



# YOUR RIGHTS OUR VISION

2020 Highlights: Looking back....moving forward  
UNFPA in Tanzania





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# FOREWORD



It has been a remarkably difficult, very sad – and different year. By early 2020, people all over the world were forced to contend with a new normal – lockdowns, rules on masks and restrictions on movement. The world suddenly felt a much smaller, but much more interconnected place, and the strong sentiments of leaving no one behind, integral to the 2030 Agenda for Sustainable Development, were thrust firmly into the spotlight.

The COVID-19 pandemic arrived in Tanzania in early March 2020 with the Government of the United Republic of Tanzania introducing measures to mitigate the spread of the virus, closing schools and universities. Public gatherings were also limited and international flights were suspended, although the government stopped short of a nationwide lockdown.

We responded swiftly – our mission remained the same – to ensure that the sexual and reproductive health and reproductive rights of women and girls and young people were protected. That progress made towards global goals, UNFPA's three zeros – zero unmet need for family planning, zero preventable maternal deaths and zero gender-based violence and harmful practices by 2030 – and the Programme of Action of the International Conference on Population and Development (ICDP) did not stall.

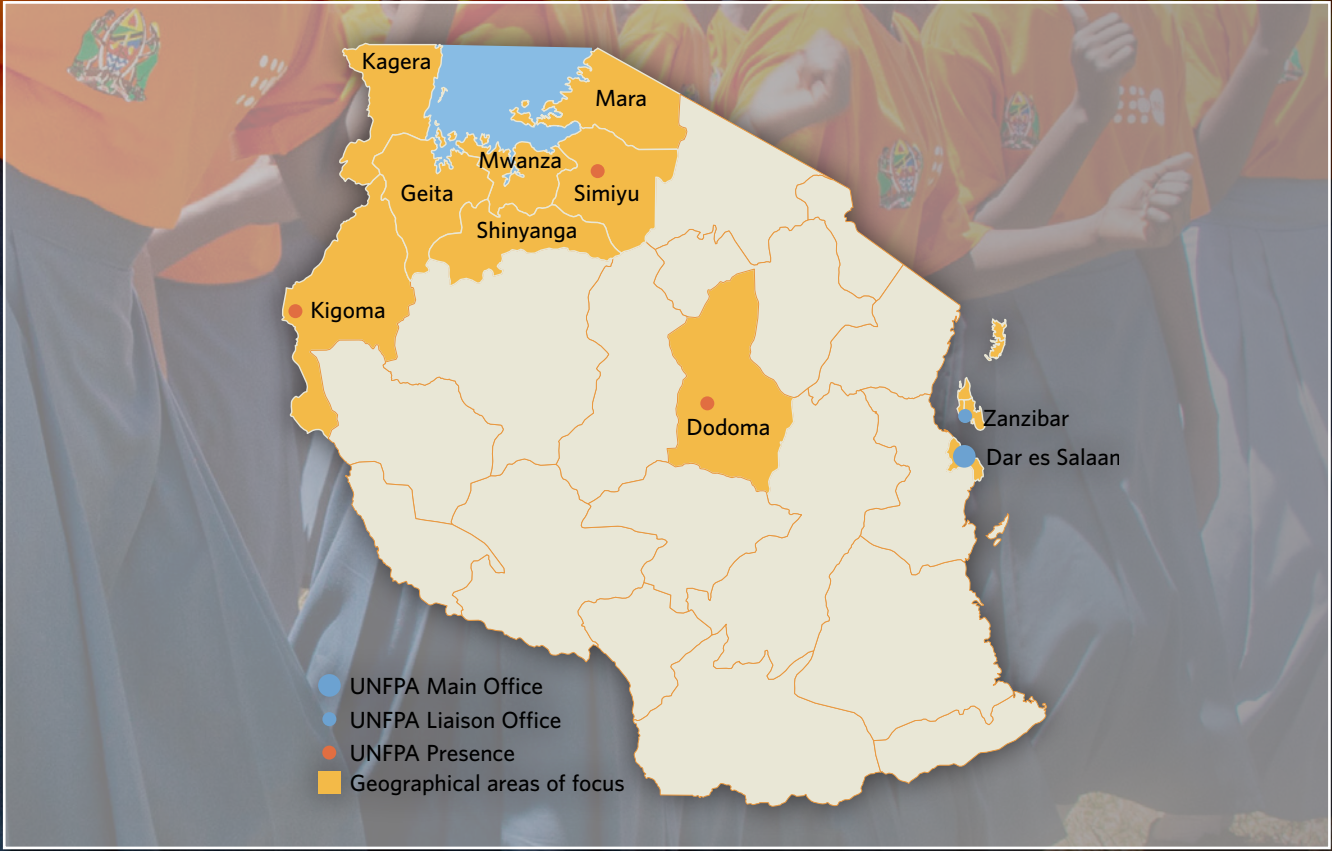
Looking forward to 2021, there can be no doubt that the pandemic has made the road ahead more challenging, but in this Decade of Action on the Sustainable Development Goals we will continue to work in support of the Government of the United Republic of Tanzania, and with our partners, to do more – and to do it better – to deliver on our collective vision for 2030. A better and more equal world for women and girls and young people; a world where every woman and girl and young person has control over their bodies and real rights and choices.

These are the promises we have made to women and girls and young people in the ICPD Programme of Action. They are counting on us to keep them.

**Ms. Jacqueline Mahon**  
UNFPA Representative, United Republic of Tanzania

# WHERE WE WORK

|   |  |
|---|--|
| <b>24,698,534</b><br>Total population in programme areas <sup>1</sup> | <b>3,549,431</b><br>(14%)<br>women (15 to 49 years)      |
| <b>4,087,732</b><br>(16%)<br>adolescents and youth (19 to 24 years)   | <b>244,367</b><br>refugees in Kigoma Region <sup>2</sup> |



The designations employed and the presentation of material on this map do not imply the expression of any opinion whatsoever on the part of the United Nations concerning the legal status of any country, territory, city or area or its authorities, or concerning the delimitation of its frontiers or boundaries.

<sup>1</sup> National Population Projections. February, 2018. National Bureau of Statistics, Ministry of Finance and Planning, Dar es Salaam Office, and Office of the Chief Government Statistician, Ministry of Finance and Planning, Zanzibar. 2012 Population and Housing Census. Population Distribution by Administrative Area, March 2013. National Bureau of Statistics, Ministry of Finance and Planning, Dar es Salaam Office and Office of Chief Government Statistician, President's Office, Finance, Economy and Development Planning, Zanzibar.

<sup>2</sup> UNHCR Tanzania Refugee Situation Statistical Report – camp-based population. 31 January 2020.





# ONE VISION FOR 2030 THREE ZEROS



**ZERO UNMET  
NEED FOR FAMILY  
PLANNING**



**ZERO PREVENTABLE  
MATERNAL DEATHS**



**ZERO GENDER-BASED  
VIOLENCE AND  
HARMFUL PRACTICES**

## Accelerating the promise of Cairo at the Nairobi Summit on ICPD25

2019 marked the 25th anniversary of the International Conference on Population and Development (ICPD) in Cairo, where 179 governments adopted a landmark Programme of Action which put women and girls' empowerment and rights at the centre of national and global development efforts.

From 12 to 14 November 2019, the Governments of Kenya and Denmark and UNFPA co-convened the Nairobi Summit on ICPD25, a high-level conference to reenergize the global community, enrich and enhance the ICPD agenda, and sustain and amplify gains made since 1994.

A high-level delegation from the United Republic of Tanzania attended the Summit and were among the countries that made concrete commitments to ensure the full, effective and accelerated implementation of the ICPD Programme of Action and the 2030 Agenda for Sustainable Development by 2030.

