THE UNITED REPUBLIC OF TANZANIA

PRIME MINISTER'S OFFICE

TANZANIA COMMISSION FOR AIDS (TACAIDS)

STRATEGIC PLAN 2021/22 – 2025/26

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LIST OF ABREVIATIONS AND ACRONYMS

AGYW	Adolescent Girls and Young Women
AIDS	Acquired Immunodeficiency syndrome
ATF	AIDS Trust Fund
CCM	Chama Cha Mapinduzi
CMACs	Council Multisectoral AIDS Committees
CSOs	Civil Society Organizations
DPs	Developments Partners
EALA	*East African Legislative Assembly*
FYDP III	Third Five Year Development Plan
GBV	Gender-Based Violence
HIV	*Human Immunodeficiency Virus*
KVP	Key and Vulnerable Population
MARPs	Most at Risk Population
MDAs	Ministries, Independent Government Departments and Agencies
MEL	Monitoring, Evaluation and Learning
LGAs	Local Government Authorities
MTEF ()	Medium-Term Expenditure Framework
NACOPHA	National Council of People Living with HIV
NACP	National AIDS Control Programme
NACSAP	National Anti-Corruption Strategy and Action Plan phase III
NMSF IV	National Multisectoral HIV and AIDS Strategic Framework
PESTEL	Political, Economic, Social, Technology, Environmental and Legal
PrEP	Pre-Exposure Prophylaxis
SADC PF	Southern African Development Cooperation Parliamentary Forum
SDGs	Sustainable Development Goals
SWOT	Strengths, Weaknesses, Opportunities and Threats
TACAIDS	Tanzania Commission for AIDS
TDV	Tanzania's Development Vision
TOMSHA	Tanzania Output Monitoring System for non-medical HIV and AIDS interventions
UNGASS	United Nations General Assembly Special Session on HIV/AIDS
VMACs/MMACS	Village/Mtaa Multisectoral AIDS Committees
VMMC	Voluntary Medical Male Circumcision
WMACs	Ward Multisectoral AIDS Committees

FOREWORD

On behalf of the Commissioners, Management and Staff of the Tanzania Commission for AIDS (TACAIDS) I am humbled to present to you the TACAIDS' Strategic Plan for the period 2021/22 – 2025/26 which leads to the achievement of significant progress in the execution of the organisation's mandate. The new strategic plan will consolidate the achievements made and to set up the organisation's strategic directions for the next five years 2021/22 – 2025/26.

During this period, the organisation witnessed major changes in the TACAIDS Act 2001 as amended in 2015. This amendment separated the dua roles of the Executive Director by creating the position of Executive Director and Chairperson respectively.

We have also witnessed the establishment of the AIDS Trust Fund (ATF) in accordance with the Tanzania Commission for AIDS (Amendment) Act No. 6 of 2015. Its functions include soliciting funds for HIV and AIDS interventions in Tanzania by mobilising domestic resources.

Therefore, efforts to strengthen domestic resource mobilization into the ATF is one of the key result areas of the new strategic plan for the sustainable HIV and AIDS response during this time of declining of external support.

This strategic plan has been informed by experiences and lessons learnt in the implementation of the previous Strategic Plan 2014/15 – 20219/20 and recent reviews as well as emerging issues from national and international stakeholders. Through this reference we have been able to make and analyze our strengths, weaknesses, opportunities, and threats in order to help us come up with key strategic issues that define the strategic focus for the next five years.

I believe that the key strategic issues charted in this plan, when implemented effectively will help ensure that we improve the overall coordination of the nation response against the HIV and AIDS scourge. We will work closely with our existing and new partners to leverage the national development efforts; to coordinate with state and non-state actors to improve service delivery.

On behalf of the Commissioners, I wish to assure you of our commitment to full implementation of this plan in line with TACAIDS mandates as stipulated in the TACAIDS Act and result framework embodied in this plan.

I therefore call upon all our stakeholders to walk with us in fulfilling our Vision of leading Tanzanians to HIV and AIDS free generation that will be accomplished through achieving the set ambitious 95-95-95 targets giving us hope that ending HIV in 2030 is possible.

I do look forward to witnessing the realization of results arising from full implementation of this strategic plan.

Dr. Edwiga F. Swai
Chairperson
Tanzania Commission for AIDS

ACKNOWLEDGEMENT

Tanzania Commission for AIDS (TACAIDS) would like to take this opportunity to express its deep appreciation and gratitude to all who participated in the development of this Strategic Plan 2021/22 - 2025/26. The development of this Medium Term Strategic Plan was a collaborative exercise involving various multi-sectoral stakeholders from national to sub-national levels.

TACAIDS management acknowledges the contribution of individuals and institutions who participated in developing this plan through generous contributions, support, commitments, and efforts.

My first gratitude is extended to the members of the Management and staff who provided a leadership role in the review process of this Strategic Plan. I am also thankful to the consultants; Professor Honest Prosper Ngowi and Dr. Faisal Issa who devoted their skills, professionalism, and time to facilitate the development process of this plan. Their technical guidance and commitment is more than appreciated.

Dr. Leonard L. Maboko
Executive Director
Tanzania Commission for AIDS

EXECUTIVE SUMMARY

This Medium-Term Strategic Plan for TACAIDS describes how the coordination challenges of the National response for HIV and AIDS in Tanzania in changing environment will be addressed between 2021 - 2025. This Strategic Plan sets effective strategies aimed at improving the implementation of TACAIDS mandate of coordinating and managing the national HIV and AIDS response in order to ultimately achieve the set 95 – 95 – 95 treatment targets and making ending AIDS by 2030 a reality.

The plan is closely aligned with Third Five Year Development Plan (FYDP III) 2021/22 – 2025/26 that outlines new interventions to enable Tanzania to transform its economy consistent with the e ruling party' manifesto, 2020 – 2025. The NMSF IV (2018/19 -2022/2023) underpins the planning, coordination and implementation guide of the national HIV and AIDS response in Tanzania. National Anti-Corruption Strategy and Action Plan phase III 2017 – 2022 and others, directives from the government to fight against HIV and AIDS in Tanzania

The preparation for the developing this Strategic plan was very participatory it involved various key stakeholders, it has included in-depth analysis of internal and external environment using tools of analysis and review of TACAIDS performance, critical issues were identified that governed the plan development. Among critical issues identified include: improving coordination of the internal and external efforts toward sustainable control of HIV and AIDS epidemic; strengthening HIV and AIDS resources mobilization mechanisms from all sources with emphasis on increased funding from domestic sources; enhance engagement of all stakeholders in the HIV and AIDS national response; improving information management and feedbacks among HIV and AIDS stakeholders to inform decision making; strengthening high level advocacy and promote behavioral change to accelerate uptake of HIV services; enhancing HIV and AIDS gender and human rights responsive programs and improving institutional capacity to deliver services

The Plan outlines the key priorities to strengthen the coordination of the national response. The Vision, Mission, Core Values, Objectives and Targets have been developed and well organized to guide the commission in fulfilling its mandate. The current Mission is: 'To provide evidence-based strategic leadership, policy development and coordination for multi-sectoral HIV and AIDS national response through advocacy and resource mobilization'. Its Vision is to be: 'A

reputable institution leading Tanzanians to HIV and AIDS free generation.' Its core values include accountability, adaptability, best resources utilization, education, integrity, people's focus, team spirit, transparency and trust. The plan has nine strategic objectives that TACAIDS needs to concentrate for outcomes in the next five years which are**:** Non-Communicable Diseases, HIV and AIDS infections reduced and

Supportive Services Improved (Objective A); National Anti-Corruption Strategy and Action Plan enhanced and sustained (Objective B); Coordination of the internal and external efforts toward sustainable HIV and AIDS response improved (Objective C); Partnership and Networking for HIV and AIDS National Response promoted (Objective D); Information management and feedbacks among HIV and AIDS stakeholders to inform decision making improved (Objective E); Adequate financial resources for HIV and AIDS response secured and properly managed (Objective F); Institutional capacity to effectively and innovatively implement its mandate attained (Objective G); HIV and AIDS, gender and human rights responsive programs enhanced (Objective H); and High level advocacy and promotion of behavioral change to accelerate uptake of HIV services strengthened (Objective I). Each Objective has strategies, several targets, and key indicators to track the performance of the plan. The Key medium-term results that this plan aim to achieve by 2025 includes; reduction of HIV new infections; Reduction of HIV prevalence rate; Reduction of HIV and AIDS related deaths; and Reduction of stigma and discrimination incidences.

For TACAIDS to effectively implement its strategic plan, all relevant internal and external stakeholders are to be committed to the plan and its implementation. Annual budgets have to be prepared to give directions to the use of resources to be used in line with organizational strategy and support implementation of the plan. The implementation of this strategic plan will need effective monitoring, evaluation and learning (MEL) for control purposes. There will be on-going monitoring as well as mid-term and end of the plan evaluations. Monitoring and evaluation reports will be produced accordingly and provide lessons for improvement in the future

CHAPTER ONE

1.1 Background

1.1.1 Establishment and functions of TACAIDS

The Government of the United Republic of Tanzania established Tanzania Commission for AIDS (TACAIDS) through a policy decision in the fight against the HIV and AIDS pandemic that was declared a national disaster in 1999. It has been an Independent Government Department since 2001 and it was strategically placed under the Prime Minister's Office as a legally mandated institution to coordinate and provide Multisectoral strategic leadership in the national HIV and AIDS response in Tanzania. The establishment of TACAIDS as an institution was subsequently followed by the enactment of Act No. 22 of 2001 by the Parliament (a law establishing Tanzania Commission for AIDS), amended in 2015. In essence, its positioning within the Prime Minister's Office was intended to signal the high-level political commitment accorded by the government to the challenge of HIV and AIDS as one of the major crosscutting issues facing Tanzania.

The role of TACAIDS is to coordinate the National multi-sectoral HIV and AIDS response in the country. The National Response that adopted '*Three Ones Principle'*, prescribe one national strategy, one monitoring and evaluation framework, and one coordinating body. To facilitate implementation of its role as defined in the Act of Parliament No 22 of 2001, the TACAIDS mandate is broken down into six areas. These are Policy Development and Coordination, Planning and Management of the National Response, Mobilisation of Resources and its uses, Collection of data, analysis and distribution and supervision of all sectors. While TACAIDS embraces the 95-95-95 global targets, it emphatically considers important objectives of prevention of new HIV and AIDS infections and the underlying conditions that breed vulnerability such as gender-based violence (GBV) and social cultural influences that negatively impact the National HIV and AIDS response.

The Act of Parliament No. 22 of 2001 provides functions and roles of TACAIDS as shown in box 1 on the next page:

Box 1: Functions and Roles of TACAIDS

a. To formulate policy guidelines for the response of HIV and AIDS epidemic and management of its consequences in mainland Tanzania

b. To develop Strategic Framework for planning of all HIV and AIDS control programmes and activities within the overall national strategy

c. To foster national and international linkages among all stake holders through proper co-ordination of all HIV and AIDS control programmes and activities within the overall national strategy

d. To mobilize, disburse and monitor resources and ensure equitable distribution

e. To disseminate and share information on the HIV and AIDS epidemic and its consequences in Tanzania and on the programmes for its control

f. To promote research, information sharing and documentation on HIV and AIDS prevention and control

g. To promote high level advocacy and education on HIV and AIDS

h. To monitor and evaluate all on-going HIV and AIDS activities

i. To coordinate all activities related to the management of the HIV and AIDS epidemic in Tanzania as per National Strategy

j. To facilitate efforts to find a cure, promote access to treatment and care, and develop vaccines

k. To protect human and communal rights of people infected and affected with HIV and AIDS

l. To promote positive living of people living with HIV and AIDS

m. To advise the government on all matters relating to HIV and AIDS control in Tanzania mainland.

n. To identify obstacles to the implementation of HIV and AIDS, prevention and control policies, programmes and ensure the implementation and attainment of programmes, activities and targets.

o. To supervise all activities related to the prevention and control of HIV/AIDS epidemic and in particular regarding: i) Health care and counselling of people living with HIV/AIDS; ii) Welfare of orphans and other survivors of people infected with HIV/AIDS; iii) handling of socio, economic, cultural and legal issues related to the AIDS epidemic.

p. To perform such other activities and functions related to the prevention and control of HIV and AIDS epidemic in Tanzania mainland as the commission may deem necessary.

These functions and roles are aligned to the strategic objectives that are stipulated in the Act of Parliament No. 22 of 2001 as follows:

i. To develop a strategic framework and national guidelines to support planning, coordination and implementation of the national multi-sectoral response to HIV and AIDS at all levels.

ii. To develop and facilitate implementation of the national multi-sectoral strategy for mobilization and use of resources for HIV and AIDS.

iii. To develop and facilitate implementation of the national multi-sectoral strategy for advocacy on the HIV and AIDS epidemic and special focus on cultural and gender related issues.

iv. To establish and strengthen partnerships for expanded response among the stakeholders.

v. To promote research on HIV and AIDS and foster linkages with research institutions.

vi. To establish and maintain a multi-sectoral HIV and AIDS Information Management System and facilitate information dissemination.

vii. To develop effective mechanisms for monitoring trends of the epidemic and for monitoring the impact of HIV and AIDS interventions.

viii. To establish and maintain, in a sustainable way, an efficient and effective management capacity at the Commission.

This Strategic Plan covers a period of five years from 2021/22 to 2025/26. It describes the vision, mission, core values, TACAIDS' mandate and functions, objectives, targets, key performance indicators and the process used to derive them. It also describes what TACAIDS is, what it wishes to achieve, and how it is going to achieve its mission. The Strategic Plan starts with the review of the operating environment which is meant to provide a context of both historical and current realities that are likely to have impact on the plan. This provides basis for the strategic options and choices.

The process of developing this plan involved situational analysis which covers policy review, performance review and organization analysis. The situational analysis helped to show areas for improvement as critical issues which need to be addressed in this plan and formed the basis for developing vision, mission, core values, objectives, strategies, targets and key performance indicators. This plan aims at enabling the TACAIDS to effectively implement its mandated role of coordinating and providing multisectoral strategic leadership in HIV and AIDS response in Tanzania.

1.2 Methodology

This Strategic Plan has been developed in accordance with the Medium-Term Strategic Planning and Budgeting Manual of the United Republic of Tanzania. The Plan was prepared in a participatory approach involving the Consultant, TACAIDS Management team, technical staff and other key stakeholders

The process also involved reviewing of various documents such as the Tanzania Development Vision (Vision 2025), National Five Year Development Plan II 2016/17 - 2020/21, Sustainable Development Goals- SDGs, the Chama Cha Mapinduzi (CCM) Election Manifesto of 2020, National Plan for Anti-Corruption Strategy 2017 - 2022, The approved Functions and organisation structure for TACAIDS of 2008 and the National HIV and AIDS policy of 2001. More inputs were also obtained from the previous TACAIDS Strategic Plan, 2015/2016 -

2019/2020 and the performance review. The Consultant also carried out a situation analysis in which Strengths, Weaknesses, Opportunities and Threats (SWOT) were identified and analysed. Furthermore, TACAIDS' Stakeholders were identified and the previous Vision, Mission, Core Values, Objectives, Strategies, Targets and Key Performance Indicators reviewed.

1.3 Purpose of the Plan

The purpose of this plan is to chart a direction and scope of TACAIDS over the medium term by making broad decisions on development, deployment and configuration of the resources within the changing environment and to fulfil stakeholders' expectations and achieve organizational objectives. It aims at improving TACAIDS performance and service delivery; increasing levels of institutional, departmental and individual accountability; Improving transparency and communication between management, employees, clients and other stakeholders; and establishing priorities for efficient and effective resource allocation and sustainability. In addition to creating a single coherent plan, this Strategic Plan aims at informing stakeholders on what TACAIDS plans to do in the medium term and provides a guide to all its operations.

1.4 The Planning Process

In developing the Strategic Plan the following nine steps were adhered to:

1) Situation analysis
    - Planning frameworks
    - Performance review
    - Organization scans (Strengths, weaknesses, opportunities, and challenges)
    - Stakeholders analysis
    - Critical Issues

2) Identification of Core values
3) Review of the previous TACAIDS Vision
4) Review of the previous TACAIDS Mission
5) Developing Strategic objectives
6) Formulating strategies
7) Developing targets and assigning responsibilities
8) Developing Key Performance Indicators
9) Developing the Planning matrix and a Result Framework.

1.5 Layout of this Plan

The TACAIDS 2021/22- 25/26 Strategic Plan is structured as follows: Part I is the introductory part providing background information covering the mandate and functions of TACAIDS. Part II is the internal and external environmental analysis. Among others it covers analysis of the efficacy of TACAIDS' organogram and briefly TACAIDS performance. It identifies the TACAIDS institutional strengths and weaknesses. Also it presents external environmental analysis using the Political, Economic, Social, Technology, Environmental and Legal (PESTEL) model. It also covers stakeholders' analysis and opportunities and challenges analysis. In Part IV, TACAIDS' reviewed Mission and Vision Statements are provided, the critical issues to TACAIDS performance are identified as well as the strategic objectives, strategies and targets to be implemented during the next five years of TACAIDS' Strategic Plan 2020/21-2024/25. PART V is on implementation, Monitoring, Evaluation and Learning (MEL) frameworks.

