Ujana Salama

“Cash Plus” combining HIV, SRHR, GBV and livelihood interventions for adolescents from poor households in Tanzania

Webinar: Intersectoral "Cash Plus" Approaches to HIV & Health

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Guiding Principles for the Adolescents “Cash Plus” Programme Implementation

- Government leadership & ownership
- Implementation within TASAF - PSSN Framework especially as part of the livelihood enhancement programme
- Age and gender sensitive dovetailed health and livelihood interventions
- Beyond educational assets and include financial, health and social asset building
- Linkages with other government services
Adolescent girls and boys 14-19 years, in HH which receive CCT receive a “Plus package” composed of

- **Face-to-face training** in livelihoods and sexual reproductive health and rights (SRHR), including HIV and violence (GBV) (7 weeks).
- **Productive Grant**
- **Mentorship and coaching** (9 months)
- **Referral to health services and livelihood opportunities**
Implementation Arrangements

Tanzania Social Action Fund (TASAF)
Regional Administrative Authorities (TASAF Regional PSSN Staff)
District Management Committee (including TASAF Planning and Monitoring Officer)
TASAF Community Management Committees, including Village Executive Officer

Other partners: TACAIDS; MOHCDEG; NGO.

4 Mbeya, Iringa, Songwe, Kigoma regional governments
11 districts/councils in Iringa, Mbeya, Kigoma and Songwe regions
348 villages

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### National level

#### Tanzania Social Action Fund (TASAF)
- Government agency which manages and monitors PSSN programme
- Co-designed C+ concept and oversees implementation, monitoring, training; data collection & analysis
- Supervises local government TASAF staff at regional, districts and council level
- Coordinates with donors and other government partners
- Member of National Evaluation team; including approval of evaluation

#### Tanzania Commission for AIDS (TACAIDS)
- Member of National Evaluation Team
- Review HIV & SRHR & GBV component
- Used C+ design and leveraged additional funding from Global Fund; Coordinates with PEPFAR DREAMS; and with national HIV and Adolescents and Young Women technical government working groups

#### MOHCDGEC
- Leads training for health facilities on HIV-SRH components

#### NGO
- Short term technical support for youth peer educator and mentor training on SRHR/HIV/GBV
Regional and District Level

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<th>Specific roles by regional and district governments:</th>
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<td>Develop and manage district implementation plans for Cash Plus activities</td>
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<td>Select staff to be trained as trainers of trainers (TOT)</td>
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<td>Supportive supervision as part of routine activities</td>
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<td>Monitor productive grants disbursement and utilization</td>
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<td>Avail government extension officers to provide technical support during mentorship phase</td>
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<td>Consolidate reports and input into TASAF Information Management System</td>
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Community level: Village Executive officer (VEO), Village Chairpersons (VC), Community Management Committee (CMC), Parents and Guardians

- enrolling and training of female and male adolescents from TASAF households to participate in Cash Plus

- Training and deployment of youth peer educators and community based adult mentors to conduct Cash Plus training and mentorship with adolescent girls and boys from TASAF households;
Implementation Cascade

C+ introduction and programme meetings at the national, regional and district and community level

Resource mapping and selection of TOTs at village level

C+ TOT training and support

Adolescent participant enrollment & selection of PE & mentors. Involved TOTs, VEO, and CMC members. Village meeting with all beneficiaries

TOT training of mentors and peer educators at the council level

Intensive 7 weeks training to adolescents at the village level.

Issuance of productive grants mentorship, referral and linkage phase.
Health Facilities Interventions

- Trained Health Care Workers in key facilities
- Offer adolescent responsive health services
- Availability of required equipment and supplies
- Linkages with trained community health workers
- Platform for youth services after completion of 7 weeks training.
Changes based on Wave 3 evaluation results and COVID 19 impacts

• Focused on out of school adolescents given the sheer number of those in families supported by TASAF CCT

• Shortened training phase from 12 to 7 weeks

• Revised training materials, especially financial planning, parenting skills

• Supported Cash Plus implementation areas with COVID 19 prevention supplies (e.g. soap, buckets, masks) and made group training smaller
Summary: Implementation Aspects

Strong government ownership from beginning

Implementation through government administrative structure @at all levels

Mentorship by trusted and trained adults from the local community and part of government workforce

Having capacity (TOTs) at the district/council level

Good community involvement: Youth Peer educators, Mentors and Village Leaders involved

Addressing supply side factors/access to health services
Summary: Implementation Aspects

C+ implementation affected by broader PSSN development, e.g., limited availability of TASAF staff and late start of new phase of PSSN 2

For scale up, cost of the package need to be better understood

Systems approach useful: Coordination across sectors in programming; Co-financing structural interventions; Addressing multidimensional poverty & vulnerability
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Thank you

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For more information on the Cash Plus, visit: