Rights and Choices for All

Highlights of Achievements from 2021 and the 8th Country Programme
TABLE OF CONTENTS

Acknowledgements ......................................................................................................................................................... iv
Foreword ......................................................................................................................................................................... vi

Zero Unmet Need for Family Planning ................................................................................................................................. 1
  Development of Strategies and Documents ......................................................................................................................... 3
  Capacity Building ............................................................................................................................................................... 4
  Community Engagement and Counselling in Family Planning .......................................................................................... 4
  Family Planning Services Bring Hope to the Community ................................................................................................ 5

Zero Preventable Maternal Deaths ......................................................................................................................................... 8
  Nyarugusu Refugee Camp Near Zero Maternal Deaths Through Health Service Delivery .................................................. 10
  Maternal health care in Nyarugusu refugee camp ............................................................................................................... 12
  Capacity building of the health care workers .................................................................................................................... 13
  Adolescents and Youth ....................................................................................................................................................... 16
  Midwifery ........................................................................................................................................................................... 17
  Emergency Obstetric and Newborn Care (EmONC) ............................................................................................................ 18
  The Unsung Hero: a Young “Midwife” Who Is Making a Difference ................................................................................. 19

Zero Gender-Based Violence and Harmful Practices ........................................................................................................ 22
  Coordination and Implementation of National Policies, Strategies and Systems ............................................................... 23
  Change in Social Norms and Values Around GBV ........................................................................................................... 25
  Adolescent Girls’ Empowerment ...................................................................................................................................... 26
  Improved Access to Gender-Based Violence Prevention and Response Create Change for Women and Girls in Bugarama Ward .................................................................................................................. 27

Zero new HIV infections .......................................................................................................................................................... 30

COVID-19 Response .............................................................................................................................................................. 32
  Undeterred by the Pandemic: How Athuman Delivered Comprehensive Healthcare in Communities Amid Crisis ....................................................................................................................... 35

Data for Development .......................................................................................................................................................... 37
  2022 Census Technology to Ensure that Everyone Counts .................................................................................................. 40

Looking Ahead ...................................................................................................................................................................... 42

UNFPA Tanzania 9th Country Programme (2022-2027) .................................................................................................... 43

UNFPA Tanzania 8th Country Programme (2016/17-2021/22) .......................................................................................... 45
  Programme Expenses by Thematic Area 2021 .................................................................................................................. 50
ACKNOWLEDGEMENTS

The work of UNFPA in Tanzania would not be possible without the strong partnership with the Government of the United Republic of Tanzania, our donors, civil society organizations, youth-led organizations, disabled person’s organizations, and sister UN Agencies. We express our gratitude to them for the progress we have made in 2021 towards our joint vision of a better and more equal world for every woman, 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 ever closer, we look forward to continuing our work together and strengthening our partnerships to do more - and to do it better - while ensuring that no one is left behind in the implementation of development agendas.

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

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

Contributors
All UNFPA staff who are working hard to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled.

Design and Layout
Ayubu Lulesu (Communications Associate - Graphic Design @ UNFPA Tanzania)

Photos
Warren Bright /UNFPA
WHERE WE WORK

13,636,373
Women

26,809,828
Total Population in programme areas

13,173,455
Men

6,319,244
(24%)
Women of reproductive age

207,811
Refugees **

4,335,123
(16%)
Adolescent and youth (girls) aged 10-24 years

* Simiyu office closed in 2020

** Refugees Data Source: UNHCR population statistics report, 30 June 2022
FOREWORD

In the United Republic of Tanzania in 2021, it is estimated that over two million babies were born, and that 44 per cent of the total population is below the age of 15 years. In the midst of this dynamic and young population, expanding sexual and reproductive health services for the country’s youthful population, while ensuring rights and choices for all, is of paramount importance.

The mandate, challenge, and shared responsibility for UNFPA in support of the Government of Tanzania and in cooperation with development partners is to continue to provide these essential services and support for women and girls to realize positive health outcomes, and for youth to develop safely into adulthood.

