

United Republic of Tanzania

Part 1: Situation update in the country

In 2018, the Government of Tanzania continued to focus on priorities that included strengthening the tax revenue base and implementing large infrastructure projects. While the economy continued to grow and tax revenues increase, the foreign and domestic private sector have concerns about the investment climate. Linked to the financing of large infrastructure projects, Tanzania's increasing debt level was a subject of discussion but the debt to gross domestic product (GDP) ratio remains below risk thresholds. In this context, social sector budgets, while increasing in total amounts, continued to decline relatively in the national budget, and remain below international benchmarks for health and education.

The education share of the national budget fell from 17 per cent in 2015/16 to 15 per cent in 2017/18. For health, the share of the national budget gradually declined over recent years, and is currently at 7 per cent compared to the international benchmark of 15 per cent. The 2017/18 budget is less than half the amount (47 per cent) required to realize Health Sector Plan goals. Yet the current needs of children and a growing child population require enhanced investment, reiterated by the Ministry of Finance in November 2018 at the launch of budget analysis reports for social sectors, which were produced with the support of UNICEF. A complicating factor is the low disbursement and execution rate of social sector investment budgets, largely due to unrealistically high targets for revenue collection and the priority for large scale infrastructure projects, leaving limited fiscal space for social sector investment.

Development partners perceive the operating environment as increasingly complex and dialogue was constrained at times, reflected in a number of development projects that await government approval. Development partners have expressed concern about the human-rights situation in Tanzania and some are reviewing their engagement with the country. This is a risk for implementation of social sector plans, as development assistance is critical for improving scale and quality of service delivery for children.

At the same time, the Government strengthened partnerships around its infrastructure investment projects, with partners such as China and India as well as Egypt and Turkey. New regulations are in place related to operations of national and international non-government organizations; the impact on programmes for children remains to be assessed.

The use of data and information in Tanzania was affected by new regulations regarding online content and amendments to the Statistics Law that penalize contesting official statistics. The exact implications for statistical production and release will be known when detailed regulation is issued on the application of the amendments. UNICEF Tanzania strengthened adherence to existing requirements for research and statistics while collaborating with the Government on all evidence-related work.

The Government has almost completed its move from Dar es Salaam to the new capital Dodoma. This, to some extent, disrupted the pace of work for development partners, including the United Nations that worked with the logistical and communication challenges caused by the move. The United Nations opened an office in Dodoma in late 2017 and UNICEF will be relocating four technical experts and support staff to Dodoma as of January 2019.

No major national household surveys were released in 2018. Data collection was completed for the 2018 Household Budget Survey, which will update several child monetary and multidimensional indicators in 2019. Preliminary findings from UNICEF-supported child poverty analysis of the 2014–2015 National Panel Survey pointed to high levels of multidimensional child poverty. Key drivers of child poverty include poor housing and weak sanitation conditions. Research commissioned by the Ministry of Finance and UNICEF, to be released in 2019, highlighted that children in urban areas are not necessarily better off; an urban-child programming response is needed to address challenges and poverty for children who live in Tanzania's growing cities.

Urbanization is linked to population growth, and demographic analysis released in 2018 highlighted the risk of Tanzania risking the benefit from the demographic dividend if investment in today's children and adolescents is insufficient. With an estimated 56 million people, Tanzania is among the most populous countries in Africa: almost 50 per cent of Tanzania's population (27 million people) is under the age of 18. Tanzania's child population is expected to more than double to approximately 59 million children by 2050 out of a total projected population of almost 134 million.

In Tanzania, 1.5 million people are living with HIV. Around 65,000 new HIV infections, including 20,500 in adolescents and young people, were estimated in 2017. HIV-prevalence in Tanzania declined from 7 per cent in 2003 to 4.7 per cent in 2016. The epidemic is characterized by heterogeneity across geographical locations with Njombe (11.4 per cent), Iringa (11.3 per cent) and Mbeya (9.3 per cent) having the highest prevalence. Girls and young women are more vulnerable to contracting HIV compared to boys and young men of the same age.

The policy environment for adolescents was mixed. The most recent estimates put the proportion of out-of-school children aged 14–17 years at 40 per cent. A comprehensive approach is required to address this, but government pronouncements on preventing girls who are pregnant from going back to public schools complicated the discussion in 2018. It delayed the approval of a US\$300 million education grant from the World Bank, which will be appraised again in 2019. Together with the World Bank and other partners, UNICEF continues to

advocate for education investment to retain children in school alongside the development of alternative pathways for children who drop out of school, including pathways that lead them back into school.

The Government launched the National Accelerated Action and Investment Agenda for Adolescents Health and Well-being which has stakeholder engagement and the promise of a holistic approach to adolescent development. Together with the Government, progress was made in implementing and evaluating a comprehensive adolescent-focused programme ('cash plus') which combines HIV and health education, livelihood trainings and access to services with social cash transfers.

Tanzania needs to invest further to achieve Sustainable Development Goal targets by 2030. In 2018, the Government appointed a national Sustainable Development Goal coordinator in the Ministry of Finance and Planning, and is working on coordination to achieve the Goals. This structure can inform policy decisions to localize Sustainable Development Goals, to identify accelerators, and to inform necessary changes in budget allocations and financing mechanisms. The 2017 Human Development Index value is 0.538: ranking Tanzania 154th out of 189 countries. Between 1990 and 2017, Tanzania's Human Development Index value increased from 0.370 to 0.538, or 45.3 per cent. The forthcoming mid-term review of the national five year development plan and the Zanzibar Strategy for Growth and Reduction of Poverty (ZSGRP/MKUZA III) will further align and prioritize Sustainable Development Goals and enhance investments in human capital development.

Regarding the humanitarian situation, the number of refugees and asylum seekers decreased from 358,398 in 2017 to 330,755 in 2018. The majority of refugees and asylum seekers residing in refugee camps come from Burundi and the Democratic Republic of Congo. About 54 per cent of refugees are under 18 years with over 7,500 unaccompanied and separated children. An inter-agency 2017 assessment showed that the biggest risks faced by children in the camps are exposure to violence, including sexual violence, and labour exploitation, such as domestic labour in households outside the camps. In addition to these risks, out of the 124,000 school-age children in the refugee camps, approximately 15,000 children are not in school.