The Plan also has three appendices: ANNEX I: TACAIDS Strategic Plan Matrix. ANNEX II. TACAIDS Result Framework Matrix and ANNEX III Monitoring Plan Matrix.

CHAPTER TWO

2.0 SITUATION ANALYSIS

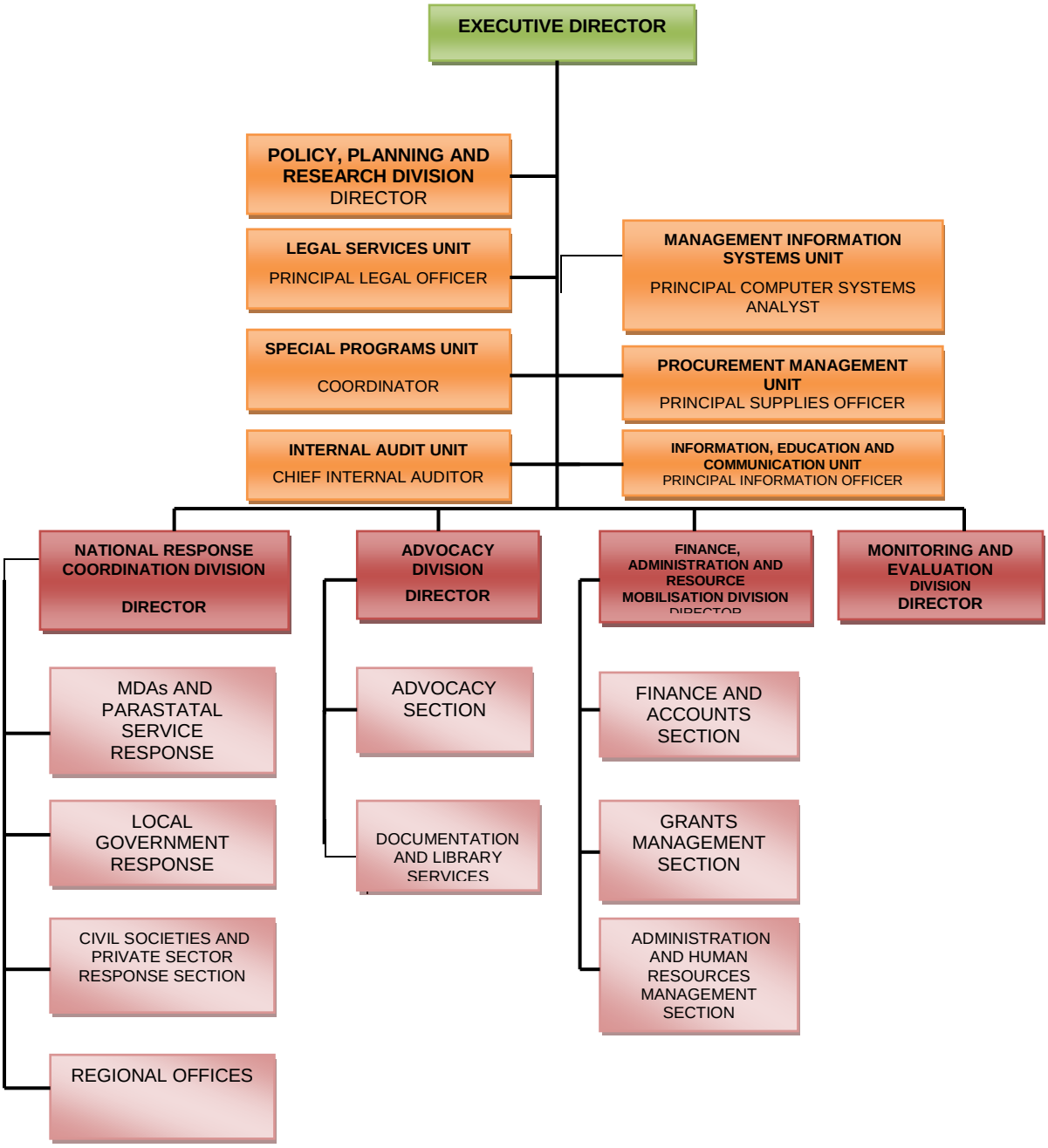
2.1 INTERNAL SITUATIONAL ANALYSIS

The rationale for this section is to establish the strengths and weaknesses of TACAIDS with regard to its internal environment. The appraisal of the organizational structure and functions gives room for the identification of the weaknesses or areas for improvement and the strengths or areas where TACAIDS has competencies and distinctive competencies that if utilized fully will enhance its capacity to realize its Mission and Vision.

2.1.1 Organization structure

TACAIDS is a Commission under the Prime Minister's Office. The Board of Commissioners is at the apex of its governing structure with its chair being appointed by the President. The Board is responsible for the strategic guidance on the key mandates of the Commission and approval of the Commission's annual budget. The Executive Director (chairs the secretariat and is the secretary to the Commission) is the Chief Executive Officer (CEO) of TACAIDS. Five divisional directors and six Heads of Units aid the Executive Director. The relationships and flow of authority are depicted in the organogram in Figure 1.

Figure 1: THE ORGANIZATION STRUCTURE OF TACAIDS



2.1.2 The Efficacy of the Organization Structure

The organogram depicts a lean organization given the national mandate of TACAIDS and reflects the main functionary activities that support the TACAIDS's objectives. Responsibility for National Response to the HIV and AIDS pandemic calls for an organisation that is

objectively dynamic to support timely and quality decision-making. This requires its staff to have adequate knowledge of its reason for existence - raison d'etre - adequately observed within TACAIDS. The management structure is designed to facilitate TACAIDS to have a clear chain of command and communication flow with defined roles and responsibilities. It facilitates the central level team to play a key role in creating effective interactions, networking and important alignments with and among Civil Society Organizations (CSOs), Ministries, Independent Government Departments and Agencies (MDAs), Local Government Authorities (LGAs) and Developments Partners (DPs).

Any effort to make changes to the structure have to consider the following: 1) strengthening linkages and synergies between efforts of different functional directorates and units; 2) maintaining a lean and focussed organizational setup; 3) matrix structure created only for projects with short life cycles; 4) supporting the coordination and domestic resource mobilisation role of TACAIDS in the National Response objective; 5) maintaining manageable number of direct reports to any positions.

2.1.3 Policy context and Documentary Review

2.1.3.1 The Five Year Development Plan (FYDP III) 2021/22– 2025/26 and Tanzania Development Vision 2025.

The FYDP III outlines new interventions to enable Tanzania to continue to transform its economy, i.e *""Realising Competitiveness and Industrialisation for Human Development"* which is in line with Tanzania's Development Vision (TDV) 2025 which *aspires to have Tanzania transformed into a middle income and semi industrialized nation by 2025*, characterized by: High quality and sustainable livelihoods; Peace, stability and unity; Good governance and the rule of law; Educated and learned society; and strong and competitive economy.

Through this Strategic Plan TACAIDS is expected to contribute towards achieving the goals of the National Five Year Development Plan FYDP III - 2021/22 – 2025/26 and the Nation Vision 2025 especially in achieving human development by setting and implement various complementary coordination strategies which aims at reducing HIV prevalence rate from 4.7% to 3.1% through; -

i) Enhancing incorporation of HIV and AIDS activities into core functions of key stakeholders.
ii) Development/review and disseminate Policies, Strategies, Plans and Guidelines on HIV and AIDS response.
iii) Strengthening ownership of the National HIV and AIDS response at regional and local levels.
iv) Increase Community engagement, participation and leadership in supporting HIV and AIDS interventions
v) Enhancing coordination of Key and Vulnerable population (KVP) and Most At Risk Population (MARPs)
vi) Developing a comprehensive HIV and AIDS National Response advocacy strategy, action plan and behaviour change programs
vii) Influencing national policies that improve the quality of lives of the youth and women through national and international partnerships.

2.1.3.2: The 2020-2025 Ruling Party (CCM) Manifesto

The ruling party manifesto, among others, direct the government to fight against HIV and AIDS, reduce new infections and strengthen availability of HIV and AIDS services. The manifesto is also in line with National Development Vision 2025 and SDGs 2030 policies which both aimed at bringing about sustainable development for Tanzania which among others, take care High quality and sustainable livelihoods.

In the medium-term period, TACAIDS will continue to be committed to the implementation of ruling party manifesto through coordination of the National multi-sectoral HIV and AIDS response in the country. This will involve Policy Development and Coordination, Planning and Management of the National Response, Mobilisation of Resources, and its uses, Monitoring and evaluation of the implementation of the National Response against HIV and AIDS and supervision of all sectors aiming at attaining 95-95-95 and three zeros global targets. Also it will consider the important objectives of prevention of new HIV and AIDS infections and the underlying conditions that breed vulnerability such as gender-based violence (GBV) and social cultural influences that negatively impact the National HIV and AIDS response.

2.1.3.3 The National Multsectoral Strategic Framework IV (NMSF IV 2018/19 -2022/2023)

The planning and implementation of the national HIV and AIDS response in Tanzania is guided by the National Multisectoral HIV and AIDS Strategic Framework (NMSF IV) – 2018/19 - 22/23. The effective implementation of the NMSF IV will result in the achievement of the following national priority impact results:

- New HIV infections reduced by 75% in 2020, and by 85% in 2023
- New HIV transition rate among children reduced to less than 5% by 2023 and below 2% by 2030
- AIDS related deaths reduced by 50% in 2020, 70% in 2023 and 80% by 2030
- Zero stigma and discrimination by 2030

To achieve the above results, Coordination and management of the HIV and AIDS multisectoral response will be strengthened, including monitoring and evaluation, research and resource mobilization. Given that coordinating structures are established at all levels, the focus of NMSF IV will be on improving coordination efficiencies, harmonizing, and aligning the different responses based on the three-one principles, (One coordinating structure (TACAIDS), one Multi-sectoral HIV and AIDS strategy (NMSF), one M&E System (TOMSHA).

2.1.3.4 National Anti-corruption Strategy and Action Plan phase III 2017 - 2022

National Anti-Corruption Strategy and Action Plan phase III **(**NACSAP III) is a continuation of Government efforts to complement other Government initiatives in preventing and combating corruption to strengthen good governance across all sectors in the economy. The specific objectives of the strategy are as outlined below:

(i) Promote efficiency, transparency and accountability in public and private sectors;
(ii) Effective enforcement of anti-corruption measures;
(iii) Build capacity of watchdogs and oversight institutions; and
(iv) Effective political leadership in the fight against corruption.

Through this Strategic Plan TACAIDS is committed to the implementation of the NACSAP III by strengthening sensitization programs and measures on prevention and combating corruption practices to its staff.

2.1.3.5 National Health Policy 2007

National Health Policy aims to improve the health of all Tanzanians, especially those at risk, and to increase the life expectancy, by providing health services that meet the needs of the population. TACAIDS through this strategic plan will effectively coordinate multi sectoral response on HIV and AIDS and foster attainment of 95:95:95 targets.

2.1.3.6 National HIV and AIDS Policy 2001

The National HIV and AIDS Policy provides the general framework for collective and individual response to HIV/AIDS pandemic. It stipulates key issues to focus on in the struggle for prevention of HIV/AIDS. Also, it outlines the mandate and functions of the Tanzania Commission for AIDS. With this Strategic Plan, TACAIDS is committed for effective performance of its mandates and functions in order to contribute effectively to the attainment of the HIV/AIDS Policy objectives.

2.1.3.7 Sustainable Development Goals (SDGs)

The goal 3 of SDGs advocates for Good Health and well-being. Ensuring healthy lives and promoting well-being at all ages is essential to sustainable development. Through this Strategic Plan TACAIDS is committed to ensure effective coordination of mult-sectoral response in prevention of HIV and AIDS epidemic and accelerate attainment of three zeros targets by 2030.

2.1.3.8 Previous Vision and Mission

2.1.3.8.1 Previous TACAIDS Vision

To be a reputable Institution leading Tanzanians to HIV and AIDS free generation.

The vision is still well orientated to the existing national frameworks such as NDV 2025, FYDP III, NMSF IV and focus on big picture of the institution in the future and clients' needs.

2. 1.3.8.2 Previous TACAIDS Mission

To provide evidence based strategic leadership, policy development, and coordination for Multi-sectoral HIV and AIDS national response through advocacy and resource mobilization.

The mission is linked to the Vision and making its bearing on main service offered, showing ways to be used to reach partners and also summarises the justification for TACAIDS existence.

2.1.3.9 TACAIDS' Performance Review

TACAIDS has been operative as the coordinating organ for the HIV and AIDS National Response objectives for about two decades. The establishment of TACAIDS was a Government initiative on HIV and AIDS in the country by creating a national body to coordinate and lead the fight against HIV and AIDS, monitor the prevalence and spread of the disease in Tanzania. The disease posed a threat to our nation and in December 1999 it was declared a national disaster. TACAIDS has been implementing its mandate by providing strategic leadership, coordinating, providing support and coherence to the efforts of all stakeholders in the fight against HIV/ AIDS.

The performance of TACAIDS in the last five years 2015/16-2019/20, can be looked at from two main points of view a) National response statistics: HIV and AIDS prevalence control, treatment and cure and impact mitigation objectives; and b) institutional sustainability objective.

If we compare the DHS data of 2003-04 (soon after TACAIDS became operational) and the THIS data of 2016-2017 (more than a decade and half later), the following are observed[1]:

- In 2003-2004, seven (7) percent of Tanzanian adults aged 15 - 49 were infected with HIV; prevalence among women was eight (8) percent and six (6) percent among men.
- In 2016-2017 HIV prevalence among 15– 49 years of age group was 4.6%.
- The HIV prevalence among adults has steadily declined from 5.3 in 2012 to 4.7% in 2017, although still with marked heterogeneity among geographical regions and socio-demographic/ economic subgroups.
- In 2016-2017 the prevalence rate was higher for women at 6.2% and among men was 3.1%. The data shows positive change than in 2003 -2004, although it is less for women.
- The 2016- 2017 THIS report indicates that there has been progress in the number of AIDS-related deaths since 2010, with a 49% decrease, from 48,000 deaths to 24,000 deaths.
- The number of new HIV infections has also decreased, from 83,000 to 72,000 in the same period.

[1] Data source is THIS report 2016-2017; DHS report 2003-2004, and UNAIDS https://www.unaids.org/en/regionscountries/countries/unitedrepublicoftanzania, and the TNMSF for HIV AND AIDS 2018/19 to 2022/23

- On reaching the 90–90–90 and 95-95-95 targets the following are observed:
    - In 2019 in the United Republic of Tanzania: 83% of people living with HIV knew their status; 98 % of people living with HIV were on treatment; 92 % of people living with HIV were virally suppressed.
    - Of all adults aged 15 years and above living with HIV, 92% were on treatment, while only 67.3 % of children aged 0 –14 years living with HIV were on treatment.
    - Ninety-nine per cent (99%) of pregnant women living with HIV accessed antiretroviral medicine to prevent transmission of the virus to their babies, preventing new HIV infections among new-borns
    - Early infant diagnosis — the percentage of HIV- exposed infants tested for HIV before eight weeks of age stood at 55% in 2019.

It is a fact that TACAIDS through its coordination mandate has made commendable progress towards reducing the HIV burden during the past 10 years.

The data on HIV and AIDS above indicate significant progress and the efforts are a step towards sustainable control of HIV and AIDS epidemic. TACAIDS performance is intricately linked to the available positive data. Despite of these outlined achievements, the level of epidemic control has not been reached: new infections have not decreased as desired. Epidemic control is reached at the point at which new HIV infections and AIDS related deaths have decreased and new infections have fallen below the number of AIDS related deaths. However, on institutional sustainability dimension much has been achieved in the last five years and beyond:

Box 2: Institutional Achievements of TACAIDS

- Successful changes in leadership have increased the vibrancy of the institution and institutional vigour;
- An act of Parliament to formally establish TACAIDS was reviewed and passed to incorporate establishment of the AIDS Trust Fund. This shows TACAIDS is dynamically evolving to mitigate resource challenges;
- The Aids Trust Fund Board is in place and mobilization of resources has started;

- TACAIDS has been able to maintain the long-standing relationship and continued implementing the Kili Challenge against HIV supported by GGM;
- The review of the TACAIDS Act has also reduced the age of consent for testing HIV and AIDS from 18 years to 15 years;
- It has also introduced the principles of good governance by separating the non-executive oversight function from the executive performance function of the organization by creating two positions of Commission's Chairman and Executive Director previously combined;
- TACAIDS has been able to adapt and effectively perform its functions despite changes in national and international development dynamics;
- It has always managed to navigate inter-institutional politics, especially on issues related to prevention, treatment and impact mitigation and thus continues to successfully coordinate the HIV and AIDS National Response;
- TACAIDS has been able to maintain and foster its relationship with external stakeholders and international programs for example, the Global Fund, UNAIDS, PEPFER and USAID, CDC, DOD UNICEF, UNDP, ILO, UNFPA, etc.
- It has also continued to work closely with national stakeholders and the business and service communities in the country for example GGM, National media outlets - TBC, ITV, Clouds, Channel Ten, Azam, Wasafi and the mainstream newspapers; higher education and research institutions; private sector umbrella associations, etc;
- TACAIDS has also worked with many non-governmental organizations whose purposes are related to HIV and AIDS response. Such include JSI inc, FHI 360, AMREF, NACOPHA, PSI, Help Age, TAYOA and many other national and local NGOs;
- There has been organizational stability as senior staff mobility has been limited mostly to retirements and promotions, indicating a good work environment and that has allowed continuity;

- TACAIDS has tended to focus on key groups and key issues such as the youth, gender and gender-based violence, stigma and discrimination this within a supportive structure and staff capacity created;

- It has continued to maintain the institutional setup created up to the grassroots level, the CMACs, WMACs and VMACs/MMACS, etc.;

- TACAIDS has continued to link the various stakeholders to each other and be a voice to some, for example associations of people living with HIV and AIDS – The National Council of People Living with HIV (NACOPHA);

- It has promoted workplace interventions in the public service through the President's Office Public Service Management and Good Governance and the implementation of the work place HIV and AIDS guideline and creation of HIV and AIDS Committees in MDAs and public corporations.