UNFPA Tanzania’s Ninth Country Programme (2022-2027) began 1 July 2022. We are guided by UNFPA’s Transformative Results, the three zeros plus one: zero unmet need for family planning, zero preventable maternal deaths and zero gender-based violence and harmful practices, and zero new HIV infections. These goals compliment the National Development Plans for Tanzania mainland and Zanzibar, and the UN Sustainable Development Cooperation Framework. Together we plan forward with concrete steps toward the 2030 Agenda for Sustainable Development.

While planning forward, we also reflect to build upon our achievements from 2021, and UNFPA’s 8th Country Programme for Tanzania (2016/17 – June 2022). Achievements in this period included: enhancing availability of sexual and reproductive health services, empowering young people through knowledge and skill-building, and improving newborn and maternal health.
health services.
Specific achievements in 2021 included: building the capacity of 180 health care workers to offer quality services; refurbishing nine maternal health facilities to make motherhood safer and enable more mothers to give birth at health facilities; providing more than 1.9 million couples with modern contraceptives for one year thereby empowering them through rights and choices; and provision of technical and financial support to prepare for the 2022 Census.

Results featured in this report were made possible by the collective efforts and hard work of the UNFPA Country Office Team under the leadership of my predecessor Jacqueline Mahon. We thank Jacqueline for her dedication and paving the way for UNFPA’s work in Tanzania for impact and results.

In the midst of these exciting achievements, much work remains: HIV is a continuing threat, especially for youth, maternal mortality is unacceptably high, and thousands of young women in Tanzania continue to experience female genital mutilation, early and forced marriage, and other harmful practices.

UNFPA supports the Government of Tanzania to deliver on the commitment of the Nairobi Summit in 2019 to support access to sexual, reproductive, maternal, newborn and adolescent health.

We aim to ensure that no one is left behind, including people with disabilities, refugees and the most vulnerable, especially with the continuing urgency of COVID-19. We rise to the challenge to provide for the growing needs of an expanding population and build upon the opportunity of the demographic dividend.

We build on the energy, strength and dynamism of the young people of Tanzania, as we work together with youth organizations, civil society and development partners toward our shared goals to empower women and youth and adolescents with skills, knowledge and resources they need to thrive and grow.

Through innovative programming, collaboration, and building on our results, we continue to accelerate and scale up our efforts to build towards the transformative results and enhance sexual and reproductive rights and choices for all.

Tuko pamoja, na tunasona mbele pasipo kuyumbishwa, Jitihada zetu na Azimio letu kwa Wanawake, Wasichana na Vijana tumewekeza kwa kufanya kazi kwa pamoja kuhakikisha kuwa tunakuwa na dunia ambapo kila ujauzito unathaminiwa, Kila uzazi ni Salama na Kila Malengo ya Kijana yanafikiwa.
Our road to vision 2030

THREE ZEROS + 1
TRANSFORMATIVE RESULTS

ZERO UNMET NEED FOR FAMILY PLANNING

ZERO PREVENTABLE MATERNAL DEATHS

ZERO GENDER-BASED VIOLENCE AND HARMFUL PRACTICES

ZERO NEW HIV INFECTIONS
The programme worked to increase choices of contraceptives, empowering women and adolescent girls to make informed choices and decisions on their reproductive health and rights, and engaged influential community members to address norms and values that limit use of services by women and adolescent girls.
<table>
<thead>
<tr>
<th>Contraceptives Supplied by UNFPA to Increase Choices</th>
<th>Demographic and Health Impact of Contraceptives Provided</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female Condoms</td>
<td>Couples Fully Covered with Modern Contraceptive for one year</td>
</tr>
<tr>
<td>617,000</td>
<td>1,972,926</td>
</tr>
<tr>
<td>Male Condoms</td>
<td>Unintended Pregnancies were prevented</td>
</tr>
<tr>
<td>564,648</td>
<td>383,004</td>
</tr>
<tr>
<td>Emergency Contraceptives</td>
<td>Unsafe Abortions were prevented</td>
</tr>
<tr>
<td>238,270</td>
<td>86,267</td>
</tr>
<tr>
<td>Intrauterine Contraceptive Device (IUCD)</td>
<td>Maternal Deaths were prevented</td>
</tr>
<tr>
<td>4,000</td>
<td>695</td>
</tr>
<tr>
<td>Injectables</td>
<td>Direct Health Care Costs Saved</td>
</tr>
<tr>
<td>2,056,600</td>
<td>$25,106,998</td>
</tr>
<tr>
<td>Implants</td>
<td></td>
</tr>
<tr>
<td>404,707</td>
<td></td>
</tr>
<tr>
<td>Oral contraceptives Pills</td>
<td></td>
</tr>
<tr>
<td>564,648</td>
<td></td>
</tr>
<tr>
<td>In 2021, UNFPA procurement covered 51% of the contraceptive needs for Tanzania and 100% for Zanzibar; for other maternal health life-saving commodities, UNFPA procurement covered 87%.</td>
<td></td>
</tr>
</tbody>
</table>
Development of Strategies and Documents