Commitments made by the Government of the United Republic of Tanzania included the roll out of a competency-based curriculum for midwives to improve the quality of care; the acceleration of integrated HIV and other reproductive health services to reduce the burden of HIV, including reducing mother-to-child transmission to <5 percent by 2030; and increasing the national budget for health to meet the Abuja declaration target of 15 percent.

These commitments will ensure that women's health and rights remain on track in Tanzania and that the promise of Cairo is finally delivered for every woman and girl, ensuring rights and choices for all.

## LEAVING NO ONE BEHIND

In 2020 we continued to support efforts to accelerate progress towards realizing UNFPA's three transformative results by 2030 - in line with the Programme of Action of the 1994 International Conference on Population and Development (ICPD) and the Sustainable Development Goals (SDGs) of the 2030 Agenda - expanding the possibilities for women and girls and young people to lead healthy and productive lives.





## ZERO UNMET NEED FOR FAMILY PLANNING

...AND A WORLD WHERE EVERY  
PREGNANCY IS WANTED

By empowering women and girls and young people to make their own decisions about the timing and spacing of pregnancies and to have control over their bodies, we open an important pathway towards their economic security and independence and a more balanced economy, community and society as envisioned in the Programme of Action of the 1994 ICPD and the SDGs of the 2030 Agenda.



Photo: Karlien Truyens

“I used to have a lot of worries and unanswered questions about getting pregnant or being forced to marry someone or getting infected with HIV, but not now.” - Winifrida, Peer Educator.

### Our commitments

- Supporting efforts by the government and our partners to expand access to high-quality and rights-based voluntary family planning services – both counselling and contraceptives.
- Strengthening systems and supply chains to ensure that the full range of modern contraceptives are consistently accessible and available with a focus on the most underserved communities and populations.
- Building the capacity of human resources for health for the delivery of equitable, sustainable and integrated sexual and reproductive health care, including voluntary family planning, HIV testing and the treatment of reproductive health cancers.
- Increasing the number of providers trained to provide sensitive and age-appropriate sexual and reproductive health services and information for young people.
- Equipping women and girls and young people with the knowledge they need to make informed decisions about their bodies and the agency to claim their rights.
- Leveraging south-south cooperation to build an enabling environment for voluntary family planning services.
- Supporting the printing and dissemination of national strategies and standards as benchmarks for the provision of high-quality sexual and reproductive health care, information and education.



# 2020 HIGHLIGHTS

## CONTRACEPTIVES PROCURED BY UNFPA TANZANIA



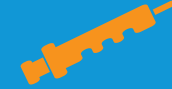
Male and female condoms:  
**3,976,600**



Oral contraceptives (the pill):  
**783,560**



Implants:  
**330,426**



Doses of injectable contraceptive:  
**2,949,300**



Emergency contraception:  
**3,000**



Intrauterine contraceptive device (IUCD):  
**158,260**

### IMPACT

Couples provided with one years' supply of modern contraceptives:  
**2,381,202**

Unintended pregnancies averted:  
**503,117**

Unsafe abortions avoided:  
**113,206**

Maternal deaths prevented:  
**1,074**

Direct health costs saved:  
**\$32,894,823<sup>3,4</sup>**

### Integrating services

**56** healthcare workers trained to diagnose and treat sexually transmitted infections (STIs).



**6,365** women screened for cervical cancer – and **79** treated as needed – as part of comprehensive sexual and reproductive health service provision.

**10,476** youth attended voluntary counselling and testing for HIV.

### Age-appropriate and sensitive youth-friendly service provision



**35** healthcare staff with increased competencies to deliver quality and youth-friendly sexual and reproductive health services.

### Getting reproductive health commodities, including contraceptives, where and when they are needed



**401** healthcare staff trained on supply chain and logistics management systems.

### Improving counselling, expanding options



**27** health care providers with increased ability to counsel on the modern contraceptive method mix.

### Informed choices



**70,706** young people accessed sexual and reproductive health services, including voluntary family planning, through outreach and at youth-friendly service corners.

**404** women in refugee settings in Kigoma Region counselled on voluntary family planning; **327** decided to use a contraceptive method

### Innovating to improve access



**3,867** students at higher education institutions purchased a microinsurance plan – which provides the full range of voluntary family planning services for about \$4 a year.

### "I moved from worrier to warrior!"

Grace had anxieties around accessing sexual and reproductive health services when she went to university in Mbeya. She was introduced to a microinsurance scheme by a friend who was already a member and now receives comprehensive voluntary family planning services for around \$4 a year.



### Empowering young people through education

**100,644** young people reached with sexual and reproductive health information, including voluntary family planning and HIV prevention, through youth-friendly corners, outreach and at university peer counselling rooms.

### Leveraging south-south cooperation



A study tour to Zanzibar by the International Islamic Center for Population Studies and Research of Al-Azhar University, Egypt, which culminated in a National Family Planning Dialogue, saw faith leaders in Zanzibar strengthen their commitment to educate communities and adopt a communique in support of family planning from an Islamic perspective. The House of Representative in Zanzibar also issued a commitment to advocate for adequate resource allocation for reproductive health commodities and services; prioritize family planning on the development agenda; and use all forums to address myths and misconceptions around family planning.

### Printing and disseminating strategies and standards for the delivery of high-quality services, information and education



**2,600** copies of the National Standards for Adolescent Reproductive Health Services printed and disseminated.

**300** copies of the Reproductive, Maternal, Newborn, Child and Adolescent Health Strategy (2016-2020) and Fact Sheets printed and disseminated to relevant stakeholders.

**1,200** copies of the HIV Social Behaviour Change Communications Strategy printed.

## "SHE HELPED REMOVE MY WORRIES ABOUT CONTRACEPTION"

Zulekha has six children – she remarried when her first husband died and subsequently had three more children. "I did use a contraceptive after my first child but I was fearful that I might get cancer or not be able to have any more children." She didn't think about using a contraceptive again until Husna – a community health volunteer – passed through her village.

Husna understood Zulekha's reservations about being seen at the medical facility and reassured her that after the first appointment at the health centre – where she wouldn't have to hang around – Husna would be able to deliver her contraceptives directly to her door.

Zulekha regularly sees Husna in her village – and when she drops in to deliver her contraceptive pills – and says she is grateful: "She helped remove my worries about contraception and also understood that I am a very private person."

Her husband is also very supportive of her using a contraceptive; Zuleka still believes to this day that he somehow engineered her meeting with Husna!

The Zanzibar Nurses Association (ZANA) has been deploying community health volunteers to each of Zanzibar's 11 districts to conduct voluntary family planning outreach services for the past two years – through the Ministry of Health's Integrated Reproductive and Child Health programme – with the support of UNFPA.

3 Direct health costs saved are the costs a health system would incur for pregnancy-related complications and illnesses  
4 Estimation calculated using Impact 2 <https://www.maristopes.org/what-we-do/our-approach/our-technical-expertise/impact-2/thank-you/>.





# ZERO PREVENTABLE MATERNAL DEATHS

...AND A WORLD WHERE  
EVERY PREGNANCY AND  
CHILDBIRTH IS SAFE

Through a three-pronged strategy that focuses on voluntary family planning, skilled attendance at birth and emergency obstetric care, we are working towards a future where pregnant women can access all the care they need – from prenatal HIV testing to antenatal care for newborns to postpartum family planning – at the same clinic or health centre – a future where every woman, wherever she lives, can plan and enjoy a healthy pregnancy and a safe childbirth.



Photo: Karlén Truyens

## Our commitments

- Supporting efforts by government and our partners to improve infrastructure and working environments and ensure essential reproductive health supplies and equipment are in place for the delivery of high-quality and comprehensive maternal and newborn health care, including emergency care, and voluntary family planning.
- Strengthening human resources for health, including nurse-midwives, so that they are competent and confident to deliver comprehensive and respectful care before, during and after birth, including emergency maternal and newborn care, and voluntary family planning.
- Adopting an innovative mentoring approach to address barriers to the delivery of consistent and high-quality maternal and child health care, including a shortage of qualified providers.
- Building capacity for systems that measure and track all maternal deaths to inform and guide actions to prevent future mortalities.
- Strengthening referral systems, particularly for hard-to-reach populations.