- TACAIDS seems to continue effectively harnessing its existing capacity to advocate and lobby for positive government actions, specifically through its parliamentary committee;
- The developed Tanzania HIV Investment case, 2017 is a strategy that will guide the government and stakeholders in allocating resources and making financial decision. This is a milestone towards the objective of ending AIDS by 2030;
- It has been able to influence National Government policies and to keep the National Response to HIV and AIDS a national priority, for example the recent decision by government on source of funds that corporate bodies supporting TACAIDS will get tax reliefs based on their contributions;
- TACAIDS has continued to strengthen its information management system and information collection tools, particularly TOMSHA that is now web based.

- Its communication campaigns for sensitization and awareness creation on the television, national and community radio programs are outstanding efforts, particularly 'Baki njia Kuu', 'Mchepuko siyo dili' and 'Fataki'.

- It has been able to develop, review and oversee the implementation of the Tanzania National Multisectoral Strategic Frameworks for HIV AND AIDS. The recently launched is the 2018/19 to 2022/23 (NMSF IV).
- TACAIDS has continued to successfully work with regional bodies SADC, EAC, etc. in the implementation of regional protocols relevant to the efforts against HIV and AIDS.
- Despite the COVID 19 outbreak TACAIDS has been able to have the HIV and AIDS Response a national priority. Sentiments of national stakeholders indicate high understanding of the possible negative implications of lessening support to HIV and AIDS prevention, care and treatment and impact mitigation efforts

2.1.3.10 The TACAIDS' Workforce

TACAIDS is being managed and run by a relatively small number of staff given its national mandate. TACAIDS has 81 employees. The actual number of staff required is 113. There is therefore a gap of 32 (28.3%) staff. Seven functional divisions and units have inadequate number of staff as per staff needs. The deficiency in staff numbers is more pronounced in the Policy Planning and Research and National Response Coordination divisions. These are very key functional units for TACAIDS to achieve its objectives. TACAIDS has to take action to fill the identified gaps. The implication in the near future is likely to be discrepancy in performance between the regions where TACAIDS Regional Coordinators are located and in the regions with no Regional Coordinators. Otherwise, existing Regional Coordinators should continue to serve more than one region so as to cover the gap and they should be provided with resources to improve their mobility within the regions they serve.

2.1.3.11 TACAIDS' STRENGTHS AND WEAKNESSES ANALYSIS

The information from internal stakeholders for the internal environmental analysis supported the identification of TACAIDS' strengths and weaknesses (S&W). The analysis of Strengths and Weaknesses and the Opportunities and Threats (O&T) identified in the next part supports the developing of the strategic direction of TACAIDS.

STRENGTHS

- Existence of national policy and other guiding tool for HIV and AIDS
- Strong political will and stability that support HIV and AIDS response.
- Existence of supportive stakeholders for HIV and AIDS
- Accepted & consistent performance in coordination
- Committed and innovative leadership
- Professional & Experienced staff
- Existence of well-defined operational guidelines and frameworks
- Proven sensitization & advocacy capacity
- Effective relationship with national and international stakeholders
- Functional information sharing systems
- Good institutional image
- Supportive national coordination structures

WEAKNESSES

- Over centralized coordination function
- Inadequate number of staff to execute duties efficiently
- Sub-optimal data management system
- Inadequate staff with skills in Research and project write ups
- Poor provision of feed back
- Inadequate Financial resources
- Unsynchronised policy and strategic documents
- Inadequate implementation of succession plan
- Lack of Client Service Charter

2.2 EXTERNAL SITUATIONAL ANALYSIS

The external situation analysis involves the assessment of external environment that includes general forces that often influence or will influence TACAIDS medium and long-term decisions. The forces emanate from the dynamics among key groups and important factors to create opportunities and threats/challenges to TACAIDS. These groups and factors that influence the

economic, technological, political-legal and social-cultural environments include: interest groups; community, market, competitors, government, suppliers etc. Before strategy formulation the external environment was scanned.

2.2.1 PEST ANALYSIS

Political – Legal environment:

Tanzania is a stable democratic country and considered one of the most peaceful countries in Africa and most peaceful in East Africa. As a democracy, the wellbeing of the people is an important agenda of the Government. HIV and AIDS as other social and health imperatives are given the right importance reflected in Government policies and actions. The focus on HIV and AIDS is multidimensional. TACAIDS under the Prime Minister's Office is mandated to coordinate and manage the National HIV and AIDS Response, while the Ministry responsible for health hosts the National AIDS Control Programme (NACP) and implements most of the Care and Treatment interventions. This, among others, indicates the importance attached to and centrality of efforts on HIV and AIDS by the National Government. Such structural set up has shown to strengthen the national response to HIV and AIDS as both a social and health problem.

Despite other numerous social and health related needs HIV and AIDS is given the requisite attention. The development partners and the government are positive about actions on the HIV and AIDS epidemic and adequate support is provided. Efforts toward zero deaths have resulted into generally less stigma; and the sensitization and impact mitigation measures are supporting the national and international goal of sustainable HIV and AIDS epidemic control. The Fourth National Multi Sectoral Strategic Framework (NMSF IV) 2018/19-2020/23 is leading the country towards the global goal of Zero new HIV infections, Zero HIV related deaths and Zero stigma and discrimination.

Tanzania is also one among the very first nations in Sub Saharan Africa to comprehensively enact a regulatory framework on HIV and AIDS both legal and the institutional framework[2]. The legal regulatory frameworks in Tanzania include the following: The Constitution of the United

[2] A very detailed analysis of the legal environment is given by the UNDP (2015) 'The Report On The Legal Environment Assessment in Response to HIV and AIDS within the United Republic of Tanzania'.

Republic of Tanzania; The National HIV and AIDS Policy of 2001, The HIV and AIDS (Prevention and Control) Act; The TACAIDS Act; and The National Multi-Sectoral Strategic Framework on HIV/ AIDS – (NMSF I-IV).

At the international and regional levels, the HIV and AIDS epidemic is an important social and health concern. The following prompt and guide national and international actions against the HIV and AIDS epidemic:

- The United Nations General Assembly Special Session on HIV/AIDS (UNGASS) Political Declaration 2011 that commit countries to HIV and AIDS and promotes and protects human rights, eliminate gender inequalities, review inappropriate laws and address the special needs of vulnerable populations;
- The 2030 Agenda for Sustainable Development is also advocating for AIDS response that is a multisectoral, rights-based, people-centred approach.

    - SDG number 3 has the Target 3.3: end AIDS as a public health threat by 2030 and also Target 3.3 sets to achieve universal health coverage, access to quality health care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all. SDGs number 4, 5.10, 16 also relate to the HIV and AIDS response.

- The UNAIDS launched its Fast-Track strategy that sets out targets for prevention and treatment, known as the 90-90-90 and 95-95-95 targets. This includes, reducing new annual HIV infections to fewer than 500,000 by 2020 and to fewer than 200,000 by 2025 and ending AIDS as a public health threat by 2030.
- The 23rd International AIDS Conference (AIDS 2020 Virtual) urged countries to accelerate efforts to end AIDS and not be derailed by COVID-19.
- At the continental level the instruments include: The African Charter on Human and People's Rights commonly known as Banjul Charter, the Abuja Declaration and Plan of Action on HIV and AIDS, Tuberculosis and other related infectious diseases 2006; In 2015 Abuja Declarations and AU Road map was extended to 2030 and developed the Catalytic Framework to End AIDS, TB and Eliminate Malaria in Africa by 2030.

- The Southern African Development Cooperation Parliamentary Forum (SADC PF) Model Law on HIV &AIDS in Southern Africa, 2008 providing a model law on HIV and AIDS for SADC countries.
- At the East African Community level, the EALA passed the HIV and AIDS Prevention and Management Bill in 2012. The Bill was assented by the Chair of the Summit in 2013.

It is apparent that HIV and AIDS response continues to be valid and important agenda at national, regional and international levels despite the COVID 19 pandemic outbreak.

Economic situation

Generally, Tanzania has been performing well economically. In terms of economic growth, it has recorded impressive growth rates compared to its peers. It has posted growth rate of about 6% to 7% in the recent years that is much ahead of the Sub Sahara Africa average of about 4%. Due to COVID – 19 pandemics, the growth rate for 2020/21 is likely to be as low 5.5%. In terms of inflation, Tanzania has performed very well by having single digit inflation of between 3% and 4% in recent years. The country has achieved five months of import support from its exports in recent years. It has increased its Gross National Income per capita to $1,080 in 2019 compared to 1020 in 2018, leading to its announcement as a middle-income country. The middle-income status was targeted to be reached in 2025. Instead, it was reached in 2020 that is five years earlier.

The 2019 Tanzania Mainland Poverty Assessment showed poverty decreasing by 8% where the country's poverty rate has been reduced to 26% in 2018 from 34.4% in 2007 (World Bank, 2019). From 2015 the government has implemented a number of economic infrastructure projects to unlock the productive economic capacity of the country. The infrastructures include roads, ports, airports, railways, electricity etc. The focus of the government from 2015 has been to build industrial economy.

Social and cultural context

While Tanzania is on progress on gender equality issues over the last decade, challenges remaining include equitable access to and ownership of land and resources, low participation of women in all decision-making levels and the exclusion of women from the paid economy among

others. The traditional practices that hinder effectiveness of national response includes female genital mutilation, early or child marriages, wife or husband inheritance and limited property rights for widows.

Technological context

Tanzania has been responding to a number of global and regional initiatives in terms of efficacy of available technologies for HIV prevention. This includes Voluntary Medical Male Circumcision (VMMC), treatment as prevention, in this case -a pre-exposure prophylaxis (PrEP), all as addition to existing initiatives of condoms programming, behaviour change, cash transfer programs to AGYW, advocacy programmes and the issue of vaccination that is at the moment under way.

2.2.2 STAKEHOLDERS ANALYSIS

Stakeholders of the HIV and AIDS National Response were identified and analyzed on the basis of two dimensions. These are (i) Interest on the national response to HIV and AIDS and (ii) Power to influence issues and to determine the future of TACAIDS. The analysis provides useful information about potential stakeholders that are likely to support this implementation of TACAIDS mandate within this strategic planning period. The results of stakeholder's analysis are presented below:

Stakeholder	Interests	Expectations	Power
Government	Government is a highest interest group. Issues of interest include: • It wishes to sustainably control HIV and AIDS epidemic • It wishes for the end of or significantly reduced new HIV and AIDS infections • Availability of adequate resources to support HIV and AIDS National Response • It wishes to be seen to	• Expects visible and constantly effective strategic leadership by TACAIDS on HIV and AIDS National Response • Expects optimum level of performance and services by TACAIDS and other institutions involved in national response • Expects accountable, responsible and	High

Stakeholder	Interests	Expectations	Power
	lead the region in efforts to attain the 95- 95- 95 global targets in the efforts against HIV and AIDS infections, care and treatment	effective use of resources • Expects timely and proper advice and influence of government policies and actions • Expects active and productive engagement of all stakeholders in the HIV and AIDS National Response • Expects tangible results from the National Response	
PLHIV and affected	PLHIV interest is High. Issues of interest include: • Their voices to be heard • Involvement in HIV and AIDs related activities • Adequate HIV and AIDS programs and interventions • Better performance of in National Response: awareness and sensitization of people, care and treatment, and impact mitigation	• They expect improved and accessible services: education, counselling, treatment, and impact mitigation. • Access to correct and timely HIV and AIDS information • Accessible and functioning structures and mechanisms to support quality of life, reduction of stigma and discrimination	Medium
Donors/Development partners	This is a High interest group. Issues of interest include: • Sustainable control of the	Expect visible and effective strategic leadership on National HIV and AIDS Response	**Middle to High**

Stakeholder	Interests	Expectations	Power
	HIV and AIDS epidemic • Visible Tanzania's Government interest on HIV and AIDS response • Improved health and wellbeing of the people • Effective and wide reach of target groups • Progress toward attainment of the 90 90 90 global targets and other global goals • Availability of adequate resources for National HIV/ AIDS response.	Expect optimum level of performance and all institutions involved in national response Expect accountable, responsible and effective use of resources Expect timely and proper advice and influence of government policies and actions Expect active and productive engagement of all stakeholders in the HIV AND AIDS National Response Expects tangible and comparatively positive results as other countries in the region Expects focused strategies on key groups Expects increased use of national resources on HIV and AIDS response	
Women and Youth	The Women and Youth are medium interest group. Issues of interest include: • Healthy, safe and quality lives • To be involved in HIV/ AIDS National Response activities • Adequate and proper dissemination of HIV and AIDS information • Accessible and safe Care, Treatment and impact mitigation facilities and services	• They expect effective HIV and AIDS national response, particularly: • Reduced infection risks • Adequate information and knowledge of HIV and AIDS • Reduction in stigma • Strengthened care and treatment facilities	Medium

Stakeholder	Interests	Expectations	Power
	• Improved gender relations	• Existence of appropriate structures that are close and can facilitate participation and access to services such as HIV and AIDS Clubs, gender and sexual harassment desks, VCT sites etc.	
Regional and Local Governments	This is a medium interest group. Issues of interest include: • Decreased HIV and AIDS infections • Increased capacity for HIV and AIDS in creating awareness, care, treatment and impact mitigation • Productive and sustainable collaborations between different actors • Adequate resources for the regional and districts' responses to HIV and AIDS • Increased voluntary testing and regular availability for care and treatment • Increased attention to key	• They expect effective support facilities and structures: HIV and AIDS committees at different levels; VCT centers; HIV and AIDS clubs and associations, etc. • Increased financial and human resources to support HIV and AIDS responses • Implementable HIV and AIDS guidelines • Efficient use of available resources for HIV and AIDS • Regular coordination meetings involving all stakeholders at regional levels • Increased interventions in	Medium

Stakeholder	Interests	Expectations	Power
	groups youth, women, PLHIV, etc.	schools and colleges	
NGOs, FBOs, CBOs	These are medium interest groups. Issues of interest include: • To be trusted and participate effectively in the HIV and AIDS national response • To see reduction in infections and strengthened care, treatment and impact mitigation services • To have a supportive environment for implementation of HIV and AIDS national Response • Clear and implementable frameworks, policies and guidelines to guide HIV and AIDS activities	• Effective strategic leadership on the National response • Inclusion of best practices of HIV and AIDS response into policies, strategies and guidelines • Regular involvement in HIV and AIDS dialogues and their viewpoints considered • Effective local coordination mechanism • Increased ownership of the national response to HIV and AIDS by Local Governments	Medium
Private sector	This is a low interest group. Issues of interest include: • Sustainable control of the HIV and AIDS epidemic • Enforceable and implementable frameworks, policies and guidelines for HIV and AIDS	• Increased awareness and sensitization efforts to encourage their effective participation • Involvement in national and local HIV and AIDS dialogues • Effective use of	Medium

Stakeholder	Interests	Expectations	Power
		Resources in the national response • Effective follow up mechanism created to enforce adherence to guidelines	
Community	This is a Low to Medium interest group. Issues of interest include: • Improved quality of lives and zero HIV infection rate • Increased effective sensitization and awareness campaigns • Increased care, treatment and impact mitigation efforts • Adequate HIV and AIDS intervention and Programs • Participation in HIV and AIDS interventions and programs	• Effective use of resources for the HIV and AIDS response • Access to quality information and preventive services, VCT, etc. • Access to care and treatment including ARVs • Access to impact mitigation for the infected and the affected • Decreased HIV infections	Medium

The analysis above tells us that all stakeholders are significantly middle to high interest groups and that they are also medium to high power groups. The National HIV and AIDS Response is therefore a very crucial objective to both local and international stakeholders. Ineffective performance is therefore not acceptable. All the stakeholders can wield their influences and cause significant changes in the National HIV and AIDS response. So far, despite not so favorable statistics in the Southern and East African region, the National Response seems to be

performing well. Strategies to be adopted are to reflect closely the interests of all the stakeholders for a possible vibrant future for TACAIDS.

