

# Striving toward a *One Stop Shop*: Assessing Integration of Family Planning and HIV Services in Tanzania

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# Methodology

- The assessment was conducted in 12 health facilities (6 in Iringa and 6 in Manyara regions) in October 2010 utilizing the Assessing Integration Methodology (AIM) (Fuentes, et al 2008).The following were conducted;
  - 12 facility inventories
  - 12 facility record reviews to collect service statistics
  - 36 observations of client-provider interactions
  - 36 interviews with service providers
  - 169 exit interviews with clients
- Facilities were rated on a five-point scale of FP integration, ranging from FP referrals only (rating of A) to fully integrated services (rating of E)

# KEY FINDINGS

- Eight out of 12 facilities as a whole rated Level D or higher, offering at least all short-acting and long-acting methods, with referral for permanent methods.
- At the service unit level, only condoms were readily available at non-FP units (with one exception), rating most non-FP units Level A.
- Providers were generally positive about service integration and reported that FP uptake had increased. However, providers perceived provision of integrated services as time-consuming.
- Among those who received FP counseling, 76% were offered a method. 50% of clients offered a method received their method of choice.
- Stock-outs were the most common reason that clients did not receive their method of choice.
- HIV testing and counseling were provided to clients attending FP clinic.