# 2020 HIGHLIGHTS



## Investing in infrastructure

A maternity ward constructed – and receiving patients – at Muzye Dispensary in Kasulu District, Kigoma Region. The ward now has three separate rooms, a nursing station, bathroom, and improved water system – and will be equipped to provide the full range of quality reproductive, maternal, newborn and child health services.<sup>5</sup>



## Building skills and competencies for comprehensive, respectful and quality maternal and child health care

**21** healthcare providers with improved capacity to provide comprehensive post-abortion care.

**70** healthcare providers with increased skills to care for women and their newborns during labour and immediately after birth.

**55** healthcare providers in refugee camps with increased capacity in basic emergency obstetric and newborn care (BEmONC), including vacuum delivery and infection prevention.



## Standardizing quality emergency and newborn care

National Curriculum for Comprehensive Emergency Obstetric and Newborn Care (CEmONC) reviewed.

## Supporting trained healthcare workers to continuously improve service delivery

**15** healthcare providers at UNFPA-renovated and equipped health facilities who had already attended training on comprehensive emergency obstetric and newborn care (CEmONC), supervised and mentored to improve their skills and quality of care, using the reviewed CEmONC curriculum.



## Strengthening referral systems

The Afya Bora boat ambulance launched. It will ensure women living in the smaller isles of the Zanzibar archipelago can be transported swiftly to the District Hospital on Pemba Island if complications occur during pregnancy.



Photo: Karlien Truyens

## Expanding innovative approaches that work

The UNFPA-supported mentorship programme – where experienced healthcare providers share their expertise and knowledge and supervise and mentor less experienced staff – was expanded from the mentoring of junior and assistant medical officers at Mnazi Mmoja Hospital, Zanzibar, to all nurses and doctors working on the wards at the hospital and to lower health facilities across the isles – ensuring that pregnant women get the best possible care.



## Gathering data and improving the quality of services

All secondary and tertiary health facilities/hospitals in Zanzibar are now conducting routine maternal death surveillance and response (MDSR) – nearly all maternal deaths and above 50 percent of perinatal deaths are reviewed to identify gaps in service provision. Feedback and on-the-job training is being provided by District Health Management Team members to health facilities that are performing deliveries to improve the quality of care, particularly emergency care, making motherhood safer for Zanzibari women.



Photo: Karlien Truyens

“I WORKED QUICKLY, DRAWING ON WHAT I HAD LEARNT DURING MY TRAINING AND MANAGED TO SAVE BOTH ADIMU AND HER BABY.”

Nuriat Koku Mtumbi remembers that day in March well. “It was raining heavily and Adimu had delivered her baby on the way to our facility. She was shielding herself under a tree when she gave birth but her mother managed to get her here.”

Adimu was bleeding heavily on arrival and her newborn baby was struggling to breathe. Nuriat worked quickly, drawing on what she had learnt during her training and managed to save both mother and baby. “I couldn’t have done this before; I simply didn’t have the skills or equipment,” she says.

Nuriat is a midwife at Nyangokolwa Dispensary in Bariadi District, Simiyu Region – one of 40 health facilities that have been renovated by UNFPA to ensure that women in the district have access to timely and high-quality maternal care, including emergency obstetric and newborn care. The facilities have also been equipped and staff have attended training.<sup>6</sup> Previously pregnant women had to make the long journey to Somanda Hospital some 20 kilometres away; some didn’t make it, others were left with life-changing conditions such as obstetric fistula.

The number of pregnant women delivering at Nyangoolwa has skyrocketed since the renovations, and there are now more than 80 deliveries per month; the number previously hovered around 20. “I am proud that women have confidence in the facility”, Nuriat says, and it is something she shares. She is well aware that the timely and skilled care she and her colleagues are providing is saving lives and preventing serious maternal morbidity injuries like obstetric fistula.

<sup>6</sup> The renovations and equipping of facilities in Simiyu Region were part of activities under the two-year ‘Nlilinde Nikulinde Project’ (“Protect me; I protect you”), funded by the Korea International Cooperation Agency (KOICA).

<sup>5</sup> Muzye Dispensary was one of the health facilities identified for renovations by UNFPA and regional and local government in 2018. Nine facilities have been upgraded to date to include maternity wards and an additional 14 are in the pipeline. The activities are part of the Ujana Wangu Nguvu Yangu – My Youth, My Power – project funded by the Government of Ireland.



# 2020 INTERNATIONAL YEAR OF THE NURSE AND MIDWIFE

## AND AN OPPORTUNITY TO SAY THANK YOU TO TANZANIA'S MIDWIVES

Midwives are central to everything we do at UNFPA. Their life-saving skills go far beyond delivering babies; midwives educate, empower and enable women to lead healthy lives – they are truly the defenders of women and girls’ sexual and reproductive health and reproductive rights.

In 2020, as we celebrated the International Year of the Nurse and Midwife, it was an opportunity to recognize Tanzanian midwives and for UNFPA to express our gratitude.

Thank you to Flora who always wanted to be a midwife and – in spite of the challenges of working in the resource poor settings of Nyarugusu refugee camp, Kigoma – loves the variety of her job, from providing general health care and counselling on voluntary family planning to supporting women before, during and after birth. Following the UNFPA-supported training on basic emergency obstetric and newborn care (BEmONC) that Flora attended in 2019, she is now able to recognize the danger signs of pregnancy and confident to make the timely and appropriate decisions which can often mean the difference between life and death.

Angelina has been a midwife for 30 years and is now based at Bariadi District Hospital, Simiyu Region, a facility renovated and equipped by UNFPA to provide



quality maternal and child health care – including emergency care. She says that even after three decades she still feels an enormous sense of pride and joy when she sees a smiling mother holding a healthy, bouncing baby for the first time...and relief. Angelina’s mother did not survive childbirth. Neema, a nurse-midwife colleague, is also proud of the work she does – making motherhood safer for women in rural Bariadi and ensuring they have access to comprehensive sexual and reproductive health care and information, including voluntary family planning.

Abdul Nyamguma and Hofne Chrisostom Yohana are two of 15 UNFPA-funded nurse-midwives who are working hard to make pregnancy and childbirth safer in Tanzania’s Nyarugusu refugee camp. Hofne knows just how important it is to have trained midwives, quality emergency obstetric and newborn facilities and effective referral systems in place, especially in humanitarian contexts – he still remembers the first patient he saw die of post-partum haemorrhaging. Abdul, his colleague, delivers postnatal care, ensuring that both mothers and newborns get a comprehensive check-up and information on immunization schedules, voluntary family planning, nutrition, and baby care.

Aisha is a nurse-midwife at one of the recently constructed youth-friendly corners at Rahaleo health facility in Zanzibar.<sup>7</sup> She says she sees the

embarrassment on youth’s faces when they come to the clinic and tries to put them at ease, drawing on what she learnt at the UNFPA-supported training and the need to provide sensitive and age-appropriate counselling and information. Nurse-midwives in Kigoma have also attended similar training to provide sexual and reproductive health care and information for first-time young mothers – a particularly vulnerable group – including psychosocial support.