Voluntary repatriation of Burundian refugees resumed in November 2018 following a temporary hold in September 2018 due to a ban on non-government organizations in Burundi and a lack of resources on both sides of the border. As of December 2018, over 52,000 (40,000 in 2018 alone) refugees had returned to Burundi. Mass meetings were held by the Government of Tanzania across the three camps in July 2018 to promote returns, resulting in a 50 per cent increase in the number of refugees registering to return in the second half of 2018.

From June to July 2018, the Tanzanian government imposed new restrictions on livelihood activities and motorbike movement in the camps, including closure of business, all of which impacted refugees living in the camps. By the end of the year, many restrictions had been eased. While nearly no new asylum seekers arrived in 2018, there remains a need for preparedness planning for new arrivals, especially considering the elections in Democratic

Republic of Congo (which took place on 30th December 2018).

UNICEF Tanzania support ensured services for refugee children in the camps including safe water, sanitation and key messages on hygiene practices for 215,964 refugees (children and parents); vaccination of over 35,00 children against measles and polio; Vitamin A supplementation to over 54,000 children under the age of five years; the provision of protection services arrangements including psychosocial support for over 7,500 unaccompanied and separated children; and the enrolment of over 109,000 children in pre-primary, primary and secondary schools.

In 2018, UNICEF and United Nations agencies continued to address development issues in refugee hosting districts via the Kigoma Joint Programme (supported by the Republic of Korea, Norway and Sweden). These districts' development indicators are far below the national average and indicators are also below the standards in the refugee camps. In 2018, UNICEF worked with United Nations Population Fund, WHO and other agencies to expand the joint programme to include health, HIV and nutrition components, and funds from Irish Aid were secured to start this work.

The risk of Ebola Virus Disease imported from Democratic Republic of Congo has increased. In response, the National Ebola Task team led by the Ministry of Health, jointly supported by UNICEF and WHO, conducted a joint capacity and gap analysis in the five at-risk regions. The international airports of Dar es Salaam, Kilimanjaro and Songwe were placed on alert. Surveillance and control measures were strengthened, and training on early detection and reporting was conducted for the regional and community health management teams for six at-risk regions (Kigoma, Kagera, Katavi, Mwanza, Rukwa and Songwe). Contingency supplies are in place. In terms of community preparedness, UNICEF conducted training on Ebola risk communication for the regional and community health management team members in the Kigoma region and supported the development of costed preparedness and response plans for eight district councils in the region, including those which serve as point-of entry for refugees and those which host refugee camps.

There has been an ongoing outbreak of cholera in Tanzania since August 2015. Currently, there are cholera hotspots in four out of 185 districts on Mainland Tanzania. Though a notifiable disease, the full extent of the outbreak is unknown as reporting is weak primarily due to poor information management. The toll of the cholera outbreak on children in the Songwe and Momba regions of Tanzania is grave. Available data shows that about 50 per cent (62 cases) of cases in Momba and 59 per cent (241 cases) in Songwe were children, the majority in Songwe being female. Due to timely response, there were no deaths of children from cholera in the two regions. At the request of the Ministry of Health, Community Development, Gender, Elderly and Children, UNICEF Tanzania provided the national response team with 160,000 Waterguard tablets for water purification as well as technical support in the preparation of a response plan.

Part 2: Major Results including in humanitarian action and gender, against the results in the Country Programme Documents

In 2018 UNICEF worked with partners to improve the lives of children in Tanzania through three key strategies: 1) evidence and knowledge generation for policy action and advocacy; 2) strengthening service delivery systems and platforms to reach the most disadvantaged children and; 3) engagement with families, communities and influencers to promote positive nurturing and well-being of children. Expanding partnerships, catalyzing innovation and integrating gender dimensions underpinned UNICEF Tanzania work.

Goal area 1: Every child survives and thrives

In 2018, more Tanzanian children and mothers were able to access high-impact interventions to reverse the negative trends in under-five and infant mortality and reduce stunting.

UNICEF supported efforts to improve the availability and use of quality data to ensure health plans and interventions are evidence-based and focus on high-impact interventions. The current Health Sector Strategic Plan (HSSP IV) and ongoing decentralization reform are a foundation for reinforcing sub-national health system capacity. Comprehensive council health plans and sub-national plans developed by local government are often ongoing with limited analysis and adjustment over the years, leading to poor prioritization of health interventions and resources. UNICEF provided technical and financial support in 2018 to review and revise the council health plans based on data and evidence. This helps districts and regions prioritize resource allocations.

UNICEF Tanzania provided technical assistance to help leverage US\$39 million from the GAVI health-systems strengthening Round II funding (2019-2023). UNICEF facilitated consultative meetings with Government and development partners and provided technical assistance to develop a US\$39 million proposal with a focus on system strengthening for universal immunization coverage. UNICEF successfully advocated for the allocation of US\$11.1 million for microplanning of immunization activities, community health worker employment and community mobilization. The remainder of the funds will be used to strengthen the immunization supply chain.

A national social accountability campaign aimed at reducing preventable maternal and newborn deaths (JiongezeTuwavushe Salama), the new elimination of mother-to-child transmission plan and a National Multi-sectoral Strategic Framework for HIV and AIDS were successfully launched. UNICEF, in collaboration with WHO, United Nations Populations Fund and other partners provided both technical and financial support to launch the JiongezeTuwavushe Salama campaign. During the launch, 12 (out of the 26) regional commissioners signed contracts committing to lead efforts to reduce maternal and newborn child deaths in their regions. These 12 regions were selected based on high levels of maternal and newborn mortality. Integrated into the broader maternal and newborn health campaign, the

Vice President launched the new Tanzania Elimination of Mother to Child Transmission of HIV Strategic Plan II 2018-2021, which was developed with substantive technical and financial support from UNICEF and CDC. The elimination of mother-to-child transmission plan provides strategic direction for the country to eliminate new HIV infections (estimated by UNAIDS at 11,000 children in 2017), and replaces the previous plan that ended in 2015.

UNICEF financially supported the Health Basket Fund to improve delivery of quality health services in 6,500 out of 7,000 health centres and dispensaries nationwide using the direct facility financing modality. This will increase availability of medicine and equipment, along with service coverage and quality. Each facility received between US\$3,000 to US\$4,000, allocated based on plans developed by the health facility in consultation with communities, with an expenditure rate of 90 per cent. Reports indicated that the funding helped health facilities to purchase essential drugs, lab equipment and make small repairs to improve the health facility.

