

Terms of Reference (ToR) for the Consultant
Development of the National Family Planning Costed Implementation Plan III
2026/2027 – 2030/2031

1. Background

The Government of Tanzania recognizes family planning (FP) as a fundamental, high-impact and cost-effective intervention for improving reproductive, maternal, newborn, child, and adolescent health (RMNCAH) outcomes, reducing maternal and infant mortality, preventing unintended pregnancies, and contributing to national social and economic development. Over the past two decades, Tanzania has made significant progress in reducing maternal and newborn deaths through strengthened health systems, increased access to reproductive health services, and implementation of national health strategies and global commitments, including FP2030.

To accelerate progress in family planning, the Government developed the first National Family Planning Costed Implementation Program (NFPCIP I) covering the period 2010–2015. The plan was designed to revitalize family planning services in response to low contraceptive uptake and high unmet need for Family Planning. Aligned with the National Road Map Strategic Plan to Accelerate Reduction of Maternal, Newborn and Child Deaths (One Plan) and the Health Sector Strategic Plan III (HSSP III), the NFPCIP-I provided a framework for coordinated investments in contraceptive security, service delivery, capacity building, advocacy, and health systems strengthening.

Building on the achievements and lessons learned from NFPCIP I, the Government developed NFPCIP II to sustain momentum and address emerging priorities. The implementation of the two plans strengthened coordination among Government institutions, development partners, civil society organizations, faith-based organizations, and the private sector, resulting in improved contraceptive commodity availability, expanded access to family planning services, integration of FP within broader health programmes, increased community-based service delivery, and greater focus on adolescents and youth-friendly services.

Despite these achievements, significant challenges remain. Modern contraceptive use remains below national aspirations, unmet need for family planning persists, and disparities in access to quality services continue to affect adolescents, young people, rural populations, and underserved communities. High rates of teenage pregnancy and inequities in service utilization continue to limit progress toward national health and development goals.

Furthermore, the evolving global and national financing landscape presents additional challenges. Declining external funding, persistent reproductive health commodity financing gaps, supply chain vulnerabilities, and health workforce constraints threaten the sustainability of gains achieved over the past decade. These challenges underscore the need for stronger domestic resource mobilization, improved efficiency in service delivery, and greater prioritization of high-impact and equitable family planning interventions within the broader health sector agenda.

As NFPCIP II comes to an end, the Government is committed to developing the National Family Planning Costed Implementation Plan III (NFPCIP III) to guide implementation of family planning priorities during the next strategic period. NFPCIP III will build on the successes and lessons learned from the previous plans while addressing emerging challenges and opportunities within the changing health and development context.

The new plan will be aligned with the Health Sector Strategic Plan VI (HSSP VI), One Plan IV, FP2030 commitments, the Sustainable Development Goals (SDGs), and Tanzania's agenda towards Universal Health Coverage. It will provide a comprehensive, evidence-based, and costed framework to scale up rights-based, equitable, and quality family planning services, strengthen domestic ownership and sustainability, and accelerate progress toward improved reproductive health outcomes and socioeconomic development for all Tanzanians.

2. Purpose of the Assignment

The purpose of this consultancy is to support the development of a comprehensive, evidence-based, and Costed FP Implementation Plan (2026/2027–2030/2031) that reflects the national priorities, lessons from the NFPCIP II, FP2030 commitments, and stakeholder inputs.

3. Objectives of the Consultancy

The consultant will:

- Review existing national policies, strategies, reports, and evidence related to family planning programming.
- Review a report from the evaluation of the implementation of the ended CIPs
- Consult the Directorate of Reproductive Maternal and Child Health (DRMCH) on prioritization and refinement of key interventions
- Develop FP CIP for 2026/2027–2030/2031.
- Facilitate stakeholder validation meeting and incorporate feedback.
- Produce and submit the Costed Plan for adoption by the government and partners.

4. Scope of Work / Key Tasks

The consultant will undertake the following tasks:

A. Inception and document review

- Conduct an inception meeting with DRMCH of the Ministry of Health and key partners to agree on the assignment scope, methodology, and timelines.
- Review relevant documents, including:
 - NFPCIP assessment report
 - HSSP V
 - One Plan III
 - FP2030 commitments and progress reports
 - Family planning performance indicators
 - Prioritization workshop report (Morogoro year? By whom?)
 - Relevant national surveys and assessments (e.g., Tanzania Demographic and Health Survey, service statistics, Mid Term Review of One Plan III, SARA Report)

B. Development of Draft Costed Plan

- Synthesize findings from reviewed documents and consultations.
- Refine and organize the priority interventions agreed during the consultative workshop.