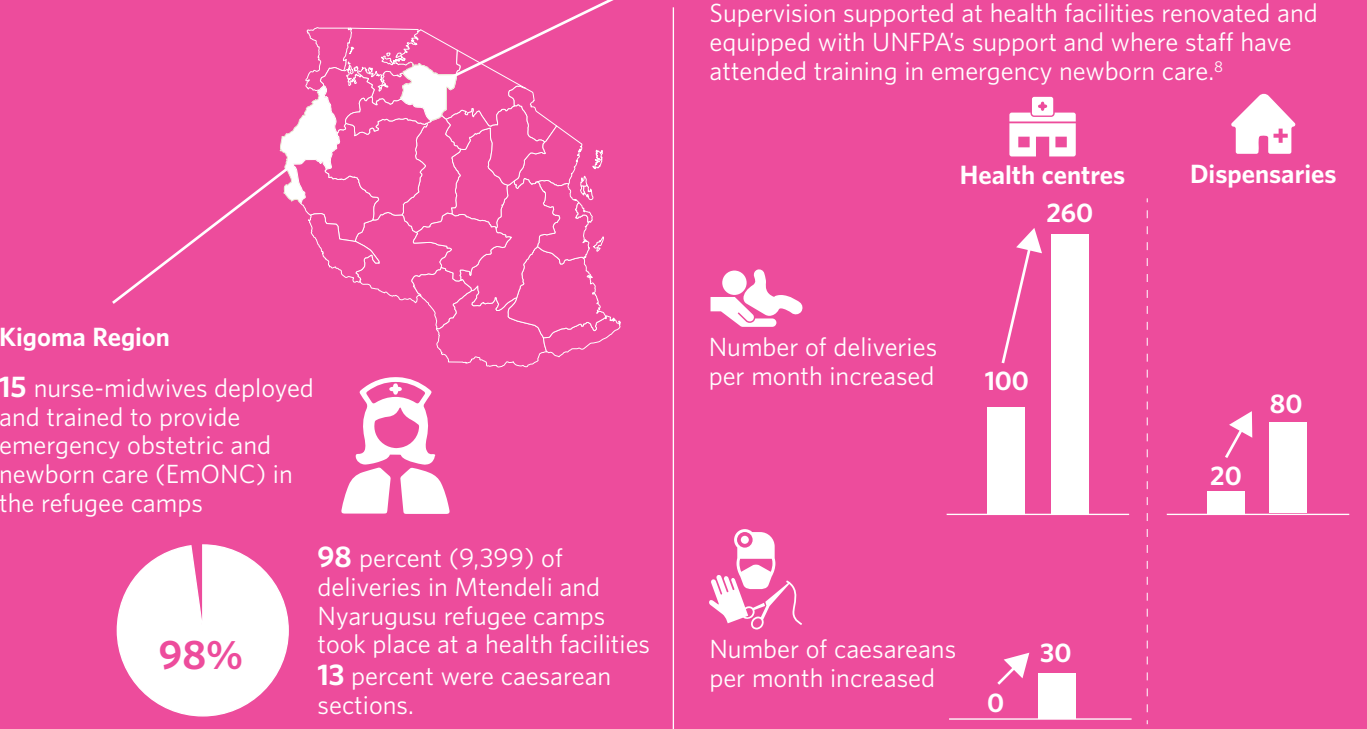
In Tanzania, trained nurse-midwives working in a supportive environment are saving lives – averting both maternal and newborn deaths. Their people-centred reproductive health care, including the provision of voluntary family planning services and information, is contributing to healthier families, more productive communities and to a health system that can provide effective coverage of reproductive, maternal, newborn, child and adolescent health services and information, including for some of the

furthest behind women and girls and youth. Day in and day out they are advancing gender equality efforts.

We salute the work of Flora, Hofne, Angelina, Neema, Abdul, and Aisha and the thousands of other nurse-midwives in Tanzania that work so hard every day – sometimes in challenging circumstances – to uphold women and girls’ rights.

UNFPA will continue to support ongoing efforts to help build a competent, well-trained and well-supported midwifery workforce in Tanzania – led by the government and in partnership with the Tanzania Midwives Association – in recognition of their significant contribution towards realizing UNFPA’s three transformative results by 2030 and accelerating progress to achieve national and global development aspirations, including the SDGs of the 2030 Agenda and the Programme of Action of the ICPD.

### Demonstrating impact



<sup>7</sup> Six youth-friendly corners were renovated and equipped in Zanzibar under the Afya Bora ya Mama na Mtoto Project supported by UNFPA and funded by the Government of Canada.

<sup>8</sup> The data was reported as part of supportive supervision at the renovated health facilities in Simiyu Region by the President’s Office, Regional Administration and Local Government Tanzania (PO-RALG) in October 2019.





