

**THE UNITED REPUBLIC OF TANZANIA  
PRIME MINISTER'S OFFICE  
TANZANIA COMMISSION FOR AIDS**



**AIDS TRUST FUND**



**THE BOARD OF TRUSTEES OF AIDS TRUST FUND (ATF) REPORT**

**November 2020 – November 2023**

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## ACRONYMS

AIDS	Acquired Immunodeficiency Syndrome
ART	Antiretroviral Therapy
ARV	Antiretroviral
ATF	AIDS Trust Fund
CAG	Controller and Auditor General
CPA	Certified Public Accountant
DAI	Division of Advocacy and Information
DFA	Division of Finance and Administration
DME	Division of Monitoring, Evaluation and Research
DPR	Division of Policy and Planning
FYDP	Five Year Development Plan
GePG	Government electronic Payment Gateway
GGM	Geita Gold Mining
HIV	Human Immunodeficiency Virus
HSSP	Health Sector Strategic Plan
HTS	HIV Testing Services
IPSAS	International Public Sector Accounting Standard
MTEF	Medium Term Expenditure Framework
MSM	Men having Sex with Men
NASA	National AIDS Spending Assessment
NBAA	National Board of Accountants and Auditors
NGOs	Non-Government Organizations
NHIF	National Health Insurance Fund
NMSF	National Multi-Sectoral Strategic Framework
NRD	National Response Division
PLHIV	People Living with HIV
PSSSF	Public Sector Social Security Fund
PMO	Prime Minister's Office
PORALG	President's Office Regional Administration and Local Government
RMM	Resource Mobilization Manager
SANAC	South Africa National AIDS Council
SBCC	Social Behavioral Change Communication
SDG	Sustainable Development Goal
TACAIDS	Tanzania Commission for AIDS
TBC	Tanzania Broadcasting Corporation
TPSF	Tanzania Private Sector Foundation
TZS	Tanzania Shillings
UHC	Universal Health Coverage
UNAIDS	United Nations Agency for AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund (former UN Fund for Population Activities)
WAD	World AIDS Day

## **A WORD FROM THE CHAIRPERSON**

Governments are now moving towards sustainable HIV/AIDS domestic resource mobilization strategies in a bid to reduce gaps and promote better national response impact. To achieve this, the Government of Tanzania enacted Act No. 6 of 2015(TACAIDS Amendment Act) to provide for objectives, functions, governance structure and management of operations of AIDS Trust Fund (ATF).

The governance structure places ATF within Tanzania Commission for AIDS (TACAIDS) under a Board of Trustee, appointed by the Prime Minister of the United Republic of Tanzania in a cycle of three years. We are a second Board of Trustee appointed for a period of three years (November 2020-November 2023) presenting a status report on implementation of our statutory functions. The key function being collecting and disbursing funds according to the prevailing laws.

The Government of the United Republic of Tanzania remains the main contributor to the Fund at 90%, while others contributed 10% of the total TZS 4.276 billion collected in the reporting period. The amount collected was spent on ATF operational costs, opportunistic infection drugs for PLHIV, prevention interventions for youth and young persons at universities and colleges in Dar es Salaam and Dodoma as well as communities along the Hoima Pipeline. The highest expenditure being on PHLHIV opportunistic disease drugs.

Government's position in ensuring ATF fulfills its objectives is unquestionable. While other stakeholders are being sensitized to understand emerging roles and responsibilities in HIV/AIDS response, while at the same time creating appropriate structures, systems, strategies, and resources as part of institutional arrangements and setups. A website that would promote better visibility and accountability is in progress, Government Electronic Payment Gateway (GePG) is used in management of ATF revenue and expenditure. ATF audited statements are now published, resource mobilization strategy review is in progress and a structure for an independent unit to support ATF within TACAIDS is under consideration. These achievements would highly contribute in ATF institutionalization, enhanced legal compliance and fulfillment of the objectives.

The key challenge is enabling IV/AIDS national response to fulfill demand within limited resources and institutional setups. These challenges hinder stakeholder management effectiveness and fulfilment of ATF objectives. All the same, persistence of resource constraints in national HIV/AIDS response underlines the importance of stakeholders joining hands to enhance sustainability of inflows to ATF. Your support is valued and appreciated.



Caroline Mary Mkunde Mdundo  
**Chairperson**

## ACKNOWLEDGEMENT

Achievements made by the Board of Trustees during its implementation period was a concerted effort of all stakeholders ranging from the Government, private sector, individuals, and beneficiaries including PLHIV. On behalf of the Board of Trustees, the Secretariat is grateful to the Government, for fulfilling its commitments of ensuring that all appropriated funds are disbursed timely throughout the implementation period and its full support accorded to the board.

I am also thankful to private sector and individuals for their contributions to **ATF** throughout the period. Specifically, we appreciate TPSF for the partnership with us and engagement of their members, Geita Gold Mining through a collaborative initiative of Kili Challenge against HIV and AIDS, Star Times through BSS platform, IPP Media, Clouds Media to mention few; for their extra ordinary contributions to the trust fund.

I also recognize the efforts of the Board of Trustees of AIDS Trust Fund for their guidance and directives, which in turn brought success in the implementation of the AIDS Trust Fund activities during the period.

My sincere appreciation also goes to staff of TACAIDS/the Secretariat that worked tirelessly to ensure that the functions and objectives of ATF are implemented to meet the intended targets.

I look forward for your continued collaboration for the sustainable domestic funding of the national response to HIV and AIDS.

Jerome Kamwela  
**Secretary**

## CHAPTER ONE: THE HIV CONTEXT AND FINANCING

### 1.0 Background Information

The National HIV/AIDS Policy (2001) prescribes enactment of AIDS Act, No, 22 of 2001, established the Tanzania Commission for AIDS (TACAIDS). The key functions of TACAIDS are mainly leading and mobilizing resources for AIDS/ HIV response in Tanzania Mainland. The Act was later amended by Act No. 6 of 2015 which established the AIDS Trust Fund (ATF) to bridge the domestic financing gap.

The amendment further mandates the Prime Minister to appoint an ATF Board of Trustees comprising of eight members. The Board of trustee must comprise of two (2) representatives from private sector; one (1) each from the following organizations: Non- Governmental Organizations (NGOs), TACAIDS Commissioners, People Living with HIV (PLHIV), Ministry of Health, President Office-Regional Administration and Local Government (PO-RALG), and Ministry of Finance.

The amended Act also described the key functions of ATF as:

- Ensure availability of funds and resources for the implementation of the HIV and AIDS activities;
- Solicit funds and other resources for purpose of ensuring adequate and sustainable flow of monies into the fund;
- Disburse fund or sponsor programmes which meet the criteria established by the law establishing the Trust Fund.

### 1.2 HIV Financing

It is estimated that HIV/AIDS control interventions in Tanzania require about US\$810 million per annum although only an average of US\$500 provided (Tanzania HIV Investment Case 2.0 2019)<sup>1</sup>. Despite the shortfall, donors contribute more than 90 percent (UNAIDS, 2020). Major donors are the United States President's Emergency Plan for AIDS (PEPFAR) and Global Fund AIDS, Tuberculosis and Malaria - GFATM. Donor funding is decreasing globally and in Tanzania as shown in table 1 below. Countries are now forced to mobilize domestic resources for reducing the donor HIV/AIDS interventions financing gap.