UNICEF, the Bill & Melinda Gates Foundation and other partners supported the development of a national plan on adolescent health and well-being for 2019–2022. The plan reduces the rate of teenage pregnancies, HIV infection, violence among adolescent girls and boys, drop-out rates, and anaemia prevalence among adolescent girls; and improves employable skills among adolescents and young people. UNICEF provided technical and financial support to define the holistic framework and to engage adolescent girls and boys from all over Tanzania in the design of the national framework. UNICEF will continue this work in 2019, including ensuring the active engagement of adolescents in the implementation of the plan.

Immunization coverage was maintained above 90 per cent nationally, and with support from UNICEF and GAVI an additional 35,000 children from 15 low performing districts in the Mainland were vaccinated; in Zanzibar, an additional 7,535 children were vaccinated during African Vaccination Week. In Kigoma's refugee camps, 98 per cent of children below one year received the first dose of the measles vaccine. UNICEF contributed to 85 per cent uptake rate of the newly-introduced HPV vaccine. The advocacy effort successfully engaged leaders, community-based organizations and religious denominations to champion the introduction of the HPV vaccine in all 26 regions of Mainland Tanzania. UNICEF supported demand for the HPV vaccine through multimedia campaigns at national and community levels.

UNICEF supported the upgrade, equipping and training of 44 strategic health facilities in Mbeya and Songwe. As a result, more than 116,000 women who were pregnant and newborns received quality emergency obstetric and newborn care services available 24 hours, seven days a week. In addition, UNICEF and DPs, through contributions from the Health Basket Fund, supported the upgrading, equipping and training of an additional 210 health facilities nationwide (out of a total of 559 emergency obstetric and newborn care facilities) to provide 24/7 obstetric and newborn care, covering an additional 350,000 women who are pregnant and newborns.

UNICEF supported Regional Health Management Teams and local government authorities in Mbeya, Songwe and Njombe regions to set up quality improvement teams in the same 44

strategic health facilities. As a result, reporting of perinatal deaths improved from 5.3 per cent (2017) to 100 per cent (2018) in these facilities, and the learning was captured for nationwide implementation. In Zanzibar, UNICEF supported the national committee on maternal and perinatal death to review and to develop recommendations for follow up. As of September 2018, all 55 maternal deaths at health facilities and 305 out of 318 early neonatal deaths were reviewed and 79 per cent of recommendations were implemented.

Good progress was made towards elimination of mother-to-child transmission of HIV, with Tanzania providing antiretrovirals to 98 per cent of women who were pregnant or lactating living with HIV in 2018, an increase from 85 per cent in 2017, according to UNAIDS. HIV treatment for children is challenging, with half of children in need of HIV treatment not receiving it in 2018. To strengthen paediatric HIV services, UNICEF Tanzania supported Ministry of Health, Community Development, Gender, Elderly and Children to expand access to HIV viral load testing machines that give accurate results in one day, compared to conventional machines which take nearly six weeks. More infants born to women living with HIV received a virologic test for HIV within two months: from 56 per cent in 2017 to 70 per cent in 2018. In addition, UNICEF supported and provided expertise to the national paediatric HIV conference. The conference recommended that WHO-approved additional paediatric HIV treatment formulations become available in the country, an important step to improve HIV outcomes in children.

UNICEF Tanzania was a technical partner for the Tanzania National Nutrition Survey 2018. Preliminary results indicated that between 2014–2018, the prevalence of stunting in UNICEF-focus regions was reduced from 36 per cent to 34 per cent in Mbeya, from 51 per cent to 47 per cent in Iringa, and from 24 per cent to 22 per cent in Zanzibar. At national level, stunting was reduced from 35 to 32 per cent, meeting the national target of 32 per cent by 2018/19.

Stunting reduction was attributed to an overall improvement in caregiving practices and children's diets. The proportion of children receiving a minimum acceptable diet at national level increased from 20 to 30 per cent, surpassing the national target of 25 per cent by 2018/19. The exclusive breastfeeding rate increased from 41 per cent in 2014 to 58 per cent in 2018. Improvements in caregiving practices were attributed to an increased coverage of infant and young child feeding services. Caregivers receiving 'infant and young child feeding' nationwide increased from 17 per cent in 2017 to 36 per cent in 2018, surpassing the national target of 33 per cent by 2018/19. Nationally 8,424,063 children were supplemented with vitamin A in 2018 compared to 7,991,747 children in 2017.

In collaboration with Government authorities, Irish Aid, Canada and non-government organizations, more children were treated for severe acute malnutrition in UNICEF-supported regions Mbeya, Iringa, Njombe, and Songwe and Zanzibar: 65 per cent in 2017/2018 (cure rate more than 75 per cent) compared to 56 per cent in 2016/17. There was progress towards a target of 75 per cent coverage by 2020/21.

UNICEF Tanzania supported the integration of gender modules, including involvement of

fathers and caregivers in young-child feeding. As a result, a proportion of men taking part in optimal caregiving practices to their young children increased from 10 per cent (30,012) in 2017 to 13 per cent (39,525) in 2018 in UNICEF-supported regions. UNICEF supported the increased participation of male caregivers in village health and nutrition days which are conducted quarterly to improve the health of children at community level.

In the refugee camps, UNICEF Tanzania vaccinated over 30,000 children against measles and provided micronutrient supplementation to over 50,000 children. A total of 9,564 long-lasting insecticide treated nets (out of a target of 12,000) were distributed to pregnant and lactating women (3,000 by UNICEF in two camps and Medicaine sans Frontiers provided 6,564 in Nduta camp). Over 2,100 children were treated for severe acute malnutrition, with a cure rate of more than 80 per cent. This was against an initial target of 2,500 potential severe acute malnutrition cases based on the previous year's trends.

UNICEF played a pivotal role in the forming a cadre of community health workers to provide preventive, promotive and curative services at household and communities in all 16,900 villages in Tanzania. UNICEF was an advocate of the approach and provided evidence and technical support. The 'scheme of service' for community health workers was approved in late 2018 and community health workers are now officially formalized. This is a breakthrough in the health sector as the community health workers (after one year's training) will officially be employed by the local government authorities, and deployed to communities to provide basic health services closer to families. UNICEF and partners will support the Government to operate the nationwide scale up of community health workers, starting with the most disadvantaged regions, with an expected 2,800 community health workers (out of a total of 24,886 needed nationwide) working in communities by the end of 2019. Specifically, UNICEF Tanzania will support the recruitment and deployment of 190 community health workers in the Kigoma region and conduct implementation research to inform the national roll out of the community health worker cadre.

