



Mid-Term Evaluation of the Zanzibar Social Protection Policy



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Contents

Executive summary	iv
Acronyms	vii
Introduction	1
1. Background	3
1.1 The Zanzibar Social Protection Policy	3
1.2 The ZSPP Implementation Plan	5
1.3 Approach to the assignment	8
1.4 Methodology	10
2. Implementation of the ZSPP	11
2.1 Summary of progress in implementation	11
2.2 Detailed review of progress	12
2.2.1 Programmes	12
2.2.2 Delivery systems	24
2.2.3 Institutional arrangements	26
2.3 Attribution	29
3. Progress towards the overall ZSPP objective	31
3.1 Summary of progress in building a social protection system	31
3.2 Social protection for older people	32
3.3 Social protection for children, pregnant women and people of working age	36
3.4 Social protection for people with disabilities	40
3.5 Coordination	41
4. Findings and recommendations	43
4.1 Findings	43
4.2 Strategic recommendations	44
4.2.1 Programmes	44
4.2.2 Delivery systems	47
4.2.3 Institutional arrangements	50
References	52
Annexure 1: TORs	53
Annexure 2: Stakeholders consulted	60
Annexure 3: Summary of progress to date	61

Executive summary

This report contains findings of the mid-term evaluation of the implementation of the Zanzibar Social Protection Policy (ZSPP). The ZSPP was approved in 2014 and an Implementation Plan (IP) for the policy was developed in 2016, by which ZSPP was to be implemented from 2017 to 2022. In the IP, the vision, mission and objectives of the policy document were retained, background information was updated, strategic priorities were condensed and a plan for implementation was developed. This evaluation uses the ZSPP IP as the primary reference document, but references to the 2014 policy document are made as necessary.

The evaluation is based on a literature review and consultations with key stakeholders, which were held during a visit to Zanzibar in March 2020. The second mission that was planned to debate the emerging conclusions and agree on the way forward was cancelled due to travel restrictions related to the COVID-19 pandemic. The dialogue was then conducted virtually.

The following are the key conclusions of the evaluation in response to the questions in the terms of reference (TORs):

The ZSPP remains broadly relevant. The overall objective of the ZSPP is “To establish a comprehensive social protection system that meets the needs for income security, risk management and access to basic services for all Zanzibaris, thereby contributing to a more equitable society.” This objective, together with the vision, mission and specific objectives of the ZSPP, remains fully valid. It

is not a major constraint even when much of the information proposed in ZSPP (2014) is out of date since the IP contains updates, and is used as a key reference document for the implementation of the policy. The ZSPP policy document might be updated at the end of the current implementation period during the financial year 2021–22.

A key strength of the social protection system in Zanzibar is its provision for older people. However, social protection for other groups, including children, people of working age and, most especially, people with disabilities (PWDs) is less well developed. While Government

spending on contributory pension schemes is higher than the regional average, the expenditure on social assistance lags behind, remaining far lower than the average, with an almost exclusive focus on older people. The impressive performance of Zanzibar in establishing, financing and effectively implementing the Zanzibar Universal Pension Scheme (ZUPS) appears to be driven by a specific imperative to support older people, but increased social protection provision for vulnerable Zanzibaris of other age groups is yet to attract due attention from Government.

The ZSPP IP remains poorly implemented:

The majority of what were planned for the first two years of the implementation period has not yet been completed, most strategic priorities are off track and the proposed coordination and reporting arrangements have not yet been established. There has been notable progress in some areas of

social protection provision, but this cannot be attributed to the IP.

Most of the progress in social protection provision since 2017 has been noted in the implementation of individual programmes (particularly the ZUPS), rather than in coordination or systems building. The choice of the Revolutionary Government of Zanzibar (RGoZ) to focus first on rolling out one categorically targeted programme (the ZUPS) has been a sensible move in a context of limited capacity. However, for this to be a first step in the building of a comprehensive social protection system in line with the overall objective of ZSPP, the RGoZ needs to concurrently build sustainable systems, capacities and knowledge that can subsequently underpin the delivery of complementary programmes for other groups.

Given the current state of implementation of ZSPP, progress towards the overall objective of the ZSPP to build a comprehensive social protection system, has so far been limited. Accelerating progress towards this objective remains a priority for the second half of the ZSPP IP period (2020–22).

Following the mid-term evaluation of ZSPP, the following recommendations are made to the RGoZ to be prioritized for high-level strategic actions:

Programmes

- 1. Increase social assistance to underserved groups, especially PWDs, but also children and their families.** As noted earlier, the provision of social protection for all vulnerable people except older residents is currently sub-optimal. The recommended first priority is strengthening social assistance for PWDs, including the launch of a disability grant.

- 2. Respond to the shock occasioned by the COVID-19 pandemic by financing an expansion of poverty-focused social assistance to cover those families further impoverished by the pandemic.**

This would be in line with the specific objective of ZSPP that requires providing protection against livelihood risks.

- 3. Combine support to youth livelihoods across all the ministries involved in social work, for increased effectiveness.** Youth livelihoods is a policy priority for RGoZ, so there is potential to improve effectiveness by breaking down current silos.

Delivery systems

- 4. Link different programme management information systems (MIS) in order to more effectively manage duplications and complementarities between programmes.** Currently, the extent to which some people are inadvertently supported by multiple programmes while others are missed out of the programmes, is unknown. Nor is it possible to manage the layering of complementary interventions to those in need of multiple types of support. A first step could be to create linkages between existing MISs, with a view to creating a single registry in due course.

- 5. Establish a joint programme of social protection studies to design of new social protection schemes.** The design of new schemes of support should be informed by evaluations of the existing schemes in Zanzibar, data from 2019–20 Household Budget Survey and evidence on what has worked elsewhere in the region.

- 6. Strengthen practical district-level coordination such that vulnerable people can be appropriately referred**

to services that will meet their needs.

Despite the numerous civil society organizations (CSOs) remaining active in providing social assistance, social welfare officers (SWOs) at the district level appear to lack practical information and guidance to identify vulnerable people for services that meet their needs.

Institutional arrangements

7. Increase financing of social protection, especially social assistance.

Social protection financing needs to be underpinned by the development and implementation of a financing strategy for the social protection system and by advocacy that makes use of the strong global and national evidence

on the positive impacts of social protection. Without increased sustainable financing, it will be impossible to build a comprehensive social protection system in line with the objectives of ZSPP.

8. Operationalize the ZSPP coordination structures as described in the IP.

This will be important in order to accelerate progress of implementation in the second half of the implementation period, with a view to achieving the intended objectives.

It should be noted that these proposed recommendations for priority implementation require intensive collaborative inter-ministerial work. Many other important actions will be taken forward primarily by a single ministry and will continue to feature in the ZSPP IP.

ACRONYMS

COVID-19	: coronavirus disease of 2019
CSO	: civil society organization
DDA	: Department for Disability Affairs
DHS	: Demographic and Health Survey
DP	: development partner
FBOs	: faith-based organizations
FY	: financial year
GDP	: gross domestic product
HBS	: Household Budget Survey
ID	: identification
ILO	: International Labour Organization
IMTC	: Inter-Ministerial Technical Committee
IT	: information technology
IP	: Implementation Plan
M&E	: monitoring and evaluation
MIS	: management information system
MLEEWC	: Ministry of Labour, Empowerment, Elders, Women and Children
MVC	: most vulnerable child
NGOs	: non-governmental organizations
OPM	: Oxford Policy Management
PORALGSD	: President's Office, Regional Administration, Local Government and Special Departments

PS	: Principal Secretary
PSSN	: Productive Social Safety Net Programme (of TASAF)
RCPS	: Retired Civil Servant Pension Scheme
RGoZ	: Revolutionary Government of Zanzibar
SWO	: social welfare officer
TASAF	: Tanzania Social Action Fund
TNNS	: Tanzania National Nutrition Survey
TORs	: terms of reference
TZS	: Tanzanian Shillings
UN	: United Nations
UNICEF	: United Nations Children's Fund
WBG	: World Bank Group
ZSPP	: Zanzibar Social Protection Policy
ZSSF	: Zanzibar Social Security Fund
ZUPS	: Zanzibar Universal Pension Scheme

Introduction

The final report of the mid-term evaluation of the implementation of ZSPP, which was commissioned by the Ministry of Labour, Empowerment, Elders, Women and Children (MLEEWC), with support from UNICEF, covers significant findings and recommendations. The period of the ZSPP IP was 2017 and 2022 and so MLEEWC judged it was time to review the progress made on ZSPP, and assess whether adjustments were required for the second half of the implementation period.

The consultant started work in January 2020 before the COVID-19 pandemic hit the United Republic of Tanzania. Hence, the TORs of this evaluation did not consider the pandemic. However, given the expected massive worldwide socioeconomic impact of the pandemic, this report takes into account the pandemic and its effects to the maximum extent possible. The COVID-19 pandemic also had an impact on the process concerned with this assignment: the planned second mission to Zanzibar, during which the draft report and updated IP were to be discussed, had to be cancelled due to travel restrictions. As such, the consultant relied on active virtual feedback by the stakeholders.

The key objectives of the assignment as per the TOR are as follows:

1. Assess whether the policy remains consistent with the needs of the key target groups; and to what extent existing social protection programmes are contributing to achievement of the policy's objectives and reaching intended target populations.
2. Take stock of progress made and identify lessons learned with the implementation of the social protection implementation plan and the functioning of the social protection system and propose potential expansion of existing and establishment of new schemes/programmes.
3. Map and assess current mechanisms and capacity for coordination of social protection at national and sub-national levels.
4. Make recommendations regarding reforms to the social protection programmes framework to expand and deepen social protection coverage in line with the policy's objectives and strategic direction.
5. Recommend and facilitate preparation of an action plan for the second half of the social protection IP, including scenarios for expansion and deepening of existing and new schemes, potential review of the monitoring and evaluation (M&E) framework, and actions to strengthen social protection coordination.

(See **Annexure 1** for the detailed ToR)

This report covers objectives 1 to 4; objective 5 is addressed in the accompanying updated IP. A brief overview of the contents is given below:

Section 1 briefly sets out the background to the assignment, outlining the ZSPP and its IP and explaining the objectives and methodology.

Section 2 assesses progress against the strategic priorities and actions of the ZSPP IP (including the establishment of coordination mechanisms) and the extent to which this progress can be attributed to ZSPP IP.

Section 3 presents an assessment of progress towards the overall ZSPP objective of establishing a comprehensive social protection system, as well as the specific objectives of the ZSPP.

Section 4 presents the key findings and recommendations; these recommendations include ideas for expanding the existing programmes and developing new ones, as well as actions to strengthen the overall social protection system.



Chapter 1

Background

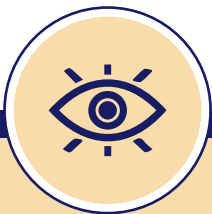
This section provides relevant background information. In sub-sections 1.1 and 1.2, the ZSPP and IP respectively are summarized and in sub-sections 1.3 and 1.4, the approach and methodology of the assignment are outlined.

1.1 The Zanzibar Social Protection Policy

The development of the ZSPP started in 2012 with the commissioning of the paper 'Poverty,

Vulnerability and Social Protection in Zanzibar' (Devereux et al, 2012)¹. This paper formed the basis for a process of policy design that commenced in 2013 and culminated in the approval of the ZSPP in 2014.

The vision, mission and overall objective, as set out in the ZSPP (2014) and reiterated in the ZSPP IP (2016), are as follows:



Vision

All Zanzibaris will have a decent and dignified quality of life, reduced vulnerability to poverty and shocks, and equal opportunities to participate in the socio-economic development of Zanzibar



Mission

To establish a social protection system for Zanzibar that improves the quality of life for all by progressively reducing poverty, allowing Zanzibaris to manage economic risks and social vulnerabilities, and ensuring universal access to essential basic services



Overall objectives

To establish a comprehensive social protection system that meets the needs for income security, risk management and access to basic services for all Zanzibaris, thereby contributing to a more equitable society

¹ Stephen Devereux, Dolf te Lintelo and Mark Davies, 2012, Poverty, Vulnerability and Social Protection in Zanzibar: An Overview, Institute of Development Studies, Brighton, UK.

Specific objectives of the ZSPP



To achieve these objectives, the ZSPP aims to **“create a comprehensive, integrated social protection system...** by expanding and coordinating existing and new initiatives and building linkages with complementary social sectors and economic policies”. It highlights the need to reinforce social protection interventions with “adequate institutional capacities, dedicated funding and sound financial arrangements”.

The evaluation considered the extent to which the ZSPP continues to be relevant to the needs of poor people in Zanzibar. The conclusion is that the ZSPP (2014) remains broadly relevant. The vision, mission, overall, objective and specific objectives remain 100 percent valid and in line with widely agreed global social protection frameworks. For example, the first three specific objectives specific align with states' commitments in Sustainable Development Goal 1² to

progressively expand social protection coverage, whilst prioritising a Social Protection Floor that ensures basic income security and access to essential health care for all.³ The ZSPP also includes a process objective: “To strengthen multisectoral coordination of all stakeholders working on social protection”. This is an appropriate addition in the Zanzibar context, given the particular challenges around coordination. The ZSPP is also clearly aligned with the MKUZA III, Zanzibar National Growth and Poverty Reduction Strategy, which outlines the following commitment to enhancing social protection: “For Zanzibar, social protection tools aim to improve the quality of life by reducing poverty, vulnerability and deprivation, providing protection against shocks, improving access to essential services, enhancing social inclusion, and promoting equal rights and opportunities for all”.

² <https://www.undp.org/content/undp/en/home/sustainable-development-goals.html#:~:text=What%20are%20the%20Sustainable%20Development%20Goals%3F%20The%20Sustainable,all%20people%20enjoy%20peace%20and%20prosperity%20by%202030.>

³ ILO (2012) The Strategy of the International Labour Organization Social security for all Building Social Protection Floors and Comprehensive Social Security Systems



However, some points detailed in the ZSPP (2014) are now out of date. This affects the background information in Chapter 1 as well as the proposed detailed strategies in Chapters 3 and 4 of the ZSPP. Given that the IP includes updated background, strategic priorities and actions, this is not a major constraint on ZSPP implementation, as the IP can be used as a guide for action. Indeed, it is recommended that to avoid confusion of stakeholders, the IP (and not the policy document itself) should be the primary reference document with respect to implementation.

Given the continued relevance of its vision, mission and objectives, updating the policy is not a top priority, though it could usefully be undertaken in the financial year 2021-22. This timing is likely to be opportune: the COVID-19 pandemic is expected to have a major impact on the economy and hence on the profile of poverty and vulnerability, necessitating more fundamental changes to the policy at that point. In order to avoid the future policy becoming rapidly out of date, it is recommended that its content be limited to the policy level (such as that set out in Chapter 2 of the current ZSPP) and not attempt to also draw detailed strategies and interventions,

as was done in the previous policy (ZSPP, 2014) in its later chapters. If the strategies and interventions are presented in an accompanying implementation plan, they can be renewed every three to five years, while the higher-level policy remains valid for up to 10 years.

1.2 The ZSPP Implementation Plan

After the ZSPP (2014) was developed, it was recognized that to ensure effective implementation of the policy, an implementation plan would be required. Therefore, work on the ZSPP IP commenced in 2015 and the plan was approved in 2017. The IP was based on an updated analysis of the poverty and vulnerability context in Zanzibar, as well as a detailed mapping of social protection programmes. In order to assess progress, it is important to understand the situation in 2016, at the start of the implementation period, as well as the rationale for the priorities set out in the IP. At that time, the three main social protection programmes (in order of coverage) were the following:

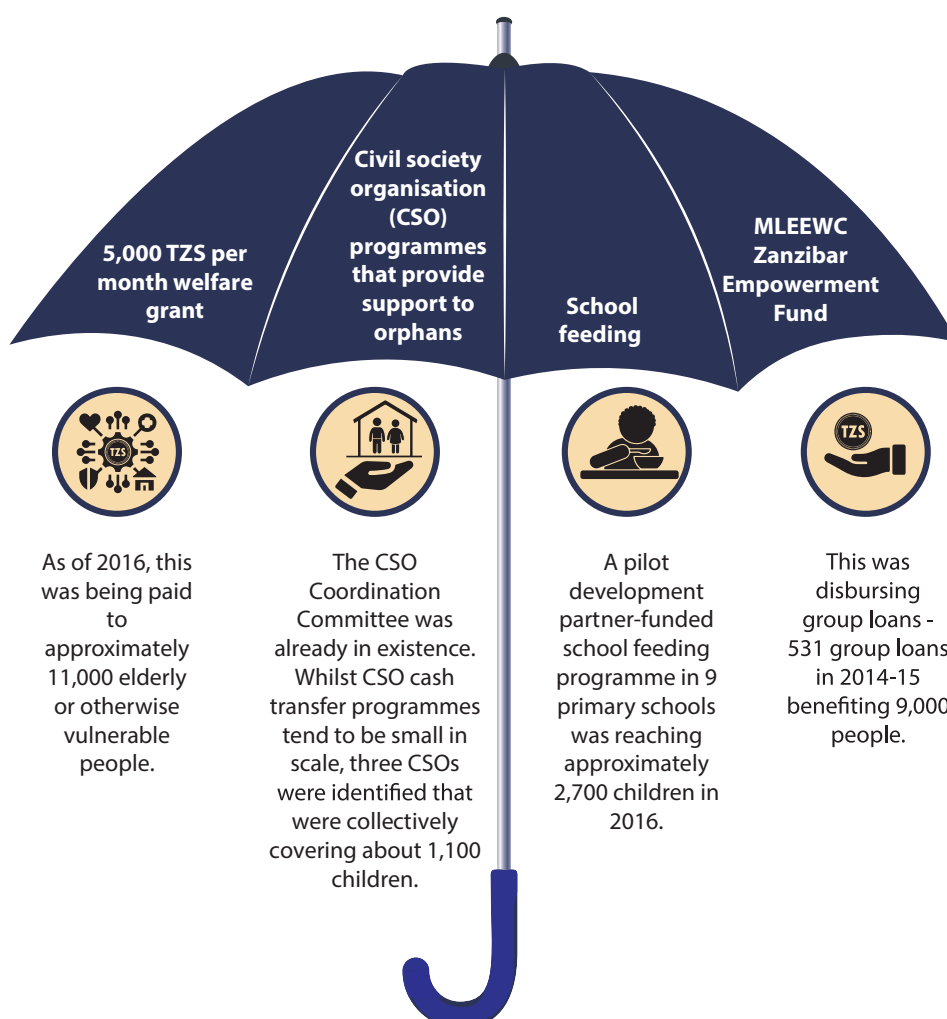
(i) **The Tanzania Social Action Fund (TASAF) Productive Social Safety Net (PSSN).** This programme targeting poverty reached approximately 15 per cent of households in Zanzibar (70 per cent of the targeted poor households) and had three key components: conditional cash transfers, public works and livelihood promotion.

(ii) **The Zanzibar Social Security Fund (ZSSF).** This contributory scheme provided a range of benefits to protect against livelihood shocks and life-cycle risks, including retirement pensions, invalidity benefit, maternity benefit and survivors benefit. As of 2016, it covered

approximately 16 per cent of the working age population, mainly formal sector workers.

(iii) **Zanzibar Universal Pension Scheme (ZUPS).** All people aged over 70 who meet specific residency criteria are eligible to receive a pension of TZS 20,000 per month. This programme was launched at the time the IP was developed and had 25,000 individual beneficiaries. At that time the Social Protection Unit was already well-established, the Pension Unit had just been set up, the operational manual had been developed and staff had received basic training.

Other key social protection programmes



Numerous other smaller scale programmes were also in operation and these were detailed in the background section of the IP (2017).

As for the plan itself, in line with the requirements of a social protection system the IP is structured in three levels: 1) programmes (covering the three programmatic specific objectives of the ZSPP listed above); 2) delivery systems; and 3) institutional arrangements. The last two levels together address the fourth specific objective of the ZSPP, which is to strengthen multisectoral coordination.

Based on an analysis of the gaps between ZSPP objectives and existing social protection provision in 2016, the IP set out nine programming strategic priorities, six delivery systems priorities, and four institutional priorities. Under each strategic priority, there are a set of detailed, time-bound, costed actions in matrix format, with responsibility for each being assigned to a particular ministry/agency. The IP also describes arrangements for tracking and reporting on progress against the plan.