The programme provided technical and financial support in the development of strategic documents and guidelines

2021 Highlights

UNFPA provided technical support in the development of the National Condom distribution guideline and supported the dissemination of the guideline in three zones

Developed Family Planning Job Aid in Zanzibar guideline, led by the Health Promotion Section of the Ministry of Health, as a tool to guide service providers to deliver quality services

UNFPA as a key partner collaborated with Government and other development partners to develop and launch the Tanzania FP2030 Commitments

Developed and disseminated the family planning framework and training package including voluntary family planning surgical contraception (VSC) and family planning preceptorship training packages
Capacity Building

Health care workers from selected facilities were supported to develop skills and knowledge to offer the various contraception choices to clients.

2021 Highlights

- Support in developing a multi-year Quantification and Procurement plan for both Mainland and Zanzibar - leading to achievement of zero stockouts at the Central Medical Stores Department in 2021 for mainland.

- **379 Health care workers, 178 male and 146 female** trained on Electronic Logistic Management Information system (ELMIS) to enhance availability of contraceptive commodities at the last mile.

Community Engagement and Counselling in Family Planning

Community awareness is key to promote demand and service utilization, the programme engaged key members with correct information for cascading to the community members.

2021 Highlights

- Community Health Volunteers sensitized **19,730 community members** in Zanzibar on correct information on contraceptives of which **7,220 received FP services**

- 29,503 clients (majority women) in refugee settings in Kigoma Region counselled on voluntary family planning; 16,521 decided to use modern contraceptive method
Pwidu (name changed) is the doctor working at the Magirisi Youth Friendly Services (YFS) in Magirisi Zanzibar. It is the only YFS near the health Centre with maternal facilities in an area of nearly 30,000 people. Every day 500 patients visit the centre, with about 8 to 10 women giving birth there daily.

Pwidu manages the family planning services with women and youth of the area. He has noticed a change lately. “Something must be changing in the community, as more and more young people are coming for the family planning services,” he says.

Meet Sheila (name changed); she lives in Mkunazini in Unguja, Zanzibar - Tanzania, with her husband and children. They rely on the insufficient and inconsistent income from their tailoring service for their livelihood. Sheila had her first child at the age of 13. Like many women among the world’s urban poor, she had limited knowledge and access to family planning services. By 28, she had three children, four miscarriages, two stillborn twins and was facing increasing hospital bills and debts, and suffering from declining mental and physical health. Family planning wasn’t discussed with her husband or in-laws. Sheila’s journey to family planning was one that she faced alone, and it wasn’t until the consequences of this lack of access became too much to bear that she found the courage to seek help.

“I lost my father when I was merely nine years old. My mother, due to low income, couldn’t take care of seven children. I never went to school, I got married at the age of 12 and I conceived soon after my first menstrual period”.

If women are suffering from the physical and mental toll of pregnancies by the time they ask for family planning services, they have been reached too late. The onus shouldn’t be on suffering women to seek out these services. Through Magirisi YFS, Sheila learned about the benefits of family planning and was able to sway her initially disapproving husband. Sheila explains, “My dreams are associated with my son. I will take proper care of him by giving him attention, good education, nutrition, and hygiene. To fulfill this dream, the spacing between children is very important to me”.

For both Sheila and her husband, family
“I lost my father when I was merely nine years old. My mother, due to low income, couldn't take care of seven children. I never went to school, I got married at the age of 12 and I conceived soon after my first menstrual period”.