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<sup>1</sup> As time counts down to 2030, Tanzania may have no choice for its HIV response. The country adopted measures to optimize the value of every dollar spent in fast tracking the ending of AIDS as donor funds for HIV decline. The Government proactively optimized the response and invested more domestic resources to curb the gap (HIV Investment Case 2 2020)

**Table1: Donor Funded Interventions (in USD)**

Source	2019	2020	2021	2022	2023
PEPFAR	395,000	355,500	319,995	287,955,000	259,159,500
GFATM	138,200,000	136,000,000	122,400,000	110,160,000	99,144,000
Others	5,700,000	5,700,000	5,700,000	5,700,000	5,700,000
Domestic sources	60,390,000	66,429,000	73,071,700	80,379,090	88,416,999
<b>Total</b>	<b>599,290,000</b>	<b>563,629,000</b>	<b>521,166,700</b>	<b>484,194,090</b>	<b>452,420,499</b>
Requirement	810,493,863	810,493,863	810,493,863	810,493,863	810,493,863
<b>Gap</b>	<b>211,203,863</b>	<b>246,864,863</b>	<b>289,327,163</b>	<b>326,299,773</b>	<b>358,073,364</b>

**Source:** TZ COP Planning letters & Strategic Direction Summaries 2022; HIV Funding NFM 2018-2020 and 2021-2023; HIV Funding Landscape FR 834-TZ-C 15/07/2020

### 1.3 Country HIV Status

TACAIDS strategic leadership promotes a decline in new infections and AIDS related death in the country as shown below:

- According to THIS report, estimated all ages new HIV infections from over 72,000 in 2016/2017 to 60,000 in 2022/2023;
- Estimated number of AIDS related deaths decreased from 32,000 estimated to have occurred in 2000 to 22,000 in 2021. This is because of the improved access to ART services for PLHIV;
- Over 1.5m PLHIV are currently on ART translating to 82% of the estimated PLHIV in Tanzania.

The above indicators show that there are some inspiring results of the epidemic multi-sectorial control efforts but the country is yet to reach the targeted control levels. The Commission continues to employ new preventive efforts, consolidate, and expand care and treatment program further for a well-coordinated response.

However, there are also vulnerabilities in response that need to be addressed for the country to achieve the targets and sustain efforts in future. These are funding and efficiency that need to be urgently addressed. Domestic financing remains to be less than 10% of total the HIV spending while the rest is from donor sources i.e. PEPFAR and the Global Fund which is likely to decline in the coming years. This calls for a vibrant and reliable ATF financing to bridge the domestic gap. The strategy is therefore, to transform national response financing through ATF to include: developing and implementing innovative participatory strategies with private sector, individual, institutions /agencies and the government of Tanzania.

#### **1.4 Objectives of the report**

This is a report presenting the operations of the fund for a period of three years (2020-2023) with a view to:

- i. Provide a status of the operation and management of the AIDS Trust Fund;
- ii. Identify key issues, challenges, and lessons for enhancing effectiveness of the Trust Fund;
- iii. Identify and recommend areas of improvements based on performance and experience of the Board of Trustee;
- iv. Inform decision makers.



## CHAPTER TWO: GOVERNANCE AND ACCOUNTABILITY

### 2.1 Governance and Accountability

ATF is established within TACAIDS. TACAIDS provides secretarial support to the Board of Trustee, and support to the overall management of ATF. Its functions include: fund raising, stakeholder communication/ events management, financial accounting, system management and application etc. TACAIDS reports and is accountable to the Board of Trustee on all matters related to the ATF while on other matters to TACAIDS Commission.

It was expected that a unit to support the management of ATF operations would have been established, equipped, and staffed within TACAIDS. A new structure is yet to be approved. Instead, a Resource Mobilisation Manager (RMM) whose contract ended in July 2023, was recruited, and placed within the Finance and Administration section as an interim measure. Thus, a senior person with equivalent competencies was appointed to assume responsibilities.

The management of the fund must also comply with the AIDS Act, 2001, public service delivery standards, laws, and policies. ATF Operational Guideline of 2016 revised in 2023 guides the collection, disbursement and accounting or reporting of funds and the general operations.

### 2.0. Board of Trustees

Annexure 1 is the composition of the Board of Trustee as appointed by the Prime Minister of the United Republic of Tanzania in November 2020. Hon. Jenista Joakim Mhagama (MP), Minister of State, Prime Minister's Office responsible for Policy, Parliamentary and Coordination accordingly, inaugurated the Board in 2021.