To prevent HIV transmission in adolescents, the application of Tanzania Commission for AIDS to the Global Fund, was supported by UNICEF and UNAIDS, and brought US\$16 million and expanded comprehensive HIV-prevention services for adolescent girls and young women from 12 to 22 districts in the country. A HIV-testing campaign launched by the Prime Minister reached 1,888,726 adolescents (52 per cent male) with HIV tests; UNICEF provided technical inputs for the campaign, designed jointly with WHO and Family Health International 360.

UNICEF Tanzania used innovation to inform women how to improve their health and well-being and that of their children. UNICEF strengthened the Mama naMwana mobile platform, which allows patients to give feedback on the quality of services received. Over 55,000 women were registered on the platform representing 26 per cent of pregnant women in the target regions. More than 2,300 women utilized the technology platform to provide feedback on health services, highlighting issues such as inadequate preventive malaria treatment, limited counselling on breastfeeding, danger signs and emergency treatment in newborns, and a lack of privacy during examinations. The pilot stage was completed in 2018. In 2019, UNICEF plans

to support the ministry to link the platform to the Health Management Information System so that other facilities and partners in Tanzania can use the feedback for further improving health services.

Goal area 2: Every child learns

UNICEF Tanzania supported the development and testing of the national school-based continuous professional development plan. This articulates the Government's policy on quality of learning through the national in-service teacher training and support package. Once implemented, this would benefit over 1.5 million pre-primary children and 8.6 million primary children nationwide. In coordination with DFID, USAID and other partners, UNICEF funded the pilot-testing of the full set of national pre-primary and primary in-service education and training modules which were developed in 2017. The pilot-testing was completed in 2018 and the training modules were finalized and approved by Government for nationwide implementation from 2019 onwards. UNICEF will support research on the effectiveness of the model in primary schools and satellite centres.

In support of pre-primary education, UNICEF provided technical support to the finalization of the national satellites guidelines, approved in December 2018. The guidelines streamline the establishment and management of the satellite centres (learning spaces that provide pre-primary and early primary (Standard 1 and 2) education to children in hard-to-reach locations). The satellite centres are linked to a primary school for oversight and for transitioning the children to that primary school. The guidelines are a step towards nationwide scale-up of the early learning programme, which is planned with the support of partners (UNICEF, DFID, USAID, Canada, Global Partnership on Education), to increase the pre-primary net enrolment rate in Mainland Tanzania, which was 45 per cent in 2017 (up from 36 per cent in 2013).

UNICEF contributed technically to leverage US\$6.7 million for the education sector in Zanzibar and US\$90 million for Mainland. As coordinating agency for the Global Partnership on Education in Zanzibar, UNICEF facilitated the discussions and leveraged US\$6.7 million to focus on out-of-school children. UNICEF contributed technically to the application of US\$90 million from the Global Partnership on Education for the Mainland. UNICEF continued its advocacy for an enhanced focus on investment in adolescent girls and boys by supporting the MOEST to strengthen gender issues in the Education Sector Development Plan, and the finalization of a costed operational plan for an inclusive education strategy, which will pave the way for children with disabilities and other disadvantaged groups to access education.

UNICEF Tanzania contributed to the development and implementation of a new skill-based programme for out-of-school adolescents. As part of the implementation of the costed national inclusive education strategy for Mainland (finalized with support from UNICEF, DFID and partners), UNICEF supported the pilot of the integrated programme for out-of-school adolescents. The programme was designed by the Institute of Adult Education with UNICEF support, in response to two MOEST studies in 2015/16 (an out-of-school children study and the

evaluation of the integrated post-primary education programme).

The out-of-school children study showed that 1.5 million adolescents are out of school, and that new interventions are required. In 2018, the integrated programme for out-of-school adolescents was piloted in eight regions, reaching 2,874 out-of-school adolescents (1,604 boys; 1,270 girls) out of a target set for 2018 of 10,000. The target for 2018 was not met due to institutional challenges, and delays material procurement. The programme was integrated into the Education Sector Development Plan with the aim to reach 200,000 out-of-school adolescents by 2021.

Adolescents and young people gained skills to articulate and test out their ideas on how to improve the quality of education and learning. With UNICEF support, more than 100 students from the University of Dar es Salaam completed the human-centered design curriculum. The students were facilitators for the Generation Unlimited Youth Challenge, which engaged more than 130 young people from secondary schools, marginalized communities and universities to generate innovative ideas to address challenges in secondary education. Collectively, the efforts helped to build young people's skills in team work, problem solving, analytical and creative thinking and research skills. Ideas that were identified as most promising will be further developed and test with UNICEF support.

UNICEF continued to provide education support to children in refugee camps, where 109,000 refugee children accessed quality education through provision of learning materials, and more than 900 learners sat for their end-of-year exams. About 12,000 children benefited from 120 semi-permanent classrooms constructed by UNICEF with support from USAID.

With UNICEF support, 60,982 children in 309 schools acquired life skills in 2018, including on preventing violence in schools. Adolescent girls and boys were empowered to participate in decision making on matters affecting their learning, health and protection. A total of 2,082 primary schools (out of the 2,000 cumulative target for 2018) were reached since the beginning of the country programme, with at least one intervention that focus on the empowerment of girls. In two and a half years, 236,176 girls and 228,449 boys were reached in UNICEF-supported regions. The Sara Radio Programme, piloted in Iringa DC (with funding from French NatCom) to deliver life skills to adolescent girls and boys, was evaluated in 2018. Findings showed that 93 per cent of the adolescent girls and boys who were part of the programme demonstrated higher awareness of key life-skills competencies. With UNICEF Tanzania technical and financial support, the Tanzania Institute of Education and Institute of Adult Education developed a new national life skills learning strategy within formal and non-formal systems.

Goal area 3: Every child is protected from violence and exploitation

UNICEF Tanzania, United Nations Women and United Nations Population Fund supported the Government to develop and implement operational tools to guide the implementation of national plan of action for violence against women and children for Tanzania Mainland and

Zanzibar. UNICEF supported the Government of Zanzibar in expanding the number of districts with a child protection system from six to nine (out of 11). In the four refugee-hosting districts under the Kigoma Joint Programme's violence against women and children component, substantial investments were made during the first year and a half of the programme (July 2017–December 2018) with support from the Government of Norway.

