



# PROJECT FACT SHEET

## ACHIEVE/TANZANIA

**Funding Level**  
\$62,817,116 million

**Duration**  
October 1, 2020 - April 14, 2024

**Implementing Partners**  
Palladium, WI-HER

**Geographic Location**  
95 councils across 26 regions

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### CONTEXT

In Tanzania, 1.74 million people are estimated to be living with HIV/AIDS as of 2019.<sup>1</sup> This includes adolescent girls and young women aged 15-24, who have been disproportionately affected by new HIV infections compared to their male counterparts. Given Tanzania’s high prevalence of infections, USAID is committed to supporting the Government of Tanzania (GoT) to achieve HIV epidemic control. This work includes a focus on adolescents and children to close the pediatric treatment gap to contribute to the 95-95-95 goals.

The Tanzania HIV Impact Survey (2016-2017) revealed that only 50% of Children Living with HIV (CLHIV) under 15 years of age had been diagnosed with HIV, and fewer than 20% of CLHIV are virally suppressed. Moreover, the gaps persist in the pediatric HIV clinical cascade. ACHIEVE aims to close these gaps through its differentiated service packages for Adolescents and Children Living with HIV (A/CLHIV), HIV-Exposed Infants (HEI), and their families to provide comprehensive services to address barriers to HIV diagnosis, ART initiation, and adherence to achieve sustained viral suppression and improve resiliency and overall wellbeing of these vulnerable children.



### ACHIEVE’S APPROACH

The goal of ACHIEVE Tanzania is to increase access to HIV-inclusive services in USAID-supported councils to improve the health and social wellbeing of orphans and vulnerable children (OVC) as well as strengthen the capacity of local organizations to manage and implement OVC and DREAMS interventions. The project has three objectives:

1. To strengthen the capacity of the national and community-level social services workforce, systems, and structures to ensure quality services for OVC, at-risk Adolescent Girls and Young Women (AGYW), and People Living with HIV (PLHIV)
2. To strengthen the capacity of local organizations to manage and implement OVC and DREAMS interventions
3. To improve the health, wellbeing, and protection of OVC and youth in high HIV burdened communities

1. PEPFAR. (2021). Tanzania Country Operations Plan Tanzania 2021. Accessed at [https://www.state.gov/wp-content/uploads/2021/09/Tanzania\\_SDS\\_Final-Public\\_Sep-30-2021.pdf](https://www.state.gov/wp-content/uploads/2021/09/Tanzania_SDS_Final-Public_Sep-30-2021.pdf) (July 26, 2022, 1230).

## PROJECT INTERVENTIONS

### OVC/DREAMS SERVICE DELIVERY

To ensure OVC and their caregivers are stable and secure enough to meet their needs (e.g., financial, social, emotional, HIV/health, and education), ACHIEVE delivers family-centered case management under a comprehensive services approach for OVC households. The prioritized outcome of OVC programming is case identification, linkage to ART, and viral suppression among C/ALHIV. The comprehensive services include:

- Age-based OVC Service Delivery Package (NICM)
- Adolescents and Children Living with HIV Services Package
- HIV Exposed Infants Services Package
- Service Package for Children of Female Sex Workers

ACHIEVE aims to increase access to HIV prevention and violence prevention services among OVC ages 10-14 (girls and boys). To this end, ACHIEVE implements the evidence-based coaching boys into men (CBIM) as the main preventive package for boys and DREAMS interventions for HIV primary prevention and gender-based violence prevention among AGYW.

DREAMS interventions include:

- Primary Services Package (Education subsidies, integrated primary prevention of sexual violence and HIV for 10-14 year olds, sanitary kits, financial literacy)
- Secondary Package of Services (Furaha Parenting Sessions, No Means No Interventions, and bi-directional referrals to AGYW based on identified vulnerabilities)

### SOCIAL WELFARE SYSTEMS STRENGTHENING

ACHIEVE focuses on strengthening the capacity of the national and community-level social services workforce, systems, and structures to ensure quality services for OVC, at-risk AGYW, and PLHIV. The activities have been tailored to ensure:

- A skilled social services workforce and active, capable community structures deliver health/HIV, social, and protection services for OVC in selected communities.
- Systems and tools for improved social services are institutionalized to promote effective OVC service delivery, coordination, and monitoring.

### CAPACITY DEVELOPMENT SUPPORT

As part of USAID's commitment to increase funding to local partners through direct prime awards to achieve country ownership and long-term sustainability of HIV response, ACHIEVE works to strengthen the capacity of local organizations to manage and implement OVC and DREAMS interventions. Activities under capacity development aim to ensure:

- Local prime implementing partners have strengthened technical and organizational capacities for implementing and managing high-quality programs serving OVC and AGYW.
- OVC service delivery is transitioned to directly funded USAID local prime implementing partners.
- Local partners have strong technical and management skills to manage and sustain family-centered, community-based OVC and DREAMS service delivery through ACHIEVE's capacity development and grants management process.

**ACHIEVE** is a five-year (2019-2024) USAID-funded global project whose primary goal is to reach and sustain HIV epidemic control among pregnant and breastfeeding women, adolescents, infants, and children. To reach this goal, ACHIEVE supports OVC and DREAMS service delivery, provides technical assistance to strengthen social welfare systems and improve service quality and reach, and supports capacity development for local partners to sustain services at the community level.

ACHIEVE is implementing activities in eight countries: Burundi, Dominican Republic, Namibia, Nigeria, Rwanda, South Africa, South Sudan, Tanzania, and Zambia. ACHIEVE also supports child protection programming for OVC in several PEPFAR Faith and Community Initiative countries.