The law requires the Board of Trustee to meet once quarterly and deliberate on matters related to guidance, mobilisation of resources, policies, disbursements, reports, and management of funds operations. The Board of Trustees held ten out of twelve statutory meetings in which agenda on fund raising sources and approaches and approval of disbursements, adoption of periodic progress, financial reports, financial statements, and audit reports were tabled, discussed and resolved. Number of meetings attended by each member are in Table 2 below:

**Table 2: Status of Board of Trustees Members Attendance**

No.	Name	Meetings attended		
		2020/21	2021/22	2022/23
1	Ms. Caroline M. Mdundo	3	4	3
2	Mr. Jenard Lazaro	3	3	3

No.	Name	Meetings attended		
		2020/21	2021/22	2022/23
3	Mr. Asupya B. Nalingigwa	3	4	3
4	Mr. John M. Cheyo	3	4	2
5	Mr. Mwasaga W. Mwambuli	3	4	3
6	Dr. Ellen M. Senkoro	2	3	3
7	Dr Beatrice Mutayobya	3	0	0
8	Dr. Anath Rwebembera	0	4	3
9	Dr. Leonard L. Maboko	3	4	2

An inception meeting was held in Bagamoyo on 2<sup>nd</sup> to 4<sup>th</sup> June 2021 to orient the members and secretariat on key issues, structure and governance of the ATF. The meeting enabled the board in consultation with TACAIDS management to map key work plan with key targeted outputs and key performance indicators. Board members were supposed to attend each quarterly meeting and any extra ordinary meeting that shall require their attendance. However, member of the Board may be removed if he or she fails to attend at least two consecutive meeting without a justification. All eight members were able to attend the meeting hence none of them was removed. Its achievements are as presented in para 3.4 below.

## CHAPTER THREE: STATUS OF PERFORMANCE

### 3.1 Key Sources of ATF collections

The statutory sources of funds are: sums of money approved by the Parliament, revenue collected or payable to **ATF**, loan, donation, grants and bequeaths, and investment. The actual sources of funds secured for the ATF are:

- (i) The Government of the United Republic of Tanzania through annual approved budget by the parliament;
- (ii) Geita Gold Mining Tanzania Limited (GGM) through the, annual Kill Marathon;
- (iii) Star Media (Tanzania) through Bongo Star Search;
- (iv) Individuals and institutions through Tigo Lipa number 5379242
- (v) Individuals and institutions through NMB Bank ATF Collection Account, No. 20110033895;
- (vi) Development Partners who provided funds for technical support: United Nations Population Fund (UNFPA) and United Nations Development Programme (UNDP).

The above listed sources are yet to include loans, grants bequeaths and investments. One of the key problems is lack of awareness among stakeholders on opportunities in supporting or investing in **ATF**. Most institutions are unaware that donations to **ATF** are among allowable tax deductions. On the other hand, limitation on investing funds voted by Parliament denies opportunity for earning investment income.

### 3.2 Key Beneficiaries of ATF

The key beneficiaries of ATF include:

- (i) People Living with HIV (PLHIV) who are provided with commodities procured by Medical Stores Department (MSD) through the Ministry of Health;
- (ii) Vulnerable young persons in risk areas such as higher learning institutions, areas with large infrastructure projects (roads, pipelines etc.) markets and recreation facilities;
- (iii) Community, NGOs and Institutions dealing with HIV/AIDS response.,

### 3.3 Status of Collections and Disbursement

The table below shows the annual and total collections/ disbursement of funds. It shows an opening balance of TZs 275, 947,108, Government contribution TZS 3,880,000,000 and other sources TZS 396,015,68 making the total available funds for the three years amounting to TZS 4,551,962,795. The position is summarized in table 3 below.