- Develop an implementation framework, including strategic objectives, interventions, indicators, and targets.
- Develop an implementation matrix specifying activities, timelines, responsible actors, and expected outputs.
- Cost all priority interventions and implementation activities.
- Prepare the 1st draft of FP- CIP 2026/2027 – 2030/2031

C. Stakeholder consultations and validation

1. Support preparation of the validation workshop agenda, materials, and presentation slides.
2. Facilitate stakeholder validation workshop involving government, implementing partners, donors, civil society, and relevant professional associations.
3. Document feedback, recommendations, and agreed revisions.
4. Prepare a workshop report summarizing key outcomes and action points.

D. Development of 2nd Draft and finalize the implementation plan

- Revise Draft 1 based on inputs from the validation workshop.
- Share Draft 2 with the DRMCH of the Ministry of Health and partners for review.
- Incorporate final comments from stakeholders.
- Submit the final FP CIP document (2026/2027–2030/2031).
- Present the final plan to the Ministry and key stakeholders.

5. Deliverables

The consultant shall produce the following deliverables:

1. Inception report (including methodology, workplan, and timeline)
2. Desk review summary report
3. Validation workshop facilitation report
4. Final Costed Plan 2026/2027 – 2030/2030
5. Costed implementation matrix
6. Final consultancy report documenting the process, findings, and recommendations
7. Performance Monitoring Plan

6. Duration of Assignment

The consultancy is expected to be conducted 75 **working days** within a period agreed with the Ministry of Health.

Roadmap

S/N	Activity		Timeline 2026														
		June	July					August				September					
1	Inception meeting with MoH and TMEPiD	29 June															
2	Contract signing and commencement of consultancy		2 July														
3	Submission of Inception Report (methodology, workplan and timelines)			4–6 July													
4	Desk review of policies, reports, evaluations and strategic documents				7–16 July												
5	Submission of Desk Review Summary Report					17–18 July											
6	Consultation meeting with key stakeholders to prioritize interventions						20–24 July										
7	Preparation of zero draft of the National Family Planning Costed Implementation Plan							27 July–10 Aug									
8	Costing workshop with the technical team and refinement of implementation matrix								11–15 Aug								
9	Submission of first draft to MoH and TMEPiD									17 Aug							
10	Technical review by MoH and TMEPiD										18–28 Aug						

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7. Qualifications and Experience

The consultant should possess the following qualifications:

- Advanced degree in public health, health policy, health economics, demography, or related field.
- At least 7 years of demonstrated experience in reproductive health/family planning programming, strategic planning, and health systems strengthening.
- Proven experience in developing national strategic plans, costed implementation plans, or policy documents in reproductive, maternal, newborn, child, and adolescent health.
- Strong knowledge of FP2030 commitments and the family planning landscape in Tanzania.
- Experience in facilitating multi-stakeholder workshops and consultations.
- Strong analytical, report writing, and costing skills.

8. Reporting and Supervision

The consultant will report to the Ministry of Health DRMCH through TMEPiD and will work closely with designated technical partners supporting family planning programming.

9. Payment Schedule (Suggested)

- 25% upon submission and approval of the inception report
- 35% upon submission of Draft 1 Costed plan
- 10% upon completion of the validation workshop and submission of the workshop report
- 30% upon submission and approval of the final Costed plan and the final consultancy report

10. Institutional Responsibilities

The Ministry of Health and partners will:

- Provide relevant documents and background materials
- Facilitate access to stakeholders and workshop participants
- Review and provide timely feedback on draft documents

TMEPiD will:

- Organize workshop logistics
- Review and provide timely feedback on draft documents
- Produce Prototype of CIP document
- Print the final document

11. Submission of Proposals

Technical and financial proposals, not exceeding 15 pages, should be sent to info@tmepid.or.tz. The deadline for submission of proposals is Tuesday, 20th July 2026. Applications received after this deadline will not be considered.