Within each of its levels the IP highlights several top priorities:

Level 1: Programmes

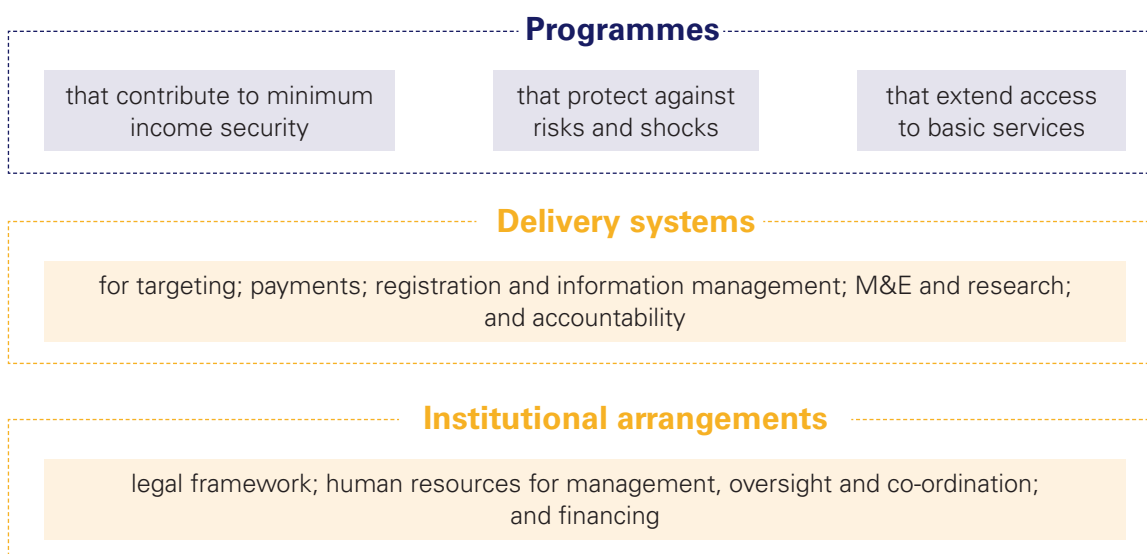
- Strengthening social protection provisions for people with disabilities
- Improving access to healthcare for the poor and vulnerable throughout the life cycle
- Building strong delivery systems for the social pension

Level 2: Delivery systems and

Level 3: Institutional arrangements

- **Development of harmonised systems**, including for information management, targeting, monitoring and evaluation (M&E), financial management and accountability
- **Capacity building** at both ministry and district levels, and
- **Creative financing strategies** that include re-allocation of existing resources, as well as increased funding.

Figure 1: Social Protection System



1.3 Approach to the Assignment

In any evaluation, typically two questions are addressed: whether there has been a change; and the extent to which this change can be attributed to the policy/ programme being evaluated. In line with this, the evaluation looks both at: i) the extent of implementation of each action in the IP and associated outcomes; and ii) whether and how these changes can be attributed to the existence of the ZSPP and its IP.

To answer the first point, the evaluation considered: whether or not those actions in the IP that were due for completion in the first two years of implementation had been completed; whether strategic priorities were on track for achievement within the implementation period; and the extent of progress towards the overall and specific objectives of the ZSPP.

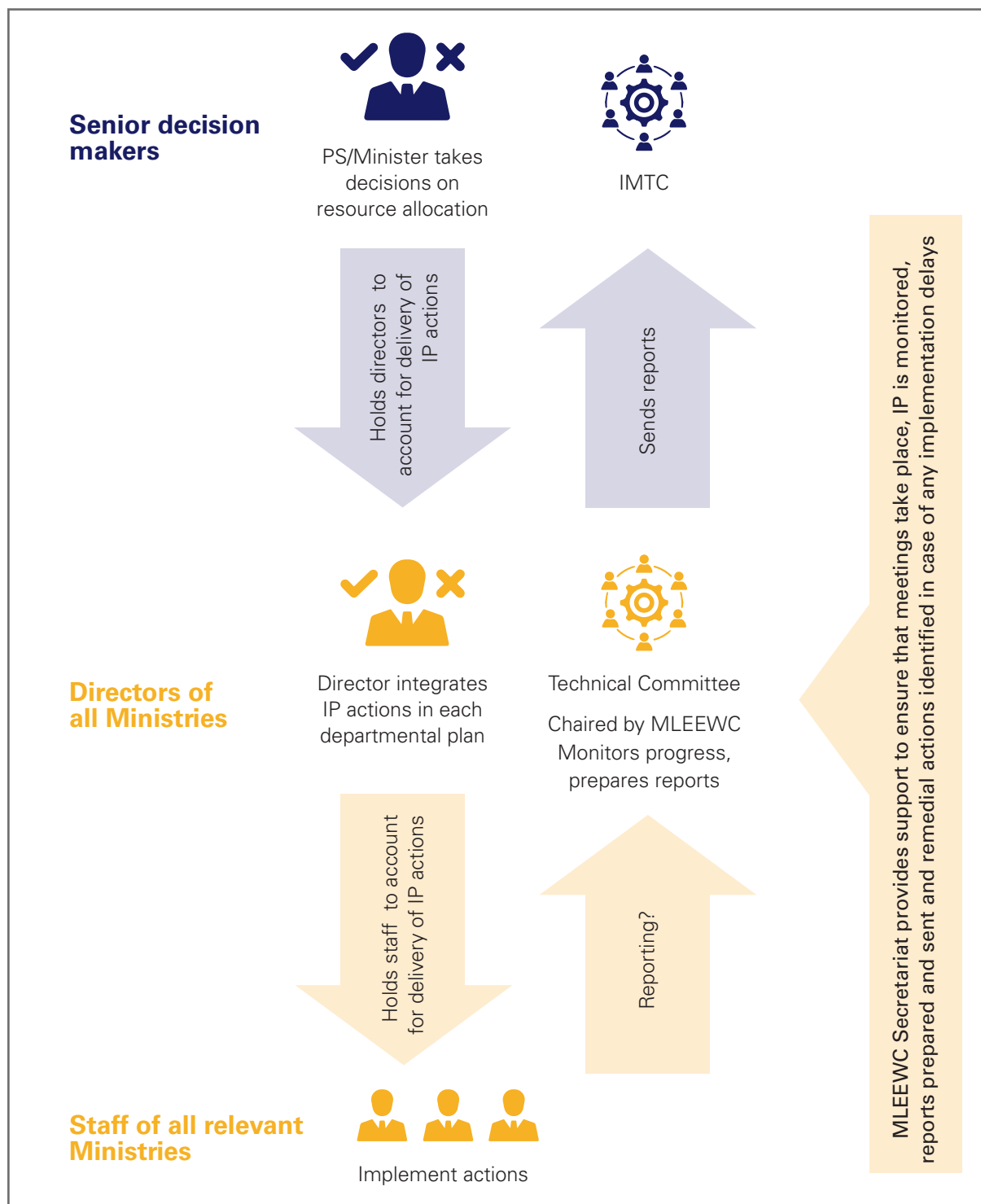
To address the second point about attribution, the first step was to establish the causal pathways through which the ZSPP IP was expected to influence actions

and then to assess whether or not these actually materialised. The IP itself proposed coordination and reporting mechanisms that constituted causal pathways through which it was expected to influence resource allocation and action. These were as follows:

- i) Social protection would be a standing item on the agenda of the Inter-Ministerial Technical Committee (IMTC). Senior leadership in each relevant ministry would thus be apprised of the importance of delivering key actions in the IP and would hold staff to account for delivery.
- ii) A Social Protection Technical Committee would be established at Director level which would meet once per quarter to assess progress against the ZSPP IP. These regular reminders of priority actions would serve to motivate Directors to deliver against the IP and to hold their own staff to account for delivery.
- iii) Key actions set out in the IP would be integrated within the relevant internal departmental plans. This would ensure that these priorities informed day-to-day work of the staff, for which they would



Figure 2: Intended causal pathways through which ZSPP results in action



be held to accountable through internal processes, rather than just remaining as a separate strategy that might be forgotten. In IP monitoring, the integration of each action within the relevant departmental plan would be checked. (There was a special column for this in the monitoring template in the IP)

- iv) The Technical Committee would submit quarterly progress reports to the IMTC (using the template in the IP). The senior leadership would thus be aware of any delays in delivery and hold their staff to account for it. They would also be aware of any obstacles beyond the authority of Directors to resolve (for example financing or staffing shortfalls) and would take action to address these themselves.
- v) There would be a dedicated secretariat function for the Technical Committee to ensure that the steps as detailed earlier were executed as planned and responsibility for execution would be formally assigned to the Director of the Department of MLEEWC responsible for social protection (who would ensure that staff in her department carried out the necessary tasks).
- vi) Development partners would use the IP to guide advocacy work and financial assistance to social protection.

The expected causal pathway from policy to action was thus as set out in Figure 2. Thus, the evaluation considered the extent to which these expected causal pathways operated and also investigated the existence of alternative unintended mechanisms through which the policy might have influenced action.

1.4 Methodology

The first step during the inception phase was a literature review and the production of an inception report. A full list of references is included at the end of this report. It was found that the available literature provided information on progress against only a few of the actions in the ZSPP IP. Thus, a detailed review of progress against each action listed in the IP was undertaken largely through meetings held during the mission and therefore the review is largely reliant on stakeholder accounts. Consultations consisted of an initial round-table meeting at which the inception report was presented and discussed, followed by a series of one-to-one meetings with key stakeholders and a wrap-up meeting at which initial findings were presented. Stakeholders included staff of ministries and agencies at both central and decentralized levels; relevant ministries and agencies were considered to be all those listed in the ZSPP IP as responsible for one or more strategic action. who were consulted can be found in **Annexure 2**.

Meetings focused not only on whether or not actions had been completed but also, in the case of actions not accomplished, the obstacles preventing implementation and any facilitatory actions required. Stakeholders discussed a draft of the report in order to provide consolidated feedback. Nonetheless, the initial plan was for a two-day workshop during the second mission. The workshop was cancelled due to the COVID-19 pandemic, thus restricting the opportunities for the consultant to directly discuss and debate the emerging findings with stakeholders.

Chapter 2

Implementation of the ZSPP

In this section, we turn our attention to an assessment of progress in implementation of the ZSPP. A detailed review of progress against the strategic priorities and actions of the ZSPP IP is presented in Table 1, Annexure 3.

2.1 Summary of progress in implementation

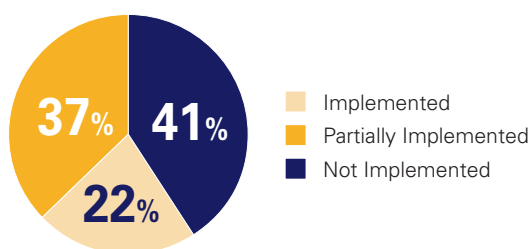
A review of progress against the actions in Table 1 leads to the following key conclusions:

1. The majority of planned actions have not been completed and most strategic priorities are off track.

Of 46 actions initially planned, 41 remain relevant, according to stakeholders. As we can see from Figure 3, of these:

- 9 actions have been implemented (22 per cent)
- 15 actions have been partially implemented (37 per cent)
- 17 actions have not been implemented (41 per cent)

Implementation Status of IP actions



Regarding strategic priorities, three show good progress, nine limited progress and six little or no progress.

2. Most progress relates to effective implementation of the ongoing programmes, rather than innovations in either programmes or systems

Level one of the IP is concerned with programmes and here we note some key achievements, notably in the effective delivery of the ZUPS, improvements in the ZSSF and continued implementation of the PSSN. Primarily, this success has been driven by effective ongoing implementation of programmes already designed by 2017 using procedures in place at that time. Actions involving review, design modification and piloting of new approaches to programming have been less actively implemented. Only a limited progress has been made with regards to levels two and three of the IP, which relate to developing new harmonized systems for targeting, harmonized information management and accountability, coordination arrangements and increased, sustainable financing.

3. Slow overall progress is not due to attention being narrowly focused on the top priorities

As noted above, the IP highlighted a small number of top priorities. In the face of limited human and financial resources, it might have made strategic sense to focus on these priorities, even if it meant delaying the implementation of others. So, the evaluation considered whether there was evidence for a

focus on top priorities. However, a review of progress against the top priorities highlighted in the IP does not indicate that the reason for non-achievement of other actions and priorities was because attention was focused on top priorities, as a stronger progress in them cannot be observed compared to other actions. The top priorities were listed in Section 1.2 of this report earlier and relate to eight priority strategic actions in the IP (1.1, 1.3, 1.8, 2.1, 2.3, 2.5, 3.3 and 3.4). Of these, it can be seen from Table 1 that only one shows good progress, three show limited progress and four show little or no progress.

2.2 Detailed review of progress

In this section, we review progress against strategic priorities one by one. As noted above, the IP is structured at three levels: (1) programmes, (2) delivery systems and (3) institutional arrangements. Within programmes, it is further sub-divided to align with the three strategic objectives of ZSPP: income security; protection against shocks; and access to basic services. This section is also structured along these lines.

2.2.1 Programmes

Programmes that promote income security

Strategic priority 1.1: The universal pension for older people is effectively implemented and sustained, ensuring full coverage of the target group and regular and timely payments

The ZUPS has scaled up to reach 27,783 older people (slightly exceeding the target of 27,000 in the IP), delivering pensions of

TZS 20,000 to them every month. An impact evaluation (MLEEWC, 2019⁴) finds positive impacts of the pension on material well-being of individual recipients, as well as on their households. Most beneficiaries are satisfied with the delivery performance of the programme. The rollout of the ZUPS is a major achievement and it now constitutes an important pillar of the ZUPS. Indeed, the ZUPS is cited across the region as a positive example of a national social pension scheme. On the other hand, the foundations for this success were laid before the start of the implementation period we are assessing. The ZUPS was already designed, prioritized within the Zanzibar budget and its implementation was started at the time the IP was being developed. The main actions in the IP in relation to ZUPS had to do with the development of systems and capacities necessary to sustain effective delivery in the long-term and to harmonize the ZUPS with other programmes. The progress in regards to the proposed actions has been mixed.

Management information system:

According to the IP, by June 2017 there should have been in place a comprehensive MIS that would keep beneficiary lists up-to-date through the addition of people turning 70 years and the removal of those who died. This MIS would be compatible with other systems, such as the civil registry and the TASAF MIS. An MIS has now been developed that is inter-operable with the civil registry (but not TASAF), which is a very important development. There was, though, a delay in its implementation: the MIS became fully operational only in late 2019. Furthermore, while the MIS is inter-operable with the civil registry in the sense that ID numbers can be automatically input, the ZUPS is still running parallel processes for verification of the eligibility of older people who lack ID cards

⁴ MLEEWC (2019). Impact Evaluation of the Zanzibar Universal Pension Scheme, in association with the ESRF and HelpAge International.

or whose birth dates appear incorrectly. For death registration, pension applicants are not always referred on to the Zanzibar Civil Status Registration Agency to have their details formally updated (see Section 3). Such stand-alone procedures seem appropriate in the short term to get the programme rapidly established and reach as many of the eligible as possible, but do not create effective harmonized systems, which was a stated priority in the IP.

Capacity building and training: Another key action in the IP was to build skills through new recruitment, technical assistance, coaching and training at both national and district levels. The purpose of such training was to enable districts to take on a greater role in day-to-day implementation, while national level staff would be able to step back from this role and, after appropriate capacity building, play more specialized roles in the monitoring, review and ongoing

improvement of the scheme. The specialized areas in which coaching and training were envisaged included: MIS development and IT; operations and payments; compliance/controls; M&E; communications; and social accountability and social inclusion, including complaints and grievance. An IT specialist has been recruited to work on the MIS and there has been MIS and general social protection training. MLEEWC staff attended two UN 'TRANSFORM' training courses on social protection in 2018 and a TRANSFORM module on MIS in 2019. HelpAge ran a social protection training course for 25 participants from MLEEWC and CSOs. On the other hand, envisaged capacity building in the other specialized areas listed above has not yet taken place.

Furthermore, there has been substantial rotation of staff, which has meant that skills built through on-the-job learning have been lost. Of the current seven staff, four are





completely new to both social protection and ZUPS and are yet to receive any training. At the district level, there has been a general strengthening of the social welfare function, with the result that staff who were met as part of the evaluation demonstrate an impressive grasp of general social welfare issues and commitment to this agenda. With respect to social protection, there has been some on-the-job learning about ZUPS, as district staff have accompanied national staff to make payments and have been actively involved in beneficiary updates, and there has been one training course. However, there has

been no new recruitment for social protection nor in-depth training for social protection envisaged in the IP.

Update of the operational manual: According to the IP, a functional review of the ZUPS was to be carried out at the end of the first year of operation. Based on the findings of this review, the manual was to be improved and updated. Neither the review nor update of the manual have yet taken place.

Harmonization with the TZS 5,000 per month welfare grant

welfare grant: Prior to the introduction of the ZUPS, there was already in place a welfare programme providing TZS 5,000 per month to people who were older or otherwise vulnerable. An opportunity for harmonization was identified in the IP. The aims were multiple: to avoid overlapping provision of transfers; to avoid duplication of work and inefficient use of human resources; and

to improve effectiveness by making use of registration, payment and information management systems being developed for the ZUPS that were stronger than the existing systems of the TZS 5,000 welfare grant. Thus proposals in the IP included various options including: (i) a progressive winding down of the welfare grant; and/or (ii) the use of ZUPS systems to deliver it to residual beneficiaries, if it was found to be reaching substantial numbers of people who were both highly vulnerable and not reached by either ZUPS or PSSN.

The aim of avoiding overlapping of ZUPS and the TZS 5,000 welfare grant has been realized: as soon as someone turns 70, they are moved from the welfare grant to the ZUPS and no new beneficiaries are being added to the TZS 5,000 welfare grant. On the other hand, the objectives of harmonizing for improved efficiency and effectiveness have not yet been fully achieved: the TZS 5,000 welfare grant continues, still delivering transfers to over 6,000 people and weaknesses in the systems underpinning it are yet to be addressed. For example, there are no consistent targeting criteria and even a quick review of the coverage of the welfare grant in different districts suggests issues with targeting, because, as can be seen from Table

1, the number of beneficiaries per district does not vary consistently based on either population or poverty rate. Thirty-four per cent of beneficiaries of this welfare grant reside in either Kaskazini A or Kaskazini B, despite these two districts having only 14 per cent of the population between them and being among the least poor districts in Zanzibar. One contributing factor seems to be that these were the only two districts in which not a single beneficiary of the TZS 5,000 welfare grant turned 70 between July and December 2019, suggesting they may have a generally younger caseload; if so, the natural reduction of the caseload in these districts will be very low and geographical disparities in beneficiary numbers will tend to worsen over time.