# ZERO GENDER-BASED VIOLENCE AND HARMFUL PRACTICES

...AND A WORLD WHERE  
WOMEN AND GIRLS CAN LIVE  
IN PEACE AND SAFETY WITH  
EQUAL RIGHTS AND EQUAL  
OPPORTUNITIES

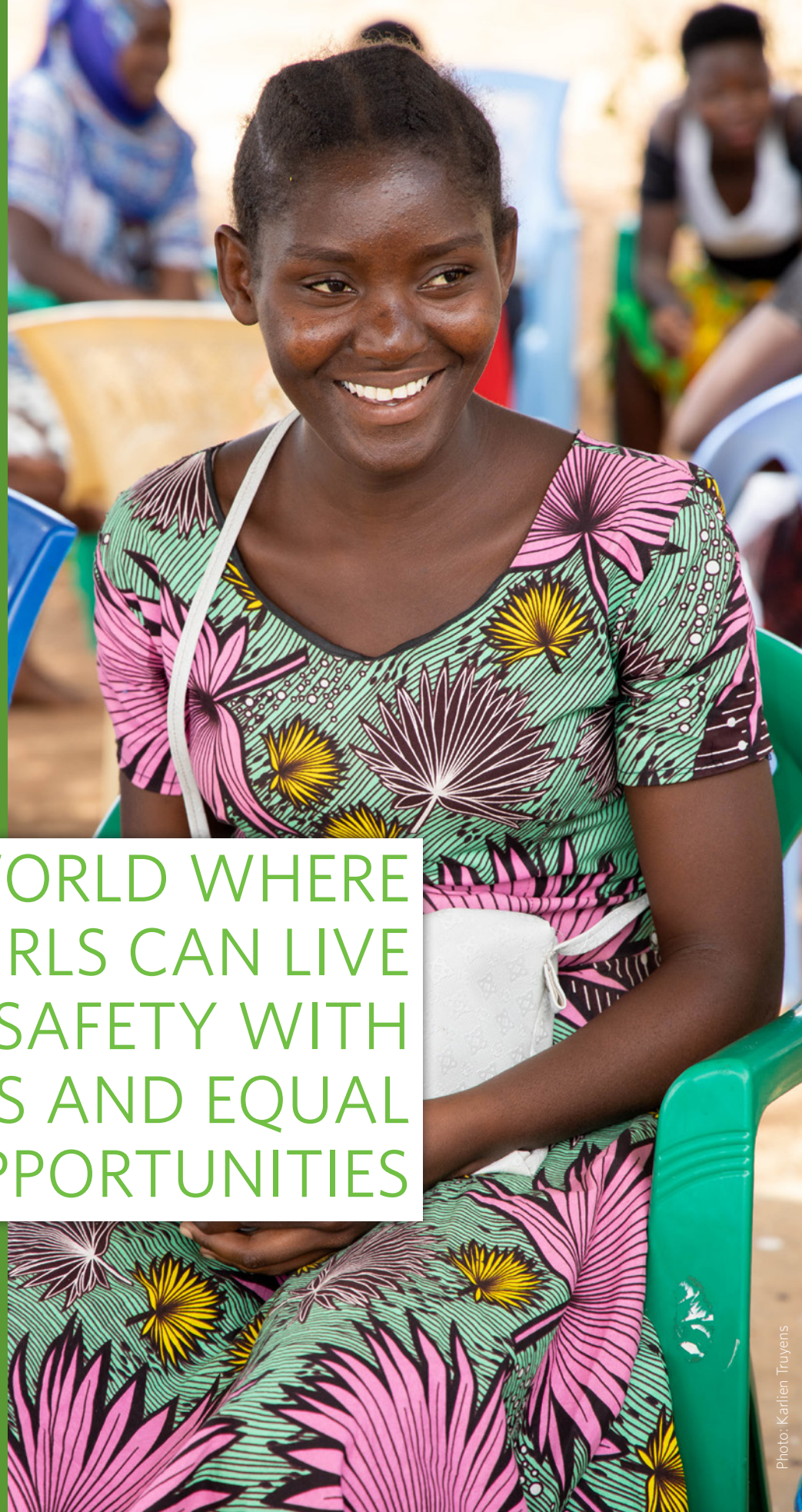


Photo: Karlien Truysens

## Our commitments

- Supporting the Government of the United Republic of Tanzania to implement the five-year National Plans of Action to End Violence Against Women and Children (2017/8-2021/22) in mainland Tanzania and Zanzibar, with its clear roadmap to eliminate gender-based violence (GBV), including a set target to reduce the national prevalence of female genital mutilation (FGM) over the course of the five-year strategy.
- Strengthening GBV prevention and response systems – including through the construction of District Police Gender and Children Desks<sup>9</sup> and increasing the capacity of the National Child Helpline,<sup>9</sup> ensuring that protection services meet the specific and comprehensive needs of women and girl survivors and provide them with the support they need to rebuild their lives, including access to justice.
- Empowering women and girls to uphold their right to live a life free from violence through the establishment of community-based structures including Community Knowledge Centres, Women's Protection Committees, vocational training, and life skills and leadership programmes, including alternative rites of passage to FGM.
- Working with influential leaders, including faith leaders, as champions of change, ideally placed in their communities to challenge social norms and practices that perpetuate GBV and harmful practices and to drive positive, transformational and sustainable change to advance gender equality.
- Influencing and supporting the development of national policies, strategies and guidelines that protect and uphold women and girls' rights, including their right to have control over their bodies and lives and an equal voice and future.

### **"I felt worthless when I became pregnant. I despaired and just watched my dreams fly away."**

Glory was 13 when she became pregnant and had to drop out of school. She was invited to join an Adolescent Girls' Club in Shilela, Simiyu Region, by her village leader. Five months later she is a different person – one who has grown in self-worth and confidence.

She has learned that she has the right to make decisions about her body and that no one can force her into having unwanted or unprotected sex. Now undertaking a vocational training course, she no longer feels inadequate compared to her friends who went on to secondary school.

Women and girls have every right to live free from violence in all its forms – economic, emotional, cyber, physical, sexual. They have a right to peace in the home, in public and online. Eliminating GBV is a prerequisite to advancing gender equality and creating a better and more inclusive world for every woman and girl and young person; and to realizing the SDGs of the 2030 Agenda, the Programme of Action of the ICPD, and sustainable and inclusive development.

<sup>9</sup> The National Child Helpline is a government toll-free telephone service (#116) that responds to children's and women's and girls' protection needs in Tanzania Mainland and Zanzibar.





**"I challenge young people's attitudes in my community in Kahama. I make them question beliefs that if a girl is harassed she did something to provoke the perpetrator."**

Rahabu was 17 when she became pregnant and dropped out of school, crushing her dreams of becoming a teacher. She returned to her home in Kahama Town at the age of 22 – now with two children – and attended a UNFPA-supported programme that supports out-of-school girls with life skills and vocational training. Today, Rahabu has her own radio show and educates her peers and their parents about the importance of girls remaining in school.

**"I didn't notice before that I have gender inequality at school, that people think a girl is a "thing" – a thing that cleans the home and does whatever she is told."**

Firyali and her friends decided to form a small girls club after they attended an adolescent girls camp. The group has now evolved into the Now! Girl Activists of Nyerere Secondary School of Msalala with four coordinators. They use art, music, technology, and drama to speak out against violence and harmful social norms around gender equality so that teenage girls understand their rights.



## WOMEN SUPPORTING WOMEN THROUGH KNOWLEDGE CENTRES IN SHINYANGA

Milka says she first visited the Knowledge Centre in her village Malito, in Msalala District, Shinyanga Region,<sup>10</sup> because she is naturally curious and likes to know what is going on in her community! What she has learnt there since, she says, together with the support she receives from the community leader/ animator and fellow women members, has changed and reshaped her outlook on life – particularly her understanding of GBV and the different forms it can take.

"I personally accepted the behaviour of my husband selling the harvest that we had worked so hard together to produce. Many a time he would go into town and come back home with empty pockets several days later," says Milka. Loyce tells a similar story. She was selected as one of the animators at the Knowledge Centre and now leads outreach activities where she educates and provides information on women and girls' rights. She passionately believes that her own daughter – and others – deserve a better future, but admits that the thought of gender equality at times seems a distant dream. "Sometimes I think it [gender equality] is impossible, but at the Knowledge Centre you meet other people with similar thoughts and I believe that if we support each other, together we can make it happen."

Loyce is also a member of the Ward Children and Women's Protection Committee where she has attended training to prevent and respond to violence against women and children. She recalls the story of her neighbour's daughter, aged 13, who was going to be married after schools closed for the holidays. The daughter's mother had been attending sessions at the Knowledge Centre and knew about the impacts of this harmful practice. She asked Loyce to come with her to speak with her husband; the proposal to marry the daughter was rejected the same day. Loyce also personally knows a number of other girls whose families have turned down marriage proposals because they now understand the importance – and right – of their daughters, like their sons, to continue their education.

Although it is early days, Loyce says these are promising signs, Milka is similarly optimistic. Both women are passionate in their beliefs that their daughters and other young women should have equal opportunities and control over their bodies and are prepared to work day and night to make this vision a reality.

<sup>10</sup> The Knowledge Centre in Malito is one of two established in Shinyanga Region under the three-year Korea International Cooperation Agency (KOICA) funded UNFPA-UN Women Joint Programme. Twenty ward District Children and Women Protection Committees have also been supported in six district councils of Shinyanga under the project during the reporting period.



# 2020 HIGHLIGHTS



Photo: Ally Migoo



## Empowering communities to protect and uphold women and girls' right to live free from violence

**20** ward District Children and Women Protection Committees established in six district councils of Shinyanga.



Approximately **400** members supported and trained to prevent and respond to GBV and violence against children and on their role as coordinators in the implementation of the National Plan of Action to End Violence Against Women and Children (NPA-VAWC) at the ward level.



## Strengthening protection and response systems to provide comprehensive services to survivors of violence

**6** Gender and Children's Desks established in Mara and Kigoma Regions; one Police Post renovated in Kigoma.

**263** GBV survivors received counselling.

**199** girls rescued from FGM.



## Women supporting women through community structures

**10** Knowledge Centres established in 10 districts of mainland Tanzania in 5 regions



**304** community leaders/animators – both women and men – trained as leaders at the Knowledge Centres and as ending GBV champions.

**1,736** community members reached through their outreach efforts which challenge social norms that perpetuate GBV.



Ongoing impact



## Engaging influencers and leaders as champions of ending GBV efforts

One dialogue held for **35** interfaith leaders in Kigoma; dialogue held for **11** District Faith Leader Action Groups on GBV in Zanzibar and an additional **290** faith leaders engaged in efforts to eradicate GBV.



The Action Groups and faith leaders in Zanzibar reached **49,438** people in their communities tackling beliefs about GBV and inequalities and driving change.



## Building adolescent girls' and boys' agency to protect their rights

**2,308** adolescent boys and girls attended life skills and leadership programmes, as well as alternative rites of passage against FGM, to equip them with the knowledge and agency to challenge social norms that underpin GBV and harmful practices.



## Educating through entertainment

**56** participatory community theatre shows organized, resulting in increased community awareness and mobilization on violence against women and children.



## Strengthening policies, strategies and guidelines to protect women and girls' rights

A review of the National Women and Gender Development Policy (2000) and its Implementation Plan (2005) undertaken.

An Anti-FGM Strategy developed that provides a clear roadmap to the goal of zero FGM by 2030.