**Table3: Status of Funds Collections, Allocations, and Disbursements**

No	Particulars	2020/21	2021/22	2022/23	Total
	<b>Opening balance</b>	<b>275,947,108</b>	<b>1,197,120,419</b>	<b>1,058,028,665</b>	<b>275,947,108</b>
1	Revenue Government contribution	1,000,000,000	1,000,000,000	1,880,000,000	3,880,000,000
2	Other sources	67,335,500	160,554,050	168,126,137	396,015,687
	<b>Total Collections</b>	<b>1,067,335,500</b>	<b>1,160,554,050</b>	<b>2,048,126,137</b>	<b>4,276,015,687</b>
	<b>Total funds available</b>	<b>1,325,282,608</b>	<b>2,357,674,469</b>	<b>3,106,154,802</b>	<b>4,551,962,795</b>
1	<b>Disbursement</b> Procurement of PLHIV drugs	0	600,000,000	1,197,869,565	1,797,869,565
2	Prevention	0	520,389,624	601,637,077	1,122,026,701
3	Enablers	106,815,479	156,045,099	640,721,738	903,582,316
4	Coordination	21,346,710	23,211,081	40,962,523	85,520,314
		<b>128,162,189</b>	<b>1,299,645,804</b>	<b>2,481,190,903</b>	<b>3,908,998,896</b>
	<b>Closing balance</b>	<b>1,197,120,419</b>	<b>1,058,028,665</b>	<b>624,963,899</b>	<b>624,963,899</b>

Government contribution is 90% while other sources is 10% of the amount collected in three years ending in 2023. Major disbursements were procurement of PLHIV drugs at 46%, prevention costs 29% and enablers 23% of the total disbursements amounting to TZS 3,908,998,896.

This shows that there is still need to invest further on promotion of **ATF** to increase awareness and contributions so as to expand the sources and streamline and integrate all AIDs response interventions. This would minimize duplication of efforts and moderate the participations to achieve the national targets.

### 3.4 ATF Work Plan Implementation Status

ATF adopted a work plan with an objective of ensuring that adequate resources for HIV/AIDS response are secured and provided. The plan was reviewed and updated annually based on performance. Table 4 below presents the targeted outputs and achievement.

Table 4: Targeted Output and Achievements

TARGETED OUTPUT	ACHIEVEMENT
1. A full-fledged ATF unit, established, equipped, and staffed within TACAIDS	<ul style="list-style-type: none"> <li>A new TACAIDS structure with independent ATF Unit under the Executive Director is at the final stages of the Presidential Instrument Committee (PIC) approvals;</li> <li>Recruited a Resource mobilization Manager (RMM) as an interim arrangement pending approval of the</li> </ul>

TARGETED OUTPUT	ACHIEVEMENT
	<p>new structure but the contract ended in June 2023. TACAIDS management appointed an officer with equivalent competencies to continue support ATF in the interim period.</p>
<p>2. Management and leadership skills and capacity building enhanced among members of ATF Board of Trustees, TACAIDS management 1team</p>	<ul style="list-style-type: none"> <li>• An inception meeting was held in Bagamoyo on 2<sup>nd</sup> to 4<sup>th</sup> June 2021 for Board of Trustee Members and secretariat. It created awareness on roles/responsibilities and mapping of priority actions and outputs;</li> <li>• A study tour visit to South African National AIDS Council (SANAC) by 4 Board of Trustee Members and 4 Secretariat Members. The visit enabled learning and sharing experience on national HIV/AIDS response financing using ATF.</li> </ul>
<p>3.TZS 6 billion for ATF secured by June 2023</p>	<ul style="list-style-type: none"> <li>• Collected 4.27 billion by June 2023 through: <ul style="list-style-type: none"> <li>a. Signing an MOU with TPSF for facilitating participation of private sector</li> <li>b. Organising 6 advocacy meetings with private sector to sensitize support for ATF</li> <li>c. Organising fundraising events in commemoration of World Aids Day on 1st December each year in Kilimanjaro, Mbeya and Lindi</li> <li>d. Sensitising Members of the Parliamentary Standing Committee for Health and HIV sensitisation to create awareness on <b>ATF</b> and financing national HIV and AIDS response</li> <li>e. Conducting media advocacy campaign with bongo star search as a way of promoting awareness and engaging with the media to promote ATF among the media groups</li> </ul> </li> </ul>
<p>4.Updated and harmonized ATF Operational Documents adopted and applied by June 2023</p>	<ul style="list-style-type: none"> <li>• A preliminary review on underlying documentation and policies was conducted through support from UNFPA and UNDP: The review targeted at improving their appropriateness in promoting a harmonized accountable resource mobilization and commitment among stakeholders. The review findings and recommendations are yet to be adopted for implementation.</li> </ul>
<p>5. Resource management systems and standards harmonized and adopted by June 2023</p>	<ul style="list-style-type: none"> <li>• An integrated financial management system for ATF funds was established in accordance with the public finance management standards, guideline and procedures. It included user manual and training users and administrators. It is linked with the website to provide real time reports on collections and</li> </ul>