Table 2: The TZS 5,000 welfare grant

Region	District	Number of beneficiaries	% of all beneficiaries	% population	Poverty ranking*
Mijini Magharib	Mjini	361	6%	17%	9
	Magharibi A	358	12%	28%	10
	Magharibi B	399			
Kusini Unguja	Kati	361	6%	6%	6
	Kusini	264	4%	3%	5
Kaskazini Unguja	Kaskazini A	1,432	23%	8%	8
	Kaskazini B	718	11%	6%	7
Kusini Pemba	Mkoani	354	6%	8%	2
	Chake Chake	864	14%	7%	2
Kaskazini Pemba	Wete	758	12%	8%	4
	Micheweni	417	7%	8%	1
Total		6,286	100%	100%	

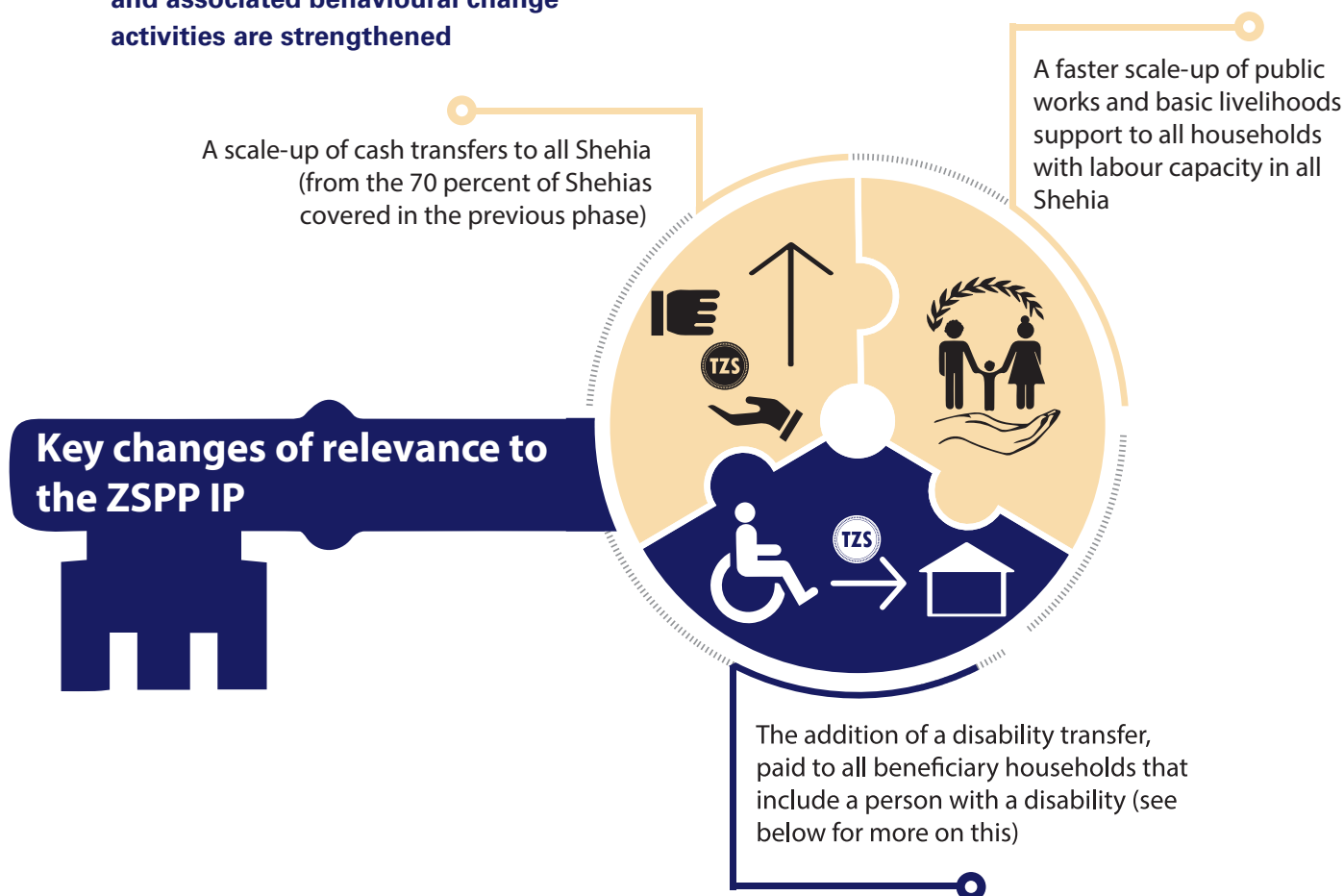
* Where '1' is the poorest and '10' the least poor.

In summary then, the ZUPS has effectively delivered pensions to older people, contributing importantly to basic income security for older people. This is a major achievement. Furthermore, an MIS has been developed for the management of this programme, which is a critical development. On the other hand, the prioritization given to the ZUPS has not been capitalized upon to invest substantially in the building of capacities and systems. As a result, the delivery of other programmes continues to largely use the procedures already in existence at the beginning of the IP in 2017. The implications of this are further discussed in Section 3.

Strategic priority 1.2: Coverage of extremely poor households with regular, timely and adequate cash transfers and public works is progressively expanded and associated behavioural change activities are strengthened

The actions under this strategic priority mainly relate to the PSSN programme managed by TASAF that covers Zanzibar as well as mainland Tanzania. As of December 2019, there were over 32,000 beneficiary households, receiving cash transfers. Transfer level varied according to household composition, and the average transfer received by a household was TZS 16,600 per month.⁵ In addition, public works had been implemented in 87 per cent of Shehias and there was a livelihoods component (discussed later in Section 1.4). A robust midline evaluation of the PSSN found substantial positive impacts on beneficiary well-being across Tanzania, which are further detailed in Section 3.⁶

A new phase of the PSSN has been designed, under which the existing programme will be scaled up and somewhat modified.



⁵ TASAF and World Bank (2019). Evaluating Tanzania's Productive Social Safety Net: Findings from the Midline Survey.

⁶ Ibid.

Unfortunately, there has been a delay in the start of the new phase due to financing challenges. Since the final payment of the previous phase in December 2019, no payments to beneficiaries had been made at the time of the evaluation. Thus basic income support has been abruptly removed from the poorest households, with likely negative consequences for their food security and other basic consumption, as well as access to health and education services. In the face of the economic shock caused by the COVID-19 pandemic, recommendations were made by UNICEF to urgently restart payments and waive conditionalities, as well as to consider a temporary humanitarian cash transfer to support horizontal coverage to those particularly affected in urban areas. At the time of writing this report, payments had still not restarted, but it is expected that they will do so later in this month (August 2021). The response of the Government of the United Republic of Tanzania and other development partners (DPs) to the other recommendations is not yet known.

The proposed nutrition-focused complementary measures (Stawisha Maisha sessions) set out in the IP were piloted as planned at pay points in Kazkazini B district with PSSN beneficiaries. An evaluation (Kajula, 2020⁷) found some modest improvements in the knowledge of participants on various aspects of child and maternal nutrition. However, going forward, the shift to e-payments will mean that beneficiaries no longer cluster at pay points, removing the natural entry point for the initiative and requiring a rethink of the approach.

As for the Most Vulnerable Child (MVC) initiative, the MLEEWC supported the establishment of MVC committees and training on the use of a methodology to

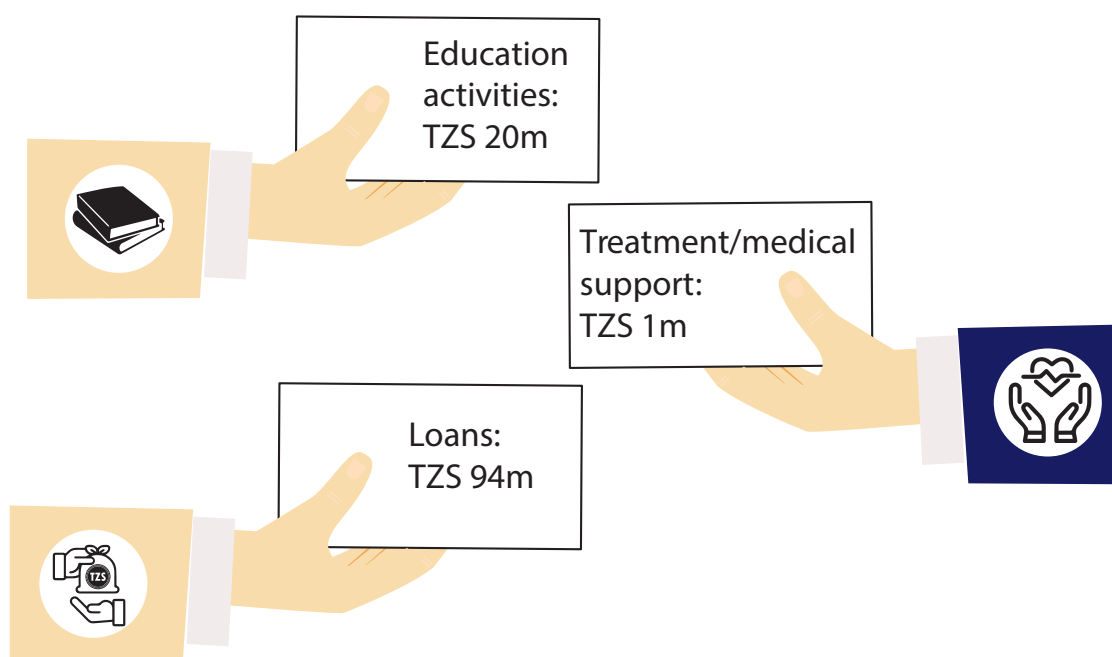
identify and register most vulnerable children in communities. The issue identified at the outset of the IP was that there was no clear plan as to how this information would subsequently be used, and communities had become frustrated by a targeting exercise that was never linked to practical support. The actions proposed in the IP were to assess the targeting effectiveness of the MVC identification exercise and then, if proven effective, to scale it up and use the data to advocate for integration of these most vulnerable children within existing programmes, whether government and CSO-run, that were already funded. It is suggested that updated information available on CSOs in the NGO Registrar should be made available to SWO and MVC Committees, so as to better link children to services they require.

Strategic priority 1.3: Social protection for vulnerable people with disabilities is strengthened

According to the IP, an urgent priority (for implementation by June 2017) was the operationalization of the existing Disability Fund, which, in 2017, existed and had received funds from fundraising activities managed by the Department of Disability Affairs (DDA) but was in a moribund state. Since then, preparatory work has been undertaken to get the Fund up and running. Guidelines have been developed on the use of the fund and a visit to all districts have been completed to raise awareness of its existence. Applications have been invited and 102 of them have been received. Disbursement has recently started and, as of July 2020, TZS 20 million had been disbursed for education activities, TZS 1 million for treatment/medical support and TZS 94 million in the form of loans. However, the Fund is still to receive any Government funds (it was intended to be jointly financed by the Government and partners). As for the

⁷ Lusajo Kajula, 2020, Strengthening infant and young child feeding (IYCF) practices: Evaluation of the Stawisha Maisha pilot programme implemented under TASAF's Productive Social Safety Net Programme. UNICEF

Disbursement as of July 2020



other envisaged actions in the IP, training of disability focal persons in disability-sensitive social protection has yet to take place. Nor has there yet been any review of the disability sensitivity of the various social protection programmes in Zanzibar, though such a review was planned for 2020.

That said, there is increased potential for disability-sensitive social protection going forward. There is a new dynamism within the DDA; disability focal persons have received cross-cutting training on disability; and a new database has been established on people with disabilities (PWDs), which includes data on both type and severity of disability. On the other hand, the database includes only 9,572 PWDs. This means that registered PWDs are only 0.7 per cent of the population,⁸ compared to a known prevalence of disability in Zanzibar for people aged 7 years and over of 7.3 per cent⁹ (from Census data). This suggests that

many PWDs have yet to be included in the database.

There is also a new provision that 1 per cent of all revenue raised by local government should be allocated to PWDs (2 per cent will also be allocated to youth and 2 per cent to women). The allocation of these funds will be managed by the Cross-Cutting Issues Unit within the Local Government Authority, not by the DDA. No guidelines or procedures have been set to guide spending, but the DDA is keen to collaborate to develop the guidelines or procedures and has already had initial meetings with the President's Office – Regional Administration, Local Government and Special Departments (PO – RALGSD). The National Council for People with Disabilities Strategic Plan 2019/20–2023/24 (RGoZ, 2018) also includes an action point on advocating for improved mainstreaming of disability in social protection programmes.

⁸ This is a slight overestimates as the calculation uses 2012 Census data and the population will have increased since then.

⁹ <https://www.nbs.go.tz/index.php/en/census-surveys/population-and-housing-census/179-2012-phc-disability-monograph>

As for disability sensitivity of the existing programmes, the design of the second phase of the PSSN includes a new disability grant element: an extra TZS 5,000 per month is to be paid to any PSSN beneficiary household that includes a PWD. This development cannot be attributed to the ZSPP as it occurred independently of it, but it is, nonetheless, very positive. Also, an unintended positive effect of the ZUPS is that it provides cash transfers to many people living with disabilities simply by targeting the oldest age-cohort, given that the incidence of disability increases with age.¹⁰

In summary then, actions under strategic priority 1.3 have not been achieved, yet there are some reasons for optimism regarding a shift towards more disability-sensitive social protection going forward.

Strategic priority 1.4: Poor households with labour are linked to appropriate livelihood opportunities, such that those who can sustainably move out of poverty do so

The main action in the IP for the first half of the strategy period was the design and roll out of the TASAF PSSN livelihoods component, including youth interventions.

To date, most PSSN beneficiary households have received support to form savings groups, with women forming the majority of active participants. Approximately 500 households have received intensive support through the enhanced livelihoods component, involving training, coaching and a livelihoods grant. Once the new phase is operationalized, livelihood support will be further strengthened, as the modified design of PSSN 2 involves an expanded livelihoods component. All beneficiary households will receive basic livelihoods support, including awareness-raising, savings promotion and linkages to ward-level extension services.



Also, the enhanced livelihood support package for selected households – encompassing training, coaching and a livelihood grant – will be further rolled out. Attention will be paid to the differing needs of household members, including youth and women. The basic livelihood component will involve informing households about opportunities for vocational education, apprenticeships and small business support and the grants under the enhanced package, while generally used for small business development, may also be used for vocational training of youth.

Thus the IP action has been partly achieved and should be more fully achieved once the new phase of PSSN is rolled out. On the other hand, opportunities for coordination between similar initiatives appear to have been missed. For example, the MLEEWCC supports women to form savings groups, but there seems to be no collaboration with TASAF's similar initiative. Likewise, the Ministry of Youth is leading the development of a new Youth Development

¹⁰ MLEEWCC (2019) op cit

Policy and has a Life Skills Programme for youth (though no documents were available to the consultant). Again, there has been no collaboration with TASAF. According to the 2019 Budget Speech, TZS 2 billion has been allocated to a youth employment programme for the current year, but it is unclear how these funds are planned to be spent. There appears to be much scope for increased collaboration in support of youth livelihoods.

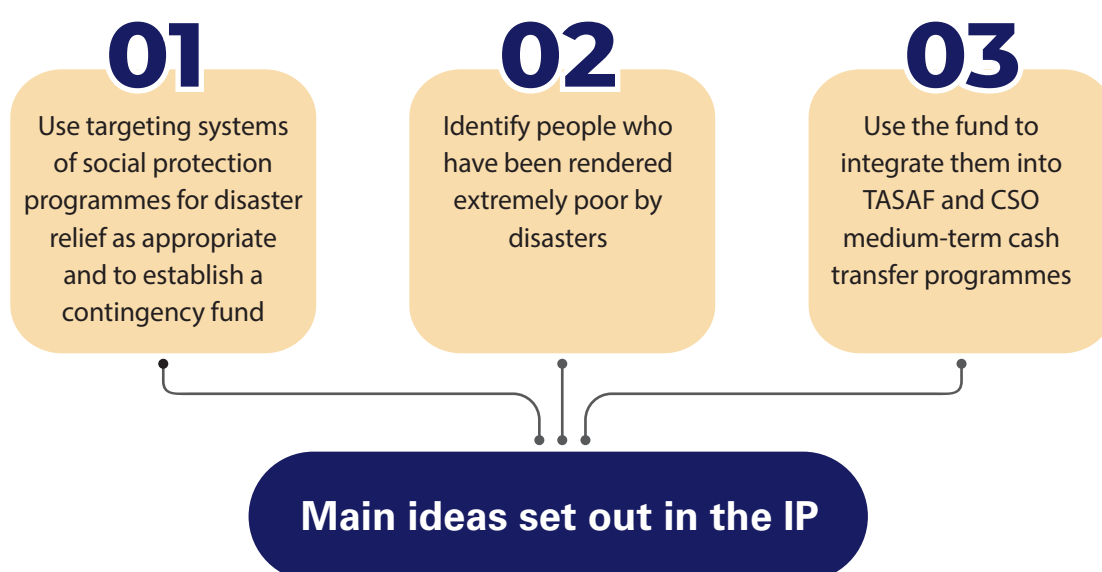
Programmes that provide adequate protection against life-course shocks and livelihood risks

Strategic priority 1.5: Effective support provided for individuals and households affected by disasters

Given the number of other more urgent priorities, actions to create linkages between disaster relief programmes and existing social protection interventions were envisaged for the period July 2018 onwards, rather than the first phase of the implementation period. Nonetheless, we might expect some preparatory activities to have taken place by early 2020. There has not yet been any strengthening of the linkage between the social protection and disaster management sectors, nor any shift towards the development of a shock-responsive social

protection system, as seen in many other highly disaster-prone low-income countries. When a disaster strikes, the Disaster Management Commission invites the Department of Social Welfare to meetings, but only as one of the many stakeholders. The Commission has representatives at national and decentralized levels, down to Shehia level, but these are not linked to the social welfare structures. In deciding who to assist when disaster strikes, the Disaster Management Commission considers both the extent of damage suffered and the vulnerability of the household. A set of guidelines that includes criteria for assessing vulnerability is currently being finalized but has not been widely discussed with other ministries or aligned with vulnerability criteria used in social protection programmes, such as those of the Social Welfare Department of MLEEWC or by TASAF. The criteria were not available to the consultant to review.

On the other hand, options for the expansion of PSSN to respond to the shock caused by COVID-19 were under discussion at the time of the evaluation and, if they go materialize, may generate useful learning for the development of a system that is more responsive to shocks in general.



Strategic priority 1.6: The coverage of contributory social security and the range of benefits offered are expanded and the long-term viability of schemes is ensured

There is a new energy in terms of reforming the ZSSF. Since the start of the IP, efforts to ensure employer compliance have been stepped up, in line with the action set out in the IP. In February 2020, an innovation was proposed that would complement the existing top-down compliance approach with a mechanism (possibly a helpline) that enables employees to complain anonymously about a non-compliant employer. Awareness-raising activities for the informal sector workers have also been increased, though the number of informal sector members of the scheme has only risen modestly to around 9,000 members up from 7,500 in 2016. In terms of the action point on increasing the viability of the ZSSF scheme, an actuarial study was carried out and, as a result of its recommendations, the contribution amount as a percentage of earnings was increased.

Analytical work was carried out to take forward the proposal to establish a social health insurance scheme. However, ministers decided against this scheme, agreed to the continuation of free health care for all, so the design of the scheme was not taken forward. Thus, this action is no longer relevant.

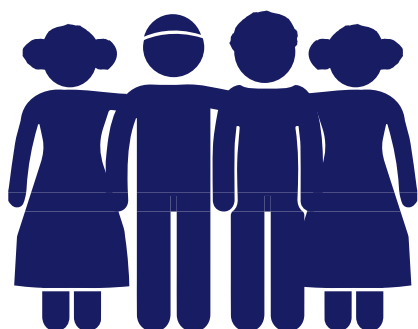
A new priority for RGoZ is the revamping of the Workers Compensation Fund, which is currently used for pays out in the case of an injury at employment. This is currently financed by the Government and not by contributions and managed by the MLEEWFC, but there are challenges with this arrangement. Many people confirmed as eligible for payment are not paid in a timely manner due to budget shortfalls. For example, of the 33 public sector workers awarded compensation in 2018–19 only 13 had been paid in full by February 2020, three had received a partial payment and 17 (more than half) are yet to receive any payment. In the case of private sector workers, employers are required to pay them compensation under the scheme, but there is a major compliance issue. The ILO is supporting the Government with a fundamental review of the scheme, and a shift from a Government-funded scheme to a contributory one is an option under consideration.

Programmes that extend access to basic social services

Strategic priority 1.7: Access to pre-primary, primary and secondary education increased for the most vulnerable children and for children with disabilities

The school feeding target of reaching 27 primary schools by 2018 has been achieved

Number of informal sector workers



2017: 7,500



2020: 9,000

and 14,751 students are now receiving meals under this scheme. However, the priority has changed since the IP was drafted. Rather than a further scaling up of feeding in both pre-primary and primary schools (to 50 of both by 2022), the new policy is to prioritize pre-primary schools and provide food to all children at this level. The responsibility for implementation of this scheme now lies with the PO – RALGSD, rather than the Ministry of Education and funds pass through the regions and local government authorities to schools. However, feedback from workshop participants suggested that the programme is not operational in all pre-primary schools, perhaps because funds are not reaching the schools in a timely way. Stronger analysis, guidance, monitoring and oversight may be required to ensure that the intended outcomes of the policy are realized. There are not yet any guidelines to local authorities on how to maximize nutritional value for minimum cost and reportedly some schools are simply providing bread; this may also be linked to the low budget allocation of just TZS 100 per child per day. There are plans to develop guidelines on the composition of a nutritionally appropriate meal and to cost this meal, as well as to assess operational bottlenecks in the programme. SOCIEUX will provide support to this scheme, with the aim of helping to develop a scalable, sustainable

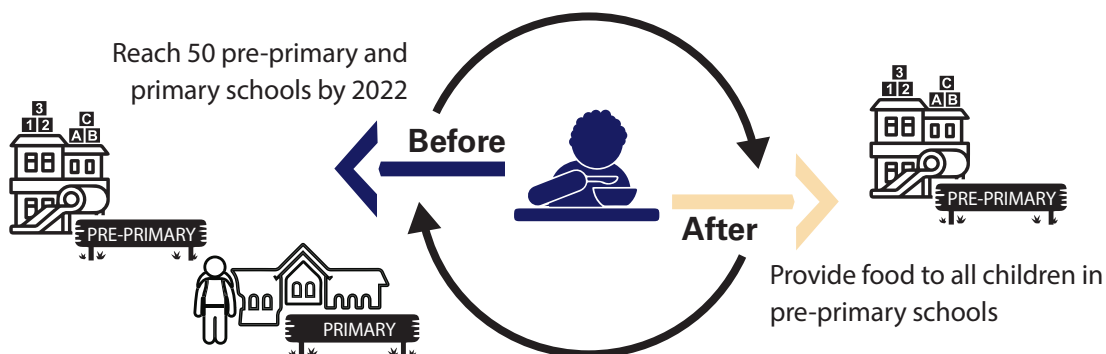
and effective school feeding programme. PO – RALGSD also plans to launch school vegetable gardens to support school feeding.