Guidelines developed for quality, participatory and open community dialogue on social norms and values – including those that accelerate GBV and harmful practices such as FGM, child marriage and teenage pregnancy – and action needed to drive sustainable and positive change.

# WINDA'S STORY

Winda was aged 13 and just about to start secondary school when her father told her he wanted her to be cut (undergo FGM). "He told me I was now grown up and I had to be cut so that my family could be proud of me and be respected in the community," she recalls.

With the obvious devastating effects, it seems like it should be an easy decision to say no to FGM. But for Winda – and millions of women and girls around the world – who live in communities where FGM is seen as a 'rite of passage' and where girls who are 'uncut' are stigmatized and often unable to marry, saying no can mean losing your community, your family and friends.

Female genital mutilation has been illegal in Tanzania since 1998 and the government is committed to ending the practice, but in spite of a decrease nationally in the prevalence of the harmful practice, there are significant regional variations and in Mara Region – Winda's birthplace – 32 percent of women aged 15 to 49 still undergo FGM.

Winda had been educated about the harmful impacts of FGM; ending FGM activists had visited her school. She knew she could suffer serious short and long-term impacts, even death, and says she was terrified. She pleaded with her family not to cut her, but they

refused to listen. "My mother said I was taking her for a fool. She had been cut – as had many of her relatives – and none of them had suffered any of the things I was talking about."

Winda ran away from home and walked for three days to reach the Police Station at Mugumu. On reporting her case she was taken to meet Sijari, a specially-trained officer at the Police Gender and Children's Desk.

UNFPA supported the establishment of six Police Gender and Children's Desks during the reporting period – three in Mara and three in Kigoma Region – and have also supported capacity building for the dedicated officers who are specially trained to handle cases of violence, including rape, sexual assault, domestic violence, and FGM.

"Sijari told me she would help me. She brought me here to this safe house," says Winda.

Winda is now 17 and is still at the safe house run by Hope for Women and Girls, Tanzania, in Serengeti. She is being supported to continue her education. She says she has not given up on her dream of becoming a doctor.



Photo: Gonzalo Bell



# UPHOLDING RIGHTS IN THE TIMES OF COVID-19

The COVID-19 pandemic arrived in Tanzania in early March 2020 with the Government of the United Republic of Tanzania introducing measures to mitigate the spread of the virus, closing schools and universities. Public gatherings were also limited and international flights were suspended, although the government stopped short of a nationwide lockdown.

## Our priorities

UNFPA responded swiftly, identifying critical programme interventions, with a detailed plan for implementation, to ensure that the sexual and reproductive health and reproductive rights of women and girls and young people were protected during the COVID-19 outbreak, and remained at the front and centre of the national coordinated response.

### Synergy in action with partners

- Supported the development of the National Contingency Plans in Tanzania mainland and Zanzibar; Regional Contingency Plans in Simiyu and Kigoma; and the UNHCR-led refugee plan in Kigoma Region.
- Actively participated in the implementation framework of these plans in four pillars: Coordination, planning and monitoring; Infection prevention and control (IPC)/case management; Risk communications and community engagement (RCCE); and Logistics, health systems strengthening and supplies.
- Provided financial and human resources and technical support to guideline and toolkit development for WHO-led surveillance and case management. UNFPA personnel were also part of teams that assessed facilities for isolating COVID-19 cases and in Zanzibar deployed personnel to support government and UN partners with surveillance activities and point of entry interventions.
- In partnership with the Ministry of Health and national partners, UNFPA supported the establishment of a national call centre – the Afya Call Centre #199 – a toll-free service for information and counselling on COVID-19 and other health needs of callers, and strengthened the capacity of call centre agents to respond to calls on GBV and sexual and reproductive health issues.

“WHEN YOU ARE A WOMAN WITH COVID-19 AND YOU DO NOT KNOW HOW YOU WILL MANAGE YOUR BASIC NEEDS, IT’S LIKE YOU ARE TRAUMATIZED TWICE”

Bikombo says she was lucky she had the chance to gather some of the things she would need for her stay at the government-run quarantine facilities in Mtoni – on the outskirts of Zanzibar Town – when she learned that her COVID-19 test result was positive. Shariffa, her roommate in the quarantine facility, was not so lucky. She arrived in the clothes she was wearing and although her relatives brought her additional effects and supplies, she did not feel able to ask them to bring the pieces of cloth she uses to control her menses – in any case she wouldn’t be able to wash and dry them in the facility without being seen by others.

Shariffa says she became increasingly worried about how she would manage her period at the quarantine facility. She was therefore very relieved when she received a UNFPA Dignity Kit containing sanitary pads, underwear, antibacterial soap, and washing powder – everything she would need to maintain both her hygiene and dignity during her stay.



# MAINTAINING FULLY-FUNCTIONING, LIFE-SAVING SEXUAL AND REPRODUCTIVE HEALTH AND REPRODUCTIVE RIGHTS SERVICES

Supported the development, printing and dissemination of guidelines and set standards for the provision of safe, high-quality and uninterrupted services including:

A Reproductive, Maternal, Newborn, Child and Adolescent Health COVID-19 Guide for frontline health workers and a Voluntary Family Planning and COVID-19 Response Guide for Community Health Volunteers; orientation on both Guides was also supported.

Psychosocial Guidelines for healthcare workers on the frontline of the COVID-19 pandemic.

A COVID-19 Handbook/Guide for National Child Helpline #116 psychosocial counsellors.

A Job Aid and leaflets on IPC for health workers.

## Training and protecting frontline health workers

**383** healthcare workers trained on IPC, including COVID-19 and pregnancy/breastfeeding, at health facilities in Simiyu and in refugee camps in Kigoma.

**5** health facilities in Mara Region provided with personal protection equipment (PPE) for frontline health workers.

**34** counsellors attended training on IPC and received PPE.

PPE – including face masks, gloves, plastic aprons, liquid soap, chlorine and hand sanitizer – procured and distributed to frontline healthcare workers in refugee camps in Kigoma.

## Adapting the delivery of gender-based violence prevention and response services

**9** counsellors recruited to increase capacity at the National Child Helpline #116.

**36** helpline counsellors and call operators attended online psychosocial support training so they could counsel callers on their mental and emotional well-being and signpost them to protection services.

## Strengthening systems and staff capacity to maintain comprehensive services

Community Health Volunteers in all 11 districts of Zanzibar trained to deliver voluntary family planning services and COVID-19 prevention information, based on guidelines developed by the Zanzibar Nurses Association, with UNFPA's support.

Duty bearers, including the police, supported with fuel costs and PPE to conduct field and home visits to identify GBV and FGM cases in Mara Region – which reports one of the highest rates of FGM in Tanzania. They identified 128 girls at risk of GBV and FGM in Tarime-Mara and supported referrals in a period that was not the cutting season. This usually takes place biannually in December.

Safe shelters managed by local NGOs supported with investments in infrastructure, including a basketball court, to house a larger number of girls at risk of FGM; staff's capacity to provide support to girls also enhanced.

## Protecting women's rights in COVID-19 quarantine centres

**62** Dignity Kits distributed to women at quarantine centres in Zanzibar; centres were also supported to

**"Throughout March and April [2020] we were getting an increased number of calls from young people. At the same time services on the ground, including GBV prevention and response, were becoming scarcer. We needed more staff with specific skills to support and counsel callers."**

Michael Marwa, Director of the National Child Helpline.

maintain high hygiene standards for women.

## Leveraging partnerships with youth and influencers to disseminate accurate information

The African Youth and Adolescent Network on Population and Development (AfriYAN) established a youth hub and led efforts across the country, using digital and traditional media, to raise awareness about COVID-19 prevention measures and to ensure that young people continued to safely access sexual and reproductive health services, including HIV testing.

Interfaith leaders in Zanzibar took to the radio and used WhatsApp to spread COVID-19 prevention messages to their congregations when places of worship were closed.