TARGETED OUTPUT	ACHIEVEMENT
	<p>disbursements;</p> <ul style="list-style-type: none"> <li>• ATF operational Guideline (fund allocation para) revised and amended to accommodate current needs based on findings of a special internal audit report on drugs procurement and distribution.</li> </ul>
<p>6.Governance and accountability in ATF Management enhanced by June 2023</p>	<ul style="list-style-type: none"> <li>• 10 ordinary and 3 extra ordinary Board meetings were convened;</li> <li>• Tablets and monthly internet bundles provided to Board of Trustee to facilitate communication and quarterly reporting to minimize printing and postage charges;</li> <li>• ATF website updated to include a page showing the status of contributions /disbursements linked with financial management system;</li> <li>• 2022/23 ATF Financial Statements with unqualified CAG's opinion;</li> <li>• 2022/23 ATF Financial Statements prepared and submitted for audit on time;</li> <li>• Finance and Planning committee of the Board was established to support the board in matters related to operation of ATF;</li> <li>• Special audit on PLHIV drugs procurement and distribution conducted and identified gaps in the distribution mechanism casting doubt on the realization of the intended benefits. This justified changes in allocations of funds and an amendment to the ATF Operational Guideline, 2016.</li> </ul>
<p>6.Support to AIDS response initiatives based on guidelines provided by June 2023</p>	<ul style="list-style-type: none"> <li>• 607,000 doses of opportunistic infectious drugs (cotrimoxazole) for PLHIV 0and distributed through MSD;</li> <li>• Prevention interventions to High Learning students Dodoma Universities and Colleges and; young people and communities along Hoima (Uganda) and Tanga (Tanzania) oil pipeline in Tanga Municipality and Muheza TC, provided, reported, monitored and key lessons identified.</li> </ul>

### 3.5 Key Challenges and Problems

3.5.1 The main challenges evolve around the fact that financing HIV/AIDS through Trust Funds and mobilization of domestic resources is a new approach applied in high donor dependent countries. Therefore, there are limited examples or best practices and Tanzania may become a role model if successfully implemented. Other challenges include:

- **Unfavorable Economic Performance:** The period under review falls within the era of Corona Pandemic and Russia; and Ukraine war, which have affected the global economy. It has also affected our purchasing power, investment, and income at disposal for donation to **ATF**. It may not be possible to raise adequate funds under these limitations.
- **Limited Public Awareness:** Awareness promotes better commitment, support, and contributions. Public at large and most public /private sector institutions also Civil Society Organizations (CSO) generally lack awareness on the role and accessibility to the ATF.
- **Culture and Traditions Surrounding Health Financing:** Majority of the people are of the view government should meet all costs of delivery of health services out of taxes. This is what hinders the acceptance of responsibility related financing HIV/AIDS related activities.
- **Fragmented Interventions in AIDS Response:** There are many institutions, agencies, and individuals providing interventions some consolidated and coordinated based on sectors or institutional structure. The available structure has gaps which hinder the effectiveness of TACAIDS in coordinating leadership via a consolidated and integrated mechanism enabling easy and fast tracking of the resources invested in AIDS. For instance, a bar that puts condoms in washrooms or construction project that campaigns in a new project area. Such recognition would eliminate duplication of efforts. It may also achieve inclusiveness where each contribution is recognized and consolidated. The visit to SANAC, Republic of South Africa was able to identify that if coordination and communication is well organized helps to streamlining, integration, controlling and resource management effectiveness.