- SHEILA
planning ensures their health and safety and helps them to take better care of their children and families. Sheila’s story illustrates the importance of timely family planning education for women and men alike. For every success story like Sheila’s, there are millions of stories where women and communities suffer due to a lack of timely FP education and access. Efforts like Magirisi’s YFS - to increase access to family planning education and services - improve the quality of women’s lives and set the foundation for a healthier, more prosperous society.

The YFS in Magirisi, Unguja, also improves family planning services. Efficient family planning empowers young people, especially girls, who often take full responsibility for parenting. Pwidu works with the girls and seeks to involve their partners and male family members (fathers and grandfathers) so that family planning can no longer be taboo and girls can choose the option they feel is best for them.

More and more young girls in the area choose family planning and focus on their careers or education. Therefore, they can do long-term planning for their lives and make decisions about their bodies. They can decide on their future.

“My dreams are associated with my son. I will take proper care of him by giving him attention, good education, nutrition, and hygiene. To fulfill this dream, the spacing between children is very important to me”.

- SHEILA
Access to quality care and reproductive health commodities reduces the risk of birth complications, unintended and mistimed pregnancies, infectious diseases, and deaths. With that reality, in 2021, the programme supported and delivered maternal health and life saving commodities to complement the Government of Tanzania efforts of offering accessible and quality reproductive health services.
Integrated Sexual and Reproductive Health Services

The programme placed integration at the core of service delivery so that clients receive health services in a continuum of preventive, promotive and curative services, according to their needs over time and across levels of the health system.

LIFE-SAVING MATERNAL HEALTH COMMODITIES PROCURED AND DELIVERED BY UNFPA IN 2021

- **4,119,640** Oxytocin Units
- **219,994** Zinc/ORS Units
- **213,300** Magnesium Sulphate Units
- **71,121** Misoprostol Units
- **1,172,000** Amoxicillin DT Units
SUCCESS STORY

Nyarugusu Refugee Camp Near Zero Maternal Deaths Through Health Service Delivery
Faila Kashindi, 27-years old, and a 22-year resident of Nyarugusu refugee camp, remembers fleeing her home country of Democratic Republic of the Congo (DRC) with her parents as a young child to seek safety and security. She is grateful that her family is together at Nyarugusu camp: her husband, mother, siblings, and her four children—all of whom were born at the refugee camp main hospital in Kigoma, Tanzania.

“In my most recent pregnancy, the doctor’s assessments and ultrasound showed the baby would be very big and I was worried, however the doctors and nurses provided counselling, and then I relaxed. I appreciated the ultrasound; I could see that my baby was okay,” said Faila.

Faila attended timely antenatal care visits, and received regular visits from community health care workers who provided information to guide a healthy pregnancy. The caesarean section birth was attended by a skilled health care worker trained on Comprehensive Emergency Obstetric and Newborn Care (CEmONC) and on infection prevention and control.

“The baby and I are healthy and doing well. I thank the health care workers, nurses and doctors for the high quality, thoughtful services they provided during labour and delivery. I thank them for welcoming my baby into the world,” said Faila.
Maternal health care in Nyarugusu refugee camp

More than 130,000 people reside in the Nyarugusu refugee camp in Tanzania’s Kigoma region (as of June 2022). Refugees in Nyarugusu Camp are mainly from Burundi and the Democratic Republic of the Congo with women and children contributing to 78% of the population.

In Nyarugusu refugee camp more than 98.8% percent of deliveries are conducted by skilled health care workers. This has been possible through community sensitization on early medical seeking behavior, deployment of 15 skilled and competent nurse midwives supported by UNFPA, regular capacity building of the health care workers on comprehensive emergency obstetric and neonatal care (CEmONC) and consistent supply of maternal health supplies, all supported by UNFPA and other members of the Sexual and Reproductive Health Sub-Working Group for the refugee operation in Northwestern Tanzania.

According to Health Information System data in recent years, the number of maternal deaths in Nyarugusu camp has been declining: in 2019 there were five maternal deaths, and four deaths in 2020. In the first and second quarter of 2021 there were three maternal deaths recorded; since then, to date, no maternal death has been recorded in the camp. Health care workers and partners continue to strive for provision of high quality maternal health care in order to maintain this achievement.