2.2.3 OPPORTUNITIES AND CHALLENGES FOR TACAIDS

Opportunities and challenges come from the analysis of the TACAIDS external environment. The external environment has been analyzed and the opportunities and challenges stated below have been derived from the analysis. It is important for strategies adopted by TACAIDS to reflect its strengths and how they are to be used to take advantage of opportunities and ameliorate the challenges. It is also important to see whether TACAIDS strategic actions can have the opportunities to see or turn the weaknesses to be strengths**.**

Opportunities

- Political stability
- Government leadership strongly advocating for tangible results
- Improved country's economy: Middle-income economic status
- A sense of urgency to outbreaks, epidemics pandemics, etc. such as COVID 19.
- A Global focus on Social wellbeing and Health through the SDGs and other international declarations and conventions.
- A UN Agency dedicated to HIV AND AIDS
- Global players and resources are available in the country, e.g. Gobal Fund, etc.
- More educated Tanzanian youths and particularly girls
- Availability and use of multiple Information and media outlets by Tanzanians especially the youths
- Strengthened government fight against drug abuse
- Increased health service outlets up to the grassroots level
- Improved physical infrastructures and technology to communication.
- More visible in-roads to cultural impediments to quality of life for all.
- Rapid lifestyle changes as a result of technological, information, and educational development making inroads into positive African cultural

Challenges

- World economy affected by inter country economic strives and COVID 19
- Decreasing donor funds for prevention and treatment responses
- Existing dependence on foreign financing.
- Tanzania not being the example of laudable success in HIV AND AIDS response in the region
- Limited involvement of the private sector.
- New outbreaks such as COVID 19 diverting attention from HIV AND AIDS
- Ownership problem by the Local Government Authorities
- Government's concern on physical and or tangible output
- Cultural factors/risks that hinder HIV and AIDS control initiatives
- Increase in urban population
- Increased service demands

2.2.4 CRITICAL ISSUES

Following the situation analysis, TACAIDS has been able to come up with following most important issues which need to be addressed, safeguarded, sustained, maintained and enhanced in order realize effective coordination of the national response towards epidemic control. The issues are as follows: -

i. Improving coordination of the internal and external efforts toward sustainable control of HIV and AIDS epidemic.

ii. Strengthening HIV and AIDS Resources mobilisation mechanisms from all sources with emphasis on increased funding from domestic sources.

iii. Enhance engagement of all stakeholders in the HIV and AIDS National Response.

iv. Improving information management and feedbacks among HIV and AIDS stakeholders to inform decision making.

v. Strengthening high level advocacy and promote behavioural change to accelerate uptake of HIV services.

vi. Enhancing HIV and AIDS gender and human rights responsive programs.

vii. Improving Institutional capacity to deliver services.

CHAPTER THREE

3.0 THE PLAN

3.1 INTRODUCTION

This chapter presents TACAIDS Strategic Plan for the coming five years. The Mission and Vision statements as well as core values are presented. The chapter also indicates the key objectives that are to be achieved during the implementation of the strategic plan. The objectives developed are linked to stakeholders' views, internal and external environmental scanning and issues presented in the previous chapters. The chapter also highlights targets and activities to be employed in implementing the objectives.

3.2 MISSION AND VISION STATEMENTS

The Mission and Vision statements reflect the desires and wishes of the relevant national and international stakeholders guided by national and global goals on HIV and AIDS. The stakeholders include TACAIDS management mandated to oversee the coordination and management of National HIV and AIDS response.

Mission Statement
To provide evidence-based strategic leadership, policy development, and coordination for Multi-sectoral HIV and AIDS national response through advocacy and resource mobilization

Vision Statement

TACAIDS inspires to be:
A reputable institution leading Tanzanians to HIV and AIDS free generation.

3.3 CORE VALUES OF TACAIDS

TACAIDS identifies itself with the following Core Values that guide its operations and its relationships.

Accountability: TACAIDS is responsible for its actions and results;

Adaptability: TACAIDS strives to be adaptive, nimble, and dynamic organization;

Best resources utilization: TACAIDS values and uses public resources efficiently and effectively;

Education: TACAIDS values robust exchange of information and ideas between its employees and stakeholders;

Integrity: TACAIDS fosters a working environment that fights corruption and mismanagement making it ethical and accountable;

People's focus: TACAIDS cares for stakeholder's needs through good customer care and competent and motivated workforce;

Team spirit: TACAIDS promotes a culture of cooperation among its employees and among its partners and stakeholders to increase efficiency while recognizing the contribution of all;

Transparency: TACAIDS is open to its staff and stakeholders in delivering its mandate;

Trust: TACAIDS recognizes that winning the trust of stakeholders is crucial to its leadership role in the HIV and AIDS response.

3.4 OBJECTIVES

TACAIDS has identified 9 objectives, of which objective A and B are crosscutting at national level (implemented by all MDAs). Other remaining seven objectives (C, D, E, F, G, H and I) reflect core functions of each division. Each objective is justified by a rationale, strategies, targets and indicator as outlined in the Strategic Plan matrix see Annex I

- **A.** Non-Communicable Diseases, HIV and AIDS infections reduced and Supportive Services Improved
- **B.** National Anti-Corruption Strategy and Action Plan enhanced and sustained.
- **C.** Coordination of the internal and external efforts toward sustainable HIV and AIDS response towards epidemic control improved.
- **D.** Partnership and Networking for HIV and AIDS National Response promoted.
- **E.** Information management and feedbacks among HIV and AIDS stakeholders to inform decision making improved.
- **F.** Adequate domestic resources for HIV and AIDS response mobilized allocated, and properly managed.
- **G.** Institutional capacity to effectively and innovatively implement its mandate attained.
- **H.** HIV and AIDS, gender and human rights responsive programmes enhanced.
- **I.** High level Policy advocacy and promotion of behavioural change to accelerate uptake of HIV services strengthened.

A. Non-Communicable Diseases, HIV and AIDS infections reduced and Supportive Services Improved

Rationale

According to Government circular number 2 of 2014; employers are required to implement the workplace HIV and AIDS interventions with aim of provision of Information on the essential components of effective HIV and AIDS prevention and care programs for staff and surrounding communities. To implement the workplace interventions, the following strategy will be adopted; Promote preventive measures and services to combat HIV and AIDS; and Implement Government directives and provide other support to PLHIVs.

B. National Anti-Corruption Strategy and Action Plan enhanced and sustained.

Rationale

Corruption is one of the vices in the country that has a negative impact on the social and economic growth. Corruption undermines economic growth, impair public resources mobilization which affects public service delivery. In this regard, TACAIDS will continue to mainstream the National Anti-Corruption Strategy and Action Plan Phase III (NACSAP III) into its policies and strategies. In addition, TACAIDS will endure to create public awareness and engage all stakeholders in preventing and combating corruption in all levels in order to enhance transparency and accountability in Financial Management System for better public services delivery.

The following strategies will be employed to meet the expected outcomes under this objective: -

B.1. Strengthen sensitization programs and measures on prevention and combating corruption.

B.2.Facilitating the adoption of the Plan for implementation of National Ant-corruption strategy on Prevention and Combating Corruption.

C. Coordination of the internal and external efforts toward sustainable HIV and AIDS response towards epidemic control improved.

Rationale

TACAIDS has been able to coordinate the HIV and AIDS National Response in the last two decades successfully. It has been able to undertake mapping of the different players including public expenditure reviews. Institutional structures in the public sector were also created and were centrally controlled. There is a need to promote more effective inter-linkages and promote ownership at the local level while strengthening the contributions of the different stakeholders. The following strategies will be employed to meet the expected outcomes under this objective;

C.1.Develop/review and disseminate Policies, Strategies, and Guidelines on HIV and AIDS response.

C.2.Enhance incorporation of HIV and AIDS activities into core functions of key stakeholders.

C.3.Strengthen ownership of the National HIV and AIDS response at regional and local levels.

C.4.Enhance media relations and communication.

C.5.Improve linkages between TACAIDS' functional activities, divisions and units.

C.6.Strengthen the coordination structures at all levels for the management of the response.

C.7 Establish data base for all Important` stakeholders implementing national response.

C.8.Enhance Joint Planning and review of HIV and AIDs program.

C.11. Intensify advocacy on harmonization and alignment of different plans and services delivery mechanism.

C.12.Promote sharing of lessons and emerging practices through annual conference for sharing experiences and best practices.

C.13.Strengthen dialogue with various stakeholders.

C.14.Enhance coordination of Key and Vulnerable population (KVP) and Most At Risk Population (MARPs)

D. Partnership and Networking for HIV and AIDS National Response promoted.

Rationale

TACAIDS recognizes that its clients need different services and support that it can provide in partnership with other interested parties. To effectively nurture its place in the public arena, it has to influence policies and actions of different players at the local and national levels to promote effective HIV and AIDS response. The following strategies will be employed to meet the expected outcomes under this objective: -

D.1.Review and assess the existing partnerships and networks in the HIV and AIDS national response

D.2.Develop a partnership and networking strategy for the National HIV and AIDS response.

D.3.Scale up Mapping of all stakeholders classified by their core business and Develop a system for mapped stakeholders**.**

D.4.Foster effective and beneficial relationships between local government authorities and other players: national, local and international.

D.5. Influence national level policies through national representatives at local level.

E. Information management and feedbacks among HIV and AIDS stakeholders to inform decision making improved.

Rationale

Strategic leadership is mostly supported by information management systems that elicits, analyses and provides access to information to strategic decision makers. TACAIDS has developed a working information management system supporting its internal operations and facilitates its coordination function. TACAIDS needs to strengthen its capacity to generate the needed high quality information in a timely manner, promote relevant research and use results to influence its approaches and national focus. The following strategies will be employed to meet the expected outcomes under this objective: -

E.1.Enforcing collection and use of data and information management system instituted in central and local government institutions.

E.2.Plan and implement focused operational researches and national surveys to inform on the National HIV and AIDS response.

E.3 Promote availability of HIV and AIDS information for strategic decisions to MDAs and LGAs and other stakeholders.

E.4.Improve TACAIDS library infrastructure and capacity.

E.5. Review, Print and disseminate TACAIDS ICT Policy, ICT Strategy, Enterprise Architecture (EA), Security Architecture and ICT Governance.

E.6 Enhance HIV and AIDS reporting compliance among stakeholders.

E.7.Undertake reviews of programs, policy, systems and strategies on HIV and AIDS response.

E.8.Improve ICT infrastructure and services.

F. Adequate domestic resources for HIV and AIDS response mobilized allocated, and properly managed.

Rationale

Programme, institutional and financial sustainability is a key ingredient for achieving the goal of controlling the HIV and AIDS epidemic. The National HIV and AIDS Response significantly depends on external resources for the procurement of life-saving commodities. This situation is untenable and presents programmatic risk. The COVID - 19 pandemic experiences underlined the unpredictability and unreliability of external dependence; and its attendant risks. Strengthening advocacy for the mobilisation of domestic resources have now been adopted. At the same time TACAIDS will collaborate with stakeholders to ensure effective use and management of available resources. Finding new innovative and sustainable sources of funds and strategic partnerships will be important. Domestic resource mobilisation initiatives by TACAIDS will be supported by collaborative efforts related to the effective use of available resources and timely reporting. The following strategies will be employed to meet the expected outcomes under this objective: -

F.1.Ensure that the AIDS Trust Fund is effectively operational.

F.2.Seek and lobby more government resources for the National HIV and AIDS Response.

F.3.Effectively compete and lobby for more financial resources from the international and private sector partners for the National HIV and AIDS Response.

F.4.Develop and implement joint programs with other Key players.

F.5.Regularly undertake public expenditure reviews and resource tracking activities for HIV and AIDS initiatives.

F.6.Capacity building to staff on public financial management laws, regulations, circulars, and guidelines conducted annually starting from 2021.

F.7.Strengthen the financial resources use and management function within TACAIDS and implementing partners.

F.8.Design and implement effective and prudent financial management systems.

F.9. Develop a domestic resources mobilisation and sustainability strategy for advocating policy makers and strategic partners for sustainable sources for implementing community- led interventions through the ATF.

G. Institutional capacity to effectively and innovatively implement its mandate attained.

Rationale

TACAIDS has to ensure that its employees are competent, service-oriented and highly committed. There is a need to strengthen staff capacity, plan and implement effectively public service policies that are directed to the wellbeing of its staff and improved capacity to sustainably deliver needed services. There is a need to offset the gap in staff numbers that may be hugely affecting departmental performances negatively. Intra-institutional linkages and collaborations have to be strengthened to promote synergy. The following strategies will be employed to meet the expected outcomes under this objective; -

G.1. Ensure effective performance of TACAIDS mandates.

G.2. Improve conducive working environment and maintain harmony at the work place.

G.2.Develop and implement staff retention program/scheme, seek to fill vacant positions quickly and create a succession plan.

G.3.Enhance staff skills and knowledge for effective performance

G.4 Implement effectively a performance management and a reward system that is closely linked to organizational objectives

G.5.Improve management of supply and procurement system, asset management and their disposal in line with existing legislation.

G.6.Enhance the effectiveness of risk management, governance, and accountability; and internal control processes by strengthening monitoring, transparency and timely reporting.

G.7.Improve the management and accountability of resource and ensure that TACAIDS abides by the public finance management regulations and procedures.

H. HIV and AIDS, gender and human rights responsive programmes enhanced.

Rationale

Strengthen advocacy for gender and human rights in HIV and AIDS responsive programmingTACAIDS needs to continue advocating for behavioral change by strengthening its collaborative efforts and coordinating stakeholders' initiatives that work for gender and human rights in HIV and AIDS responsive programs, behavioral change and also influence laws, policies and actions of the Government. To achieve this objective, the following strategies will be employed to meet the expected outcomes: -

H.1.Scale up gender responsive programming and human rights- based approach in the context of HIV and the law.
H.2.Develop rights-based and gender-sensitive standard package of interventions for key populations.
H.3 Enhance knowledge on gender and human rights HIV and AIDS related issues to Law enforcers and makers.
H.4.Review of laws and plans to ensure HIV and gender sensitivity.
H.5. Enhance Reduction of GBV, stigma and discrimination to PLHIV and community at large.

I. High level Policy advocacy and promotion of behavioural change to accelerate uptake of HIV services strengthened.

Rationale

Effective and sustainable sensitization, education and awareness campaigns are important for prevention of HIV infections, promotion of voluntary testing, decision on care and treatment, stigma control and impact mitigation objectives. TACAIDS needs to continue advocating for behavioral change and optimally involve and coordinate stakeholders' initiatives that work for behavioral change and also influence policies and actions of the Government. The following strategies will be employed to meet the expected outcomes under this objective: -

I.1.Develop a comprehensive HIV and AIDS National Response advocacy strategy, action plan and behaviour change programs.

I.3. Improving key stakeholders' involvement in community HIV and AIDS educational campaigns and Organizing meetings with the different stakeholders as convenient and reaching agreements on future collaborations.

I.2.Promote education, sensitization and awareness efforts on HIV and AIDS in schools and colleges.

I.4.Continuous improvement of TACAIDS image internally and externally.

I.5.Influence national policies that improve the quality of lives of the youth and women through national and international partnerships.

I.6. Advocate to all sectors to mainstream in their plans the issues of KVP and Genders issues.

CHAPTER FOUR

4.0 IMPLEMENTATION, MONITORING, EVALUATION AND LEARNING

4.1 THE RATIONALE

For any strategic plan to be implemented successfully, it requires an implementation, monitoring and evaluation process to be thought of beforehand. This part shows some important aspects to be considered to support TACAIDS to achieve its mission, vision and objectives.

4.2 IMPLEMENTATION OF THE STRATEGIC PLAN

For TACAIDS to effectively implement its strategic plan, all relevant internal and external stakeholders are to be committed to the plan and its implementation:

i) The Commissioners have to make strategic decisions and provide oversight over the implementation of the strategic plan;

ii) The management and staff of TACAIDS have to be highly committed and motivated to deliver the objectives of the Commission;

iii) The Government and development partners have to continue giving priority to HIV and AIDS and provide adequate resources and support

iv) There should be increased ownership and commitment to the National HIV and AIDS Response in the Regional Administrations and Local Government Administrations;

v) The management of TACAIDS has to steer the organization strategically and prudently in the right direction while providing adequate supervision of the employees' work.

It is also important for yearly budget to be prepared to give directions to the use of resources to be used in line with organizational strategy and support implementation of TACAIDS Strategic Plan. The financial resources envelope available will determine the strategic objectives, strategies and activities that are to be given priority over others. Nonetheless, there are a number of efforts identified in the strategy document that do not need huge resources or any new financial resources.

4.3 MONITORING, EVALUATION AND LEARNING (MEL)

The implementation of the strategic plan will need effective monitoring, evaluation and learning (MEL) for control purposes. Feedback mechanism that is in-built is essential for consistent performance. Mid-term and end-of-term evaluations provide reflection opportunities and allow corrective measures to be taken and learning to occur in order to ensure successful implementation.

Monitoring of the implementation of the plan will be overall responsibility of the Executive Director through the Monitoring and Evaluation (M&E) Division. Implementing functional departments and units shall be responsible for development of relevant reports and submit to the M&E Department on time for compilation and production of quarterly and annual reports.

The specific objectives of evaluation will be to:

i) Assessing TACAIDS performance over time in achieving its objectives and targets;

ii) Identifying challenges in TACAIDS performance and making strategic decisions to overcome them;

iii) Identifying actual and potential problems before the situation becomes critical;

iv) Investigating deviations from plans and taking corrective measures if needed;

v) Determining whether the base assumptions about strengths and weaknesses, challenges and opportunities are still valid;

vi) Determining whether mobilized resources are being utilized efficiently to achieving the targets set for strategic objectives of the plan;

vii) Identifying sustainability of gained achievements

viii) Drawing lessons that can inform about future directions.