### 3.5.2 Problems

ATF is at the stage of development. It is yet to create appropriate strategies, policies, resources, and systems. At this stage it would require a lot of resources to invest in leaning and creating a reliable transparent and accountable trust fund. Others are:

- **Lack of Appropriate Institutional Setups and Arrangement:** TACAIDS structure lacks an independent unit to support the ATF operations limiting accountability and development of specialized capabilities for supporting **ATF**. Now ATF activities are placed in the Finance and Administration pending approval of the new structure with staff specification. At the moment, it is neither a core nor statutory function; therefore accountability as an incentive of performance is unlikely.
- **Lack of Sustainable ATF Income:** Certainty and sustainability of income may only be achieved if there is a known and capable source of income. The ATF relies more on government funds and willingness of stakeholders to contribute, which may not be sustainable in the long run. Therefore, sustainability is having committed contributors or a legally defined source.

### 3.6 The Way Forward

It is the wish of the Government that ATF operate such that it meets all gaps in AIDS response financing. To meet this goal it should address all the challenges and internal gaps. Planning should be a systematic and gradual investments in resources for ATF aiming at a well-coordinated and integrated giving priority on the following:

- **Stakeholder Management, Engagement and Coordination Framework:** The main thrust is to improve contribution from other sources other than government by recruiting a stakeholder management specialist, updating the communication guideline to cope with needs of sensitization and application of technology and harmonization, integration and consolidation of resources or interventions. It should also include clarification of incentives for various sectors and groups to sustain commitment and willingness to support **ATF**.
- **Create Specialized ATF Competencies:** ATF financing is a new phenomenon requiring specialized competencies, which require learning and gradual planning to ensure relevancy and competencies. It should be noted that right competencies emanate from long-term flexible investments. It calls for a need to undertake a critical review on the performance of ATF, identifying priorities and developing a plan for capacity building. To ensure timely implementation the government should finance the initial costs to ensure competencies are developed without any further delay. Interim arrangements should include recruiting of technical experts in this area.
- **Conduct a Study on HIV Financing, Challenges, and Opportunities:** The Board of Trustees through support from UNFPA initiated a study in HIV financing to explore challenges and opportunities of mobilizing domestic resources. The objective is to identify innovative options for domestic resource mobilization and workable modalities for engaging private sector, NGOs, CSOs and individuals to contribute to **ATF**. It would also help in development of a realistic framework for stakeholder management.
- **Harmonization, Coordination, and Consolidation of Interventions:** An assessment should be made to identify all persons or institutions involved in AIDS to map resources and track activities. It should begin with tracking funds for infrastructure projects allocated for HIV/AIDS prevention basing on area and type. It is possible to minimize duplication while at same time minimizing costs of response.
- **Finalize the Adoption of Recommendations for a viable Source of Revenue:** It is now imperative for the higher authorities to reach to a final decision as to which source of revenue should be designated to the AIDS Trust Fund. This would generate predictable income and reduce dependency on government budget.



## CHAPTER FOUR: CONCLUSION AND VOTE OF THANKS

### 4.1 Conclusion

**ATF** would play a better role in reducing domestic HIV response resource gap in the country. Existence of ATF makes a solid ground and evidence for the need of self-dependence in ending AIDS by 2030, since our key donors are gradually pulling out. Hence supporting HIV and AIDS intervention would not be among priorities for donor support globally.

