



TANZANIA

April 2019

Snapshot of the Strength of the Health Information System as a Source of HIV Data

Health information systems (HIS) are important tools in combatting the HIV epidemic, from the individual to the population level. Electronic health records contain individual patient information that helps clinicians provide high-quality care and can improve continuity of care across services and institutions. Laboratory information systems improve the submission of lab tests and the receipt of results. Logistic information systems can help forecast the need for medications and other commodities and reduce stockouts of antiretroviral drugs and other medications. Routine health information systems are used to compile this information for reports from facilities to the national level. Data use at all levels of the health system is necessary to monitor coverage of HIV interventions and progress toward targets. And finally, population-level surveys provide information on changes in behavior and HIV prevalence every few years; these data are needed to assess the impact of HIV programs over time.

HIV IN TANZANIA

- Adult HIV prevalence rate: 4.5¹
- Prevalence rate for women: 5.5¹
- Prevalence rate for men: 3.4¹
- Number of adults living with HIV: 140,000²
- Number of new HIV infections in 2016: 55,000²
- Number of AIDS-related deaths in 2016: 33,000²
- People living with HIV who know their status: 52%²
- People who know their status and are on antiretroviral therapy (ART): 91%²
- People on ART who have achieved viral suppression: 88%²

1 UNAIDS. (2017). AIDSinfo. <http://aidsinfo.unaids.org>

2 United States President's Emergency Plan for AIDS Relief. (2018). Country Specific Information: Tanzania. Retrieved from <https://www.pepfar.gov/countries/index.htm>

3 World Health Organization. (2018). Global Health Observatory: Tanzania Summary Statistics. Retrieved from <http://apps.who.int/gho/data>

4 United Nations Statistics Division. (2016). 2020 World Population and Housing Census Programme. Retrieved from <https://unstats.un.org/unsd/demographic/sources/census/censusdates.htm>

5 United Nations Development Programme (UNDP). (2018) Human Development Indices and Indicators: 2018 Statistical Update. Retrieved from <http://hdr.undp.org/en/2018-update>

6 International Telecommunications Union. (2017). ICT Development Index 2017. Retrieved from <https://www.itu.int/net4/ITU-D/idi/2017/index.html>



Population

55,572,000+³

Year of last census

2012⁴

Life expectancy at birth

64.6/65.8 years (m/f)^{3,5}

Total expenditure on health

6.1% GDP³

Physician density

0.022 per 10,000³

Nurse & midwife density

0.461 per 10,000³

Hospital bed density

27 per 10,000³

Internet users

13% of the population⁶

HEALTH INFORMATION SYSTEM FACTS

Indicator name	Status	Global* status	Title and details
Health strategy	yes	72%	Tanzania Health Sector Strategic Plan (HSSP IV) July 2015 – June 2020
Health sector monitoring and evaluation (M&E) plan	no	42%	Tanzania Health Sector Strategic Plan (HSSP IV) July 2015–June 2020: Monitoring and Evaluation Strategy (M&E Strengthening—5 Year Strategy)
Health information system (HIS) policy	no	19%	
HIS strategic plan	yes	33%	M&E Strengthening: 5 Year Strategy 2015–2020 (A Tanzanian Platform for Health Information and Accountability)
Core health indicators	yes	49%	Tanzania Health Sector Strategic Plan (HSSP IV) July 2015–June 2020
HIS coordinating body	no	26%	
Master health facility list	yes	28%	
Completed Health Metrics Network assessment	no	56%	Assessment of the Health Information System in Tanzania 2007
Population census within the past 10 years	yes	49%	2012 Census
Availability of national health surveys	yes	100%	2015–2016 Demographic and Health Survey
Completeness of vital registration (births and deaths)	no	7%	
Electronic system for routine site-level data	yes	91%	https://www.dhis2.org/inaction
Health statistics office	yes	98%	http://www.nbs.go.tz
Annual health statistics report	no	9%	Annual Health Sector Performance Profile 2014/15
Health statistics website with latest data available	yes	49%	http://moh.go.tz
Data quality assessment aligned with health sector strategy	yes	67%	