4.3.1 Monitoring Mechanism

Monitoring of the implementation process will involve both internal and external experts. The monitoring process will include among others: verbal feedback, track up meetings, performance reports, and physical inspections. Specifically, emphasis will be on:

i) Quarterly, semi-annual and annual implementation reports prepared using the Medium-Term Expenditure Framework (MTEF) formats.

ii) Getting feedback from forums such as workshops, meetings, seminars, symposia, informal meetings, surveys, and suggestion boxes.

4.3.2 Strategic Plan Evaluation

This is the actual assessment of performance with regard to the implementation of the TACAIDS strategy. It involves collecting and analysing information about a program's activities, characteristics, impacts, outcomes and sustainability among others.

There shall be:

i) Mid-term evaluation of the implementation of TACAIDS Strategic Plan;

ii) Evaluation at the end of Strategic Plan Period.

4.3.3 The Internal Reporting Plan

Internal reporting for accountability by TACAIDS is essential to allow for timely corrective actions to be taken if there are deviations and to allow for adjustments of implementation of the plan as needs necessitate. Below is the internal reporting plan.

Table 1: Internal Reporting Plan

#	Report Type	Frequency	Responsible
1.	M&E Reports	Quarterly	M&E
2.	Progress Reports	Quarterly Annually	M &E & PP
3.	SP Mid-Term Review	Once	M&E
4.	Internal Audit Reports	Quarterly	Internal Auditor
5.	Risk Management Reports	Quarterly	Risk Coordinator
6.	SP Annual Review	Once	M&E
7.	Financial Reports	Quarterly	DFA

4.3.4 External Reporting Plan

Progress reports are also requirements of external stakeholders as mandated through specific government policies or from specific to agreements with different stakeholders.

Table 2: External Reporting Plan

#	Report Type	Recipient	Frequency	Responsible person
1.	M&E reports	PMO & Stakeholders	Annually	M&E
2.	Annual and quarterly reports	PMO, TR	Quarterly & Annually	PP
3.	Audited Financial Statements	PMO, Parliament, TR	Annually	DFA
4.	Manpower Strength Reports	PO-PSM	Quarterly	DFA
5.	Internal audit reports	Internal Auditor General	Quarterly & Annually	Internal Auditor
6.	Procurement Reports	PPRA	Quarterly & Annually	PMU
7.	Risk Management Reports	Internal Auditor General	Quarterly & annually	Risk Coordinator

ANNEX 1: TACAIDS' STRATEGIC PLAN MATRIX

OBJECTIVE CODE	OBJECTIVE	IMPLEMENTATION STRATEGIES	TARGET CODE	TARGETS	RESPONSIBLE DEPT/UNIT
A	**Non-Communicable Diseases, HIV and AIDS infections reduced and Supportive Services Improved**	**A.1.**Promote preventive measures and services to combat HIV and AIDS and Non Communicable disease.	**A01**	HIV and AIDS, NCD and COVID-19 Workplace Programs to 86 TACAIDS staff strengthened by June 2025.	**DFA**
B	**National Anti-corruption Strategy and Action Plan enhanced and sustained.**	**B.1.**Strengthen sensitization programs and measures on prevention and combating corruption.	**B01**	Anti-corruption Awareness creation programs conducted to 86 TACAIDS staff by June 2025	**DFA**
		B.2.Facilitating the adoption of the Plan for implementation of National Ant-corruption strategy on Prevention and Combating Corruption.	**B02**	TACAIDS' Plan for implementation of National Anti-corruption strategy developed and adopted by 2025	**DFA**
C	**Coordination of the internal and external efforts toward sustainable HIV and AIDS towards epidemic control response improved.**	**C.1.**Develop/review and disseminate Policies, Strategies, and Guidelines on HIV and AIDS response.	**C01**	NMSF IV and HIV and AIDS Policy reviewed and disseminated by June 2025	**DPR**
			C02	Strategies and guidelines for enhancing HIV and AIDS response updated/developed and disseminated by June 2025.	**DAI** **DNR**
			C03	Strategy for integration of peoples with disabilities' needs in the national response developed and disseminated by June 2025	**DNR**
		C.2. Enhance incorporation of HIV and AIDS activities into core functions and plans of key stakeholders.	**C04**	HIV and AIDS mainstreamed into sectoral plans by June 2025.	**DPR**

		C.3.Strengthen ownership of the National HIV and AIDS response at regional and local levels.	**C05**	Advocacy sessions on the ownership of the HIV and AIDS response to Regions and LGAs of priority conducted annually by June 2025	**GCU** **DNR** **DAI**
			C06	Priority regions supported to review their HIV and AIDS strategic plan by 2025	**DNR**
		C.4. Improve media in communicating Correctly and consistently on Current HIV and AIDS issues	**C07**	Media and communication guide on HIV and AIDS issues reviewed and disseminated by June 2025.	**DAI** **GCU**
		C.5. Improve linkages between TACAIDS' functional activities, divisions and units.	**C08**	Commission Quarterly and annual performance reports prepared annually by June 2025.	**DME**
			C09	TACAIDS' Quarterly Revenue and Expenditure and Ruling Party Election Manifesto implementation reports prepared annually by June 2025	**DPR**
		C.6. Strengthen the coordination of international agencies and structures at all levels for the management of the HIV and AIDS response	**C010**	Capacity building sessions to members of HIV and AIDS coordination structures at National, regional and local levels on HIV and AIDS response conducted annually by June 2025.	**DNR**
			C011	International agencies and companies in response to HIV and AIDS coordinated by June 2025	**SPU**
		C.7 Establish data base for all Important` stakeholders implementing national response and improve modalities Mapping of all stakeholders classified by their core business and Develop a system for	**C012**	HIV and AIDS stakeholders database developed and updated by June 2025.	**MISU** **DNR**

		mapped stakeholders.			
		C.8. Enhance Joint Planning and review of HIV and AIDs response programs	**C013**	Five Joint planning meetings and annual performance review forums on HIV and AIDS programs convened by June 2025.	**DPR** **DNR**
		C.9. Intensify advocacy on harmonization and alignment of different plans and services delivery mechanism.	**C014**	Dissemination of NMSF V to key stakeholders and conducted annually by June 2025	**DPR**
		C.10. Promote sharing of lessons and emerging practices through annual conference, National festivals, commemorations and exhibitions for sharing experiences and best practices.	**C015**	Best practices on response to HIV and AIDS documented and disseminated annually to key Stakeholders by June 2025.	**DNR** **DME** **DAI**
			C016	National festivals, exhibitions and commemorations on HIV and AIDS coordinated annually by June 2025	**DAI**
		C.11. Strengthen dialogue with various stakeholders.	**C017**	Quarterly Joint thematic Working Group, TWCs and Biennial stakeholder review forums conducted by 2025	**DPR** **DNR**
			C018	Biannual Youth dialogues in response to HIV and AIDS conducted annually by June 2025	**DNR**
		C.12. Enhance coordination of Key and Vulnerable populations (KVP) and Most At Risk	**C019**	Quarterly joint supportive supervisions and discussion forums for Key and Vulnerable Populations (KVPs) conducted yearly by June 2025.	**DNR**

		Population (MARPs)	**C020**	HIV Prevention programs for AGYW and KVPs effectively coordinated and supported annually by June 2025	**DNR**
		C.13. Strengthen implementation of TACAIDs image promotion programs	**C021**	Promotional packages developed and TACAIDS image promoted by June 2025	**GCU**
D	**Partnership and Networking for HIV and AIDS National Response promoted.**	**D.1.**Review and assess the existing partnerships and networks in the HIV and AIDS national response	**D01**	Partnerships and networks on HIV and AIDS national response reviewed by June 2025	**DNR**
		D.2.Develop a partnership and networking strategy for the National HIV and AIDS response	**D02**	Partnership and networking strategy for the National HIV and AIDS response developed by June 2025	**DNR**
		D.3.Foster effective and beneficial relationships between local government authorities and other players: national, local and international	**D03**	HIV and AIDS stakeholder review forum involving LGAs and other key players conducted annually by June 2025.	**DNR**
			D04	Annual International and Regional integration forums on HIV and AIDS response effectively attended by 2025	**SPU**
		D.4. Influence national level policies through national representatives at local level.	**D05**	Two policy advocacy sessions with political leaders and decision makers on HIV and AIDS response conducted annually by June 2025.	**DAI**
		D.5. Improve modalities Mapping of all stakeholders classified by their core business and Develop a system for mapped stakeholders.	**D06**	Stakeholders mapping done and a system for mapped/reviewed stakeholders developed by June 2025.	**DNR** **MISU**

E	**Information management and feedbacks among HIV and AIDS stakeholders to inform decision making improved.**	**E.1.**Improve collection and use of data and information management system in central and local government institutions	**E01**	Information systems reviewed and instituted by June 2025.	**DME** **MISU**
			E02	HIV and AIDS response best practices documented, disseminated and feedbacks from key stakeholders received annually by June 2025	**DME** **DNR** **GCU**
		E.2. Plan and implement focused researches and national surveys to inform on the National HIV and AIDS response.	**E03**	Three focused researches and surveys on HIV and AIDS response conducted by June 2025.	**DME**
		E.3 Promote availability of HIV and AIDS information for strategic decisions to MDAs and LGAs and other stakeholders.	**E04**	Multi-sectoral M&E Steering tools updated and utilized by June 2025.	**DME**
		E.4.Improve TACAIDS library infrastructure and services.	**E05**	TACAIDS' Library equipped with HIV and AIDS films and story books by June 2025.	**DAI**
			E06	TACAIDS' online Library updated and promoted to key stakeholders by June 2025.	**DAI**
			E07	TACAIDs' website and social media updated and maintained annually by June 2025.	**GCU** **DAI**
		E.5. Review, Print and disseminate TACAIDS ICT Policy, ICT Strategy, Enterprise Architecture (EA), Security Architecture and ICT Governance.	**E08**	TACAIDS' ICT Policy and Strategy updated and disseminated by June 2025	**MISU**
		E.6 Enhance HIV and AIDS reporting compliance among	**E09**	90 percent of HIV and AIDS coordinators at Regional, LGAs and CSOs are oriented on HIV and AIDS	**DME**

		stakeholders.		reporting compliance guideline by June 2025	
			E010	Quarterly supportive supervision visits and stakeholders meetings on reporting compliance conducted by June 2025.	**DME**
		E.7.Improve ICT infrastructure and services.	**E011**	TACAIDS' ICT infrastructure developed, maintained and upgraded annually by June, 2025	**MISU**
F	**Adequate domestic resources for HIV and AIDS response mobilized allocated, and properly managed.**	**F.1.**Ensure that the AIDS Trust Fund is effectively operational.	**F01**	Sustainable source (s) for funding AIDS Trust Fund operations secured by June 2025	**DFA** **ATF RMM**
		F.2.Seek and lobby more government resources for the National HIV and AIDS Response.	**F02**	Financial resources worth to 50 billion secured by June 2025	**DFA** **ATF RMM** **SPU**
		F.3. Effectively compete and lobby for more financial resources from the international and private sector partners for the National HIV and AIDS Response.	**F03**	Bi annual Advocacy sessions for increased Donor and Private sector contribution to the HIV and AIDS response conducted annually by June 2025	**DAI** **DFA** **ATF RMM**
		F.4.Develop and implement joint programs with other Key players.	**F04**	Ten project write-ups in response to HIV and AIDS developed and implemented by June 2025	**SPU** **DFA**
		F.5. Regularly undertake Public Expenditure Reviews and National Spending Assessments (NASA) for HIV and AIDS interventions.	**F05**	Public Expenditure Review (PER) for HIV and AIDS interventions conducted annually by June 2025.	**DFA**
			F06	National HIV and AIDS spending Assessments (NASA) conducted biennial by June 2025.	**DME**
		F.6. Capacity building to staff on public financial management laws, regulations, circulars and	**F07**	Capacity building to 20 staff on public financial management laws, regulations, circulars and guidelines enhanced by June 2025	**DFA**

		guidelines conducted annually starting from 2021			
		F.7. Strengthen the financial resources use and management function within TACAIDS and among partner.	**F08**	Internal Audit Unit's staff and audit committee members trained in Auditing and Financial management by June 2025	**IA**
		F.8. Design and implement effectively prudent financial management systems.	**F09**	Quarterly financial and performance audits conducted each year by June 2025.	**IA**
			F010	Quarterly Internal Audit committee meetings conducted annually by June 2025	**IA**
			F011	Compliance to Public Procurement Act and regulations instituted to TACAIDS operations by June 2025.	**PMU**
G	**Institutional capacity to effectively and innovatively implement TACAIDS mandate attained.**	**G.1.**Ensure effective implementation of TACAIDS mandates.	**G01**	G.1.1.Monthly management and quarterly Commission's and ATF Board meetings conducted each year by June 2025	**LSU**
			G02	G.1.2.Biannual Workers council meetings and quarterly employment committee meetings convened annually by June 2025	**DFA**
			G03	G.1.3.TACAIDS annual Plans and budgets prepared accordingly and its implementation coordinated annually by June 2025	**DPR**
			G04	Three DPR staff and 22 budget officers and budget committee members capacitated on result based planning, budgeting and implementation by June 2025.	**DPR**

		G.2. Improve conducive working environment and maintain harmony at working place.	**G05**	Working tools, Workers' statutory and administrative services to staff provided annually by June 2025.	**DFA**
			G06	TACAIDS HQ building constructed in Dodoma by June 2025	**DFA**
		G.3.Develop and implement staff retention program/scheme, seek to fill vacant positions quickly and create a succession plan.	**G07**	Twenty (20) Vacant positions field, succession plan and staff retention scheme developed and implemented by June 2025.	**DFA**
		G.4. Enhance capacity building to TACAIDS staff	**G08**	Staff capacity building programs facilitated and enhanced by June 2025.	**ALL DEPT&UNITS**
		G.5.Enhane effective performance management and a reward system that is closely linked to organizational objectives	**G09**	Performance assessment of TACAIDs staff and review of Client Service Charter (CSC) conducted annually by June 2025.	**DFA**
		G.6. Improve management of all procurements, asset management and disposal in line with existing legislation.	**G010**	Effective Management of all procurements, asset management and disposal in line with existing legislation attained by June 2025.	**PMU**
		G.7.Enhance the effectiveness of risk management, governance, control processes and react timely with the right information on changes in perspectives and actions by the external players.	**G011**	Risk Management Framework developed and operationalized by June 2025.	**DPR**
		G.8.Improve management and Accountability of resource and ensure	**G012**	Monthly, quarterly and annual financial management reports prepared by June, 2025	**DFA**

		TACAIDS abides by the government legislations, regulations and procedures.	**G013**	TACAIDS Legal matters attended and staff updated on government legislations, regulations and procedures by June 2025	**LSU**
H	**HIV and AIDS, gender and human rights responsive programs enhanced.**	**H.1.**Scale up gender responsive programming and human rights based approach in the context of HIV and the law.	**H01**	Gender responsive programming and human rights based approach in the context of HIV and the law scaled up by June 2025	**LSU** **DAI**
		H.2. Develop rights-based and gender-sensitive standard package of interventions for key populations.	**H02**	Rights-based and gender-sensitive standard package of interventions for the Key and Vulnerable populations developed by June 2025	**LSU** **DNR** **DAI**
		H.3 Enhance knowledge on gender and human rights HIV and AIDS related issues to networks of WLHIV; Law enforcers and makers.	**H03**	40 Law enforcers and 370 lawmakers sensitized on gender and human rights on HIV and AIDS intervention by June 2025	**LSU**
			H04	Adult and young WLHIV engaged as community mobilisers and agent of change to promote women and girls health rights in the case of HIV and Human Papilloma Virus (HPV) related health issues by June 2025	**DAI** **DNR**
		H.4. Review of laws and plans to ensure HIV and gender sensitivity.	**H05**	Laws on HIV and gender sensitivity reviewed by June 2025.	**LSU**
			H06	Gender operational Plan reviewed and operationalized by June 2025	**DAI**
			H07	Male catch –up plan in HIV response developed and operationalized by June 2025.	**DAI**
		H.5. Enhance Reduction of GBV, stigma and	**H08**	A study and awareness creation on GBV, stigma and discrimination to	**DAI**

		discrimination to PLHIV and community at large.		PLHIV conducted by June 2025	**DNR**
			H09	Gender assessment of the national HIV/AIDS response in Tanzania mainland conducted and its report disseminated to key stakeholders by 2025	**DAI**
			H010	Gender and HIV stakeholders programs that focus on addressing gender inequalities, socio-economic challenges and social norms scaled up by June 2025.	**DAI**
I	**High level advocacy and promotion of behavioural change to accelerate uptake of HIV services strengthened.**	**I.1.**Develop a comprehensive HIV and AIDS National Response advocacy strategy, action plan and behaviour change programs.	**I01**	A comprehensive HIV and AIDS advocacy strategy developed by June 2025.	**DAI**
		I.2. Promote education, sensitization and awareness efforts on HIV and AIDS in schools and colleges**.**	**I02**	Assessment of the National HIV and AIDS response efforts in educational institutions conducted by June 2025.	**DNR**
		I.4. Influence national policies that improve the quality of lives of the youth and women through national and international partnerships.	**103**	Two Advocacy session with stakeholders dealing with Youth and Women conducted yearly by June 2025	**DAI** **GCU**