**24** first-time young mothers in Kigoma, already UNFPA-trained peer educators, received training on COVID-19 prevention to increase awareness in their communities.

## Disseminating accurate information

Around 2,500,000 people within and outside Mara Region reached through radio with accurate information on COVID-19 prevention and women and girls' increased vulnerability to GBV in the context of the pandemic. A radio and TV campaign airing the same messages was also conducted in Zanzibar and leaflets were disseminated during roadshows.

113 influencers supported with COVID-19 IPC training in Kigoma and helped to tackle misperceptions and spread accurate information in their communities.

## Leaving no one behind

Nyarugusu refugee camp received a large tent to act as a COVID-19 isolation site.

# #YOUTH AGAINST COVID-19

AfriYAN Tanzania led efforts across the country to raise awareness about COVID-19 and to ensure that young people continued to access sexual and reproductive health services, including HIV prevention, care and treatment.

With chapters in 11 regions of the country, and a broad network of member organizations, they were well-placed to ensure that the needs and rights of youth remained at the centre of coordinated response efforts. Through appearances on TV and radio shows, webinars and engaging social media influencers, they disseminated age-appropriate information about COVID-19 prevention and the importance of youth continuing to access services – emphasizing that public and private health facilities remained open and the infection, prevention and control measures in place to ensure services were being delivered safely.

The continued promotion and distribution of condoms for HIV prevention, which is usually implemented through community outreach and at health facilities, posed a challenge, but the AfriYAN chapter in Kigoma sprang into action. Members set up a youth hub at one of the youth-friendly corners – UNFPA is supporting three in Nyarugusu refugee camp – where young people were able to pick up free condoms and information on COVID-19 and HIV prevention, care and treatment using a self-service facility. Over 16,000 condoms were distributed through the hub, which was open every day, in May and June 2020.



# SUPPORTING YOUNG PEOPLE TO REALIZE THEIR POTENTIAL

...AS TODAY'S AND TOMORROW'S  
LEADERS, AS **POWERFUL AGENTS  
OF CHANGE**

## 2020 HIGHLIGHTS

- **90** youth trained on leadership and participation in national decision-making processes.
- **825** youth attended a youth conference and now have increased knowledge on the Programme of Action of the 1994 ICPD – and the commitments made by Tanzania at the 2019 Nairobi Summit on ICPD25.



Photo: Sahara Sparks

Joseph is a member of AfriYAN in Kigoma. He believes that the future of the world is in the hands of the generations who will one day be in charge. Fatina, a fellow member, echoes his sentiments. She feels young people are ready to take ownership of what is happening in the world: "We are full of creativity, innovation and determination and, given the chance, we can be the leaders at the heart of global change," she asserts.

AfriYAN, a youth-led network, is mobilizing youth-led and youth-serving organizations across Tanzania – and the region – to increase meaningful youth participation in Tanzania's and Africa's development, while addressing the intersecting challenges young people face. With UNFPA's support there are now 11 chapters of the network across Tanzania.

## YOUTH MUST BE ABLE TO CLAIM THEIR RIGHTFUL PLACE IN DECISION- MAKING PROCESSES

UNFPA recognizes young people's potential as changemakers and continues to support AfriYAN members – and other youth – to develop the skills they need to take the lead in their communities and their place at national decision-making tables, ensuring strategies and structures are in place that make sure their voices are heard. In 2020, a further 90 youth attended leadership and participation trainings and more than 800 were sensitized on the ground-breaking Programme of Action of the ICPD so that they can identify and engage around issues that are key to their futures.

## YOUTH ENTREPRENEURS INNOVATE TO ENSURE NO ONE IS LEFT BEHIND

In the second round of the AMUA Accelerator – AMUA II – UNFPA continued to tap into the entrepreneurial talent of Tanzania's youth encouraging over 1 million young people to get involved in designing innovative solutions to reach their peers with age-relevant and engaging sexual and reproductive health information and services. AMUA II focused on expanding access to sexual and reproductive health services for people living with disabilities.

With over 360 innovations submitted to the jury, whittled down to a final seven for a virtual demo day, the judges had a challenging task, but after a fierce pitch war four teams – eAfya, Nulaif Centre, Frendlicom, and Safe Box – were declared the winners. They will be supported with seed funding and mentoring to finetune their products and make them market-ready.

The winning innovations include a platform that will instantly translate sign language to text speech and vice versa for use at health facilities, and a voice-based mobile app loaded with content on sexual and reproductive health, which will ensure the visually impaired and those with low literacy skills can access information and services.

UNFPA will continue to invest in youth to expand access to information and services that enable them to make a safe and healthy transition to a productive adulthood and ensure that they have a voice and are heard.

Investing in today's youth as tomorrow's leaders means investing in the future of the world – Nothing about youth without youth!



# LEAVING NO ONE BEHIND



## 2020 HIGHLIGHTS

- **2,832** Adolescent Dignity Kits distributed
- **239** adolescent girls and **161** adolescent boys trained as peer educators on menstrual health and hygiene. They reached **703** students – both girls and boys – in their schools.
- **40** first-time young mothers attended training on life skills.
- **24** first-time young mothers trained as peer educators.



Photos: Karlien Truyens

Leaving no one behind (LNOB) is the central, transformative promise of the 2030 Agenda for Sustainable Development and its SDGs. It represents an unequivocal commitment to eradicate poverty and the persistent forms of discrimination, including gender discrimination, which leave individuals, families and whole communities marginalized and excluded.

To deliver on this promise, UNFPA continues to support efforts to reach some of the furthest behind, connecting both humanitarian and development efforts in Kigoma Region – one of the poorest regions in Tanzania – to ensure that the local community and refugee population are included in the implementation of national and global development programmes.

Our support in Kigoma focuses on strengthening health systems to deliver quality and accessible reproductive, maternal, newborn and adolescent health care and information, and expanding access to services and information that meet the unique needs of Kigoma's large youthful population.

We are also working with interfaith leaders, men and boys to champion gender equality efforts and challenge taboos and stigma that keep women and girls locked in a cycle of violence and abuse. This includes education for girls and boys on menstruation so that monthly periods are not a time of isolation for adolescent girls like Asma, when they miss school and miss out.

Asma, aged 12, was one of the 2,823 girls who received an Adolescent Dignity Kit – which contains a reusable sanitary pad – in 2020, distributed by UNFPA's implementing partner, the International Rescue Committee. She could barely hide her delight...and relief. For Asma the kit means a 'golden opportunity' for her to compete as an equal with her male peers at school, no longer dreading her monthly period and how she will manage it. Joyce, a first-time young mother, does not attend school, but the kit will give her the freedom to take part in community activities – in everyday life. For her the kit is accompanied by hope. Some 239 adolescent girls and 161 adolescent boys graduated as menstrual health and hygiene peer educators and are now breaking the wall of silence and shame that exists around periods in their schools.



Dalia is a young mother who lives in Kasulu, Kigoma. She loves her son, but she admits that she sometimes struggles to cope. Adolescent pregnancy, which is higher than the national average at 32 percent in Kigoma is generally not the result of a deliberate choice. Girls often have little or no say over decisions affecting their bodies – and early childbirth is a consequence – as is the case for Dalia – of inequalities, including GBV; of peer and social pressures and a lack of access to age-appropriate sexual and reproductive health and reproductive rights education, information and services.

Dalia had to drop out of school when she became pregnant and says that the responsibilities of raising a child can be both overwhelming and isolating – young mothers face stigma and discrimination in the community she says. Last year Dalia attended life skills training – supported by UNFPA – where she learnt about parenting, breastfeeding, nutrition and voluntary family planning. This, she says, has made her feel more able to deal with motherhood. It also gave her the confidence to train as a peer educator and Dalia is now part of a group supporting other young mothers in her community. UNFPA is also working in collaboration with the Tanzania Midwives Association (TAMA), to ensure that sexual and reproductive health services meet this group's unique needs, including through the provision of psychosocial support.