UNICEF supported coordination to implement the violence against women and children national plan of action, with accountabilities consolidated in two high-level multi-sectoral committees and eight thematic working groups. With technical and advocacy support from UNICEF, the plan's priorities were included into the 2018/19 National Guidelines for Planning and Budgeting. The ministries committing funds to the violence against women and children's national plan increased from three in 2017 to eight in 2018, with a total commitment of over US\$2 million from the Government's own resources for implementation; 6 per cent of the second year estimated costs. UNICEF will advocate for more government funding, especially to balance the reliance on donor funds.

The Government demonstrated leadership in taking components of the child protection system beyond the 19 UNICEF-supported local government authorities on the Mainland. UNICEF, in partnership with the Governments of Norway and Sweden, supported the roll-out of the District Case Management Monitoring System in 35 local government authorities (target: 32 out of 185), bringing the total coverage to 54 districts (or 29 per cent of the country). The system is used to monitor and track child protection data and use the evidence in decision-making for improving the services. In Zanzibar, district social welfare officers were trained and are using case management tools in all 11 districts to standardize child protection case management practices for social welfare officers. Future plans include rolling out District Case Management Monitoring System in the remaining districts on the Mainland and developing child-protection score cards, to monitor case management.

Important steps were taken to make courts child friendly, including training court personnel, increasing entry points to the legal system, and making courts more child-friendly. With the designation of 130 primary courts as juvenile courts in late 2016, UNICEF commenced training of magistrates, prosecutors, social welfare officers, and advocates in the 14 judicial zones (seven targeted by the end of 2018, and the remaining seven will be covered in 2019). UNICEF worked with Government and the Tanzania Law School to ensure child protection is integrated into the curriculum used to train the estimated 4,500 paralegals. This is critical given that paralegals are community-based and can alleviate confusion on course of action is appropriate for a complaint.

Simultaneous investment in community-based violence prevention and support services yielded protection results. UNICEF, with support from the Government of Norway and other partners, supported the simultaneous introduction of child protection prevention and response programming in the Kigoma region through the United Nations Joint Programme. As a result, the number of children supported with case management increased from 122 in one district (July 2017) to a cumulative 731 (November 2018).

In order to meet protection needs, UNICEF supported the Government with the deployment of 16 additional social welfare officers (in four local government authorities and three camps, the latter to assist with over 7,500 unaccompanied and separated children) bringing the number of officers to 21. This quickly increased identification and referral of children with protection concerns. The number of children supported with case management went up from 122 (July 2017), to 283 (December 2017), to a cumulative 731 (322 female; 409 male) by November 2018.

More than 800,000 children under five were registered in 2018 and issued with a birth certificate. In March, the simplified birth registration system was rolled out in Simiyu and Mara regions, bringing the number of regions covered in Tanzania to 11 (of 26 in Mainland). This helped increase the total number of children under five benefiting from the simplified birth registration system to more than 2.8 million.

With this, the birth certification rate in the 11 regions covered by simplified birth registration system rose from 9.5 per cent in 2012 to 83 per cent in 2018, and increased Mainland's overall under-five certification from 13 per cent (2012) to 35 per cent (2018). With simplified birth registration system there is now gender parity (50 per cent for boys against 50 per cent for girls), the rural-urban divide was bridged, and the gap between rich and poor households closed. The new system brings registration closer to the community and makes it a 'one step, one visit' process, which benefits women who are primary clients. The initiative is funded by Global Affairs Canada and jointly implemented by UNICEF and the Government with support from mobile phone provider TIGO.

Through strategic partnerships and the use of innovative approaches involving young people, there was progress to end violence. UNICEF's partnership with senior media editors in Tanzania resulted in the publication of over 880 stories published and aired in print and electronic media on the issue of ending violence against children. This created awareness and boosted programming efforts. With UNICEF Tanzania partnership, faith leaders advocated for ending violence against children in platforms and congregations, including during religious festivals such as Eid and Maulid, and in sermons during weekly prayer services.

To complement this, in Zanzibar, all 11,760 community health volunteers were trained and are now identifying and referring children in need of protection. In 2019, community health workers in Kigoma and Njombe will be trained on the same. University students, through the Innovation Hub, developed an app for community volunteers to send information on a child in need of protection services to the district social welfare officer. The app was tested in Kigoma and significantly shortened the time for a child to receive services. It's ready for roll out.

UNICEF Tanzania contributed to prevent child marriage in 2018, by engaging with influencers at different levels. Advocacy by religious leaders sensitized over 1,600 faith leaders on children's issues as part of the engagement with the Tanzanian Inter-faith Alliance for Children. As a result, the Muslim Scholars Committee (the highest Islamic body in the country) declared that all Muslim girls must complete secondary education prior to marriage by issuing a fatwa on 20th November 2018. This was a milestone in the fight against child marriage in the country.

UNICEF enhanced Government capacity to train families and caregivers in parenting skills and engage teachers and communities to prevent violence. UNICEF reached close to 7,000 parents in its programming districts with positive parenting messages. So far, almost 40,000 parents out of a target of 265,000 were reached (to be achieved by 2021). The Government identified parenting programmes designed to promote safe, nurturing, and non-violent home settings as the strategy to help parents develop behaviours that support and improve children's behaviour and mental health. An evaluation to assess the impact of the training on parents and caregivers is planned for 2019. UNICEF supported the development of the violence against women and children's communication and outreach strategy which was validated by the Government and will address social norms that support the use of violence and negative gender stereotyping, once implemented. In 2019, UNICEF will support implementation and learn lessons in Kigoma and Mbeya.

Goal area 4: Every child lives in a safe and clean environment

UNICEF and partners, through the National Bureau of Statistics, conducted a national school WASH assessment covering over 2,500 schools in the Mainland and Zanzibar. UNICEF provided technical and financial support which will facilitate the scale up of WASH in schools. The findings will determine national coverage estimates for water, sanitation and hygiene services in schools, calculating JMP estimates and providing a Sustainable Development Goal baseline for Tanzania WASH in schools. It will inform the development of a costed plan for WASH in schools, and allow for better advocacy, planning and implementation of school WASH services. Data collection in all 31 regions of Tanzania was completed. Top line findings are expected in the first quarter of 2019.