ANNEX II: TACAIDS' RESULT FRAMEWORK MATRIX

OBJECTIVE CODE	OBJECTIVE	IMPLEMENTATION STRATEGIES	TARGET OUTPUT	PERFORMANCE INDICATOR	RESPONSIBLE DEPT/UNIT
A	**Non-Communicable Diseases, HIV and AIDS infections reduced and Supportive Services Improved**	**A.1.**Promote preventive measures and services to combat HIV and AIDS and Non Communicable disease.	A.1.1. Staff awareness on HIV/AIDS increased A.1.2. Staff voluntarily testing services increased A.1.3.Stigma and phobia amongst staff minimized by 2025 A.1.4. Nutritional services to staff living with HIV/AIDS provided by 2025	A.1.1.1. Number of Staff trained on HIV and AIDS, NCD and COVD-19 issues A.1.1.2. Number of Staff voluntarily tested for HIV and NCD and received results. A.1.1.3 Number of PLHIV staff disclosed their status to the Accounting Officer A.1.1.4. Number of staff provided with nutrition (Special diet).	**DFA**
B	**National Anti-corruption Strategy and Action Plan enhanced and sustained.**	**B.1.**Strengthen sensitization programs and measures on prevention and combating corruption.	B.1.1.Awareness on Anti-corruption Strategy to 85 staff done and measures to combat corruption practices promoted by 2025	B.1.1.1. Number of staff trained/oriented on anti-corruption strategy	**DFA**
		B.2.Facilitating the adoption of the Plan for implementation of National Ant-corruption strategy on Prevention and Combating Corruption.	B.2.1.The Plan for implementation of National Ant-corruption strategy adopted by 2025	B.2.1.1. Plans and initiatives against corruption in place. B.2.1.3. Complains management mechanism in place	**DFA**
C	**Coordination of the internal and external efforts toward sustainable HIV and AIDS**	**C.1.**Develop/review and disseminate Policies, Strategies, and Guidelines on HIV and AIDS response.	C.1.1.NMSF IV and HIV and AIDS Policy of 2001 reviewed and disseminated by June	C.1.1.1. A reviewed NMSF IV in place. C.1.1.2. A reviewed HIV and AIDS Policy in place.	**DPR**

	towards epidemic control response improved.		2025		
			C.1.2.Strategies and guidelines for enhancing HIV and AIDS response updated and disseminated by June 2025.	C.1.2.1. Number of Strategies updated/developed and disseminated C.1.2.2. Number of Guidelines developed/ updated and disseminated	**DAI** **DNR**
			C.1.3.Strategy for integration of peoples with disabilities' needs in the national response developed and disseminated by June 2025	C.1.3.1 A developed Strategy for integration of peoples with disabilities' needs in the national response in place.	**DNR**
		C.2. Enhance incorporation of HIV and AIDS activities into core functions and plans of key stakeholders.	C.2.1. HIV and AIDS initiatives mainstreamed into National Strategic projects, MDAs, RS, 185 LGAs and other key stakeholders' plans by 2025.	C.2.1.1. Number of institutions with HIV and AIDS Plans and budgets. C.2.1.2.Number of Strategic National Projects implementing HIV and AIDS interventions.	**DPR** **DNR**
		C.3.Strengthen ownership of the National HIV and AIDS response at regional and local levels.	C.3.1.Advocacy sessions on the ownership of the HIV and AIDS response to Regions and LGAs of priority conducted annually by June 2025	C.3.1.1.Number of advocacy sessions conducted.	**DNR** **DAI**
			C.3.2. Priorities regions supported to review their HIV and	C.3.1.1.Number of priority regions with reviewed HIV and AIDS strategic plans	**DNR**

			AIDS strategic plan by 2025		
		C.4. Improve media in communicating Correctly and consistently on Current HIV and AIDS issues	C.4.1.Media and communication guide on HIV and AIDS issues reviewed and disseminated by June 2025.	C.4.1.1 A Media and communication guide on HIV and AIDS issues reviewed and disseminated in place.	**DAI** **GCU**
		C.5. Improve linkages between TACAIDS' functional activities, divisions and units.	C.5.1.Commission quarterly and annual performance reports prepared annually by June 2025.	C.5.1.1.Number of quarterly reports prepared C.6.1.2.Number of annual reports prepared	**DME** **DPR**
		C.6. Strengthen the coordination structures at all levels for the management of the HIV and AIDS response	C.6.1.Capacity building sessions to members of HIV and AIDS coordination structures at regional and local levels on HIV and AIDS response conducted annually by June 2025.	C.6.1.1.Number of coordination structures capacitated C.6.1.2.Number of capacity building sessions conducted	**DNR**
		C.7 Establish data base for all Important` stakeholders implementing national response	C.8.1.HIV and AIDS stakeholders database developed and updated by June 2025.	C.7.1.1.A developed and updated HIV and AIDS stakeholders database in place	**MISU** **DNR**
		C.8. Enhance Joint Planning and review of HIV and AIDs response programs	C.8.1.Five Joint planning meetings and annual performance review forums on HIV and	C.8.1.1. Number of Joint planning forums conducted C.8.1.2. Number of annual performance review meetings done	**DPR** **DNR**

			AIDS programs convened by June 2025.		
		C.9. Intensify advocacy on harmonization and alignment of different plans and services delivery mechanism.	C.9.1. Dissemination of NMSF to key stakeholders conducted annually by June 2025	C.9.1.1.Number of NMSF dissemination sessions conducted	**DPR**
		C.10. Promote sharing of lessons and emerging practices through annual conference for sharing experiences and best practices.	C.10.1.Awareness creation meeting on HIV and AIDS emerging issues and documented best practices to key Stakeholders conducted annually by June 2025.	C.10.1.1. Number Awareness creation meeting on HIV and AIDS emerging issues and documented best practices to key Stakeholders conducted. C.10.1.2.Number of documented best practices	**DNR** **DAI** **GCU** **DME**
			C.10.2.National festivals, exhibitions and commemorations on HIV and AIDS coordinated annually by June 2025	C.10.2.1 Number and type of National festivals, exhibitions and commemorations on HIV and AIDS coordinated annually.	**DAI**
		C.11. Strengthen dialogue with various stakeholders.	C.11.1.Quarterly Joint thematic working Group, TWCs and Biennial stakeholders' review forums conducted by 2025	C.11.1.1. Number of quarterly Joint thematic working Group (TWG) and TWCs meetings conducted C.11.1.2. Number of Biennial stakeholders' review forums conducted	**DPR** **DNR**

				C.11.1.3 Number of Youth dialogues in response to HIV and AIDS conducted	
		C.12. Enhance coordination of Key and Vulnerable population (KVP) and Most At Risk Population (MARPs)	C.12.1. Quarterly joint supportive supervisions and discussion forums for Key and Vulnerable Populations (KVPs) and Most At Risk interventions conducted yearly by June 2025.	C.12.1.1. Number of Joint supportive supervisions conducted. C.12.1.2. Number of discussion forums conducted.	**DNR**
			C.12.2. HIV Prevention programs for AGYW and KVPs effectively coordinated and supported annually by June 2025.	C.12.2.1Number of prevention programs coordinated C.12.2.2. Number of Supportive supervisions conducted C.12.2.3. Number of coordination meetings conducted C.12.2.4. Developed Packages for KVP and AGYW in place C.12.2.5.Number of Income generating activities for KVPs and AGYW supported and coordinated.	**DNR**
		C.13. Strengthen implementation of TACAIDs image promotion programs.	C.13.1.Promotional packages developed and TACAIDS image promoted by June 2025	C.13.1.1. A developed TACAIDS' promotional package in place. C.13.1.2. Number of promotions done in relation to	**GCU**

				TACIDS' image promotion.	
D	**Partnership and Networking for HIV and AIDS National Response promoted.**	**D.1.**Review and assess the existing partnerships and networks in the HIV and AIDS national response.	D.1.1.Existing partnerships and networks on HIV and AIDS national response reviewed and assessed by June 2025.	D.1.1.1.Number of existing partnerships and networks in the HIV and AIDS national response identified.	**DNR**
		D.2.Develop a partnership and networking strategy for the National HIV and AIDS response	D.2.1.Partnership and networking strategy for the National HIV and AIDS response developed by June 2025	D.2.1.1. A developed partnership and networking strategy for the National HIV and AIDS response in place.	**DNR**
		D.3.Foster effective and beneficial relationships between local government authorities and other players: national, local and international	D.3.1.Annual HIV and AIDS stakeholder review fora involving LGAs and other key players conducted by June 2025.	D.3.1.1. Number of annual HIV and AIDS stakeholder review fora involving LGAs and other key players conducted.	**DNR**
			D.3.2.Annual International and Regional integration forums on HIV and AIDS response effectively attended by 2025	D.3.2.1. Number of regional and international forums attended D.3.2.2. Number of cross border initiatives implemented D.4.2.3.Number of RWC supported	**SPU**
		D.4. Influence national level policies through national representatives at local level.	D.4.1.Two policy advocacy sessions with political leaders and decision makers on HIV and AIDS response conducted	D.4.1.1.Number of policy advocacy sessions with political leaders and decision makers on HIV and AIDS response conducted.	**DAI**

			annually by June 2025.		
		D.5. Improve modalities Mapping of all stakeholders classified by their core business and Develop a system for mapped stakeholders.	D.5.1.Stakeholders mapping done and a system for mapped/reviewed stakeholders developed by June 2025.	D.5.1.1.Number of Stakeholders mapped D.3.1.2.A system for mapped stakeholders in place	**DNR** **MISU**
E	**Information management and feedbacks among HIV and AIDS stakeholders to inform decision making improved.**	**E.1.**Improve collection and use of data and information management system in central and local government institutions	E.1.1.Information systems reviewed and instituted by June 2025.	E.1.1.1.Number of reviewed and instituted information systems	**DME** **MISU**
			E.1.2. Best Practices documented, disseminated and feedback on HIV and AIDS response from key stakeholders received by June 2025	E.1.2.1.Number of HIV and AIDS response best practices documented and disseminated to key stakeholders .	**DME** **DNR**
				E.1.2.2.Number of best practices dissemination meetings conducted.	**GCU**
				E.1.2.3.Number of quarterly and annually TOMSHA reports Received from Local Government Authorities.	
		E.2. Plan and implement focused researches and national surveys to inform on the National HIV and AIDS response.	E.2.1.Three focused researches and 3 national surveys to inform on the National HIV and AIDS response planned and implemented by June 2025.	E.2.1.1. Number of researches implemented E.2.1.2. National surveys conducted E.2.1.3.Research agenda in place.	**DME**
		E.3 Promote availability of HIV and AIDS information for strategic	E.3.1.Multi-sectoral M&E Steering tools updated and utilized	E.3.1.1. An updated Multi-Sectoral M&E Steering tools in place.	**DME**

		decisions to MDAs and LGAs and other stakeholders.	by June 2025.	E.3.1.2. Number of key information products in place.	
		E.4.Improve TACAIDS library infrastructure and services.	E.4.1.TACAIDS' Library equipped with HIV and AIDS films and story books by June 2025	E.4.1.1.Number of HIV and AIDS film in TACAIDS library. E.4.1.2.Number of HIV and AIDS story books in TACAIDS library.	**DAI**
			E.4.2.TACAIDS' online Library updated and promoted to key stakeholders by June 2025	E.4.2.1. An updated online TACAIDS' Library in place. E.4.2.2.Number of promotion sessions done.	**DAI**
		E.5. Review, Print and disseminate TACAIDS ICT Policy, ICT Strategy, Enterprise Architecture (EA), Security Architecture and ICT Governance.	E.5.1. TACAIDS' ICT Policy and Strategy updated and disseminated by June 2025	E.5.1.1. An updated ICT policy in place E.5.1.2. An updated ICT strategy in place E.5.1.3.Number of dissemination meetings on updated ICT Policy and Strategy conducted	**MIS**
		E.6 Enhance HIV and AIDS reporting compliance among stakeholders.	E.6.1. 90 percent of HIV and AIDS coordinators at Regional, LGAs and CSOs are oriented on HIV and AIDS reporting compliance guideline by June 2025	E.6.1.1. Percentage of HIV and AIDS coordinators at Regional, LGAs and CSOs oriented on HIV and AIDS reporting compliance guideline	**DME**
			E.6.2.Quarterly supportive supervision visits and	E.6.2.1. Number of reports in line with data quality dimension received quarterly	**DME**

			stakeholders meetings on reporting compliance conducted by June 2025.	E.6.2.2. Number of supportive supervision visits conducted E.6.2.3.Number of stakeholders'meeting conducted.	
		E.7.Improve ICT infrastructure and services.	E.7.1.ICT infrastructure developed, maintained and upgraded annually by June, 2025	E.7.1.1.Number of ICT infrastructure developed and maintained E.7.1.2.Number of ICT infrastructure upgraded	**MISU**
F	**Adequate financial resources for HIV and AIDS response secured and properly managed.**	**F.1.**Ensure that the AIDS Trust Fund is effectively operational.	F.1.1.Sustainable source (s) for funding AIDS Trust Fund (ATF) operations secured by June 2025	F.1.1.1. Sustainable source (s) of fund for ATF secured	**DFA** **ATF RMM**
		F.2.Seek and lobby more government resources for the National HIV and AIDS Response.	F.2.1.Financial resources worth to 50 billion secured by June 2025	F.2.1.1. Amount of fund secured. F.2.1.2.Number of fund securing efforts undertaken.	**DFA** **ATF RMM** **SPU**
		F.3. Effectively compete and lobby for more financial resources from the international and private sector partners for the National HIV and AIDS Response.	F.3.1.Biannual advocacy and lobbying session for more resources for the National response to selected committees of the Parliament and decision makers conducted yearly by June 2025.	F.3.1.1. Number of lobbing and advocacy sessions to key decision makers conducted. F.3.1.2.Amount of financial resources secured from international and private sector partners for the National HIV and AIDS Response.	**DAI** **DFA** **ATF RMM**
		F.4.Develop and implement joint programs with other Key players.	F.4.1.Five project write-ups in response to HIV and AIDS developed and	F.4.1.1.Number of project write-ups in response to HIV and AIDS developed and implemented.	**DFA** **ATF-RMM** **DME** **SPU**

			implemented by June 2025		**DNR** **DAI**
		F.5. Regularly undertake Public Expenditure Reviews and National Spending Assessments, (NASSA) for HIV and AIDS initiatives.	F.5.1.Annual PER and NASSA for HIV and AIDS interventions conducted by June 2025	F.5.1.1. Number of PER reports in place. F.5.1.2.Number of NASSA reports in place.	**DFA** **DME**
		F.6. Capacity building to staff on public financial management laws, regulations, circulars and guidelines conducted annually starting from 2021	F.6.1.Six (6) DFA staff capacitated on public financial management laws, regulations, circulars and guidelines by June 2025	F.6.1.1.Number of DFA staff capacitated on public financial management laws, regulations, circulars and guidelines	**DFA**
		F.7. Strengthen the financial resources use and management function within TACAIDS and among partner.	F.7.1. 15 Internal Audit Staff and audit committee members trained in Financial Management by June 2025	F.7.1.1. Number of Internal Audit and Audit Committee members trained in Financial Management by June 2025	**CIA**
		F.8. Design and implement effectively prudent financial management systems.	F.8.1.An Effective internal control and financial management systems instituted by June 2025.	F.8.1.1. Number of Clean audit reports achieved. F.8.1.2. Number of audit queries F.8.1.3. Financial management systems and tools available and updated. F.8.1.4 Number of internal Audits conducted.	**CIA**
			F.8.2. Compliance to Public Procurement Act and regulations instituted to TACAIDS operations by June 2025.	F.8.2.1. Number of vetted contracts in place F.8.2.2. Annual procurement plan in place and adhered F.8.2.3Updated asset register in place	**PMU**