As we move through the Decade of Delivery towards the 2030 target date for the SDGs, we will continue to prioritize the rights and needs of the most marginalized individuals and communities in Tanzania – working with local government, families, communities and leaders – so that every woman and girl and young person can aspire to a better future – and fulfil their potential in dignity and in equality.



# SHAPING THE FUTURE THROUGH DATA

Once a decade the Government of the United Republic of Tanzania undertakes one of its largest and challenging exercises – a Population and Housing Census (PHC). It requires mapping the entire country, mobilizing and training a large number of enumerators, conducting a public advocacy campaign, canvassing all households, and compiling, analysing and disseminating vast amounts of data.

More than just a headcount of how many people are living in Tanzania, by age, geographic region and sex, the 2022 PHC will provide detailed demographic, social and economic data on how they are living – giving decision-makers in national and local government, community groups, and development partners an opportunity to better serve communities and individuals in Tanzania –and enable a wide range of services and future planning to be supported, from schools to health care facilities, to roads.



## Understanding disparities across Tanzania

By reaching out to all households in the country the census will be a unique source of information to map the needs of the most vulnerable and marginalized groups – women and girls, adolescents, older people, persons with disabilities – and in understanding disparities across the country and where and how to invest. The data generated will also be a cornerstone for tracking progress towards national, regional and global development commitments, including the Sustainable Development Goals (SDGs) – with their strong sentiment of leaving no one behind – and the Programme of Action of the 1994 ICPD.

## Optimizing the accuracy of census data

UNFPA has been the technical partner to the Government of the United Republic of Tanzania in all previous censuses, including the last census conducted in 2012, and continues to support preparations for the 2022 PHC.

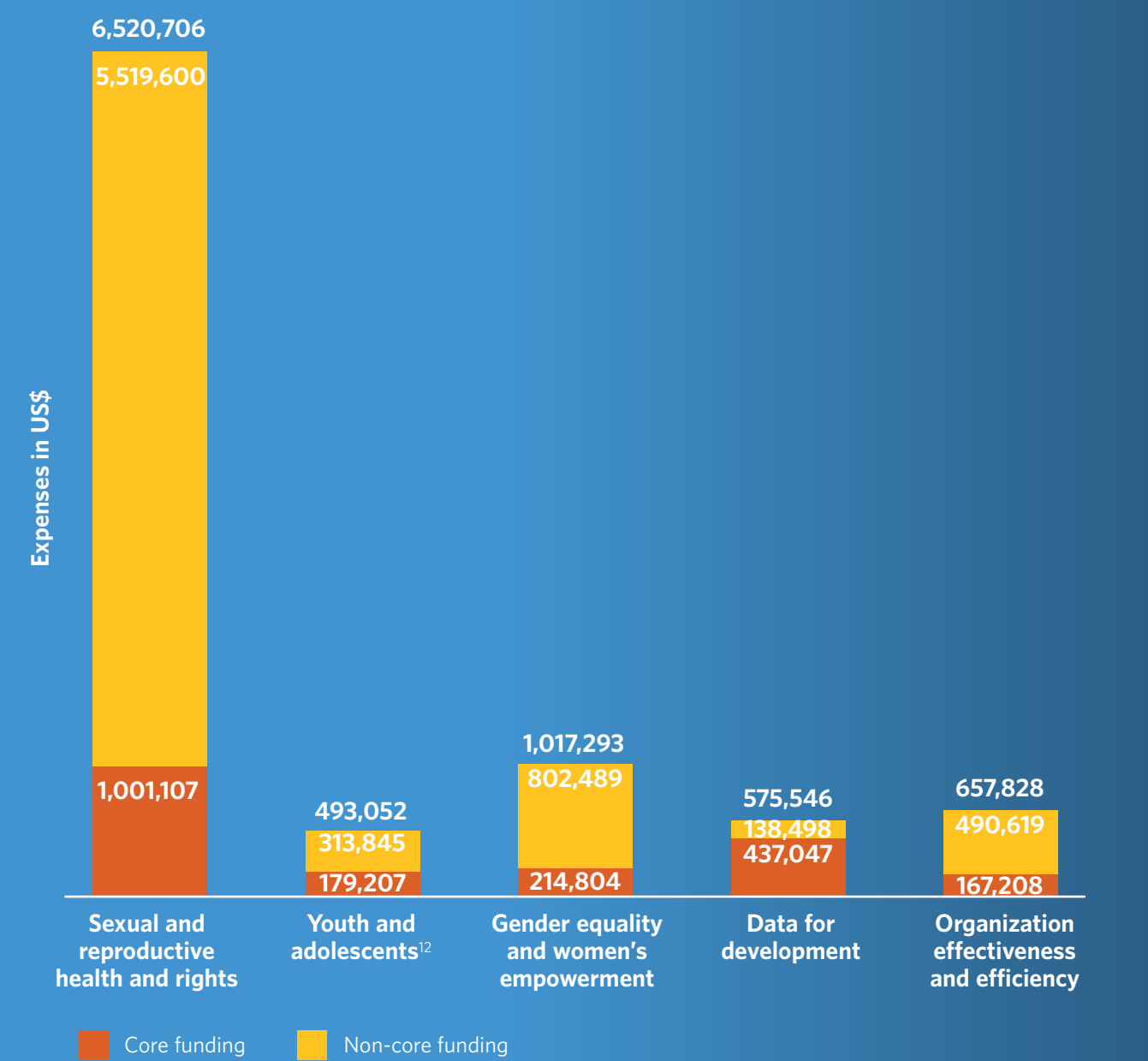
The government is taking bold steps to ensure that everyone is counted in the 2022 Census, using Geographical Information System (GIS) technologies for the first time to demarcate the country into enumeration areas, and adopting a combination of traditional and digital data collection methods to ensure that data collection processes are faster, more efficient and more cost effective.

UNFPA is providing financial and technical assistance for the use of these new technologies and in 2020 joined National Bureau of Statistics' technical field teams in Dodoma, where they were using hand-held tablets loaded with GIS software to update and demarcate the country's census enumeration areas.

UNFPA will continue to support preparation efforts to ensure that the PHC is implemented to international standards and that the data generated is high-quality, widely accessible and enhances evidence-based decision-making, accountability and transparency, helping to build a Tanzania that works for everyone.



# PROGRAMME EXPENSES BY THEMATIC AREA 2019/2020<sup>11</sup>



<sup>11</sup> UNFPA in Tanzania has both a Fiscal Year (January to December) and an Annual Work Plan Year (July to June) in line with the United Republic of Tanzania's Fiscal Year.

<sup>12</sup> Resources directly allocated to youth leadership and engagement and policy development, as well as life skills education for youth, both in and out-of-school, are detailed under "Youth and adolescents". Additional resources for youth and adolescent interventions, including in humanitarian settings, are spread across the three programme outcome areas - Sexual and Reproductive Health and Rights; Gender equality and women's empowerment; and Data for development.

## Our partners

The work of UNFPA in Tanzania would not be possible without the strong support of the Government of the United Republic of Tanzania, our donors, implementing partners, and sister UN Agencies. We express our gratitude to them for the progress we have made in 2020 towards our joint vision of a better and more equal world for every woman and girl and young person in Tanzania.

As we continue through the Decade of Action, and the deadline for the SDGs of the 2030 Agenda inches every closer, we look forward to continuing our work together and strengthening our partnerships to do more – and to do it better – to ensure that no one is left out or behind in the implementation of national, regional and global development agendas

### Data sources

Data in this report are drawn from the most recent Tanzania Demographic and Health Survey and Malaria Indicator Survey (2015/16), unless otherwise indicated.

### Names of individuals

In some instances the names of individuals have been changed to protect their identity.

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And all the UNFPA staff who are working hard to realize the vision of a more equal world for every woman and girl and young person in Tanzania.

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# YOUR RIGHTS OUR VISION