Ensuring access to education for all remains a social protection challenge. Even though parental contributions for education have been abolished, uniforms and pens still need to be purchased by parents, presenting a challenge for the poorest. There are also reportedly challenges with implementation of the policy of provision of free textbooks and exercise books in some schools. UNICEF and the Ministry of Education have developed a response plan for out-of-school children (though it is not yet funded), following a study in 2018 to review school capacity, school inclusiveness and reasons why children are out of school. The social protection element of this proposes a link to the PSSN, which already provides cash transfers to beneficiary households with children, conditional on school attendance.

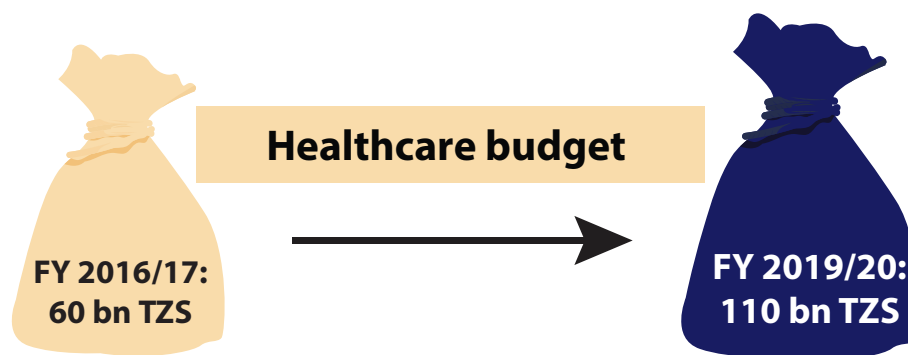
Strategic priority 1.8: Access to health services improved for the very poor and vulnerable, especially young children, pregnant women and older people

The action in the IP aimed to ensure that the approach to health-care cost-sharing adequately considered exemptions for those unable to pay. However, as noted above, the cost-

School feeding target before and after the drafting of the IP



¹¹ RGoZ and UNICEF (2018). Health Budget Brief: Zanzibar, p. 14.



sharing approach has been shelved and the policy of free access to health care continues. Thus this specific action becomes irrelevant, even though the strategic priority remains important. The challenge previously noted was that budgetary allocations were insufficient to fully implement the free health care policy and that shortages of basic medications were common. The 2018 Zanzibar Health Budget Brief noted that, "The maintenance of an official free health-care policy without the adequate funding to implement this policy has resulted in poor targeting of the scarce public resources available for health. Rather than targeting specific basic health interventions to be fully funded, a full range of health interventions are offered but only when resources are made available."¹¹ The challenges identified included major disparities in allocation of health services and high out-of-pocket expenditures on health care that risked catastrophic spending and impoverishment in case of a health shock.

There are anecdotal reports of improved access to health care in the past few years, attributed to increased health sector spending. It is true that there has been a substantial increase in budget in nominal terms from TZS 60 billion in FY 2016–17 to 110 billion in 2019–20. However, in 2019–20 the health sector budget as a proportion of total approved government budget is at 7.7 per cent, still far below the World Health Organization (WHO) recommendation of 15 per cent and indeed only marginally higher than the 7.5 per cent of the Government budget allocated to health in 2016–17.

Thus it is not clear whether allocations are yet sufficient to overcome the challenges previously identified.

In the coming months, the Ministry of Health will carry out further analysis and put forward proposals on how to ensure access to a package of essential health services for all. The social protection objective of ensuring improved access for the poor and vulnerable remains valid, but, until the shape of the health sector proposals is clearer, specific social protection actions cannot be defined. It will be important for social protection actors to remain engaged with the debate and ready to provide an analysis on how to ensure access of the poorest and most vulnerable, as required.

Strategic priority 1.9: Access to free or subsidized transport services increased for PWDs, children and older people

The action in the IP under this priority was to develop and implement a strategy to enforce the transport law on payment of half fares by children, older people and PWDs. According to stakeholders consulted, the MLEWC has had limited involvement in this during the IP implementation period and is unclear how to proceed, given challenges of working with the private sector. However, older people's associations are spearheading a campaign to take this forward for their target group, and the DDA has agreed with ZAN ID to prepare a disability ID that can be presented for discounts for PWDs.

2.2.2 Delivery systems

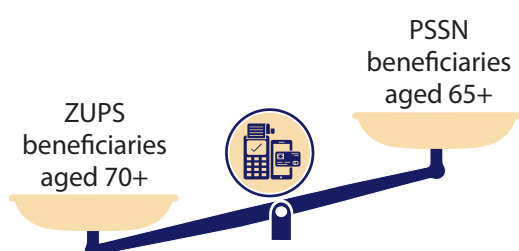
Strategic priority 2.1: Targeting systems are more effective and are harmonized where appropriate

The actions under this priority were to carry out an analysis of the targeting effectiveness and appropriateness of the existing targeting systems and then to design and use a common targeting approach and set of criteria for identifying poor and vulnerable households. It was recognized that different programmes would then need to overlay this action with their own categorical or geographical criteria, but it would avoid multiple programmes using divergent criteria to identify the poor and vulnerable. For example, when the Disaster Management Commission wanted to identify the poorest and most vulnerable households in an area affected by a climate-related shock, it could use these common criteria to carry out targeting in that area. Or if the Cross-Cutting Unit of each local government authority wanted to identify poor and vulnerable PWDs, youth and women, it could use the agreed criteria on poverty and vulnerability, rather than having to reinvent its own.

No progress has yet been made on this action.

Strategic priority 2.2: Payment systems ensure the right amount of cash always reaches the right recipient at the right time

Level of comfort with electronic payments



Initially it was envisaged that a common payment solution would be identified and implemented by all the programmes, for example mobile payments, or payments to bank accounts accessed via agents (in other countries, often shopkeepers). However, while PSSN is moving gradually to 100 per cent electronic payments (with 56 per cent currently made to mobile accounts and 44 per cent in cash), the ZUPS has maintained cash payments. This divergent approach may be justified by the fact that Zanzibar has fewer mobile money agents than mainland Tanzania and also by the different target groups of the two programmes. ZUPS beneficiaries being aged over 70 years may have a lower comfort level with electronic payments. On the other hand, across Tanzania, 41 per cent of PSSN recipients are aged 65 or older, so there may be very useful lessons to be learned by ZUPS from how older beneficiaries of PSSN experience the shift to e-payments and whether challenges can be overcome. In summary then, convergence of payment systems may not necessarily be appropriate, but there is still scope for increased learning across programmes.

Strategic priority 2.3: Effective systems for managing and sharing information established

The actions under this priority relate to the sharing of beneficiary information across programmes, in order to minimize unintended duplication of support by similar programmes to the same beneficiaries, and to maximize complementarities (ensuring that households receive all the different types of support they require from different programmes). In the short term (by July 2017), it was envisaged that this would be achieved through the development of protocols on the manual sharing of information at Shehia level and by issuing clear guidance on duplications and complementarities, and clarifying which overlaps are acceptable/desirable and which not. Then, by 2018, compatible MISs would be developed for all the major programmes,

enabling automatic sharing of information and these functions would be managed electronically.

No progress has been made on this strategic priority.

Strategic priority 2.4: Evolution of the social protection system backed by solid analysis, research and M&E

Envisaged activities under this strategic priority included: enhancement and finalization of the draft social protection monitoring and evaluation framework set out in the IP; quarterly reporting of progress against the IP using a format set out therein; and the development and implementation of a plan of research and analytic work to support progress against current and emerging social protection priorities.

No progress has been made on this strategic priority, reportedly due to human resource constraints.

Strategic priority 2.5: The social protection system is accountable to all citizens, including the extremely poor and vulnerable people it serves

This priority was about the development of common social accountability mechanisms to hold the social protection system accountable



to communities and beneficiaries. As a first step, a study to decide on appropriate methodologies (e.g., independent complaints and grievance mechanisms, community report cards, citizen score cards, etc.) was envisaged.

The study has not been carried out. The major programmes have complaint procedures, but these are not harmonized across programmes and it is unclear how actively they are used. In the case of PSSN, many issues are resolved informally at the pay point and lists of beneficiaries who complain about not getting paid are transmitted up to the Zanzibar office, but other complaints are not formally registered and there is no established procedure to follow up on more complex issues that cannot be quickly resolved. Given this situation, social accountability is an issue that is yet to receive increased attention under the next phase of the PSSN.¹² As for ZUPS, according to the operational manual,¹³ there is a complaint procedure, but no data is available to assess how actively this is being used or the percentage of complaints resolved in a timely way.

Strategic priority 2.6: Social protection impacts of CSO activities strengthened

There were two main sets of activities under this strategic priority.

The first involved engaging with the entity responsible for CSO registration (which shifted from the Zanzibar Business and Property Registration Agency (ZBPRA) at the beginning of the IP to PO – RALGSD now) to ensure that the design of their new MIS and reporting requirements addressed the information needs of the social protection sector. For example, this action would include ensuring that social protection is included as a sector of activity in the database and clearly defining this in line with the ZSPP, in order to facilitate MLEEWC's access to information on the key CSO social protection actors and the

¹² World Bank (2019). Project Appraisal Document Production Social Safety Net Project II.

¹³ MLEEWC (2015). Zanzibar Universal Pension Scheme (ZUPS) The Standard Operating Procedures Manual.

focus, scale and location of their operations, without the need to duplicate information collection. No progress has yet been made on this action, because the shift in institutional responsibility has delayed the development of the database. However, the database is now under development and is expected to be finalized by July 2020, so MLEEWC's active engagement along the lines initially envisaged remains important.

The second set of activities involved strengthening the CSO Forum already in existence in 2017 by more clearly defining roles, regulations, TORs and membership and encouraging districts to set up similar coordination forums. The national forum has been strengthened and the TORs and membership are now clearly defined. On the other hand, there has been no move yet to support districts to set up similar forums, although local government staff attend the national CSO Forum meetings. This still seems to be a priority especially given that

CSOs sometimes do not communicate with SWOs working in a district, as procedure only requires them to pay their respects to the District Commissioner. SWOs in the district office whom the consultant visited explained how they had little knowledge of the CSOs operating in their area and were unaware of where to refer the highly vulnerable families who came to them for assistance.

2.2.3 Institutional arrangements

Strategic priority 3.1: Relevant legal and policy frameworks developed and enforced

A social protection legal framework was due to be developed by June 2018. This is now scheduled for financial year 2020–21. The Elder Persons Affairs Act, No. 2/2020 was approved, which covers the general right of people aged 70 years and older to "access services related to social protection activities" and the specific right to receive monthly payments under the ZUPS if they meet the specified residency criteria.



Strategic priority 3.2: Social protection steering committee and technical committees are established and active

In recognition of the heavy workload of senior decision makers, the IP proposed that the 'Steering Committee' would actually consist of making social protection a Standing Point on the IMTC, rather than setting up a new committee (as had been earlier proposed in the ZSPP). The concern raised in 2017 with the earlier proposal for a stand-alone social protection steering committee was that senior-level decision makers would have insufficient time and that meetings might be poorly attended.

The Technical Committee, in contrast, was to be convened at the Director level to meet four times per year and to have responsibility for ensuring implementation of the IP. A secretariat was also planned to be established in the MLEEWC under the Director of Elders and Social Welfare, which would be responsible for servicing the committee, organizing meetings, preparing agendas, writing minutes, following up on action points and ensuring work was taken forward between meetings. Since the Social Protection Unit was already in existence (since 2015), it was expected that specific staff from within this unit would be tasked by the Director to carry out these new roles. Given that these structures would be key to ensuring that the rest of the plan moved forward, their establishment was envisaged to be among the very first actions undertaken by June 2017. At the time of the evaluation, although there were terms of reference and a membership list in place for the Technical Committee, this committee had never met. Neither had social protection been put on the agenda of the IMTC.

It should be noted that the Social Protection Technical Committee is distinct from the CSO Coordination Committee, which is covered in priority 2.6 earlier. According to

the minutes reviewed, the latter is a more general information-sharing forum and does not specifically assess progress against the ZSPP IP.

Strategic priority 3.3: Appropriate capacity and skills available to build the social protection system and to effectively deliver, oversee, monitor and evaluate programmes

A capacity assessment was carried out at the ministry level for MLEEWC, rather than for the social protection sector.¹⁴ Some useful recommendations in relation to MLEEWC's role in relation to social protection were made in the assessment. These were: that the management orientation and M&E function be strengthened, both to enable improved internal planning and monitoring and to enhance MLEEWC's credibility as the coordinator of the ZSPP; that social protection coordination mechanisms be made more effective; that the ministry develop a workforce strengthening strategy for both social welfare and social protection functions; and that trained social workers be deployed in roles where their skills are most needed (rather than in administration of social protection programmes). These recommendations have reportedly been integrated into the Five-Year MLEEWC Strategic Plan.

In terms of staffing, two officers in SPU were supported by UNICEF from October 2017 to October 2019; and an additional officer was recruited by the MLEEWC and allocated to the SPU in June 2020. On the other hand, as noted above in respect of the Pensions Unit, frequent rotation of staff within the MLEEWC, as well as staff absence due to study leave, has caused challenges in terms of continuity. As also noted above, some social protection training has been provided to MLEEWC staff, but there has been no social protection

¹⁴ OPM (2018). Capacity Assessment and Capacity Building Plan for the Ministry of Labour, Empowerment, Elderly, Youth, Women and Children for the Delivery of Social Welfare Services in Zanzibar: Final Project Brief.

training for other Technical Committee members involved in the delivery of social protection.

Strategic priority 3.4: Sustainable financing for the envisaged system ensured, including through increased RGoZ contribution to social protection

A useful Zanzibar Social Protection Budget Analysis was carried out in 2018.¹⁵ The analysis found social protection expenditure to be dominated by contributory pension schemes that primarily benefit formal sector workers whereas spending on both social assistance and labour market programmes was well below the average for Sub-Saharan Africa. The findings of this report are discussed further in Section 3 later. This report has not yet been used to develop a financing strategy, as envisaged in the IP.

The most urgent envisaged action in the IP was to advocate for increased funding for social protection to ensure that activities planned in the IP could be implemented, for example the expansion of social protection for people with disabilities, development of harmonized systems and systematic capacity building. This does not appear to have been done. During consultations, neither MLEEWC nor Ministry of Finance could recall having been a clear advocacy strategy for increased social protection funding.

As for the budgeting action, in 2017 the Ministry of Finance was shifting to results-based budgeting and developing a coding structure. This process appears to be still ongoing and a social protection code is not yet in place, but planned to be developed soon along with relevant sub-codes. The Ministry of Finance flagged that it will be



important to train relevant staff to ensure that codings are correctly applied and that social protection expenditure can be reliably tracked.

Regarding Zakat and Sadaqat financing, the actions envisaged in the IP remain relevant and the Waqf and Trust Commission have themselves developed an action plan that strongly aligns with the IP. Indeed, this team was one of the few to demonstrate familiarity with the IP. Capacity strengthening has been undertaken, there is a new team in place at national level and recruitment of staff at district level is ongoing. On the other hand, these actions are at an early stage and have not yet resulted in any increase in contributions collected or distributed. In the event that learning from other countries enables the Waqf and Trust Commission to substantially increase their collection of contributions, these could become an important additional revenue stream for the financing of harmonized social protection programmes for the poor and vulnerable people in Zanzibar, in line with priorities in the ZSPP IP. On the other hand, the impact would be less if the Commission sought instead to use the contributions to finance its own small parallel programmes.

¹⁵ RGoZ and UNICEF (2018). Zanzibar: Social Protection Budget Analysis.

2.3 Attribution

As noted in Section 1 earlier, an evaluation needs to both assess progress and the extent to which such progress can be attributed to the intervention under consideration. As seen

above, most strategic priorities in the IP are off track and most actions have not been implemented. Nonetheless key progress has been noted in some areas, and so the question of attribution applies.

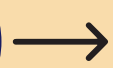
Key progress in the IP

Effective delivery of the ZUPS, paying more than 27,000 beneficiaries in full and on time every month



Establishment of the ZUPS MIS, with a link to the civil registry

Movement of beneficiaries of the 5,000 TZS welfare grant to the ZUPS when they reach the age of 70 years



Inclusion of a disability grant element within the new design of the PSSN (TASAF)

Development of a new school feeding strategy, targeting pre-primary schools



Reform of the ZSSF schemes

In this section we reflect on the extent to which the progress in the areas listed above is due to the existence and use of the ZSPP and its IP.

With reference to the mechanisms through which the IP was expected to influence action (see Figure 2 in Section 1.4), most of these were found to be inoperative. The Technical Committee has not yet held a single meeting and no written reports have been produced. The IP priorities were not integrated within internal Ministerial plans in a way that ensured staff were held accountable by managers for their delivery. The IMTC did not have social protection as a standing point on their agenda; one attempt to discuss the IP with Principal Secretaries was made in a special meeting, but this meeting was poorly attended. Nor did we find evidence of alternative internal mechanisms through which the IP influenced Government action. On the other hand, the IP was used to some extent by development partners, notably UNICEF. Noting that the IP is a validated RGoZ

document, UNICEF staff made reference to it in their rationale for financing to the social protection sector, for example in the provision of technical assistance to the development of the ZUPS MIS.

Reasons offered by the stakeholders for the limited use made of the IP include: (i) limited time that MLEEWC staff have to devote to coordination, due to the imperative to deliver the ZUPS and staff absence because of study leave; (ii) lack of convening power of the MLEEWC, related to the inability of one line ministry to hold other line ministries accountable for delivery or even to ensure their attendance at meetings; and (iii) involvement mainly of staff in the IP development who are concerned with implementation rather than policymaking and limited ownership at more senior levels.

These reasons merit further reflection by stakeholders, in order to find solutions to the constraints and ensure fuller implementation in the second half of the implementation period.

Reasons for limited use made of the IP



Limited time that MLEEWC staff have to devote to coordination



Lack of convening power of the MLEEWC



Involvement of staff in IP development that was concerned with implementation rather than policymaking

Chapter 3

Progress towards the overall ZSP objective

In this section we assess progress towards the overall objective of the ZSP: *To establish a comprehensive social protection system that meets the needs for income security, risk management and access to basic services for all Zanzibaris, thereby contributing to a more equitable society.* In so doing we draw on the review of progress against the IP above, as well as on recent analytical work.

3.1 Summary of progress in building a social protection system

Before looking in detail at the extent of progress in building a social protection system, it is instructive to first consider the extent to which financing of social protection in Zanzibar is adequate overall and appropriately distributed for the development of such a system. The 2018 Zanzibar Social Protection Budget Analysis¹⁶ sheds light on the allocation of resources. In 2015–16, 1.62 per cent of the gross domestic product (GDP) was spent on social protection, of which:

- 1.07 per cent was spent on social insurance (mainly the ZSSF and Retired Civil Servant Pension Scheme (RCPS) retirement pensions);
- 0.54 per cent on social assistance (mainly ZUPS and PSSN); and
- 0.01 per cent on labour market

programmes (including youth employment) and social welfare services (including elderly care, orphanages and child rehabilitation).