				F.8.2.4.Operational procurement management system in place.	
		F.9. Develop a financial sustainability strategy and lobby for sustainable sources for funding ATF activities.	F.9.1. Financial sustainability strategy developed by June 2025	F.9.1.1.A developed financial sustainability strategy in place.	**DFA** **ATF-RMM**
G	**Institutional capacity to effectively and innovatively implement TACAIDS mandate attained.**	**G.1.**Ensure effective implementation of TACAIDS mandates.	G.1.1.Monthly management and quarterly Commission's and ATF Board meetings conducted each year by June 2025	G.1.1.1.Number of meetings don**e (**disaggregated by type**)**	**LU**
			G.1.2.Monthly and quarterly standing committees' statutory meetings convened by June 2025.	G.1.2.1. Number of operational standing committees in place G.1.2.2. Number of statutory meetings don**e**.	**IA** **DPR**
			G.1.3.TACAIDS annual Plans and budgets prepared accordingly and its implementation coordinated annually by June 2025	G.1.3.1. Number of annual plans and budget prepared. G.1.3.2. Number of annual implementation plan prepared.	**DPR**
		G.2. Improve conducive working environment and maintain harmony at working place. .	G.2.1. Statutory and Administrative services to TACAIDS staff provided annually by June 2025	G.2.1.1. Statutory payments to staff made G.2.1.2. Office operation expenses paid (water, telephone, cleaning and security services) G.2.1.3. Food &refreshments	**DFA**

				provided. G.2.1.4. Number of meetings to discuss staff issues conducted	
			G.2.2.TACAIDS' HQ building constructed by June 2025.	G.2.2.1.TACAIDS' HQ building constructed in place.	**DFA**
			G.2.3. Five Divisions (5) and six (6) Units offices facilitated with Air condition, working tools and internet connectivity by June 2025.	G.2.3.1. Number of Air conditioned offices G.2.3.2. Number of facilities, working equipment and tools put in place and maintained. G.2.3.3 Number of offices with internet connectivity.	**DFA**
			G.2.4.Client Service Charter (CSC) reviewed annually by June 2025	G.2.4.1. A reviewed Client Service Charter (CSC) in place	**DFA**
			G.2.5.Retirement and other social welfare benefits paid to TACAIDS staff annually by June 2025.	**G**.2.5.1.Number of retired staff paid retirement benefits timely **G**.2.5.2.Number of staff whose social welfare contributions paid timely	**DFA**
		G.3.Develop and implement staff retention program/scheme, seek to fill vacant positions quickly and create a succession plan.	G.3.1. Twenty (20) Vacant positions field, succession plan and staff retention scheme developed and implemented by June 2025.	G.3.1.1. Number of vacant positions field G.3.1.2. A developed staff succession plan in place G.3.1.3.A Staff retention scheme developed and implemented in place.	**DFA**
		G.4. Enhance capacity building to TACAIDS	G.4.1. Staff capacity building programs	G.4.1.1. Training need assessment report in place.	**DFA**

		staff	facilitated and enhanced by June 2025.	G.4.1.2. Staff Training Programme in place G.4.1.3. Number of staff facilitated to attend short and long course**.**	
		G.5.Enhane effective performance management and a reward system that is closely linked to organizational objectives	G.5.1.Enhanced Performance management and rewards linked to Strategic objectives by June 2025	G.5.1.1. Number of incentives and rewards put in place G.5.1.2. Number of staff assessed using OPRAS system G.5.1.3. Number of staff rewarded G.4.1.4. Number of staff trained on OPRAS	**DFA**
		G.6. Improve management of all procurements, asset management and disposal in line with existing legislation.	G.6.1.Attained effective Management of all procurements, asset management and disposal in line with existing legislation by June 2025.	G.6.1.1. Master inventory report in place G.6.1.2. Annual suppliers Evaluation report in place G.6.1.3. Tender board Meetings conducted. G.6.1.4.List of items for disposal	**PMU**
		G.7.Enhance the effectiveness of risk management, governance, control processes and react timely with the right information on changes in perspectives and actions by the external players.	7.1.A Risk Management Framework developed and operationalized by June 2025.	7.1.1. A developed and operational TACAIDS' Risk Management Framework in place 7.1.2. Risk register in place 7.1.3. Risk implementation report in place	**DPR** **IA**
		G.8.Improve management and Accountability of resource and Ensure TACAIDS abides by the	G.8.1.Quarterly and annual financial management reports prepared by June, 2025	G.8.1.1. Number of quarterly and annual financial management reports prepared	**DFA**

		government legislations, regulations and procedures.	G.8.2.TACAIDS Legal matters attended and staff updated on government legislations, regulations and procedures by June 2025	G.8.2.1 Number of legal advice provided. G.8.2.2. Number of contracts developed. G.8.2.3 Number of contracts reviewed. G.8.2.4 Number of commission legal matters attended. G.8.2.5 Number of legal matters trainings conducted to staff	**LSU**
H	**HIV and AIDS, gender and human rights responsive programs enhanced.**	**H.1.**Scale up gender responsive programming and human rights based approach in the context of HIV and the law.	H.1.1.Gender responsive programming and human rights based approach in the context of HIV and the law scaled up by June 2025	H.1.1.1Study report on gender and human rights in place. H.1.1.2.Number of trainings done on gender and human rights on response to HIV and AIDS.	**LSU** **DAI**
		H.2. Develop rights-based and gender-sensitive standard package of interventions for key populations.	H.2.1.Rights-based and gender-sensitive standard package of interventions for the Key and Vulnerable populations developed by June 2025	H.2.1.1.A developed Rights-based and gender-sensitive standard package of interventions for the Key populations in place.	**LSU** **DAI**
		H.3 Enhance knowledge on gender and human rights HIV and AIDS related issues to Law enforcers and makers.	H.3.1. 40 Law enforcers and 370 lawmakers sensitized on gender and human rights on HIV and AIDS intervention by June 2025	H.3.1.1. Number of law makers and low enforcers sensitized on gender and human rights HIV and AIDS issues (disaggregate by type)	**LSU** **DAI**

		H.4. Review of laws and plans to ensure HIV and gender sensitivity.	H.4.1.Review of sectoral laws to ensure HIV and gender sensitivity conducted by June 2025.	H.4.1.1.Number of sectoral laws to ensure HIV and gender sensitivity reviewed	**LSU** **DAI**
			H.4.2.Gender operational Plan reviewed and operationalized by June 2025	**H.4.2.1.** A reviewed Gender Operational Plan in place	**DAI**
		H.5. Enhance Reduction of GBV, stigma and discrimination to PLHIV and community at large.	H.5.1.A study and awareness creation on GBV, stigma and discrimination to PLHIV conducted by June 2025.	H.5.1.1Study report in place H.5.1.2.Number of awareness creation sessions done on GBV, stigma and discrimination to PLHIV.	**DAI** **DNR**
I	**High level advocacy and promotion of behavioural change to accelerate uptake of HIV services strengthened.**	**I.1.**Develop a comprehensive HIV and AIDS National Response advocacy strategy, action plan and behaviour change programs.	I.1.1.A comprehensive HIV and AIDS advocacy strategy developed by June 2025.	I.1.1.1.Adeveloped comprehensive HIV and AIDS advocacy strategy in place I.1.1.2. Action plan for the implementation in place I.1.1.3. Number of advocacy programs designed and implemented.	**DAI**
		I.2. Promote education, sensitization and awareness efforts on HIV and AIDS in schools and colleges**.**	I.2.1.Assessment of the National HIV and AIDS response efforts in educational institutions conducted by June 2025	I.2.1.1.Assessment report in place	**DNR**
		I.3. Influence national policies that improve the quality of lives of the youth and women	I.3.1.Two Policy advocacy sessions that influence national policies	I.3.1.1.Number of policy advocacy sessions that influence national policies aiming at improving the	**DAI**

		through National and International partnerships.	aiming at improving the quality of lives of the youth and women conducted yearly by June 2025	quality of lives of the youth and women conducted per year	

ANNEX III: MONITORING PLAN MATRIX

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
A	A.1.1.1. Number of Staff trained on HIV and AIDS issues *This indicator measures the counts of staff who attended a training on HIV and AIDS seminar*	2020	NA	86	86	86	86	86	TACAIDS annual Report	Training Registration form	Bi-annual	Workshop report	Bi-annual	DFA/HR
A	A.1.1.2. Number of Staff voluntarily tested for HIV *Indicator measures the counts of staff who tested for HIV and received results*	2020	NA	43	43	50	50	50	TACAIDS annual Report	Training registration form	Bi-annual	HTS Register/Training report	Bi- annual	DFA/HR
B	B.1.1.1. Number of staff trained/oriented on anti-corruption strategy *Indicator counts number of staff trained or oriented on the anti-corruption strategy*	2020/21	N/A	86	86	86	86	86	TACAIDS annual report	Activity report templates	Bi-annual	Activity reports Registrations forms	Bi-annual	DFA
B	B.2.1.1. Number of employees sanctioned for involvement in corrupt practices *This indicator measures the number of staff who have been disciplined due to involvement in corruption.*	2020/21	0	0	0	0	0	0	TACAIDS annual Report	Activity report templates	Annually	Annual reports	Annually	DFA
C	C.1&2.1.1 Number of Policies, strategies, guidelines and plan developed/reviewed and	2020/21	3	4	4	4	4	4	Annual report	Activity report template and desk review	Quarterly	Activity reports	Quarterly	DPR DNR DAI DFA

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	disseminated (disaggregated by type) *Indicators measures number of national steering tools developed/reviewed and disseminated*													DME
C	C.3.1.1. Number of institutions with HIV and AIDS Plans and budgets *Indicators measures number of institutions and national projects with HIV and AIDS Plans and budget*	2020/21	120	185	185	185	185	185	Annual Reports	Supervision report template	Annually	Activity reports	Annually	DPR DNR
C	C.4.1.2. Number of regions with reviewed HIV strategic plans *Indicators counts number of regions with reviewed RHASPs*	2020/2021	10	16	20	26	26	26	Annual Reports	Regional report template	Annually	Regional reports	Annually	DNR
C	C.5.1.1. A reviewed Media and communication guide on HIV and AIDS issues and disseminated report in place. *Indicators measures response on the reporting of HIV and AIDS issue by Media*	2020/21	0	1	1	1	1	1	Annual report	Report template	Annually	Dissemination report	Annually	DNR

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
C	C.6.1.1.Number of quarterly and annual reports prepared. *This indicator measures* the *level of reporting compliance by the Commission per year.*	2020/21	4	4	10	10	10	10	Annual report	Report template and report review	Quarterly	Annual report	Quarterly	DME DPR
C	C.7.1.1.Number of HIV and AIDS coordination structures in Regions and LGAS capacitated. *This indicator measures the level of capacity building to coordination structures in Regions and LGAS.*	2020/21	80	100	140	180	195	211	Annual report	Report template and report review	Annually	Annual report	Annually	DNR
C	C.8.1.1.A developed and updated HIV and AIDS stakeholders' database in place *Indicator measures effective coordination of stakeholders in response to HIV and AIDS*	2020/21	0	0	1	1	1	1	Annual report	Report template and report review	Annually	Stakeholder data base	Annually	DNR MISU
C	C.9.1.1. Number of Joint planning forums conducted *Indicator counts number of joint planning forums conducted*	2020/21	0	2	2	2	2	2	Activity report	Activity reporting template	Annually	Activity report	Annually	DPR
C	C.9.1.2. Number of annual performance review meetings done *Indicator count number of performance reviews*	2020/21	1	2	2	2	2	2	Activity report	Activity reporting template	Annually	Activity report	Annually	DPR

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	meeting conducted.													
C	C.10.1.1.Number of NMSF dissemination sessions conducted. *This indicator count number of NMSF dissemination sessions conducted*.	2020/21	2	3	3	3	3	3	Activity report	Activity reporting template	Annually	Activity report	Annually	DPR
C	C.11.1.2.Number of documented best practices. *This indicator measures best practices on response to HIV and AIDS.*	2020/21	0	1	2	3	4	5	Best practice report	Best practice reporting template	Annually	Report on best practice	Annually	DNR
C	C.12.1.1. Number of quarterly Joint thematic working Group (TWG) and TWCs meetings conducted. *This indicator measures the number of TWG and TWCs conducted per year.*	2020/21	3	20	20	20	20	20	TACAIDS's annual report	Activity reporting template	Quarterly	TWGs and TWCs minutes	Quarterly	DPR DNR
C	C.12.1.2. Number of Bi-annual stakeholders' review forums conducted. *This indicator measures the level of stakeholders engagement in the review of HIV and AIDS response interventions per year.*	2020/21	2	2	2	22	2	2	TACAIDS's annual report	Activity reporting template and reports review	Biannual	Bi annual meeting minutes	Biannual	DPR DNR
C	C.13.1.1. Number of Joint supportive supervisions conducted. *This indicator measures*	2020/21	0	4	4	4	4	4	Activity report	Activity reporting template and reports review	Quarterly	Activity report	Quarterly	DNR

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	number of supervision visits conducted on KVP interventions per year.													
	C.13.1.2. Number of KVP discussion forums conducted. *Indicator measure number of forums targeting KVPs by type (FSWs, IDUs, AGWYs, Uniformed forces, Inmates etc per year*	2020/21	1	4	4	4	4	4	Activity report	Activity reporting template and reports review	Quarterly	Activity report	Quarterly	DNR
D	D.1.1.1. Number of existing partnerships and networks in the HIV and AIDS national response identified *Indicators measures existing partnerships between TACAIDS and Stakeholders.*	2020/21	0	2	2	2	2	2	Activity report	Activity reporting template and reports review	Quarterly	Activity report	Quarterly	DNR
D	D.2.1.1. A developed partnership and networking strategy for the National HIV and AIDS response in place. *This indicator measures the existence of guiding tool in strengthening partnership in response to HIV and AIDS.*	2020/21	0	1	1	1	1	1	TACAIDS Annual report	Activity reporting template and reports review	Annually	Developed strategy in place	Annually	DNR
D	D.3.1.1.Number of Stakeholders mapped. *This indicator measures the*	2020/21	8	10	13	15	18	20	TACAIDS' annual report	Activity reporting template and	annually	Stakeholders mapped report	Annually	DNR

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	number of key stakeholders in the national response against HIV and AIDS .									documentary review				
D	D.3.1.2.A system for mapped stakeholders in place. *This measure the level of stakeholders identification in response to HIV and AIDS.*	20/21	0	1	1	1	1	1	MIS report	System review	annually	Annual MIS report	Annually	MISU DNR
D	D.4.1.1. Number of annual HIV and AIDS stakeholder review forum involving LGAs and other key players conducted. *It measure the involvement of stakeholders from LGAs in response to HIV and AIDS.*	2020/21	0	1	1	1	1	1	TACAIDS' annual report	Activity reporting template and documentary review	annually	Meeting report	Annually	DNR
D	D.4.2.1. Number of regional and international forums attended. *It measure number of regional and international forums on HIV and AIDS attended*	2020/21	2	4	4	4	4	4	TACAIDS' annual report	Activity reporting template and documentary review	annually	Meeting report	Annually	SPU
D	D.4.2.2. Number of cross border initiatives implemented. *It measures the level of integration of HIV and AIDS in cross borders protocols*	2020/21	1	1	2	3	4	5	TACAIDS' annual report	Activity reporting template and documentary review	annually	Cross border HIV and AIDS interventions report	Annually	SPU

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
D	D.5.1.1.Number of policy advocacy sessions with political leaders and decision makers on HIV and AIDS response conducted.	2020/21	0	2	2	2	2	2	TACAIDS bi-annual report	Activity reporting template and reports review	Bi annual	TACAIDS bi-annual reports	Bi annual	DAI
E	E.1.1.1.Number of reviewed and instituted information systems. This *indicators measures the number of reviewed and instituted information systems*	2020/21	1	1	1	1	1	1	TACAIDS' annual report	Activity reporting template and reports review	annual	TACAIDS annual report	Annually	DME MIS
E	E.1.2.1.Number of HIV and AIDS response best practices documented and disseminated to key stakeholders .	2020/21	0	2	2	2	2	2	TACAIDS' annual report	Activity reporting template and reports review	annual	TACAIDS annual report	Annually	DME DNR GCU
E	E.1.2.3. Number of quarterly and Annually TOMSHA reports received from Local Government Authorities. *Indicators measures the number of reports received from MDAs, LGAs and CSOs and Private sector*	2020/21	40	50	90	129	140	186	TOMSHA	TOMSHA tools	Quarterly	TOMSHA Database	Quarterly	DME
E	E.2.1.3. Number of National Research/surveys conducted *Indicator measure the number of national surveys/researches on HIV*	2020/21	0		3	3	4	5	THIS Research final reports	Standard tools for Surveys and Research	To be determined	Final Research/Survey reports	To be determined	DME

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	conducted in the SP life span													
E	E.3.1.1. An updated Multi-Sectoral M&E Steering tools in place. *This indicator measures number of updated M&E steering tools in place per year*	2020/21	1	1	1	1	1	1	M&E Steering tools report	Annual report template and report review	Annual	TACAIDS annual report	Annual	DME
E	E.3.1.2. Number of key information products in place. *This indicator measures number of key information products in place.*	2020/21	0	1	1	1	1		Quarterly Reports	Quarterly Report template and report review	Quarterly	Developed information Products	Quarterly	DME
E	E.4.1.1.Number of HIV and AIDS film in TACAIDS library. *This indicator measures the number of HIV and AIDS film in TACAIDS library per year*.	2020/21	0	1	1	1	1	1	TACAIDS annual reports	Annual reporting template and report review	Annual	TACAIDS annual report	Annual	DAI
E	E.4.1.2.Number of HIV and AIDS story books in TACAIDS library. *This indicator measures the number of HIV and AIDS story books in TACAIDS library per year*.	2020/21	0	1	1	1	1	1	TACAIDS annual reports	Annual reporting template and report review	Annual	TACAIDS annual report	Annual	DAI

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
E	E.4.2.1. An updated online TACAIDS' Library in place. *This indicator measures the update status of TACAIDS online Library per year*.	2020/21	0	1	1	1	1	1	TACAIDS Website	Online library performance report	Annual	Updated online Library in place	Annual	DAI
	E.5.1.1. An updated ICT policy in place. *This indicator measures the update status of the TACAIDS ICT policy*.	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annual	An updated ICT policy in place	Annual	HMISU
	E.5.1.2. An updated ICT strategy in place. *This indicator measures the update status of the TACAIDS ICT strategy.*	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annual	An updated ICT strategy in place	Annual	HMISU
	E.5.1.3.Number of dissemination meetings on updated ICT Policy and Strategy conducted. *This indicator measures the Number of dissemination meetings to TACAIDS staff on updated ICT Policy and Strategy conducted per year*	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and dissemination report review	Annual	Dissemination report	Annual	HMISU
	E.6.1.1. Percentage of HIV and AIDS coordinators at Regional, LGAS and CSOs oriented on HIV and AIDS reporting compliance guideline *This indicator measures the Percentage of HIV and AIDS*	2020/21	0	20	50	70	80	90	TACAIDS annual report	Activity reporting template and orientation report review	Annual	TACAIDS annual report	Annual	DME