We wish to emphasise the need for ensuring that ATF environment that promotes its sustainability is created without further ado. It should include updated guidelines, systems, resources as well as approving the new TACAIDS structure and source of revenue.

On the other hand, development of a structure and resourcing stakeholder management should be among priorities of strengthening the ATF and TACAIDS capacity for AIDS/HIV response.

Strengthening and advocating of Public Private Partnership (PPP) is the vital strategy in enhancing the full functionality of ATF in Domestic Resource Mobilization on HIV response. Private sector plays a key role in complimenting the government efforts through Cooperate Social Responsibility (CSR).

Lastly, to advocate for awareness of the ATF, this strategy will enable the community to understand the importance of the Fund as this pandemic has in one way or the other touched everyone in the country.

### 4.2 Vote of Thanks

We would like to extend our sincerely appreciation to the Prime Minister's office, TACAIDS Commission, and the Management for the support and guidance throughout our leadership time. It was the great honour to be part of the TACAIDS team and play part in achieving the target of ending AIDS by 2030 through various strategies including domestic resource mobilization for ATF.

The ATF board of trustee, appreciates the efforts made by permanent standing committee for the health and AIDS, of the Parliament for their valued guidance on how to improve the performance of the ATF unit by advising the government on various issues especially on the approval of the TACAIDS Organization structure and on the reliable source of fund for the ATF.

Finally, but not in the order of importance, UNAIDS, UNFPA and UNDP for their technical support, Geita Gold Mine (GGM) for the devoting proceeds of Kili Challenge to the Trust Fund, TPSF for their willingness to support collaboration with member organizations and individuals who contributed to our accounts.

## Annexure I

### List of Members of ATF Board of Trustees

No.	Name	Gender	Position	Qualifications	Tenure End
1	CPA Caroline M. Mdundo	F	Chairperson	CPA (T), Master in Business Administration (Strategy and Procurement Management)	17.11.2023
2	Jenard Lazaro	M	Vice Chairman	Master of Business Administration	17.11.2023
3	Mr Asupya B. Nalingigwa	M	Member	Master in Computer System Engineering	17.11.2023
4	CPA John M. Cheyo	M	Member	CPA (T), Post Graduate Diploma in Financial Management	17.11.2023
5	CSPT. Mwasaga W. Mwambuli	M	Member	Master of Community Economic Development	17.11.2023
6	Dr. Ellen M. Senkoro	F	Member	Master of Public Health	17.11.2023
7	Dr. Anath A. Rwebembera	F	Member	Dr of Medicine, Master of Public Health	17.11.2023
8.	Mr.Joram M. Anyngise	M	Member	Masters in Development Economics and Policy	17.11.2023
9	Dr. Leonard L. Maboko	M	Secretary	PhD in Clinical Epidemiology	Executive Director

## Annexure II

### List of Members of Secretariat

No.	Name	Gender	Position
1	Dr Leonard L. Maboko	M	Executive Director and Secretary to the Board of Trustees
2	Dr. Jerome P. Kamwela	M	Director of Monitoring and Evaluation
3	CPA Yasin B. Abas	M	Director of Finance and Administration
4	Mr. Jumanne Issango	M	Director of Advocacy and Information
5	Ms. Audrey Njelekela	F	Ag. Director of National Response
6	Mr. Godfrey Godwin	M	Director of Policy and Planning
7	Mr. Devis Misingo	M	Head of Legal Unit
8	CPA Idrisa Mohamed	M	Chief Internal Auditor
9	Ms. Nadhifa Omary	F	Head of Government Communication Unit
10	Ms. Irene Charles	F	Head of Management Information System Unit
11	Mr. Dickson S. Peter	M	Head of Special Program
12	Mr. Elly Kombe	M	Head of Procurement Management Unit
13	CPA Carson Konga	M	Chief Accountant
14	Mr. Miraji R. Mambo	M	Principal Legal Officer and Assistant to the Secretary of the Board of Trustees