At 0.54 per cent of GDP, social assistance spending in Zanzibar is well below the average for Sub-Saharan Africa of 1.34 per cent. Furthermore, less than half of social assistance is funded by the Government, which goes almost exclusively to the ZUPS. Financing of labour market and social welfare services is even lower. In the following sections, we consider what these budgetary allocations imply for the coverage and adequacy of social protection provision for different population groups, and draw on evidence from evaluations to assess the effectiveness of this provision.

Figure 4 presents a summary assessment of the coverage and adequacy of social protection in relation to each of the four specific objectives of the ZSP at each stage of the life cycle – childhood and pregnant women, working age and older age and for people with disabilities. Green indicates key strengths, while red highlights key gaps and orange other areas where there is scope for substantial improvement.

As can be seen, social protection of older people is a key strength, while provision for PWDs and coordination across the system are areas of particular challenge. There is substantial scope for improvement in most areas, including in social protection for children, pregnant women and people of working age.

¹⁶ RGoZ and UNICEF (2018). Zanzibar: Social Protection Budget Analysis.

3.2 Social protection for older people

The provision of social protection for older people is a key strength of the Zanzibar social protection system.

Pension schemes, especially contributory schemes, constitute the vast majority of Government social protection spending. Spending on the ZSSF pension scheme, which provides pensions to 6,407 retirees

(2016 data¹⁷), is, at 0.63 per cent of GDP¹⁸, above the average for Sub-Saharan Africa, despite Zanzibar having a lower than average proportion of older citizens. In addition, the Retired Civil Servant Scheme provides pensions to 12,596 retired civil servants and spend is a further 0.44 per cent of GDP.¹⁹ Furthermore, RGoZ social assistance expenditure goes primarily to the ZUPS, and this accounted for a further 0.19 per cent of GDP in 2016.^{20,21}

Figure 4: Coverage and adequacy of the Zanzibar Social Protection System

SPP specific objective /life cycle stage	Children and pregnant women	Working age adults	Older people	PWDs
Minimum income security for all	TASAF CTs (currently suspended)	TASAF CTs and PWs (currently suspended)	ZUPS	None currently operating at scale
			ZSSF pensions	
	Familia Yenye Mazingira Magumu Zaidi		Retired Civil Servant Scheme	Familia Yenye Mazingira Magumu Zaidi
Protection against life-course shocks and livelihood risks	As adults and ZSSF maternity grant	ZSSF in-work benefits (limited coverage)	ZUPS	Workers Compensation Fund
		Disaster relief (not coordinated with SP)	ZSSF pensions	
Access to basic social services	School feeding	Free health care	Free health care	Free health care as others, but likely higher costs
	TASAF CCTs			
	Numerous CSO programmes, focusing especially on orphans			
	Free health care			
Multisectoral coordination				

■ Key Gap

■ Scope for Improvement

■ Relative Strength

¹⁷ This is the latest data available to the consultant since requests for data updates elicited no response.

¹⁸ RGoZ and UNICEF (2018). Op cit.

¹⁹ ibid

²⁰ ibid

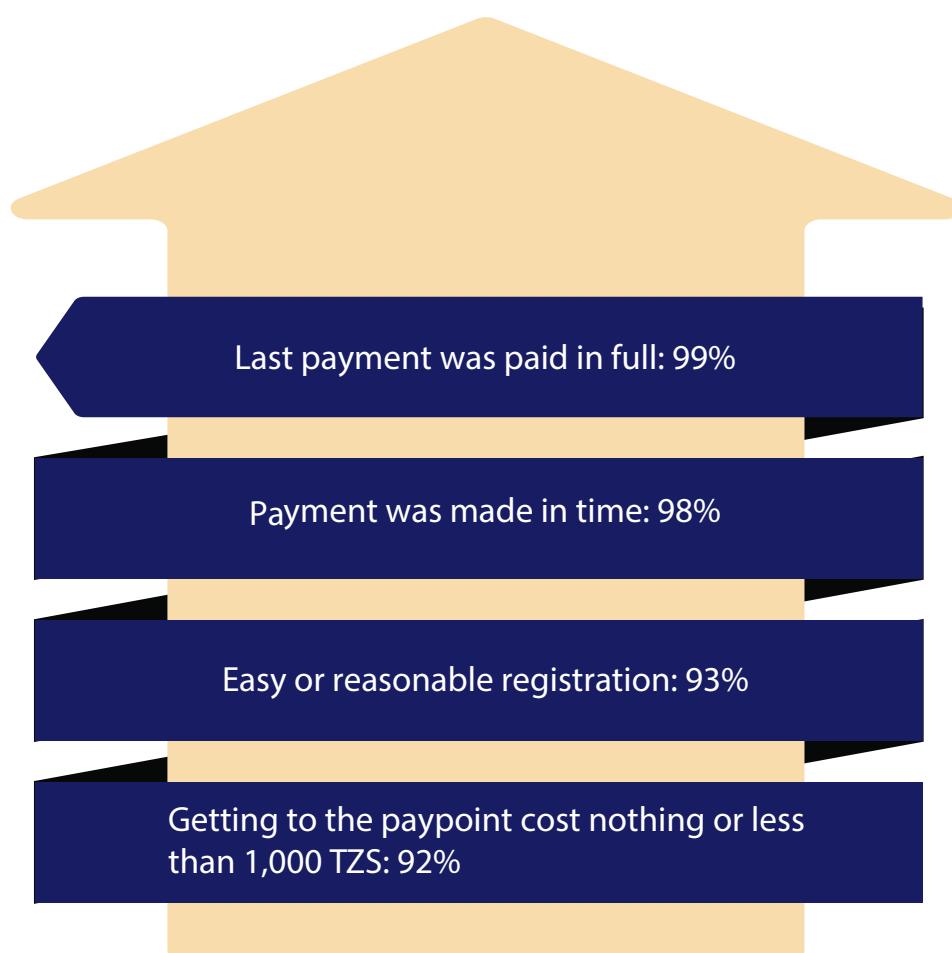
²¹ When it had between 18,000 to 24,000 beneficiaries, compared to 27,000 currently

When the IP was drawn up, the ZUPS had only recently been launched and its effectiveness was as yet unproven. Now it is well established and is reaching over 27,000 beneficiaries with monthly transfers, which both provide older residents with a minimum level of income security and help them to cope with shocks by enabling savings and investments. It is funded entirely by the RGoZ, with development partner support only in the form of technical assistance for the initial design and systems development. The recent evaluation (MLEEWC, 2019) found a high level of satisfaction with the delivery of ZUPS among beneficiaries: 93 per cent reported that registration was either easy or

reasonable; 92 per cent said that getting to the pay point cost nothing or less than TZS 1,000; 99 per cent confirmed that the last payment was paid in full; and 98 per cent reported that it was paid on time.²²

Furthermore, the evaluation found that ZUPS was the main source of cash income for 70 per cent of recipients and that it had a large, positive and statistically significant impact on recipients' mean monthly individual income. Furthermore, these effects extended to the households of the recipients, with households reporting increased health and education expenditure, improved food security, increased dietary diversity and

Level of satisfaction with the delivery of the Zanzibar Universal Pension Scheme (ZUPS) amongst beneficiaries



²² MLEEWC (2019). Impact Evaluation of the Zanzibar Universal Pension Scheme, in association with the ESRF and HelpAge International.



slightly increased likelihood of having savings (promoting resilience in case of a shock). Previous assessments have noted substantial out-of-pocket health expenditure in practice, despite the policy of free health care²³ and the ZUPS evaluation found the same: older people reported that only the most basic medicines are available free of charge and they end up having to buy most of the prescribed drugs. In this context, it is positive that the ZUPS has increased average health care expenditure by individual older people by approximately TZS 9,000 per month (MLEEWC, 2019).

Overall then, the performance of the ZUPS is very impressive. Nonetheless, there are some issues not covered by the evaluation that merit future analysis. While the evaluation assessed the impact of the scheme on the beneficiaries, it did cover in depth who was benefiting: it did not assess the poverty profile of the beneficiaries; nor did it assess exclusion error (the proportion of those eligible who are missing out on ZUPS); or the inclusion error (the percentage of payments made to ineligible people). Neither did it look at the extent of overlaps of ZUPS beneficiaries with those of other programmes.

Regarding the poverty profile of ZUPS beneficiaries, the Budget Analysis (RGoZ and UNICEF, 2018) finds that in Zanzibar people aged over 70 years have a slightly higher than average likelihood of being in the poorest

population quintile (27 per cent fall in this quintile). Thus, the current targeting of the ZUPS is moderately pro-poor. It is notable, though, that were the age of eligibility be reduced to 60 years in future, in line with the plans, the programme would no longer be pro-poor, as people aged 60+ years are more or less evenly spread across consumption quintiles.

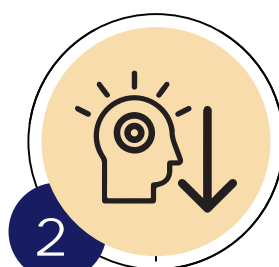
With regard to exclusion error, while not examining this directly, the evaluation of ZUPS does flag two issues. First, focus group participants commented that some people aged 70 years and older are excluded due to not having the right documentation or having an ID card with the wrong date of birth. This issue is known to MLEEWC and to which an interim solution has already been found. The District SWO assesses the case, asking a series of questions developed to test the person's knowledge of past events. If they believe them to be eligible, they then submit a request for inclusion to the MLEEWC. This appears a very appropriate interim solution. However, it is not aligned with civil registration processes, as when someone without appropriate document is assessed as eligible, there is not always a follow-up with the Zanzibar Civil Status Registration Agency to request them to examine the case. So, while the older person remains indefinitely enrolled in the ZUPS, they still have no ID card (or one

²³ Ibid.

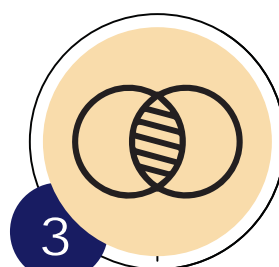
Reasons for exclusion from ZUPS



1
Some people aged 70 years and older are excluded due to not having the right documentation or having an ID card with the wrong date of birth.



2
There is a low level of awareness of the ZUPS among older people not currently benefiting.



3
Programme overlaps (between ZUPS and PSSN)

that shows a younger age), which may affect their access to other services. A second issue related to exclusion error is that the evaluation showed a low level of awareness of the ZUPS among older people not currently benefiting. Fewer than half of 68- and 69-year-olds had heard of the scheme, raising the possibility that there may also be people aged 70 years and older who are unaware and so have not applied and are inadvertently excluded.

As for the inclusion error, the interim solution to incorrect ID cards noted above, relying as it does on the judgment of the SWO, does introduce a risk that some people younger than 70 years are included in error. More important, though, is the risk that pensions may continue to be paid to households after the death of the beneficiary. While the non-collection of pensions after three months raises a flag in the system, a representative may collect indefinitely on behalf of the beneficiary. In this case, removal from the beneficiary list is reliant on the notification of

death. Finding that few deaths are notified to the Zanzibar Civil Status Registration Agency, the ZUPS has established an independent process, whereby Shehas are supposed to notify District Social Welfare Officers (SWOs) of the death of a ZUPS beneficiary. However, there is no death or funeral grant in the pension scheme, which provides little incentive for timely notification and a consequent risk of ghost beneficiaries. In the case of the TZS 5,000 welfare grant, which is reliant on a similar process of notification by the Sheha and has a younger beneficiary profile, a recent verification exercise found that around 1 per cent of beneficiaries had already died. Even if a minority of deaths of ZUPS beneficiaries remain unreported each month, the percentage will tend to grow over time and the cost of an incentive such as a funeral grant may soon be superseded by actual losses due to these ghost payments. This merits further analysis of costs and benefits.

²⁴ TASAF and World Bank, undated. Evaluating Tanzania's, Productive Social Safety Net: Targeting Performance, Beneficiary Profile, and Other Baseline Findings.

²⁵ Across Tanzania 40 per cent of PSSN beneficiary households have a head aged 65+ years and Zanzibar has 32,000 beneficiary households. So assuming the same age structure applies in Zanzibar as elsewhere, there would be nearly 32,000 households with a head aged 65+.

A further issue is that of programme overlaps. While it might not always be a problem for households to receive multiple transfers from different programmes, especially if they are among the poorest, it is important to understand how programmes overlap. In the context of finite resources, if benefits are concentrated on particular households or individuals, other vulnerable people are kept out of the programme. There is clearly some overlap between the ZUPS (targeting older people) and the PSSN (targeting poor households), not only because some older people inevitably live in poor households, but also because it is known that there is an over-representation of older people in the PSSN target group as compared to their proportion of the poor population.²⁴ Forty per cent of PSSN households (an estimated 13,000 households in Zanzibar²⁵) are headed by a person aged 65 years or older, suggesting that the overlap between the two programmes might actually be quite substantial. No data is yet available on the proportion of ZUPS beneficiaries living in PSSN households, nor the proportion of PSSN households that include a beneficiary of ZUPS, and it would be useful to carry out such an analysis.

The key point is that an increased investment in systems and capacities would not only ensure ongoing improvement of the ZUPS by minimizing inclusion and exclusion errors, but could also help ensure an equitable allocation of resources across a comprehensive social protection system.

3.3 Social protection for children, pregnant women and people of working age

While the provision of social protection for children and for people of working age is conceptually distinct, in practice the same instruments often cover both (since the

majority of children live with people of working age). To avoid excessive repetition, both will be covered in this section, and the particular provision for children and young people of different ages, as well as for pregnant and lactating women, will also be discussed.

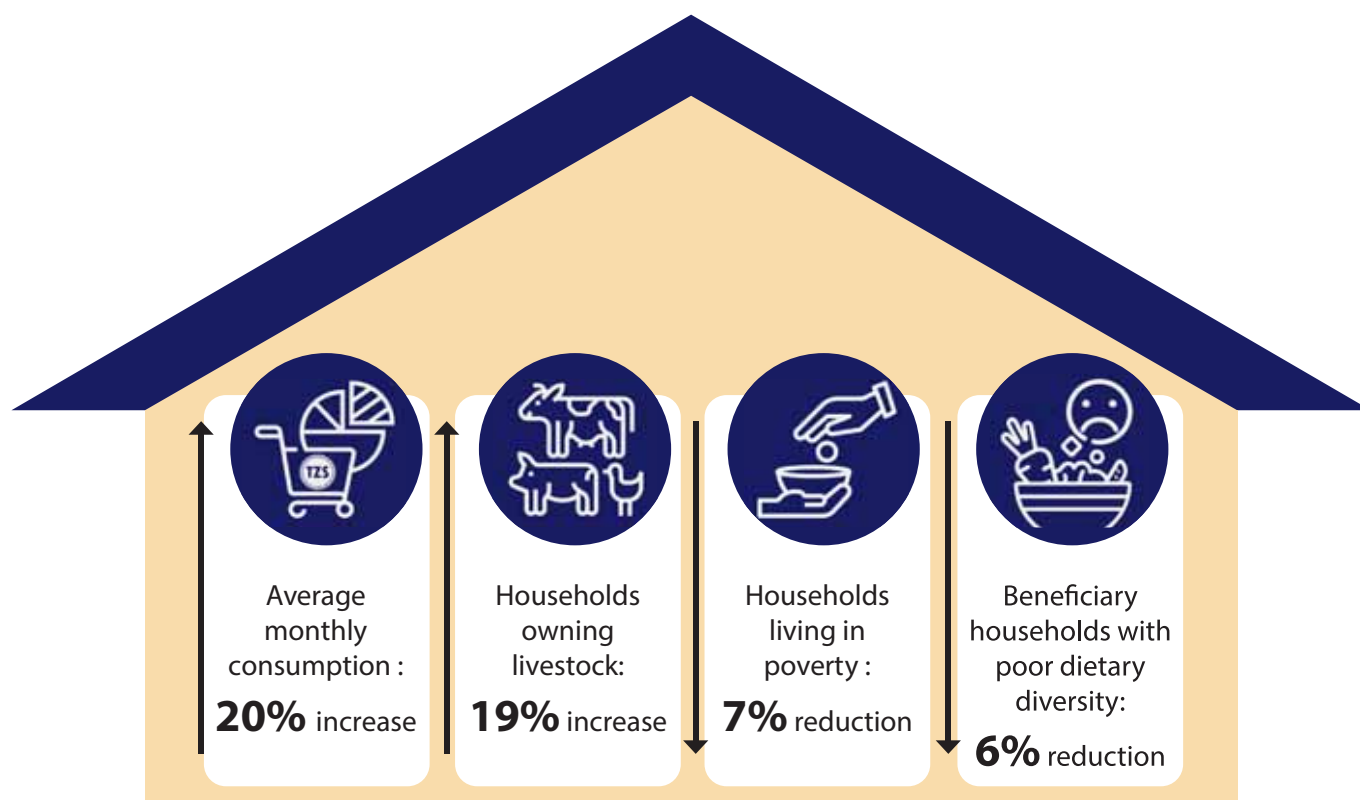
Government spending on social assistance for people of working age and children is very low indeed and there are consequently some inadequacies in the provision.

According to the 2018 Social Protection Budget Analysis, the RGoZ social assistance spending on children and people of working age consisted of the MLEEWC spending on welfare programmes equivalent to only 0.01 per cent of GDP and school feeding of only 0.02 per cent of GDP.²⁶

The main programme providing social assistance to people of all ages is TASAF's poverty-targeted PSSN, which is primarily funded by development partners. According to the 2020–21 budget, RGoZ will contribute just 0.2 per cent of total PSSN funding (TZS 50 million out of a total budget of TZS 21.6 billion). Until December 2019, the PSSN programme provided 32,000 households with regular cash transfers and also made available public works and livelihood support to households with labour capacity in targeted areas. While not child-focused, the programme is child-sensitive in that it contains provision for additional transfer to households with children. Cash transfers vary according to household composition, consisting of a base element, an additional unconditional amount for all households with at least one child, and further amounts for children, conditional on households complying with health and education co-responsibilities. During the first phase, the average monthly value of the household transfer received was TZS 16,600 (approximately 16 per cent of average consumption of the beneficiary households). It is relevant to state that the average transfer levels were lower than for

²⁶ UNICEF (2018). Op cit. Note that this relates to 2016 data, the latest on which such analysis has been carried out.

Impact of the cash transfer element on beneficiary households across Tanzania



the ZUPS (TZS 20,000), despite the PSSN being a household rather than individual benefit.

A baseline evaluation found the PSSN to be very well targeted. Most PSSN households are very poor: across Tanzania, the majority (83 per cent) are in the bottom 40 per cent of the consumption distribution and almost half (48 per cent) are in the lowest decile. In consultations for this assignment, stakeholders in Zanzibar raised concerns about the targeting effectiveness of the programme. It is possible that the PSSN is less well targeted in Zanzibar than on the Mainland, although there is no evidence to support this contention of the stakeholders;

the targeting evaluation proposed in the IP to investigate this issue has not yet been carried out.

A robust midline evaluation of the impact of the cash transfer element (TASAF and World Bank, 2019) found the following substantial impacts on beneficiary households across Tanzania: an almost 20 percentage point increase in average monthly consumption; a consequent reduction of 7 percentage points in households living in poverty; a 6 percentage point reduction in beneficiary households with poor dietary diversity; a shift of beneficiaries from casual work into more productive self-employment; and a 19 percentage point increase in households owning livestock.

²⁷ TASAF and World Bank (2019). Op cit.

²⁸ The Tanzania Cash Plus Evaluation Team (2018). Tanzania Youth Study of the Productive Social Safety Net (PSSN). Impact Evaluation: Endline Report, UNICEF Office of Research – Innocenti. Florence, 2018.