Indicator name	Status	Global* status	Title and details
Performance of Routine Information System Management (PRISM) assessment conducted in any region or district	yes	47%	
Percentage of facilities represented in health management information system reports is available	yes	74%	
Proportion of government offices using data to manage health programs (set and monitor targets) is available	no	40%	
Measles coverage reported to the World Health Organization (WHO)/UNICEF	yes	98%	WHO/UNICEF estimates of immunization coverage: 2017 revision ; page 7
Data on the number of institutional deliveries available by district and published within a year	no	28%	Annual Health Sector Performance Profile 2014/15
Policies, laws, and regulations mandating public and private health facilities to report indicators determined by the national HIS	no	33%	
Standards or guidelines for routine health information system data collection, reporting, and analysis	yes	51%	
Procedures to verify the data quality	yes	47%	National Guidelines for Health Data Quality Assessment - 2016
Routine health information system forms allow for gender disaggregation	yes	60%	
At least one national health account completed in the past 5 years	no	35%	Tanzania National Health Accounts Year 2010 with Sub-Accounts for HIV and AIDS, Malaria, Reproductive, and Child Health
Database of healthcare workers by district and main cadres updated in the past 2 years	yes	26%	Human Resource for Health Information System (HRHIS) database
Annual data on tracer medicines and commodities in public and private health facilities available	yes	21%	Annual Health Sector Performance Profile 2014/15, pages 97–101 Tracer Medicine Indicators (Program Indicators): MOH Tanzania HMIS Web Portal – 2016
eHealth strategy	yes	58%	Tanzania National eHealth Strategy July 3, 2013 to June, 2018
Completeness of disease surveillance reporting is available	yes	28%	Monthly Epidemiological Bulletin: March 2017

* "Global status" is the percentage of the 43 countries tracked by the [HIS Strengthening Resource Center](#) that have a positive result (yes/no) for the indicator. A positive result (yes) indicates that the indicator is available and current; a negative result (no) indicates that the indicator is unknown, not available, or not current.

According to the 2010 Tanzania Demographic and Health Survey (DHS) report, the proportion of reproductive-age women who were tested for HIV in the past 12 months and received the results of the test was 29.5 percent.⁷ For men of the same age, the percentage was 25.0 percent.⁷ The proportion of pregnant women attending antenatal care who received counseling on HIV, an HIV test, and the result was 55.2 percent.⁷ A more recent DHS survey in 2016 did not capture information on HIV.

According to the 2014–2015 annual health sector profile from Tanzania’s health ministry, the goal was to reach 76 percent of children and 89 percent of adults in need of ART by 2015. As of 2014, 83 percent of children and 73 percent of eligible adults were on ART. ART retention was estimated at 77 percent for children and 73.7 percent of adults.⁸ Tanzania’s HIV impact survey for 2016–2017 found that among those 15–64 years of age who knew their HIV status, 90.9 percent (92.9% of women and 86.9% of men) were on ART. Viral

suppression among all those 15–64 years of age who were on ART was 87.7 percent (89.2% of women and 84.0% of men).⁹

The country’s current health information system strategic plan—“M&E Strengthening: 5 Year Strategy 2015–2020 (A Tanzanian Platform for Health Information and Accountability)”¹⁰—has been available since 28 April 2016 but it is not online. However, the Draft Tanzania National eHealth Strategy 2012–2018 is online. It emphasizes the health ministry’s recognition that the way forward amid “increasing pressures on the health system [is...] a fundamental transformation in the way healthcare is delivered and managed.”¹⁰ To that end, it offers a detailed eHealth plan with four pillars for its implementation: (1) eHealth foundations, (2) eHealth solutions, (3) change and adoption, and (4) eHealth governance. According to the plan, implementation will occur in four phases (separate from the pillars).

7 National Bureau of Statistics (NBS)/Tanzania & ICF Macro. (2011). Tanzania Demographic and Health Survey 2010. Dar es Salaam, Tanzania: NBS/Tanzania and ICF Macro. Retrieved from <https://dhsprogram.com/publications/publication-FR243-DHS-Final-Reports.cfm>

8 Ministry of Health, Community Development, Gender, Elderly and Children. (2016). Annual Health Sector Performance Profile 2014/15. Retrieved from http://www.tzdp.org.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/Key_Sector_Documents/Monitoring_Evaluation/Final_Annual_Health_Sector_Performance_Profile_2014_15.pdf

9 Ministry of Health, Community Development, Gender, Elderly and Children. (2017). Tanzania HIV Impact Survey: THIS 2016-2017, Preliminary Findings Summary Sheet. Retrieved from https://phia.icap.columbia.edu/wp-content/uploads/2017/11/Tanzania_SummarySheet_A4.English.v19.pdf

10 Ministry of Health and Social Welfare. (2013). Tanzania National eHealth Strategy 2012–2018. Retrieved from https://www.who.int/goe/policies/countries/tza_ehealth.pdf