In Mainland Tanzania, UNICEF worked closely with the Ministry of Health, Community Development, Gender, Elderly and Children in cholera prevention and response activities. Since the outbreak of cholera in August 2015, all 26 regions have reported outbreaks. In 2018, 10 regions reported 4,389 cases with 83 deaths. UNICEF Tanzania supported 10 of a total of 26 regions most prone to cholera outbreaks, to prepare cholera preparedness and response plans and manage cholera data at all levels, resulting in a cholera information management action plan for Tanzania. To be approved by the Ministry Management Team, the plan to improve data for early detection of cholera outbreaks, estimate cholera morbidity and mortality and inform resource allocation including personnel and supplies required. UNICEF Tanzania provided supplies for cholera response, including household water treatment chemicals, disinfection agents for use in health care facilities, households, and cholera treatment centres, water testing kits and information, education and communication materials.

In 2018, UNICEF continued interventions for WASH in schools to meet the country programme document target, improving the learning environment of 31,906 pupils (17,235 girls and 14,671 boys) in 41 schools (the 2018 target in focus regions). This was achieved through increasing access to improved WASH facilities (all compliant with the national school WASH guidelines). To leverage the lessons learned over the years from UNICEF-supported construction of WASH

facilities in schools, UNICEF is exploring cost-effective and easily-adaptable technologies in addressing spiraling costs of construction, which have become a barrier to scale up. As part of these efforts, UNICEF engaged students from the University of Dar es Salaam's Youth for Children Hub, who presented ideas on low-cost options for the construction of WASH facilities in schools. The ideas are being worked into proposals for uptake in 2019. This engagement expanded opportunities for the participation of young people to provide solutions for the development of scalable school WASH in Tanzania. The initiative to develop low-cost options is supported by the Ministry of Education.

Providing WASH services in refugee camps, UNICEF Tanzania and partners undertook cholera-specific hygiene promotion using IEC materials prepared to highlight cholera-specific messages. This increased awareness of cholera-prevention measures among households, and in 2018 there were no outbreaks of cholera in the three camps despite the ongoing national outbreak.

Water and sanitation facilities were provided to 200,000 refugees including children in schools, in child-friendly spaces, and in health care facilities through provision of high-volume water storage tanks, pumps, and latrines. Working with partners including the Norwegian Refugee Council, Oxfam and the Tanganyika Christian Refugee Service, UNICEF increased the supply of water in the three refugee camps ensuring greater than 20 litres per capita, per day, thereby exceeding the sphere standards.

UNICEF Tanzania supported the Ministry of Health to implement actions in the Zanzibar Comprehensive Cholera Elimination Plan. In Zanzibar, 74 Shehias designated as cholera hotspots (amounting to 20 percent of all Shehias) were reached with key cholera prevention and control messages by UNICEF partners (Red Cross and ZAPHA+) who carried out house-to-house sensitization. A total of 75,771 people were reached. The intervention included the distribution of chlorine for household water treatment and bulk water chlorination. Radio and TV spots on preventive behaviour were aired for three months from July–September 2018. There was no outbreak of cholera reported in Zanzibar and this is attributed in part to the effectiveness of the sensitization programme in selected Shehias.

Goal area 5: Every child has an equitable chance in life

The Government of Tanzania, with technical and financial support from UNICEF and ILO, completed a new National Social Protection Policy. Social protection is a critical piece of the government's socioeconomic development portfolio, as it aims to address poverty and vulnerability, which are key drivers of deprivation among children. The new policy lays out the direction for social protection interventions such as health insurance, fee waivers, and cash transfers, which can remove structural and financial barriers that prevent children from accessing services. It conveys the government intention to strengthen services and introduce support grants for people living with disabilities, including children.

UNICEF Tanzania intensified support in the field of public finance for children. In partnership

with the Ministry of Finance, budget analyses were released for all social sectors: health, nutrition, education, HIV-prevention and social protection. The findings informed advocacy for stronger budget allocations to social sectors. They reveal that Tanzania spends below the international standard, notably for health, education, and social protection. The budget analyses had technical recommendations to improve budget execution and equity. During the launch, the Minister of Finance re-emphasized the commitment to invest in children and the implementation of follow-up actions, including the dissemination in Parliament to inform discussion for the next budget cycle and the integration into child-focused planning and budgeting training materials for government officials.

In order to develop national capacity on child-focused planning and budgeting at both central and local levels, UNICEF Tanzania launched a partnership with training institutions that train the civil service. A first set of training materials was developed and a first cohort of lecturers trained. The materials will be institutionalized in budget-training programmes and tailored to the local government planning and budgeting environment so that the capacity development can be rolled out nationwide. This is part of a broader initiative to make budgets respond to the needs of children with focus on regional and district level capacities and decisions, where services are planned, budgeted and implemented.

UNICEF Tanzania released the first-ever comprehensive study on the tourism industry in Zanzibar and its implications and opportunities for children. The study process, the reports and the involvement of multiple tourism stakeholders created a conducive environment for partners to work together to mitigate the negative impacts and identify the opportunities the tourism industry can bring to improve the lives of children and their families in Zanzibar. As a first follow up step, UNICEF supported a revision of the code of conduct for tourists. A broader agenda is being worked out for 2019 and beyond.

This was the first such study in Zanzibar, launched with the Ministry of Tourism in the presence of partners. Child poverty in Tanzania continues to affect many children. Two to three of every 10 children live below the poverty line, more than seven out of 10 are deprived in at least three out of eight dimensions of child well-being. In 2018, UNICEF and the Statistics Office of Tanzania Mainland and Zanzibar updated the monetary and multidimensional child poverty indicators, which are core Sustainable Development Goal indicators. In partnership with the Ministries of Finance, a research project was completed that helps to understand child poverty 'beyond the numbers', focusing on children's own perceptions and experiences. While it is commonly believed that children are better off in urban areas, the findings reveal challenges there. The research will be used to enhance UNICEF's programming in urban areas in Tanzania and to advocate and support urban local governments to address specific service delivery challenges.

In 2018, the Government's largest cash transfer programme continued to reach 2.7 million children in the poorest families of Tanzania Mainland and Zanzibar. UNICEF supported the programme's evidence-based design for Phase II (2019–2023), which will expand the programme to the 30 per cent of remaining villages and reach national scale. UNICEF assisted

the programme with community-engagement sessions where beneficiaries discussed infant and young child feeding and care practices and were referred to nutrition services. While the cash transfer alleviates monetary constraints, this nutrition component is aimed to address knowledge gaps and improve feeding practices for poor children.