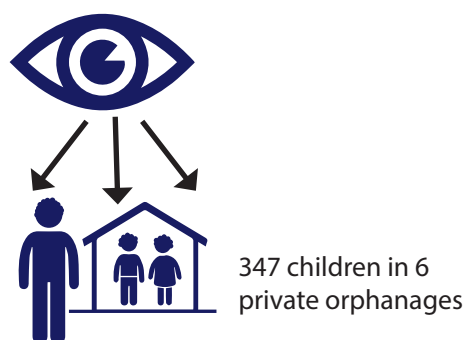
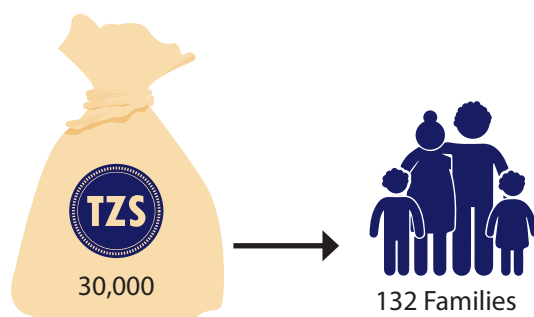
With respect to children, the PSSN resulted in an 8 per cent point increase in enrolment of children of primary school age, benefiting both boys and girls, but there has been no increase in school enrolment of adolescents aged 14–19.²⁷ Some of the other positive impacts of cash transfer programmes seen in other countries on adolescents have not yet been observed in Tanzania either. For example, there have been no impacts on sexual debut, pregnancy, partnership formation, perceived HIV risk or risky sexual behaviours, although there is some increase in knowledge in these areas. The impacts may be therefore felt in a longer time frame.²⁸ As for younger children, the midline evaluation found that the PSSN led to increased visits to a health care provider, especially for regular check-ups for children aged five and under, but an improvement in health or nutritional outcomes is not yet visible, which may take longer to materialize.

Overall then, during its first phase, PSSN had positive and promising impacts in a range of areas across Tanzania. Design work on a new phase was undertaken during 2018 and design modifications took into account lessons learned from phase 1. Key innovations in relation to children include: (i) for public works, eligible households that have only one adult able to work who is pregnant or caring

for an infant will continue to receive PW wages but will be granted a temporary waiver from the need to work and will be linked with nutrition services; (ii) conditional transfer elements will be restructured to ensure a stronger focus on maternal and young child health and nutrition and on the completion of education cycles (completion of primary, transition from primary to secondary and completion of secondary level); and (iii) asset grants under the livelihood component will be able to be used for vocational training to promote youth livelihoods.

Despite these positive impacts of phase one of PSSN, a key issue is that there has been a hiatus since that phase stopped in December 2019. No payments have been made since then due to financing issues. This interruption in transfers risks undermining the positive impacts of the scheme to date and is of particular concern given the anticipated adverse economic impacts of COVID-19. Given that the RGoZ does not provide substantial financing for PSSN, there is little that can be done to address the interruption, which underlines the fragility of provision that is not substantially domestically funded and the importance of building a sustainably financed national system.

Benefits provided by MLEEWC



²⁹ Again, this is the latest data available to the consultant, as requests for updates received no response

³⁰ *ibid*



Other social protection provision for people of working age includes the ZSSF contributory scheme, which provides maternity benefit and survivors' benefit. However, as noted in Section 2, only approximately 76,000 workers are covered (16 per cent of the labour force according to 2017 data²⁹), mainly formal sector workers who are generally not among the most vulnerable. The ZSSF provision for working-age people, including in respect of maternity, is perceived as less adequate than pension provision; for example, ZSSF's maternity benefit is just a one-off payment. Furthermore, not all the benefits provided in the Zanzibar Social Security Act 2005 are yet operational, including medical care benefit in particular and there is no provision for unemployment benefit, which has been identified as a gap in relation to the economic fallout of the current COVID-19 pandemic.

As for children, the other major social protection intervention targeting children is school feeding. As noted above, all pre-primary schools are now covered by the Government's school feeding programme, from which over 41,000 children benefit. The mapping carried out in 2016 and summarized in the IP also found that CSO social protection activities tended to focus mainly on children, specifically orphans, and that three CSOs collectively covered about 1,100 children. Transfer levels

varied, but were typically around TZS 40,000 per month per child. In addition, the MLEEWC provides a cash transfer of TZS 30,000 per month to 132 families living in difficult circumstances, monitors the care of 347 children in six private orphanages³⁰ and manages the Mazizini orphanage.

There is currently no specific social assistance provision for pregnant or lactating women, though under the next phase of PSSN, it is proposed to update cash transfer conditionalities to incentivize antenatal and postnatal care. The MLEEWC provides allowance for milk for mothers of triplets, but the numbers benefiting are low – just 14 in the last financial year.

As for access to health care, as mentioned above, the policy remains that all health care is free for all, although in practice there is substantial out-of-pocket expenditure. In this context, cash transfers are the key mechanism of support to access to health care for poor families, as they enable them to cover these expenditures. As for protection from shocks, again regular cash transfer programmes, such as PSSN, by enabling people to acquire assets and savings offer some protection. PSSN systems – MIS, payments systems and human capacities – might also offer potential for vertical and horizontal scale-up in case of shock and this is under consideration in response to the economic fallout of the COVID-19 pandemic. The Disaster Management Commission has some capacity to respond to disasters, though, as noted above, there is currently very limited coordination between the social protection and disaster management sectors and there is no move towards shock-responsive social protection as in some other countries.

Overall, notwithstanding the positive impacts of PSSN, the very limited RGoZ budgetary allocation to social protection for children, pregnant women and people of working age and the concerns over financial sustainability of the PSSN lead to the conclusion that social

protection provision for children and families need to be strengthened substantially.

3.4 Social protection for people with disabilities

Social protection for people with disabilities was flagged as a key gap in the ZSPP IP and since 2017 there has been only modest improvement.

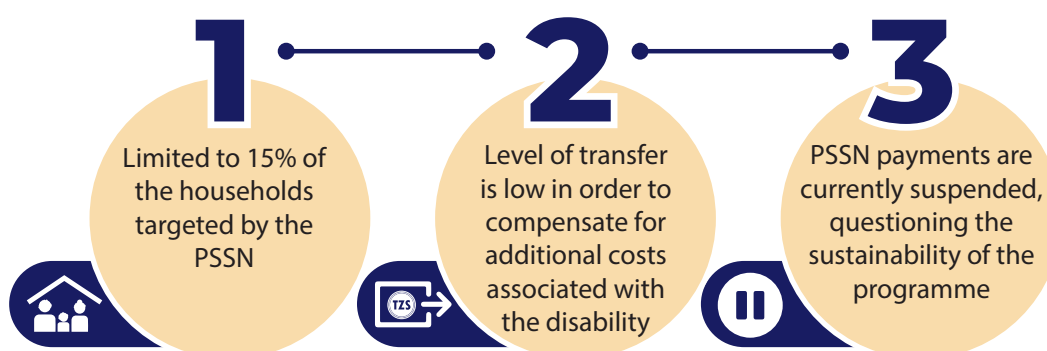
PWDs form a category that cuts across life-cycle stages and are likely to find particular challenges in ensuring basic income and accessing essential services, due not only to logistical challenges, but also stigma and discrimination; they will also often face additional costs in accessing services or economic opportunities due to the need for assistive devices, higher transport costs, personal assistance or interpretation. Furthermore, carers of people with severe disabilities may experience difficulties in combining work and caring responsibilities, leading to reduced household income.

There have been some improvements in social protection provision for PWDs since 2017; of particular note is the new TZS 5,000 disability grant element within the PSSN, mentioned above. However, there

are several limitations to this provision. First, it is limited to the approximately 15 per cent of households targeted by the PSSN. Second, the level of transfer is very low and may not be sufficient to compensate for additional costs associated with the disability, especially if the disability prevents a working-age person from engaging in productive activities. Third, as noted above, PSSN payments are currently suspended and the sustainability of a programme so heavily dependent on development partner financing is questionable.

It should also be noted that ZUPS provides some coverage of people with disabilities. The rate of disability is higher among those of older age. The Impact Evaluation of the Zanzibar Universal Pension Scheme (MLEEWC, 2019) found that 24 per cent of recipients had a disability. Furthermore, a Disability Fund (managed by the Department of Disability Affairs) has been in place, though non-operational, for many years. A priority of the IP was to operationalize this fund and, as noted above, there has been some progress regarding this priority. The Disability Fund has recently started the disbursement of funds. Another provision for PWDs is the 1 per cent allocation of local government revenues to people with disabilities mandated by law, but no guidelines for its use have yet been developed.

Limitations to social protection provision for PWDs since 2017



³¹ There is no breakdown that permits to know how many families with disabilities benefitted.

Other programmes with limited coverage include a contributory invalidity pension under the ZSSF scheme and the Government-funded Workers Compensation Fund, which is paid out in the case of a workplace injury. This provided compensation of TZS 24 million to 37 people in financial year 2018–19 and was discussed in more detail in Section 2. One of the four eligible categories for the MLEEWC cash transfer of TZS 30,000 per month for vulnerable families ‘Familia Yenye Mazingira Magumu Zaidi’ is a family that includes a child or caregiver with a disability, but it is not known how many of the total of 132 households benefiting fit within this category.³¹ Fifty-five leprosy victims benefited from a transfer of TZS 30,000 per month from MLEEWC.

People with disabilities are subject to the same free health-care policy as the rest of the population. The reason for flagging access

to health care as a particular concern for this group is that people with disabilities and chronic illnesses are likely to have increased need of access to medical services and hence higher out-of-pocket expenditures. At the same time, some will face greater challenges and costs to access health centres. Unlike older people, and to some extent children, most PWDs are not covered by adequate regular cash transfers to help cover these costs.

In summary, we find that, despite some limited progress since 2017, social protection provision for people with disabilities remains a key gap in the Zanzibar social protection system.

3.5 Coordination

Despite the existence of several effective social protection programmes in Zanzibar, the development of a comprehensive social

Dimensions to assess the extent of coordination



protection system remains at an early stage, due to weak coordination

Coordination happens in many ways and the absence of formal coordination meetings does not always signal a problem. Sometimes seizing emerging opportunities for collaborative action is even more important. Therefore, in assessing the extent of coordination, we consider multiple dimensions: (1) the operation of formal social protection coordination meetings; (2) the state of progress of IP actions requiring active inter-ministerial collaboration; and (3) the extent to which new opportunities for informal collaboration to advance important social protection agendas have been seized as they arise.

On the first point, as discussed at length in Section 2, the coordination arrangements for implementation of the ZSPP have yet to be established: there have been no meetings of the Technical Committee nor any progress reports of the IP produced.

Second, as documented above, while some individual programmes have progressed, those actions in the IP that required coordinated action and/or were aimed at building harmonized systems have largely not been implemented. These include the development of a harmonized approach to identifying poor and vulnerable people; systems for managing and sharing information across programmes; a capacity building strategy for the social protection sector; common social accountability systems; a common M&E framework; a joint plan for analytical and research work; a financing strategy; and a social protection communications strategy.

Third, over the course of the past three years, several new opportunities for more harmonized social protection provision have

emerged, but the majority have not yet been seized. Some constitute lost opportunities, but many others still hold promise. For example, (i) the Disaster Management Commission has recently designed a new approach and criteria to identify poor and vulnerable households affected by a shock, but these are not yet harmonized with those used by any existing social protection programme; (ii) there is increased available financing from TASAF for livelihoods enhancement in poor households during the next phase that could be used to help address the priority of youth livelihoods through increased inter-ministerial collaboration; (iii) there is a forthcoming requirement for local government authorities to spend proportions of their revenue on PWDs, youth and women and there may be an opportunity to support the development of guidelines that encompass social protection; (iv) analysis of the extent of overlaps in social protection provision for older people by TASAF, ZUPS and ZSSF could inform a more equitable spread of social protection resourcing across the life cycle; (v) ZUPS has developed appropriate short-term unilateral measures to register people lacking correct ID and to collect information on deaths and there is untapped potential to share this information with other social protection programmes and civil registry, in order to ensure that people can access all the programmes to which they are entitled (and not access those to which they are not entitled); and (vi) while there is active coordination between MLEEWC and CSOs at the national level, better coordination at district level could enable vulnerable people to be more effectively referred to appropriate services.

In summary, coordination seems to have been weak on all three of the dimensions considered and there is an opportunity for substantial reinforcement going forward.

Findings and recommendations

4.1 Findings

The following are the key conclusions of the assignment in response to the questions in the TORs:

- **The ZSPP remains broadly relevant.** The vision, mission, overall, objective and specific objectives are still fully valid. Much of the details of ZSPP (2014) are now out of date, particularly in regard to background information and proposed strategies and interventions. Given that the IP includes updates in all these areas, this is not a major constraint, as long as the IP (2016) is used as the key reference document for implementation. The ZSPP might usefully be updated in FY 2021–22.
- **A key strength of the social protection system in Zanzibar is provision for older people. Social protection for people with disabilities is an area of particular challenge and there are also substantial gaps in relation to provision for children and people of working age.** Government spending on social assistance is very low overall, and much lower than the average in Sub-Saharan Africa. The impressive performance of Zanzibar in establishing and effectively implementing the ZUPS appears to be driven more by an imperative to support older people than by a commitment to universal social protection. ZUPS has not yet catalysed cross-cutting systems development or increased social protection provision for vulnerable Zanzibaris of other age groups.
- **The ZSPP IP has largely not yet been implemented:** The majority of the planned actions have not been completed, most strategic priorities are off track and the proposed coordination and reporting arrangements have not been established. While there has been good progress in some areas of provision for social protection, this cannot be attributed to the IP.
- **Most of the progress in social protection provision since 2017 has been in the implementation of individual programmes (particularly the ZUPS) rather than in coordination or systems building.** There has been limited investment in building coordinated or harmonized delivery systems or institutional arrangements to support the social protection system. Coordination remains weak at both national and sub-national levels. The choice of the RGoZ to focus first on rolling out one categorically targeted programme (the ZUPS) has been a sensible move in a context of limited capacity. However, for this to be a first step in the building of a comprehensive social protection system, in line with the overall objective of ZSPP, there needs to be a concurrent building of sustainable systems, capacities and knowledge that can subsequently underpin delivery of complementary programmes for other groups.
- **As a result of the above, progress towards the overall objective of the ZSPP has so far been limited.** The overall objective of the ZSPP is "to establish a comprehensive social

protection system that meets the needs for income security, risk management and access to basic services for all Zanzibaris, thereby contributing to a more equitable society". To achieve this, an acceleration of effort will be required in the second half of the ZSPP IP period.

4.2 Strategic recommendations

The key recommendation is to reinforce efforts towards establishing a comprehensive social protection system for all Zanzibaris, in line with the overall objective of ZSPP. Priority actions that are needed for establishing a comprehensive social protection system are given below. It should be noted that this is not an exhaustive list of all social protection-related activities in the IP. Importantly, it does not include actions that are specific to one ministry or programme, but focuses on initiatives that require intensive collaboration between ministries and/or agencies. This section is structured on the lines of the IP: programmes, delivery systems and institutional arrangements.

4.2.1 Programmes

1. Increase social assistance to under-served groups, with a particular focus on PWDs (strategic priority 1.3)

Given that social assistance is currently substantially under-funded compared to the Sub-Saharan average (whereas social insurance is not), the recommendation is to prioritize the expansion of social assistance. Taking into account the particular gap with respect to social protection of PWDs, the launch of a disability grant is proposed as the first step in this expansion, with a nutrition grant for pregnant women and young children possibly comprising the next.

Design a harmonized disability grant



programme that provides regular, adequate cash transfers to people with disabilities (similar to the ZUPS). To promote affordability, the programme might prioritize in the first phase either children with disabilities (CWDs) or people of all ages with severe disabilities (PWSDs), or even children with severe disabilities (CWSDs), gradually expanding coverage to all people with disabilities as funds become available.

The approximate cost of such a scheme (assuming the same benefit level as ZUPS) and depending on the group targeted would be as detailed in Table 4. These costings are estimates, based on a number of assumptions detailed in the footnotes, and are presented for illustrative purposes to aid reflection and decision-making on next steps. It is notable that taken together with the 0.19 per cent of GDP spent on the ZUPS, even the more broadly targeted disability grant would still not push RGoZ spending on social assistance up to the Sub-Saharan Africa average of 1.34 per cent.

Table 4: Cost Estimates of Disability Grant

Target group	Percentage in population ¹	Number of beneficiaries ²	Transfer cost per beneficiary per year in TZS	Total cost of scheme in TZS ³	Cost as a % of GDP ⁴
All PWDs	7.3	94,900	24,000	2,505,360,000	0.7
CWDs	5.2	33,124	24,000	874,473,600	0.2
PWSDs	2.9	37,700	24,000	995,280,000	0.3
CWSDs	0.7	4,459	24,000	117,717,600	0.03

Once designed, as a first step in implementation, the available existing sources of funding (for example from the 1 per cent allocation of district resource, MLEEWC budget and DDA funds) and development partner assistance might be used to pilot a scheme in the poorest districts using the existing DDA database to identify beneficiaries. This could be seen as an expansion of the vulnerable families' fund managed by the MLEEWC, which already includes families with children with disabilities as a target group. Any scale-up beyond the pilot phase would require allocation of substantial additional financing (see below on financing social assistance).

Concurrently, it will be important to expand the existing DDA database into a comprehensive database of PWDs. As noted in Section 2, the numbers of PWDs currently in the DDA database suggest a substantial under-coverage. A key action point will be to understand the reasons for the inadequate coverage of data and to devise actions to ensure the database becomes

more comprehensive and, in particular, that the poorest and most vulnerable PWDs are included in it.

The role of MLEEWC in this effort would be to establish and facilitate the Technical Subcommittee to take forward the recommended actions, to assign responsibilities to appropriate ministries for taking forward each required action and to follow up on progress. The DDA seems to be the appropriate technical lead.

2. Finance an expansion of poverty-focused social assistance to cover families newly impoverished as a result of the COVID-19 Pandemic (new)

The poverty impacts of the COVID-19 pandemic are not yet fully known, but, given the importance of the tourism sector in the Zanzibar economy, they are likely to be substantial. It is predicted that it might take up to two years for the global tourism sector to fully recover. The pattern of poverty may

¹ For all PWDs, Zanzibar Census data is used (Government of the United Republic of Tanzania, 2016, Disability Monograph). For other groups percentages are estimated by using WHO data on global rates of disability. As noted above, numbers of PWDs in the DDA database are much lower and suggest that the data is not yet complete- hence this is not used as the source for costing.

² For population, this uses 2012 Census data, so is likely to slightly underestimate the numbers, given population growth. On the other hand, these estimates include older people, so if the decision was taken not to give disability grants to older people already in receipt of ZUPS, numbers and hence costs, would be lower.

³ Assumes delivery costs of 10 per cent of the value of transfers.

⁴ Uses 2018 GDP of TZS 3.66 billion.

also change if low-paid workers in parts of the informal sector who are directly or indirectly reliant on tourism lose work and are thrown into poverty. A survey is currently being conducted with the assistance of World Bank to assess health and economic impacts of COVID-19.

An immediate priority will be to restart PSSN transfers to households who were already poor, with a possible vertical expansion (increase in transfer level). After the beginning of this transfer, based on the results of the survey, consideration could be given to expanding the programme horizontally to shock-affected households to provide a temporary cash transfer and/or to increase transfer levels of other existing programmes (such as ZUPS if older people are found to be particularly badly affected). Depending on the groups found to be most seriously impoverished as a result of COVID-19, it might make sense to use existing databases (for example, to expand to PSSN households who just missed the cut-off for eligibility, or to 68- and 69-year-olds awaiting the start of ZUPS transfers or to people with disabilities in the DDA database). Alternatively, it may be that the profile of the most seriously affected households is very different from those covered by existing programmes and requires a new targeting exercise.

While the particular response would need to be adapted to the impacts of COVID-19, many of the processes established through such an exercise would subsequently be relevant to response to other types of shock, including climate-related ones.

The role of MLEEWC in this effort would be to establish and facilitate a Technical Subcommittee of appropriate stakeholders to take forward the COVID-19 social protection response. These are likely to include at least TASAF (Second Vice President's Office), Pensions Unit (MLEEWC), ZSSF (on informal sector urban workers) and others, as required.

An appropriate technical lead could be appointed by the group.

3. Combine support to youth livelihoods (strategic priority 1.4)

The Department of Youth, MLEEWC, TASAF and DDA all have existing programmes of support to youth livelihoods, and youth livelihood is also an RGoZ priority. Yet collaboration is reportedly limited. It would add value if these entities worked together to link existing programmes and sources of finance to respond to this challenge. There is a particular opportunity at the current time, because under the new phase of PSSN, funds for livelihoods enhancement are increasing, there is an increased focus on youth and the design of this component is yet to be finalized.

The role of MLEEWC would be to establish and facilitate a Technical Subcommittee, comprising the listed stakeholders and any others deemed appropriate. The first step would involve information sharing, followed by the identification of opportunities for joint working in pursuit of common aims regarding youth livelihoods. Again, an appropriate technical lead could be appointed by the group and this lead may or may not be MLEEWC.



