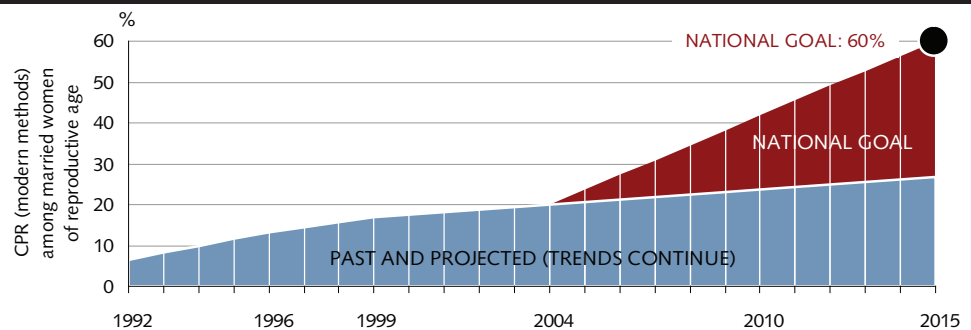
Experience in Sub-Saharan Africa confirms that without widespread availability and use of long-acting and permanent methods of contraception (LA/PMs),\* a country cannot cost-effectively meet its fertility, health, and development goals.

The Government of Tanzania has long recognized the benefits of including LA/PMs in the method mix and of making them more widely available in support of their FP program goals. Fewer than 10% of current FP users choose an LA/PM, and while both programmatic efforts and the actual number of LA/PM users have

*continued on back >*

\* LA/PMs are long-acting methods (IUDs and implants) and permanent methods (male and female sterilization).

FIGURE 1: MEETING TANZANIA'S NATIONAL GOALS



Sources: 1992, 1996, 1999, and 2004 Demographic and Health Surveys, and Reality √ projections for intervening and future years

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increased, the prevalence of these methods has remained relatively steady due to population momentum.

**HELP PEOPLE ACHIEVE THEIR  
REPRODUCTIVE INTENTIONS**

If the existing unmet need for FP in Tanzania could be fulfilled, the demographic impact would be substantial. LA/PMs have an important role to play and offer multiple benefits to programs, women, and couples.

LA/PMs are vital to address the dissonance between women's expressed reproductive intentions and their method use. The gap between intention and practice could be closed by increasing awareness of LA/PMs, correcting misinformation about them, and increasing their availability to expand method choice.

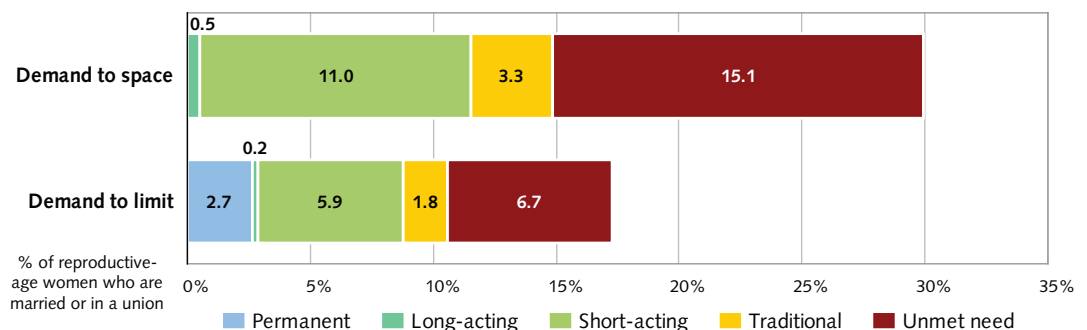
Though IUDs and implants are the most effective methods for Tanzanian women who want to space their births, relatively few current users are using long-acting methods to space their births. (See Figure 2, below.) Among limiters (women and couples who do not want any more children), even fewer are using IUDs or implants. Nine times as many are using a traditional method. Greater access to correct information and to LA/PM services would enable people to meet their changing needs as they progress through their reproductive lives.

**RESPOND TO TANZANIA'S NEEDS**

The RESPOND Project can assist the Ministry of Health and the USAID Mission's implementing partners in current efforts to expand access to FP services. Supported by USAID/Tanzania, the Ministry is partnering with the ACQUIRE Tanzania Project (ATP) to expand LA/PM service availability, quality, and use. Possible interventions include:

- *Reality √*, a cutting-edge forecasting and planning tool that generates data for realistic, evidence-based service and training projections as part of national and provincial FP Repositioning and Contraceptive Security efforts
- Strategies to address the growing demand for implants in Tanzania through outreach and other mobilization approaches
- A targeted strategy to reposition female sterilization, to strengthen and build on ATP's success at increasing use
- Assessing the scale-up of postabortion care and other FP/RH integration models through systematic evaluation and documentation
- Collaboration with the Champion Project, to integrate FP services and education or men

**FIGURE 2: TANZANIA'S DEMAND FOR CONTRACEPTION (MET AND UNMET NEED)**



Source: 2004 Demographic and Health Survey