UNICEF supported the roll out of a 'cash plus' initiative for adolescents aged 14–19 who live in the poorest households. The initiative provided adolescent boys and girls with life skills training, mentorship and access to vocational training or income-generating opportunities. In 2018, cash plus was implemented in four districts on an experimental basis. Data collection was completed for its mid-term impact and process evaluation, with findings expected in early 2019. Cash plus promotes an integrated approach to adolescent well-being, covering educational, health, HIV prevention, and social, protective, and economic aspects of the transition into adulthood.

Part 3: Lessons learned and constraints

Constraints

Numerous challenges exist for obtaining sustainable improvements for children. Tanzania is changing rapidly. Several years of strong economic growth have put the country on the brink of achieving middle-income status and poverty is declining. There was progress in a number of human development dimensions. The proportion of stunted children reduced by one third between 1992 and 2015 and there was an impressive decrease in under-five mortality by 40 per cent since 2005.

Government priorities are fighting corruption; increased government control over the management of natural resources; infrastructure investment; increasing tax revenues; and moving government ministries and agencies to the capital Dodoma. These shifts create challenges to promote initiatives that focus on human capital development. A number of traditional donors of UNICEF's work in Tanzania are in the process of reviewing their priorities in the country, requiring the country office to diversify partner and donor engagement. Simultaneously, through dedicated technical support and advocacy, UNICEF Tanzania focused on leveraging and influencing resources for children from global funds such as GAVI and GFATM.

With an increase in total budget for social sectors, the specific social-sector budgets remain below international spending benchmarks for education, health and social protection, and have declined as a proportion of the overall budget. The education share of the national budget decreased from 17 per cent in 2015/16 to 15 per cent in 2017/18. For health, the share of the national budget was gradually declining, currently at 7 per cent compared to the international benchmark of 15 per cent; and the 2017/18 budget is less than half the amount required to realize the Health Sector Strategic Plan IV goals.

The Joint Multi-sectoral Nutrition Review 2018 had similar findings and indicated that average nutrition spending at council level reduced by 65 per cent in the past year. As a result, no region met the minimum budget allocation for nutrition of TZS 1,000 (approximately US\$0.40) per child in 2017/18. This poses a challenge for expanding core interventions and will require advocacy in 2019 and beyond. UNICEF will continue to support, and dialogue with, the Government to enhance allocations to social sectors, improve budget execution performance, and enhance transparency of budget information in line with international standards.

At sub-national level, local government authorities have relatively little discretion over spending, including on services for children. Locally-raised revenue is a small portion of the overall budget and is affected by centralization of certain taxes. Transfers from central level mainly cover recurrent and operational charges, while funds for investments are inadequate or not disbursed. Analysis reveals that central-level transfers to local government authorities do not reduce inequities between districts. The allocation formula favors districts already better endowed with health and education infrastructure and staffing. UNICEF supports the Ministry of Finance on several fronts to address these bottlenecks, including social sector budget analysis, a Nutrition Public Expenditure Review and capacity development for child-focused planning and budgeting. In 2019, emphasis will be placed on supporting local government-level budgeting and improving the equity-content of central-level transfers to districts.

Human resource needs in the social sectors (education, health and protection) are growing and are of concern. Additional funding is required for the recruitment of teachers, skilled health personnel and community health workers under their recently-approved scheme. Innovative human resource management approaches are critical to keep up with population growth. UNICEF will support the development of new and stop-gap human resource strategies, such as the use of para-professionals in education, and provide analysis that highlight human resource needs in the medium- to long-term.

At national level, the percentage of children under five with severe acute malnutrition admitted for treatment slightly decreased from 14 per cent in 2016/17 to 12 per cent in 2018/19 (cure rate > 75 per cent). Progress in severe acute malnutrition treatment coverage is constrained as it lacks a source of sustainable funding, which affects the availability of essential supplies. This is being addressed by UNICEF Tanzania with integration of severe acute malnutrition supplies into the national system, strengthening the Government's supply chain management, and supporting local government authorities and health facilities to plan for supplies using domestic funds.

A comprehensive approach is required to address the issue of girls who are pregnant and are out of school. Government pronouncements on preventing these girls from going back to public school complicated the discussion in 2018. While government-informed private schools are exempt from this policy, most girls, including those who become pregnant, often cannot afford the cost of private schooling. The newly developed NAIAA will (if implemented as planned) contribute to preventing school drop-out and provide alternative learning pathways that are inclusive of girls. In addition, there are small-scale initiatives to support the education of girls

who are pregnant.

Amendments to the 2015 Statistics Act have implications for the regulation of information and statistics in Tanzania: they require prior authorization of the National Bureau of Statistics for publishing or communicating official statistics. Prior consultation is now required in cases where findings from published data are different from statistics published by the bureau. While the production of official statistics was already subject to National Bureau of Statistics approval, the amendments expand the governing scope of the Statistics Act from “official statistics” to “statistical information”, requiring further clarification from the Government.

There is need for better evidence-based planning, prioritization, budgeting and monitoring to achieve results for children at local level. THE President’s Office Regional Administration and Local Government offices is strengthening general planning, budgeting and monitoring and evaluation, including support for the PLAN-REP system, used to develop local government plans and budgets, and an improved local government monitoring database. Support for the strengthened use of relevant data for local government planning, budgeting and monitoring and evaluation is a priority for UNICEF in 2019.

In January 2018, the Government decided to withdraw from the implementation of the Comprehensive Refugee Response Framework. However, having a joint United Nations programme for host communities close to refugee areas allowed policy-level dialogue to take place. It ensured continued service delivery for refugees and host communities, and enabled the United Nations family to come together in addressing a complex situation.

The planned roll out of the simplified birth registration system in Kigoma and Kagera was postponed. Initially, the Government agreed to roll out the simplified system in the refugee camps as well, but the launch was put on hold. Concerns were raised about the substantial number of people from Burundi, the Democratic Republic of Congo, and Uganda who reside in these bordering regions without a status, so the Government wanted to complete a national identification exercise in the region. Hence, the Registration Insolvency and Trusteeship Agency decided the new system would instead be rolled out in Dodoma and Singida regions in early 2019. This decision meant that the target of reaching 13 regions with the new system could not be achieved in 2018.