4.2.2 Delivery systems

4. Link programme MISs (strategic priority 2.3 and action 1.1.1)

The aim is to more effectively manage duplications and complementarities between programmes, as well as anomalies in the available data, and potentially also to pave way for scale-up in response to shocks.

A first step would be to carry out a discrete matching exercise to match beneficiaries between programme MISs in order to: understand the extent of programme overlaps and data anomalies and identify opportunities and challenges in the creation of more systematic linkages through a single registry. Key questions to be answered by this exercise might include the following:

- (i) *ZUPS/PSSN overlap.* What percentage of PSSN beneficiary households also include an older person benefiting from the ZUPS? What percentage of ZUPS beneficiaries live in a household benefiting from the PSSN? *The purpose would be to determine what these overlaps imply for the allocation of social protection resources in relation to poverty and vulnerability.*



- (ii) *A welfare grant of TZS 5,000 and PSSN, ZUPS and disability.* Questions that might usefully be addressed are as follows: What percentage of current TZS 5,000 welfare grant beneficiaries currently reside in a household benefiting from the PSSN? What percentage of current beneficiaries of the TZS 5,000 welfare grant are aged 68–69 years and so due to move soon to the ZUPS? What percentage of current TZS 5,000 welfare grant beneficiaries are included in the DDA database of PWDs (or are known to have a disability)?
- (iii) *Civil registration data.* To what extent is data on age consistent across civil registry and various social protection programme databases? To what extent is notification of death registered in one database, consistent across others? Regarding death, a field exercise on a sample of beneficiaries of ZUPS (and possibly also PSSN) could also be useful in determining the extent to which deaths are being notified in a timely way. If many ghost beneficiaries were identified, this would indicate substantial losses to the programme from under or late reporting. In this case, it might be cost-effective to develop a system to incentivize reporting of deaths, for example through a new entitlement to a one-off funeral grant. An analysis of costs and benefits is recommended.

A second step, based on learning from the discrete matching exercise described above, could be to create a **single registry**. This would entail extracting key information from programme databases in a common format into a single database. It should enable stakeholders to know the social protection programmes from which a household is benefiting, as well as key information on the household: household structure, poverty score

of PSSN beneficiary households, and other relevant information. It would enable a clearer picture of programme overlaps and the extent of concentration of programme resources. For example, if a household member is benefiting from ZUPS, this could flag in the system and be communicated to TASAF, such that the review of eligibility for PSSN took this fact into account. This is not to say that benefiting from ZUPS should automatically bar a household from benefiting from other programmes (ZUPS alone is likely to be insufficient for a large, extremely poor household), but it would be a consideration in assessing eligibility. The registry could also facilitate targeting of complementary interventions, for example of programmes aimed at supporting the employment of youth in poor and vulnerable households.

A single registry could also have a role to play as a starting point for targeting in response to a shock, for example by enabling a rapid cash transfer to all beneficiaries of any programme in a relevant geographical area (vertical expansion). If it also included some non-beneficiaries (for example 68- to 69-year-olds in the case of ZUPS, or households that just missed the PMT cut-off in the case of PSSN), it could also have a modest role to play in supporting horizontal expansion (expansion of cash transfers to new beneficiaries in case of a shock). On the other hand, given that it would be limited to existing beneficiaries of social protection programmes, it would need to be supplemented with new targeting to enable a full horizontal expansion.

There are likely to be challenges in creating such a registry. For example, because ZUPS registers individuals and PSSN households, matching on ID would be dependent on PSSN holding complete and up-to-date ID information on all household members (though algorithms can be developed to match alternative features such as name and location). These issues would be explored by

technical experts during the discrete matching exercise phase (see above).

Some countries have gone further and developed a social registry that includes data on all or a large proportion of households, whether or not they are currently benefiting from a social protection programme. Such a database is more useful for horizontal expansion in case of shock response, but it has to be stressed that this effort requires regular dedicated data collection exercises to keep it up-to-date and useful. Given other priorities in Zanzibar, it is not recommended as a top priority at this stage.

As the social protection policy lead, the role of MLEEWC in this effort would not only be to establish and facilitate a Technical Subcommittee but also to lead (in collaboration with other members of this committee) the development of TORs for the required analytical work.

5. Establish joint programme of studies (strategic priority 2.4)

Analytical work will be needed to enable effective implementation of actions in the IP, including the design of new schemes and the ongoing improvement of existing ones. Needs for studies (including evaluations, assessments, design documents and costings) are expected to continue to emerge during the implementation period and so the list of priorities should be continually updated. The work could either be RGoZ-financed or funds could be sought from development partners; the important principle is that there would be a harmonized inter-ministerial list of priorities owned by RGoZ and shared with partners.

To give some examples of the type of analytical work that might be included in such a list: (i) The design of new schemes will need to be based on an analysis of the



costs and fiscal sustainability of introducing new schemes and how this varies for various options of coverage and benefit level. A fiscal space analysis has been contracted, which is intended to provide the government with this kind of evidence. RGoZ might want to commission further work to look more in depth at particular questions or options and once decisions on future programmes have been taken, further studies will be required to establish a detailed design of programmes. (ii) An assessment is planned into the composition and cost of a school meal for pre-primary school children to inform the development of guidelines for district-level implementors. (iii) Once the various departments involved in promoting youth livelihoods and employment have met to share information and agree a common way forward, they might want to commission studies to underpin the new harmonized

approach. (iv) Successfully making the case for increased financing of social assistance will require effective advocacy based on national and global evidence of how social assistance can contribute to national development goals. So analytical work might perhaps include the commissioning of an appropriate policy brief to support advocacy for the programmes.

It has to be made clear that this list is merely illustrative. The list of key studies to support IP action should be drawn up by social protection stakeholders across ministries and then modified and agreed at each quarterly meeting of the Technical Committee.

The role of MLEEWC would be to propose a list of studies (based on the IP) and to share this with other stakeholders in advance of meetings of the Technical Committee, such that it could be debated and modified at each meeting of the Technical Committee.

6. Strengthen district-level coordination (strategic priority 2.6)

While there is active coordination between MLEEWC and CSOs at national level, this does not seem to have yet filtered down to the district level. In practical terms, when vulnerable people are present at the district level, SWOs do not always know to where to refer them for support. The purpose would not necessarily be to set up formal coordination structures at the district level but rather to devise effective mechanisms to overcome the current practical challenges, such that vulnerable people presenting themselves to SWOs (or other district staff) are in future more likely to be appropriately referred to an organization that can support them.

The proposed way forward is to set up a Technical Subcommittee (possibly virtual), facilitated by MLEEWC and led by PO – RALGSD, with involvement of representatives of several units in district offices – SWOs,

as well as Cross-Cutting Officers and PSSN staff – in order to devise mechanisms that are practical and appropriate in the district context.

4.2.3 Institutional arrangements

7. Develop and implement a financing strategy for the social protection system (strategic priority 3.4)

Increased overall financing will be required if a comprehensive system is to be built. The financing strategy could largely draw on the ongoing Fiscal Space Analysis, as well as the detailed Social Protection Budgetary Analysis carried out in 2018, and this evaluation. Successful advocacy for increased financing will require highlighting the positive impacts of existing and potential programmes and how these contribute to national development goals. (As noted above, this might require commissioning analytical work to develop an appropriate policy brief for IMTC.)

The role of MLEEWC would be to lead the development of the financing strategy and then successfully advocate to MOFP for increased allocations to social assistance.

8. Operationalize the ZSPC coordination structures as described in the IP (strategic priority 3.2)

This is the only priority not expected to require a subcommittee of the Technical



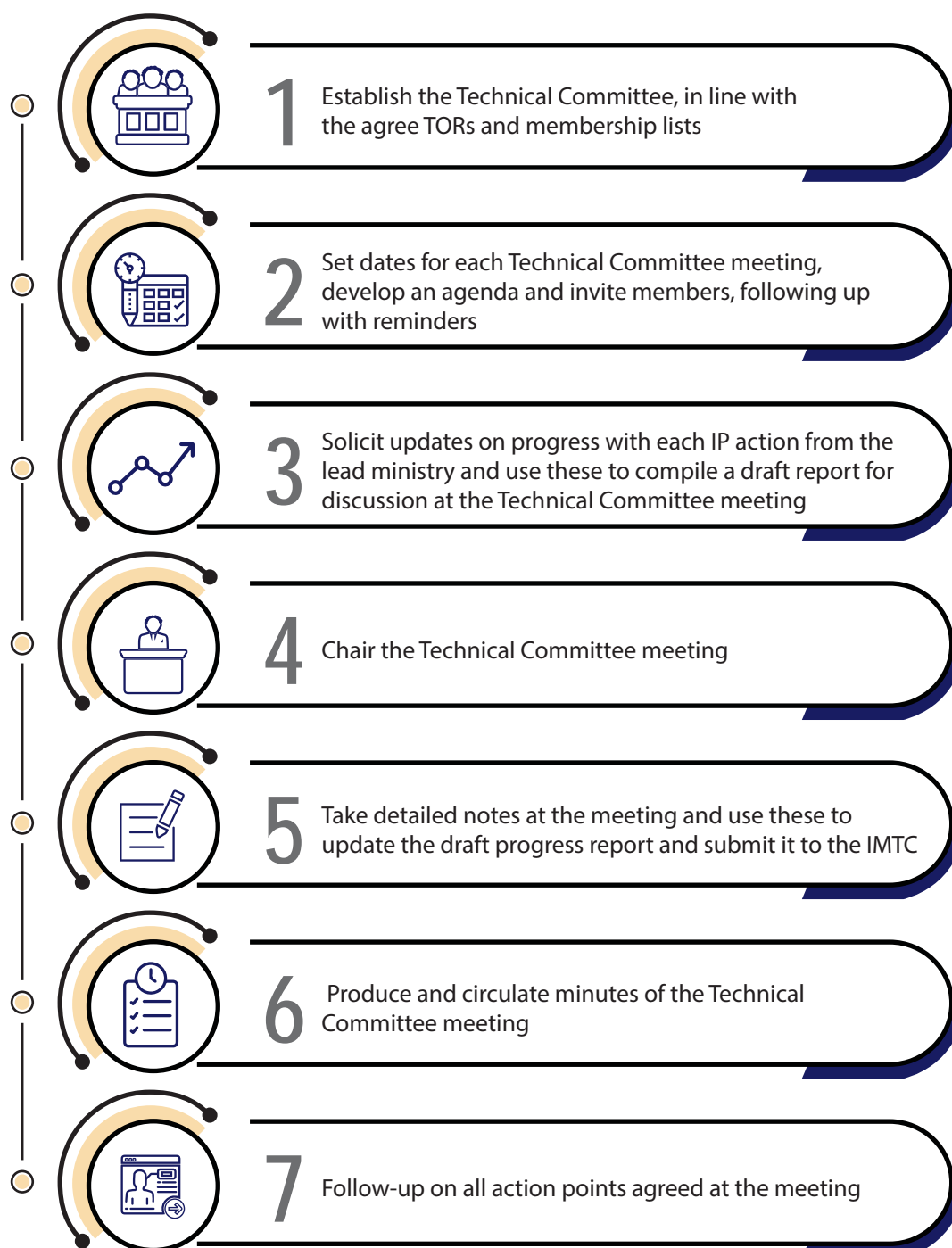
Committee to take forward, as it is already clearly the role of MLEEWC to do so.

A key priority is the establishment of coordination mechanisms to take forward implementation of the ZSPC IP. According to consultations, the arrangements set out in the validated IP are still relevant. These involved two levels: (i) high level – social protection to be a standing item on the agenda of the IMTC, such that policy issues are discussed and decisions taken whenever required and (ii) technical level – a Technical Committee established at the Director level. Every quarter, the MLEEWC will collect reports from each stakeholder on progress against the IP action(s) for which they have lead responsibility and then hold a meeting of the Technical Committee to review these reports and prepare a summary progress report to be submitted to the IMTC. The formation of the Technical Committee should be the foremost priority of the new IP.

A further dimension of the coordination mechanisms mentioned in the IP was the creation of ad hoc subcommittees of the Technical Committee to take forward workstreams that required concerted collaborative action in a smaller group. It is proposed that a subcommittee needs to be formed to take forward each of the recommendations listed here, and that new subcommittees may be created by the Technical Committee to address new priorities as they emerge.

The role of MLEEWC in relation to the IMTC would be: (i) to remind the IMTC of the commitment to have social protection as a standing point on the agenda; (ii) to highlight key strategic social protection issues to the IMTC as they arise (for example to present highlights from the current evaluation and the revised IP); (iii) to submit quarterly progress reports to the IMTC, highlighting key strategic issues for their consideration.

Role of MLEEWC in relation to Technical Committee



The role of MLEEWC in relation to the Subcommittees of the Technical Committee would be to establish these informal committees and to attend and facilitate their meetings, following up and ensuring that the

work is progressing as planned. On some issues, the MLEEWC would also be the technical lead, but on others this role would fall on a different ministry.

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Annexure 1: TORs

CONCEPT NOTE

MID-TERM EVALUATION OF THE SOCIAL PROTECTION POLICY IN ZANZIBAR

SUMMARY

Title	Evaluation of the Zanzibar Social Protection Policy
Purpose	To evaluate the implementation of the social protection policy and implementation plan, to recommend areas for focused improvements and to develop an action plan for the next 5–10 years.
Location	Zanzibar
Duration	40–50 days
Start Date	December 2019 or January 2020
Reporting to	UNICEF Social Policy Specialist, Zanzibar and Director for Elders and Social Welfare, Zanzibar Ministry of Labour, Employment, Elders and Children.

BACKGROUND & RATIONALE

According to the 2012 Census, the population of Zanzibar consists of 1.3 million people, living in 252,000 households; and the Zanzibar Household Budget Survey 2014–15 shows the poverty situation to be as follows:

- ❁ **11 per cent of the population lives below the food poverty line; and 30 per cent below the basic need poverty line.** Food insecurity is also widespread: only 51 per cent of the population is food secure.³²
- ❁ Certain households are much more likely than others to be poor:
 - **Larger households are much more likely to be poor than smaller households.** The average household in

Zanzibar has 5.6 members. Less than 3 per cent of single person households are poor, compared to 56 per cent of households with 10 or more members.

- **Basic needs poverty and food poverty are both much higher in rural areas.** Basic needs poverty is 40 per cent in rural areas, compared to 18 per cent in urban ones; food poverty is 16 per cent in rural areas and 5 per cent in urban centres.
- **Poverty is geographically concentrated.** Poverty is much higher in Pemba than Unguja. Across Zanzibar's 11 districts, the basic needs poverty headcount ranges from a low of 15 per cent (Magharibi A and B districts Unguja) to a high of 69 per cent (Micheweni district Pemba).

³² Please see OCGS (2016). Zanzibar Household Budget Survey 2014–15, p. 5 for a full explanation of how the food poverty and basic needs poverty lines are calculated, and pp. 106–7 for a discussion of the definition and calculation of food security.

It is clear that the persistence of poverty and food insecurity is not due to weak overall economic growth – growth in Zanzibar has actually been rather strong in recent years. However, growth has not been particularly pro-poor: it has been concentrated in the service sectors, especially tourism, which have weak linkages with other sectors and do not generate much employment for local people. Growth in the sectors that are most important to the livelihoods of poor people, such as agriculture, has been much weaker. Reductions in poverty between 2009–10 to 2014–15 have been driven by improvements in urban areas of Unguja. Pemba has not seen poverty reduction during this period.

INTRODUCTION

POLICY

The Zanzibar Social Protection Policy (ZSPP) was approved by the government in 2016. The long-term vision is that all Zanzibaris will have a decent and dignified quality of life, reduced vulnerability to poverty and shocks, and equal opportunities to participate in the socioeconomic development of Zanzibar.

It is envisaged that this will be accomplished by pursuing the following four objectives:

- ✿ *to contribute to minimum income security;*
- ✿ *to provide adequate protection against life-course shocks and livelihood risks;*
- ✿ *to extend access to basic social services, for all citizens and residents of Zanzibar; and*
- ✿ *to strengthen multisectoral coordination of all stakeholders working on social protection.*

SOCIAL PROTECTION PROGRAMMES

The Ministry of Labour, Empowerment, Elders, Women and Children (MLEEWC) is

the Ministry responsible for social protection. The Social Protection Unit sits within the Department of Elders and Social Welfare. The Ministry implements one of two flagship social assistance programmes in Zanzibar, the Zanzibar Universal Social Pension (ZUSP), which targets all elders over the age of 70 and was initiated in 2016. The ZUSP currently has 27,000 participants.

The Second Vice President's Office (2VPO) manages the coordination of the Productive Social Safety Net programme which has been implemented since 2014. It is the largest social assistance programme in the United Republic of Tanzania, and which reaches 34,000 households in Zanzibar. The 2VPO also manages the Department of Disability Affairs which is managing the Disability Fund, which provides loans and grants for assistive devices for people with disabilities.

Other non-contributory social protection programmes include:

- ✿ social care programmes (orphanages, elderly homes) run by MLEEWC;
- ✿ school feeding, run by the Ministry of Education and local government authorities; and
- ✿ labour market programmes run by MLEEWC.

A recent Social Protection Public Expenditure Review (June 2018) has indicated that in 2017, social protection spending was equivalent to 1.62 per cent of GDP with social insurance receiving the bulk (1.07 per cent) followed by social assistance – with 0.54 per cent – made up of PSSN and ZUSP. Social protection spending has doubled between 2012 and 2015. This is due to an increase in social assistance.

COORDINATION & MONITORING

The implementation of the social protection plan was collated in 2014 and its implementation was envisaged for

the five-year period from 2017 to 2022. The implementation plan includes many different stakeholders from across different government institutions.

The Social Protection Policy envisages coordination at policy and technical level. A Zanzibar Social Protection Steering Committee (ZSPSC) is expected to guide, coordinate and oversee the implementation of the policy and its implementation plan; and to ensure proper enforcement mechanism of the legislation is in place. This body is to be chaired by the 2VPO and composed of all relevant ministries and institutions. It has not been established at the time of drafting these ToRs.

Currently the coordination of the policy lies with MLEEWC, which has taken the initiative to establish a coordination group made up of key implementors (from social insurance to social assistance and social care) that meets on a quarterly basis in Pemba and Unguja.

EVALUATION PURPOSE

The Social Protection Unit in MLEEWC has expressed an interest and requested UNICEF to commission an evaluation of the policy and implementation plan given that it has been five years since the policy was approved and three years since implementation started in 2016–17. The evaluation will be managed by the Director for Elders and Social Welfare with support from the Social Protection Unit and UNICEF, which will contract a consultant. The present TORs outline the main parameters and scope of work for this evaluation.

The purpose of the evaluation is to provide a space for reflection for social protection stakeholders on social protection in Zanzibar and to examine the implementation of the policy five years after it was approved. It is expected to result in a revised implementation plan as well as recommendations on how the social protection sector can develop over the next 5–10 years.

EVALUATION OBJECTIVE

The objective of this assignment is to review and evaluate the implementation of the social protection policy and implementation plan, propose potential areas of development of the social protection system and revise & update the implementation strategy and M&E framework.

SCOPE OF THE EVALUATION

The main objectives for this assignment are to:

1. Assess whether the policy remains consistent with the needs of the key target groups; and to what extent existing social protection programmes are contributing to achievement of the policy's objectives and reaching intended target populations.
2. Take stock of progress made and identify lessons learned with the implementation of the social protection implementation plan and the functioning of the social protection system and propose potential expansion of existing and establishment of new schemes/programmes.
3. Map and assess current mechanisms and capacity for coordination of social protection at national and sub-national levels.
4. Make recommendations regarding reforms to the social protection programmes framework to expand and deepen social protection coverage in line with the policy's objectives and strategic direction.
5. Recommend and facilitate preparation of an action plan for the second half of the social protection implementation plan, including scenarios for expansion and deepening of existing and new schemes, potential review of the M&E framework, and actions to strengthen social protection coordination.

METHODOLOGY AND SCOPE OF THE ASSIGNMENT

The individual consultant is expected to propose a detailed methodology that would be most suited to the assignment. The approach will combine desk-based review, interviews with key stakeholders and participatory workshops to obtain inputs and validation of the draft report and develop a new implementation plan.

