

Dear all,

We are grateful for the very inclusive process so far in the development of COP 2018 in Tanzania. CSOs had number of meetings with colleagues from US government to best prepare for meaningful contributions. We want to also thank AVAC our donor, The NSA and DSDUT Coalitions in Tanzania for facilitating these inputs and UNAIDS for technical assistance whenever required.

We have three core messages we wish to convey.

First is around community ART. We need health care workers such as expert patients who are out there in the field to be enrolled in providing HIV services, including ART delivery. They understand this role very well. There is a benefit to formalize the volunteer community health care workers and we are urging the government to relax requirements for task-sharing and task-shifting to increase coverage of services and improve retention.

Second issue is around HIV related stigma. Stigma in the community remains a big barrier for people to get tested. And we all know testing is the entry point to care and treatment. We are all aware of stigma faced in particular by KVP in accessing health services. Everyone in the health facility needs to be trained on stigma and discrimination reduction. Law enforcement actors also need to be engaged in counter S&D interventions including the TWGs. And we need to monitor the effectiveness of the stigma reduction activities and focus our investments on impactful interventions on S&D reduction.

Third issue is around effective connectivity between facilities and community service providers. We have a high TB burden on top of the HIV burden. It becomes of essence that community and facility health systems are talking to one another (bi-directional linkage).

*Bi-directional linkage helps in ensuring efficiencies in client case management by making sure that there is effective networking among community and facility service providers. Ideally a facility service person will know about all the services being offered at the facility level while community service provider will know about all the services being offered at the community. Effective communication between these two (community and facility providers), promotes efficiencies: for example instead of the community service provider providing a client escort service; S/he would just call the facility person who would receive the client and ensure that s/he receives the required services at the facility and likewise for the services at the community. This would save much time for both service providers.*

There are also other opportunistic infections like sexually transmitted infections that require additional attention.

For all this happen, money is important. We are grateful to GoT, PEPFAR and GLOBAL FUND for their financial support and urge the Government to continue increasing its resources in the fight against HIV, as the country is moving towards being a middle-income status.

Thank you.