Lessons learned

UNICEF Tanzania needs to increase investment in ‘upstream’ support at sub-national level in the Southern Highlands and Zanzibar to achieve sustainable progress for children. Implicit in this is the need for UNICEF’s support to be embedded within sectoral and multi-sectoral sub-national development plans. This will require time invested by UNICEF staff with key partners during the local government-level planning, prioritization and budgeting processes. Through a capacity-development strategy, UNICEF Tanzania will support Government officials at different levels to better use data for decision-making, analyze evidence on proven-effective interventions, prioritize interventions, implement and monitor impact. This represents the ‘local

upstream' agenda for the country office.

UNICEF experience to date on convergent programming for early childhood development and adolescents will be taken to the next level in 2019. For early childhood development, UNICEF Tanzania has substantial operational experience on the ground with good progress as a result of convergent and integrated programming. However, the essential elements of the integrated early childhood development package must be anchored in the government coordination, planning, budgeting, implementation and monitoring mechanisms to ensure implementation at scale in a sustainable manner.

For adolescent programming, a different approach will be used for the 10–14 and 15–19 age group, as well as for girls and for boys, as a generic approach did not have impact. UNICEF Tanzania will identify entry points and pilot a minimum package of interventions to make a difference for vulnerable adolescent girls and boys in Tanzania. Young people working in the country office, such as United Nations Volunteers, junior programme officers and interns, brought in relevant and valued contributions to the work of UNICEF Tanzania.

It's essential that UNICEF Tanzania monitor and respond to the changes in the political economy environment. The current country programme is implemented in a dynamic political economy environment. The National Five-Year Development Plan (2016–2021), 'Nurturing industrialization for economic transformation and human development,' focuses on industrialization with a push for investments in infrastructure and job creation, and for development partners to contribute to results. In this changing political environment, UNICEF work for children's rights must speak to the prominent priorities of the Government. The importance of investing in the early years, quality education, girl's education, adolescent development and well-being for human capital development and economic growth needs to be emphasized regularly. This means equipping staff with the necessary knowledge, skills and tools to be able to make the necessary arguments for investing in children, and being flexible in adjusting programme strategy and emphasis depending on the contextual issues.

Being agile and seizing opportunities that emerged in 2018 enabled UNICEF to provide leadership in different areas. During the year, the Ministry of Health expressed its intention to create a national 'accelerated action and investment agenda for adolescent health and wellbeing', covering the holistic needs of adolescents. UNICEF Tanzania was able to respond to this request swiftly with multisector expertise, shaping the agenda by providing technical assistance and by catalyzing the participation of adolescents and young people in the process.

UNICEF Tanzania also responded to the Generation Unlimited partnership agenda by leveraging existing work with adolescents and young people (such as on 'human-centered design' with students from the Youth for Children Innovation Hub at the University of Dar es Salaam). During 2019, more than 10 young Tanzanians joined the office as national UN Volunteers and interns, including the youth voice and influence in UNICEF programming and bringing youthful energy into the day-to-day UNICEF country office environment.

Moving forward

UNICEF Tanzania identified a number of strategic shifts in 2018 during the mid-term review which will be implemented in 2019 and beyond. The mid-term review process confirmed the overall direction and objectives of the country programme. Based on lessons learned and changes in context, all programme strategy notes were updated, including theories of change, and there were minor adjustments in results frameworks.

The country programme will continue to be implemented during a period of infrastructure development and economic growth, while the country still struggles with overall poverty and child poverty. UNICEF Tanzania will make required adjustments, such as a focus on sustainability, scale, institutionalization and leveraging of domestic resources.

Three overarching shifts for the country programme include: 1) some programme areas will quickly phase-out working at small-scale, and transition to influencing budgets and action at scale; 2) capacity in the field offices in Mbeya (responsible for the Mbeya, Iringa, Njombe and Songwe Regions), Kibondo, Zanzibar and the United Nations joint office in Dodoma will be enhanced for a stronger influence at local level to deliver results for children; and 3) integrated programming for adolescents and institutional, holistic approaches for early childhood development need to be accelerated. The mid-term review process was participatory, with staff involved through various fora which included the 'speak up committee', the participation of the staff association, and the representation of both national and international staff on the mid-term review committee.

UNICEF Tanzania will prioritize child-focused interventions which are scalable, informed by evidence and sustainable. There will be emphasis on addressing the barriers and enablers for scale and sustainability. In this regard, the work on public finance for children, partnerships, local-level institutional strengthening, leveraging domestic resources and exploring innovative financing will become prominent across the programme. UNICEF will expand its role in strengthening government supply systems (especially for nutrition and immunization supplies) through strengthening the supply chain workforce and functions.

From a management perspective, there will be focus on supporting the field offices to deliver on equity-oriented decentralization and local governance for children. The new UNICEF presence in Dodoma will facilitate interactions with Government in planning, prioritization discussions and monitoring. The innovations agenda in UNICEF Tanzania is expected to grow, with the ground testing of innovative ideas from young people, the expansion of U-Report both in Mainland and Zanzibar, and outreach to engage institutions to act as Y4C Innovation Hubs. UNICEF Tanzania remains vigilant in anticipating and addressing disease outbreaks and responding to the refugee situation.

UNICEF Tanzania will continue to build the capacity, skills and attitude of staff around important topics such as ethics, the prevention of sexual exploitation and abuse, gender equality, environmental awareness and greening, by continuing practical and hands-on office-

wide training approaches started in 2018. These capacity-building efforts were led and facilitated by UNICEF Tanzania staff, and have helped staff to take concrete actions at both personal and professional levels. As a result, UNICEF Tanzania eliminated single-use plastics in all its offices and established systems to recycle. UNICEF Tanzania will continue gender-related conversations as a forum for staff to discuss and devise practical solutions around gender issues experienced by staff members at work and at home.

As a 'Delivering as One' country and with the new UNDS reforms taking place in 2019, UNICEF Tanzania will continue to play an active role in the United Nations family. UNICEF Tanzania will deliver on its commitments on two United Nations joint programmes and seek further opportunities for United Nations joint advocacy, and providing analytical and policy support to the Government of United Republic of Tanzania. UNICEF Tanzania will further engage in supporting the United Nations-wide business operations strategy and innovations to deliver results more efficiently.

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