The key outputs of the assignment include:

- Inception report & presentation
- Evaluation report & presentation
- Action plan and new M&E framework

TASKS, DELIVERABLES AND TIME FRAME

The specific tasks of the consultant will include:

- a. Reviewing the existing documents: social protection policy and implementation

plan, programme impact evaluations, social protection budget analysis, ZUSP impact evaluation, the Zanzibar Household Budget Survey and the PSSN impact evaluation.

- b. Developing an inception plan, carrying out a stakeholders' consultation and field visit
- c. Interviewing key stakeholders in Unguja and Pemba
- d. Preparing a draft evaluation report & PowerPoint presentation
- e. Presentation of key findings, recommendations and proposed action plan to MLEEWC and stakeholders and collation of feedback
- f. Incorporate feedback to the evaluation report
- g. Present final evaluation report with proposed action plan and M&E framework

The full assignment shall take between 40 and 50 working days (including three visits to Zanzibar – in the event of a consultant based in Mainland Tanzania) from the date of signing the contract. The consultant shall provide the following deliverables:

Phase	Activity details	Deliverables	Time frame
Phase 1	<p>Remotely:</p> <ul style="list-style-type: none"> • Consultations with key social protection stakeholders on scope of the evaluation • Develop an inception plan detailing key approach, timeline and tools needed • Reviewing the existing documents: social protection policy and implementation plan <p>Zanzibar trip 1:</p> <ul style="list-style-type: none"> • Present inception report • Key informant interviews with key social protection stakeholders • Carrying out a stakeholders' consultation 	<p>Approved Inception report by UNICEF and MLEEWC management</p> <p>(Deliverable 1, 20%)</p>	5 –10 days

Phase	Activity details	Deliverables	Time frame
Phase 2	<p>Remotely:</p> <ul style="list-style-type: none"> Preparing a draft evaluation report & PowerPoint presentation <p>Zanzibar trip 2:</p> <ul style="list-style-type: none"> Presentation of key findings/validation to MLEEWC and stakeholders and collation of feedback 	<p>Draft evaluation report</p> <p>(Deliverable 2, 40%)</p>	30 days
Phase 3	<p>Remotely:</p> <ul style="list-style-type: none"> Incorporate feedback to the evaluation report <p>Zanzibar trip 3:</p> <ul style="list-style-type: none"> Present final evaluation report with proposed action plan 	<p>Final Evaluation report & presentation</p> <p>(Deliverable 3, 40%)</p>	5 –10 days

MANAGEMENT AND ACCOUNTABILITY

The consultants shall carry out the assignment under the joint supervision of the Director of the Department of Elders and Social Welfare, and UNICEF Chief of Zanzibar Field Office. Day-to-day management will be carried out by Social Policy Specialists in Zanzibar. It is expected that key deliverables will be reviewed by Social Protection Steering Committee.

QUALIFICATIONS AND EXPERIENCE REQUIRED

This assignment requires an **international individual consultant with experience in East Africa**. The consultant should have the following qualifications and experience

- Advanced degree in social sciences and or other relevant fields of study;
- Minimum of 10 years of documented experience in research and evaluation of social protection programmes in East Africa;

- Good knowledge of the social protection landscape of Tanzania is an asset;
- Demonstrated experience working closely with stakeholders such as government ministries and donors;
- Experience in developing and implementing an M&E framework is required;
- Strong track record of successfully completed similar assignments;
- Excellent writing and presentation skills; and
- Ability to communicate and conduct interviews and facilitate workshops in English

PAYMENT SCHEDULE

Payments will be made upon submission and acceptance of the specified deliverables in the table above. *Final payment to a consultant is dependent on the completion of deliverables.* UNICEF reserves the right to withhold all or a portion of payment if performance is unsatisfactory, if work/output is incomplete, not delivered or for failure to meet deadlines.

ASSESSMENT/ SELECTION PROCESS AND METHODS

Interested consultant will be assessed on the basis of CV and financial proposal submitted.

GENERAL CONDITIONS: PROCEDURE AND LOGISTICS

- The consultant will be expected to provide his/her own materials such as computer and office supplies, except in the event of a consultation workshop.
- The consultant will not have authorized access to UNICEF transport, except where accompanied by a UNICEF staff.
- The consultant should conduct this assignment remotely, with the exception of visit to Zanzibar required for consultations and workshops (for list of detailed visits, refer to TASKS, DELIVERABLES AND TIME FRAME section above).
- The consultant will be entitled to DSA when travelling in Zanzibar. Flight costs will be covered (economy class). Daily Subsistence Allowance DSA comprises, for this purpose, the total contribution of UNICEF towards such charges as meals, overnight accommodation, gratuities, intra-urban transportation and other payments made for personal services rendered to the Consultant for the duration of the assignment.

POLICY BOTH PARTIES SHOULD BE AWARE OF:

- Under the consultancy agreements, a month is defined as 21 working days, and fees are prorated accordingly. Consultants are not paid for weekends or public holidays.
- Consultants are not entitled to payment of overtime. All remuneration must be within the contract agreement.
- No contract may commence unless the contract is signed by both UNICEF and the consultant or Contractor.
- For international consultants outside the duty station, signed contracts must be sent by fax or email. Signed contract copy or written agreement must be received by the office before Travel Authorization is issued.
- No consultant may travel without a signed travel authorization prior to the commencement of the journey to the duty station.
- Unless authorized, UNICEF will buy the tickets of the consultant. In exceptional cases, the consultant may be authorized to buy their travel tickets and shall be reimbursed at the "most economical and direct route" but this must be agreed to beforehand.
- Consultants will not have supervisory responsibilities or authority on UNICEF budget.
- Consultant will be required to sign the Health statement for consultants/ Individual contractor prior to taking up the assignment, and to document that they have appropriate health insurance, including Medical Evacuation.
- The Form 'Designation, change or revocation of beneficiary' must be completed by the consultant upon arrival, at the HR Section.

RESERVATIONS

The consultant should respect the confidentiality of the information obtained during the assignment. S/he can use documents and information provided only for

the tasks related to these terms of reference. The consultant shall adhere to [UNICEF Procedure for Ethical Standards in Research, Evaluation and Data Collection and analysis](#) (effective from 1 April 2015).



Annexure 2

Stakeholders consulted

Individual	Organization
Fatma Gharib Bilal	Principal Secretary, MLEEWC
Khamis Khamis Ali	Acting Labour Commissioner, MLEEWC
Aisha Abbas Seif	Head of Pension Unit, MLEEWC
Mwanaidi	Director, Department of Youth
Dampu Ndenzako	ILO
Saida Adam, Makame Ali Haji and Ibrahim Khalid Abdulla	TASAF
Said Ali and Hassan Ali	Waqf and Trust Commission
Maha Damaj	UNICEF
Masoud Mrisho Sheha	Workers' Compensation Fund
Ali Maulid and Maryam Kheis	President's office Regional Administration, Local Governments and Special Departments (PORALGSD)
Khamis Shibu	Director, Fiscal and Financial Policy Department Ministry of Finance and Planning
Wahida Maabad Mohammed	Director, Elders & Social Welfare, MLEEWC
Attiye J. Shaame	Director of Planning, Policy and Research, Ministry of Health
Sheikha Mohamed Ramia	Former Acting Head of Social Protection Unit, MLEEWC
Sabra Machano	Managing Director, ZSSF
Haji Faki, Hamdani, Haji Ame Haji, Abbas Juma Haji and Thureya Gharib Mussa	Disaster Management Commission
Mwanabaraka Saleh Sheha	CSO registration, PORALGSD
Hamad Massoud	Ministry of Agriculture
Issa Zahran, Shaaban Abdalla and Rahma Kassim	Zanzibar Civil Status Registration Agency
Zuhura Abdalla Alli and Sabra Mwin'juma Mgeni	Social Welfare Officer and Women and Children Officer, Magharibi A District
Safia Rijal	Director, Pre & Primary Education, Ministry of Education and Vocational Training
Abeida Rashid	Director, Department of Disability Affairs

Annexure 3

Summary of progress to date

Table 1 summarizes progress to date against the strategic priorities in the IP and against priority actions that were planned for completion either by June 2017 or June 2018. Other actions, due for completion by June 2022, have been excluded from this summary for simplicity.

Activities colour-coded green (horizontal stripe) had been completed by the date of the assessment in February 2020. Those coded red (downward stripe) had not been completed. Those in blue (with dots) had not been completed either, but were identified

by stakeholders as no longer relevant due to changes in the context. The ones in orange had either been partially completed, or, despite not yet being completed, showed promising signs of being completed soon.

As for strategic priorities, here green signifies that overall good progress has been made and that with continued effort the intended progress should be made by 2022. Those in orange have seen only limited progress and a substantial intensification of effort will be required to get them back on track. Those in red have seen little or no progress since 2017.

Table 1: Progress against the IP strategic priorities and actions

Action	Progress to date
Level 1 : PROGRAMMES	
Programmes that contribute to minimum income security	
Strategic Priority 1.1: The universal pension for older people is effectively implemented and sustained, ensuring full coverage of the target group and regular and timely payments	
1.1.1 MIS. Establish a comprehensive database and registration system that captures key information on beneficiaries and payments and that is compatible with other key MIS.	
1.1.2 Capacity building. Based on the findings of the overall capacity assessment (action 3.3.4 below), ensure sufficient capacity for delivery. Likely to involve:	
(a) Building the Pension Unit's skills through technical assistance and coaching	
(b) Providing additional staff at national and district levels	
(c) Ensuring adequate running costs budget at district level	
1.1.3 Training. To ensure that all staff involved in programme delivery or oversight of the universal pension have a thorough understanding of the operational manual, address any training gaps, with a particular focus on staff working at sub-national levels.	
1.1.4 Review of the Universal Pension Operational Manual	
(a) Carry out a functional review of the first-year delivery of the universal pension, review policy options and assess social impact.	

Action	Progress to date
(b) Based on findings, review and refine the operational manual. Print and disseminate final version.	
1.1.5 Delivery of pensions. Deliver regular, timely payments of TZS 20,000 per month to all registered older people	
1.1.6 Harmonization. In order to improve effectiveness, efficiency and transparency, either:	
a) Abolish the TZS 5,000 benefit and reallocate resources to the universal pension; or	
b) Harmonize all systems of the TZS 5,000 welfare grant (including beneficiary identification, registration, payments, complaints, and M&E) with the new universal pension systems.	
Strategic Priority 1.2: Coverage of extremely poor households with regular, timely and adequate cash transfers and public works is progressively expanded; and associated behavioural change activities are strengthened	
1.2.1 TASAF cash transfers. Provide cash transfers to 34,000 extremely poor households in Zanzibar through TASAF	
1.2.2 Public works. Make appropriate public works available to extremely poor households with labour, through TASAF and other programmes	
1.2.3 Complementary measures	
(a) Collaboratively design: (i) Enhanced community sessions at TASAF pay points, (ii) 'equity nexus' which entails establishing a link between TASAF and large-scale stunting reduction programmes	
(b) start roll out (phased approach) of enhanced community sessions and equity nexus	
1.2.4 MVC identification. Assess effectiveness of MVC identification exercise, and promote integration with TASAF registry and other social protection programmes.	No longer relevant
Strategic Priority 1.3: Social protection for vulnerable people with disabilities is strengthened	
1.3.1 Disability training. Train existing disability focal persons in ministries involved in social protection, and social protection key staff, on disability-sensitive social protection.	
1.3.2 Disability mainstreaming. Review the disability sensitivity of existing social protection programmes, identify any key gaps and articulate concrete recommendations for improvements.	
(a) Review disability sensitivity of TASAF in Zanzibar and make suggestions for enhanced mainstreaming.	
1.3.3 Disability advocacy. Create task force/pressure group (CSOs, FBOs, private sector, DSW, and UWZ,) to advocate for the operationalization of the Disability Fund in line with the provisions of the Disability Act.	
Strategic Priority 1.4: Poor households with labour are linked to appropriate livelihood opportunities, such that those who can sustainably move out of poverty do so	
1.4.1 TASAF livelihoods. Design, pilot and roll out TASAF livelihoods component, including youth interventions. All stakeholders engage to ensure that the component is designed in a way that links to and builds on existing livelihoods services in Zanzibar.	
Programmes that provide adequate protection against life-course shocks and livelihood risks	

Action	Progress to date
Strategic Priority 1.5: Effective support provided for individuals and households affected by disasters	
Strategic Priority 1.6: The coverage of contributory social security and the range of benefits offered are expanded; and the long-term viability of schemes is ensured	
1.6.1 Employer compliance. Step up efforts (legal action) to enforce compliance by all employers with existing ZSSF Act No. 2 2005 on registration, contributions, benefit payments, through increased legal action against the non-compliant.	
1.6.2 Informal sector. Conduct awareness campaigns aimed at encouraging informal sector workers to join the ZSSF schemes and strengthening compliance of employers, through media campaigns (TV and radio spots) and public meetings	
1.6.3 Social health insurance. Establish a social health insurance scheme	No longer relevant
1.6.4 Scheme viability. Review the contribution amounts and benefits for members and employers and improve investment performance to ensure long-term viability of ZSSF schemes	
1.6.5 Maternity benefits. Review level of maternity benefits provided to ZSSF members, with a view to increasing adequacy	No longer relevant
Programmes that extend access to basic social services	
Strategic Priority 1.7: Access to pre-primary, primary and secondary education increased for the most vulnerable children and for children with disabilities	
1.7.1 School feeding. Scale up pre-primary and primary school feeding programmes (targeting poorest areas first)	
1.7.2 School dropout. Based on studies into why children drop out of school:	
(a) Design a multisectoral response plan	
(b) Implement under this strategy the social protection elements of the plan	
Strategic Priority 1.8: Access to health services improved for the very poor and vulnerable, especially young children, pregnant women and older people	
1.8.1 Health-care cost-sharing. Ensure that the Bill on cost-sharing adequately considers exemptions for those unable to pay. Enforce agreed exemptions.	No longer relevant
Level 2: DELIVERY SYSTEMS	
Strategic Priority 2.1: Targeting systems are more effective, and are harmonized where appropriate	
2.1.1 Targeting systems. Develop and use a common approach for targeting extremely poor households	
(a) Carry out an analysis of the targeting effectiveness and appropriateness of existing targeting systems (especially TASAF, MVC identification)	
(b) Design common targeting approach	
Strategic Priority 2.2: Payments systems ensure the right amount of cash always reaches the right recipient at the right time.	
2.2.1 Payments systems	

Action	Progress to date
(a) Review payments options and decide on most appropriate payment(s) system(s) for programmes and how these can be harmonized; (b) Implement agreed new payment systems	No longer relevant
2.2.2 Controls. Ensure that robust systems of financial control, verification and spot checks are in place for all social protection programmes (including the new universal pension); and that annual audits are conducted.	
Strategic Priority 2.3: Effective systems for managing and sharing information established.	
2.3.1 In the short-term (manual sharing)	
(a) Share appropriately the beneficiary lists of key programmes (TASAF, universal pension, CSO programmes) between the Shehya-level committees involved in targeting of different social protection programmes.	
(b) Issue guidance and provide training to all committees on how to avoid unintended duplication and promote complementarities (clarify which overlaps are acceptable/ desirable and which not) and on confidentiality protocols.	
2.3.2 In the medium term (electronic sharing)	
(c) Develop MISs for each major programme (universal pension, health fee exemptions, MVC programming) ensuring that they are compatible	
Strategic Priority 2.4: Evolution of the social protection system underpinned by solid analysis, research and M&E	
2.4.1 Planning, monitoring and evaluation. Enhance and finalize the draft social protection monitoring and evaluation framework set out in chapter 3 of this plan, including a set of core indicators and targets, and clear data sources.	
2.4.2 Reporting. Produce quarterly and annual progress reports against implementation plan and logframe to an agreed format, highlighting where progress is on/off track, why and remedial actions proposed – and share	
2.4.3 Research plan. Develop and implement a multi-year rolling research and evaluation plan that responds to key identified priorities, including issues that emerge from ongoing monitoring	
Strategic Priority 2.5: The social protection system is accountable to all citizens, including the extremely poor and vulnerable people it serves.	
2.5.1 Accountability. Develop common mechanisms to hold the social protection system to account to communities and beneficiaries:	
(a) Carry out a study to decide on the appropriate methodologies (e.g. independent complaints and grievance mechanisms, community report cards, citizen score cards. etc.)	
(b) Design the mechanism(s) and train those involved in implementation	
(c) Effectively implement the agreed mechanism(s), and ensure that issues so identified are followed up and feedback provided to communities/individuals as appropriate	
Strategic Priority 2.6: Social protection impacts of CSO activities strengthened	
2.6.1 CSO registration and reporting. Strengthen registration and reporting by CSOs (NGOs, CBOs and FBOs)	

Action	Progress to date
(a) Engage with the Zanzibar Business and Property Registration Agency (ZBPRA) on CSO registration and reporting to ensure that the new MIS and reporting requirements address the information needs of the social protection sector.	
(b) ZBPRA to strengthen compliance with CSO reporting requirements.	
(c) In collaboration with ZBPRA, districts to introduce a new district-level CSO registration and reporting requirement.	
2.6.2 CSO coordination. Strengthen coordination of CSO activities:	
(a) Strengthen the existing MLEEWC Forum for FBOs and CSO's, by more clearly defining roles, regulations, TORs, and membership; and encourage districts to set up similar coordination forums.	
(b) Invite CSOs to choose representatives to participate in the Social Protection Technical Working Groups and Subcommittees, the role of which would be to represent all CSOs and feed back to all CSOs active in the sector.	
Level 3: INSTITUTIONAL ARRANGEMENTS	
Strategic Priority 3.1: Relevant legal and policy frameworks developed and enforced.	
3.1.1 Legal framework. Develop a legal framework for Social Protection for Zanzibar	
Strategic Priority 3.2 Social protection steering committee and technical committees are established and active.	
3.2.1 Coordination arrangements. Establish Committees, all of which have clear TORs and membership lists	
- High-level: Social Protection as Standing Point on IMTC	
- Technical Committee at Director level responsible for ensuring implementation of this plan	
3.2.2 Put in place a secretariat responsible for servicing the committees: organizing meetings, preparing agendas, writing minutes, following up on action points and ensuring work is taken forward between meetings.	
3.2.3 Hold regular, well-structured and minuted meetings:	
- Steering Committee – twice per year	
- Technical Committee – four times per year	
Strategic Priority 3.3: Appropriate capacity and skills available to build the social protection system and to effectively deliver, oversee, monitor and evaluate programmes.	
3.3.1 Capacity assessment. Develop a medium-term staffing plan and capacity building strategy to ensure sustainable capacity in the sector.	
3.3.2 Staffing. Increase number of qualified staff in Social Protection Unit and provide appropriate training to ensure the Unit has the sustainable capacity to undertake all the actions assigned to it in this implementation plan	
3.3.3 Training. Address training gaps in all staff with key roles in social protection at national and district levels.	

Action	Progress to date
Strategic Priority 3.4: Sustainable financing for the envisaged system ensured, including through increased RGoZ contribution to social protection.	
3.4.1 Budgeting. Review the social protection function in the RGoZ budget and align it with the definition of social protection in the ZSPP. Cost existing commitments, including the social pension. Then track social protection spending each year.	
3.4.2 Financing strategy. Based on an analysis of the context, devise and implement a sustainable financing strategy, to include:	
- re-allocation of existing social protection expenditures to increase impact (e.g. from existing TZS 5,000 welfare grant to new universal pension)	
- strategic, sustainable and cost-effective investments in systems and capacity building	
- prepare a fiscal space analysis	
- targeted fund-seeking from DPs	
3.4.3 Communications	
(a) Communications strategy to build public and political support for social protection	
(b) Deliver social protection information/training sessions to senior decision makers, including politicians and senior civil servants, in order to increase understanding of and support for social protection.	
3.4.4 Zakat and Sadaqat Funding. Strengthen funding for social protection through Zakat and Sadaqat	
(a) Work with religious leaders to strengthen awareness of zakat and sadaqat obligations, and to promote increased contributions through introduction of more user-friendly collection mechanisms	
(b) Support the Waqf and Trust Commission to strengthen: their systems for beneficiary selection, data management and reporting on use of funds; and their capacities at national, district and shehia levels.	
3.4.5 RGoZ funding. On the basis of this implementation plan, advocate for increased funding for the financial year 2017/18, to ensure that planned activities can be implemented	

Not completed

Partially completed or completion likely soon

Completed

No Longer Relevant



REVOLUTIONARY GOVERNMENT OF ZANZIBAR