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	coordinators at LGAS oriented on HIV and AIDS reporting compliance guideline per year													
	E.6.1.2. Number of reports in line with data quality dimension received quarterly *Indicator measures the number of TOMSHA reports that adheres to Data Quality dimensions (timely, reliability, accuracy, precision and integrity)*	2020/21	0	1	1	1	1	1	Quarterly Reports	Quarterly Report template	Quarterly	Quarterly Reports	Quarterly	DME
	E.6.2.2. Number of quarterly and annual reports from LGAs prepared per year. *This indicator measures the number of quarterly and annual reports prepared and submitted by LGAs per year.*	2020/21	40	186	186	186	186	186	TOMSHA	TOMSHA and report review	Quarterly	TOMSHA	Quarterly	DME
	E.6.2.3. Number of stakeholders' performance meeting conducted. *This indicator measures the number of stakeholders' performance meeting conducted per year*	2020/21	1	4	4	4	4	4	Quarterly reports	Activity reporting template and reports review	Quarterly	Quarterly Reports	Quarterly	DME
	E.7.1.1.Number of ICT infrastructure developed and maintained. *This indicator measures the Number of ICT*	2020/21	0	1	1	1	1	1	MISU annual report	Activity reporting template and reports review	Annual	MISU annual report	Annual	HMISU

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	infrastructure developed and maintained.													
	E.7.1.2.Number of ICT infrastructure upgraded	2020/21	0	1	1	1	1	1	MISU annual report	Activity reporting template and reports review	Annual	MISU annual report	Annual	HMISU
F	F.1.1.1. Sustainable source (s) of fund for ATF secured. *This indicator measures the number of sustainable sources of fund secured for ATF*.	2020/21	0	1	1	1	1	1	ATF annual performance report	Annual reporting template and documentary review	Annually	ATF annual performance report	Annual	DFA ATF-RSM
F	F.2.1.1. Amount of fund secured. *This indicator measures the amount of fund secured by ATF*	2020/21	2bil	3bil	10bil	15bil	20bil		ATF annual performance report	Annual reporting template and documentary review	Annually	ATF annual performance report	Annual	DFA ATF-RSM
F	F.3.1.1. Number of lobbing and advocacy sessions to key decision makers conducted. *This indicator measures the number of lobbing and advocacy sessions to key decision makers conducted per year.*	2020/21	1	2	2	2	2	2	TACAIDS annual report	Activity reporting template and reports review	Bi annual	TACAIDS annual reports	Bi annual	DAI DFA
F	F.3.1.2.Amount of financial resources secured from international and private sector partners for the National HIV and AIDS	2020/21	17bil	20bil	25bil	30bil	35bil	40bil	TACAIDS annual Financial Report	Activity reporting template and reports review	Annual	TACAIDS annual Financial Report	Annual	DFA ATF-RSM

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	Response. *This indicator measures the amount of financial resources secured from international and private sector partners for the National HIV and AIDS Response per year*													
F	F.4.1.1. Number of project write-ups in response to HIV and AIDS developed and implemented. *This indicator measures the number of project write-ups in response to HIV and AIDS developed and implemented per year.*	2020/21	2	3	4	6	8	10	TACAIDS annual report	Activity reporting template and reports review	Annual	Project write-ups in place	Annual	DFA ATF-RSM DME SPU DNR DAI DPR
	F.5.1.1. Number of PER reports in place. *This indicator measures the number of PER conducted per year.*	2020/21	1	1	1	1	1	1	PER report	Activity reporting template and reports review	Annual	PER report in place	Annual	DFA
F	F.5.1.2.Number of NASA reports in place. *This indicator measures the number of NASSA conducted per year.*	2020/21	1	1	1	1	1	1	NASSA report	Activity reporting template and reports review	Annual	NASSA report in place	Annual	DME
F	F.6.1.1.Number of DFA staff capacitated on public financial management laws, regulations, circulars and guidelines .	2020/21	2	2	3	4	5	6	TACAIDS annual staff training report	Activity reporting template and reports review	Annual	TACAIDS annual staff training report	Annual	DFA

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	This indicator measures the Number of DFA staff capacitated on public financial management laws, regulations, circulars and guidelines .													
F	F.7.1.1. Number of Internal Audit and Audit Committee members trained in Financial Management. *This indicator measures the number of Internal Audit and Audit Committee members trained in Financial Management*.	2020/21	2020/21	2	3	5	10	15	TACAIDS annual staff training report	Activity reporting template and reports review	Annual	TACAIDS annual staff training report	Annually	IA
F	F.8.1.1. Number of Clean audit reports achieved. *Indicators measures number clean audit reports achieved in 5 years of implementation of the SP*	2020/21	1	1	1	1	1	1	Annually	Audit trail	Annual	Audit reports	Annually	DFA/IA
F	F.8.1.4 Number of internal Audits conducted. *This indicator measures the number of internal Audits conducted per year*	2020/21	4	4	4	4	4	4	Quarterly Audit report	Activity reporting template and internal audit reports review	Quarterly	Quarterly Audit reports	Quarterly	IA
F	F.8.2.2. Annual procurement plan in place and adhered. *This indicator measures compliance to the implementation of Procurement Act and its*	2020/21	1	1	1	1	1	1	TACAIDS annual report	Activity reporting template and reports review	Annually	APPs in place	Annually	HPMU

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	regulations													
F	F.8.2.3Updated asset register in place. *This indicator measures compliance to Finance Act.*	2020/21	1	1	1	1	1	1	TACAIDS annual report	Activity reporting template and reports review	Annually	Updated asset register in place.	Annually	DFA
F	F.8.2.4. Operational procurement management system (TANePs) in place. *This indicator measures compliance to Public Procurement Act and Regulations*	2020/21	1	1	1	1	1	1	TANePs	Activity reporting template and TANeP	Annually	Operational procurement management system in place	Annually	HPMU
F	F.9.1.1.A developed financial sustainability strategy in place. *This indicator measures efforts taken to ensure sustainability of resources inflows in relation to HIV and AIDS response*.	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	A developed financial sustainability strategy in place	Annually	DFA ATF-RSM
G	G.1.1.1. Number of statutory meetings don**e** **(**disaggregated by type**)** *This indicator measures number of statutory meetings conducted per year.*	2020/21	10	24	24	24	24	24	Annual report	Activity report template and desk review	Quarterly	Meeting minutes	Quarterly	DFA IA DPR
G	G.1.2.1. TACAIDS'HQ building constructed in Dodoma. *This indicator measures*	2020/21	0	0	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	TACAIDS' HQ building constructed in Dodoma	Annually	DFA

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	construction progress of TACAIDS HQ building													
G	G.1.3.1. Number of Air conditioned offices. *This indicator measures the number of offices with AC in relation to improvement of working environment.*	2020/21	8	11	13	14	15	16	TACAIDS annual report	Activity reporting template and report review	Annually	TACAIDS annual report	Annually	DFA
G	G.1.3.3 Number of offices with internet connectivity. *This indicator measures the number of offices with internet connectivity*	2020/21	11	12	13	14	15	16	TACAIDS annual MISU report	Activity reporting template and report review	Annually	TACAIDS annual MISU report	Annually	DFA HMISU
G	G.1.4.1. A reviewed Client Service Charter (CSC) in place *This indicator measures the update status of the Client Service Charter (CSC)*	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and documentary review	Annually	A reviewed Client Service Charter (CSC) in place	Annually	DFA
G	G.1.5.2. Number of staff whose social welfare contributions paid timely. *This indicator measures the number of staff whose social welfare contributions paid timely*	2020/21	70	86	86	86	86	86	TACAIDS monthly deduction and staff contributions report	Activity reporting template and documentary review	Monthly	TACAIDS monthly deduction and staff contributions report	Monthly	DFA
G	G.2.1.1. Number of vacant positions field *Indicator ratio of existing staff to number of vacancies filled against the total*	2020/2021	0	5	10	15	20	25	TACAIDS annual report	Activity reporting template and report review	Annually	TACAIDS annual report	Annually	DFA

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	establishment													
G	G.2.1.2. A developed staff succession plan in place. *This indicator measures the presence of staff succession plan.*	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	Staff succession plan	Annually	DFA
G	G.2.1.3.A Staff retention scheme developed and implemented in place. *This indicator measures the presence of staff motivation scheme.*	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	Staff retention scheme report	Annually	DFA
G	G.3.1.1. Training need assessment report in place. *This indicator measures TACAIDs staff training need/capacity building demand*	2020/21	0	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	Training need assessment report	Annually	DFA
G	G.3.1.2. Staff Training Programme in place. *This indicator measures compliance to guidelines and circulars pertaining to staff career and working capacity building development*	2020/21	1	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	Training program	Annually	DFA
G	G.3.1.3. Number of staff facilitated to attend short and long course. *This indicator measures number of staff facilitated to*	2020/21	4	6	10	15	25	30	TACAIDS annual report	Activity reporting template and report review	Annually	Annual staff training report	Annually	DFA

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	attend short and long course in relation to TACAIDS training programme													
G	*G.4.1.2. Number of staff assessed using OPRAS system.* *This indicator measures the number of staff assessed using OPRAS system.*	2020/21	86	88	90	94	96	100	TACAIDS annual staff assessment report	Activity reporting template and report review	Annually	Annual staff assessment report	Annually	DFA
G	G.4.1.4. Number of staff trained on OPRAS *This indicator measures the number of staff trained on OPRAS system.*	2020/21	70	86	86	88	90	94	TACAIDS annual staff report	Activity reporting template and report review	Annually	Training report	Annually	DFA
G	G.5.1.1. Master inventory report in place *This indicator measures compliance to PPA and its Regulations*	2020/21	1	1	1	1	1	1	TACAIDS annual inventory report	Activity reporting template and report review	Annually	Master inventory report	Annually	HPMU
G	G.5.1.2. Annual suppliers Evaluation report in place *This indicator measures compliance to PPA and its Regulations*	2020/21	0	1	1	1	1	1	TACAIDS annual Suppliers evaluation report	Activity reporting template and report review	Annually	Annual suppliers Evaluation report	Annually	HPMU
G	G.5.1.3. Number of Tender Board Meetings conducted. *This indicator measures the number of Tender Board meetings conducted per year.*	2020/21	2	4	4	4	4	4	TACAIDS annual report	Activity reporting template and report review	Quarterly	Minutes of Quarterly Tender Board meetings	Quarterly	HPMU

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
G	G.5.1.4. List of items for disposal prepared in place *This measures the compliance to PPA and its Regulations*	2020/21	1	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	List of items for disposal prepared	Annually	HPMU
G	G.6.1.1. A developed and operational TACAIDS' Risk Management Framework in place. *This indicator measures compliance to Public Finance Act and guidelines and circulars on the Risk management in Public Institutions*	2020/21	1	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	TACAIDS' Risk Management Framework	Annually	DPR
G	G.6.1.2. Risk register in place. *This indicator measures compliance to Public Finance Act and guidelines and circulars on the Risk management in Public Institutions*	2020/21	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	Annually	TACAIDS' Annual Risk register	Annually	DPR
G	G.6.1.3. Risk implementation report in place *This indicator measures compliance to Public Finance Act and guidelines and circulars on the Risk management in Public Institutions*	2020/21	1	1	1	1	1	TACAIDS annual report	Activity reporting template and report review	Annually	Annually	TACAIDS' Annual Risk implementation report	Annually	DPR

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
G	G.7.1.1. Number of quarterly and annual financial management reports prepared *This indicator measures the number of quarterly and annual financial management reports prepared*	2020/21	5	5	5	5	55	5	TACAIDS quarterly financial report	Activity reporting template and report review	Quarterly	Quarterly financial reports	Quarterly	DFA
G	G.7.2.2. Number of contracts developed. *This indicator measures the number of legal contracts developed*	2020/21	3	4	4	4	4	4	TACAIDs annual report	Activity reporting template and report review	Annually	TACAIDs annual report	Annually	HLSU
G	G.7.2.3 Number of contracts reviewed *This indicator measures the number of legal contracts reviewed per year.*	2020/21	3	4	4	4	4	4	TACAIDs annual report	Activity reporting template and report review	Annually	TACAIDs annual report	Annually	HLSU
G	G.7.2.5 Number of legal matters trainings conducted to staff *This indicator measures the number of legal matters training conducted to TACAIDS staff per year.*	2020/21	0	1	1	1	1	1	TACAIDs annual report	Activity reporting template and report review	Annually	TACAIDs annual report	Annually	HLSU
H	H.1.1.1Study report on gender and human rights in place. *This indicator measure the level of scaling up Gender responsive programming*	2020/21	0	1	1	1	1	1	TACAIDs annual report	Activity reporting template and report review	Annually	Study report on gender and human rights	Annually	HLSU DAI

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	and human rights based approach in the context of HIV and the law													
H	H.1.1.2. Number of trainings done on gender and human rights on response to HIV and AIDS. *This indicator measures the number of trainings done on gender and human rights on response to HIV and AIDS.*	2020/21	1	4	4	4	4	4	TACAIDs annual report	Activity reporting template and report review	Annually	TACAIDs annual report	Annually	HLSU DAI
H	H.2.1.1.A developed Rights-based and gender-sensitive standard package of interventions for the Key populations in place. *This indicator measures response on the coordination of KVP interventions in the country.*	2020/21	0	1	1	1	1	1	TACAIDs annual report	Activity reporting template and report review	Annually	A developed Rights-based and gender-sensitive standard package of interventions for the Key populations	Annually	HLSU DAI
H	H.3.1.1. Number of law makers and low enforcers sensitized on gender and human rights HIV and AIDS issues (disaggregate by type)	2020/21	60	120	240	300	410	450	Annual reports	Activity reporting template and report review	Annually	Activity reports	Annually	LSU DAI
H	H.4.1.1.Number of sectoral laws reviewed to ensure HIV and gender sensitivity. *This indicator measures the number of sectoral laws reviewed to ensure HIV and gender sensitivity.*	2020/21	1	2	3	4	5	6	TACAIDS Annual reports	Activity reporting template and report review	Annually	Sectoral laws reviewed	Annually	LU DAI

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
H	H.4.2.1. A reviewed Gender Operational Plan (GOP) in place. *This indicator measures action taken to implement gender and HIV responsive interventions per year.*	2020/21	1	1	1	1	1	1	TACAIDS Annual reports	Activity reporting template and report review	Annually	A reviewed GOP	Annually	DAI
H	H.5.1.1Study report on GBV, stigma and discrimination to PLHIV in place. *This indicator measures the action taken to assess the status of GBV, stigma and discrimination to PLHIV*	2020/21	1	1	1	1	1	1	GBV assessment report	Activity reporting template and report review	Annually	Study report on GBV, stigma and discrimination to PLHIV	Annually	DAI DNR
H	H.5.1.2. Number of awareness creation sessions done on GBV, stigma and discrimination to PLHIV. *This indicator measures the number of awareness creation sessions done on GBV, stigma and discrimination to PLHIV.*	2020/21	2	4	4	4	4	4	Annual reports	Activity reporting template and report review	Quarterly	Activity reports	Quarterly	DNR DAI
I	I.1.1.1.A developed comprehensive HIV and AIDS advocacy strategy in place. *This indicator measures action taken on strengthening advocacy on*	2020/21	0	1	1	1	1	1	Annual reports	Activity reporting template and report review	Quarterly	A developed comprehensive HIV and AIDS advocacy strategy	Quarterly	DAI

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	response to HIV and AIDS.													
	I.1.1.3. Number of advocacy programs designed and implemented. *This indicator measures the number of advocacy programs designed and implemented per year*	2020/21	2	3	4	6	8	10	Annual reports	Activity reporting template and report review	Annually	Annual reports	Annually	DAI
I	I.2.1.1.Assessment report of the National HIV and AIDS response efforts in educational institutions in place. *This measure action taken to assess the response to HIV and AIDS in educational institutions per year.*	2020/21	0	1	1	1	1	1	Annual reports	Activity reporting template and report review	Annually	Assessment report of the National HIV and AIDS response efforts in educational institutions	Annually	DNR
I	I.4.2.2. Number of awareness sessions conducted to various stakeholders on TACAIDs operations. *This indicator measures the number of awareness sessions conducted to various stakeholders on TACAIDs operations*.	2020/21	5	7	10	14	18	20	Annual reports	Activity reporting template and report review	Annually	Annual reports	Annually	DNR DAI
I	I.5.1.1. Number of policy advocacy sessions that influence national policies aiming at improving the quality of lives of the youth	2020/21	0	2	4	6	8	10	Annual reports	Activity reporting template and report review	Annually	Annual reports	Annually	DNR DAI

S/N	Indicator & Indicator Description	Baseline		Indicator Target Value					Data Collection and Methods of Analysis				Frequency of Reporting	Responsibility of Data Collection
		Date	Value	2021/2022	2022/2023	2023/2024	2024/2025	2025/2026	Data Source	Data Collection Instruments and Methods	Frequency of Data Collection	Means of Verification		
	and women conducted per year. *This indicator measures the number of policy advocacy sessions that influence national policies aiming at improving the quality of lives of the youth and women conducted per year.*													