Health Care Worker Testimony

Benedicta Kweslema, an Enrolled Nurse with 28 years of experience has been working in the Nyarugusu main hospital maternity wing as a Nurse Midwife for the past two years. She provides nursing care in the antenatal and the postnatal wards, attending to mothers and newborns during and after labour and delivery.

Benedicta and colleagues attended two UNFPA supported trainings: a CEmONC training that covered topics on emergency preparedness, obstetric emergency response, and essential new-born care; and Infection Prevention and Control training which included hand hygiene, prevention of surgical site infections, and injection safety.

“This training has expanded our technical skills and knowledge on monitoring of labour and early detection of danger signs to make deliveries safer. I am better able to identify direct and indirect needs, and more effectively care for patients. The training has thus improved nurse-patient relationships, and enhanced trust from the refugee community that has in turn led to an increased number of women seeking services, and an increased number of safe deliveries at our health facilities,” said Benedicta.
Capacity building of the health care workers
In 2021 UNFPA supported trainings on monitoring of labour, infection prevention control and focused antenatal care to 47 health workers in Kigoma refugee camps which has steadily increase the health staff’s knowledge and competence in monitoring of labour/ delivery using a partograph and as well in provision of quality antenatal care.

UNFPA in collaboration with UN sister agencies, local and international NGOs and development partners continue to support the Government of Tanzania to deliver quality and comprehensive maternal health, targeting the Transformative Result of zero maternal deaths.
2021 Highlights

12 Health Facilities started provision of integrated reproductive health services in HIV Care and Treatment

FP/HIV Training Package was reviewed and completed and Male Involvement Guideline for RMNCAH was developed

Developed Guideline on Mental Health and Psychosocial Support for Health Workers in collaboration with the Ministry of Health, Directorate of Nursing and Midwifery Services, and partners, with the aim to assess, assist and build the resilience of health workers who are on the frontline of the COVID-19 response.

95 peer educators from 3 Higher Learning and Tertiary Institutions (HLIs) were trained on sexual and reproductive health and rights and on GBV and HIV referral mechanisms

In Kigoma Region refugee camps 98.8% percent of deliveries take place under skilled supervision

38,585 adolescents in humanitarian setting oriented on menstrual health hygiene and management
Highlights

5,720 dignity kits were provided to adolescent girls and young women in humanitarian setting in Kigoma region.

125,368 youth aged 10-24 years, 66,689 female (53%) and 58,680 male (47%), have been reached with SRHR information through peer educator programme.

896 first-time young mothers (FTYM) accessed information on their sexual reproductive health and rights.

Four Youth Friendly Services corners in 4 health facilities (2 in Zanzibar and 2 in Kigoma) were renovated.
Adolescents and Youth

Tanzania is a youthful nation with adolescents being a group with high unmet need and requirement for skills and information to empower them with bodily autonomy and agency to engage in decision-making about their bodies, their lives and their world. The programme supported the provision of life skills education, as well as capacitating young people to acquire entrepreneurial skills and empower them to engage in decision making structures.

400 out-of-school adolescent girls and young women, first-time young mothers, young people with HIV and young people with disability who were trained on Life Skills completed entrepreneurship skills programme that strengthened their skills to match with employment opportunities and build their capacity for income generation.

A study was conducted to highlight the available youth decision making structures at national and regional levels, and identify gaps and strengths. The study forms the basis of the advocacy to policy and decision makers, it also informs young people on available opportunities.

Created Youth Hub, a platform for young people to learn, share experiences and discuss their wellbeing, mainly on SRHR, GBV, employment, participation, and gender equality.

Built Capacity of 100 AfriYAN members on integration of innovation and creativity on entrepreneurship to expand their relevant skills and capabilities for income generation to sustain their lives.

Supported printing of the famous FEMA Youth Magazine (Issue 61 of October -December 2021), 96,250 copies distributed to 2,300 secondary schools in Tanzania mainland reaching approximately 2 million students with SRHR information.

UNFPA has been supporting the review of the National Youth Development Policy 2007 in mainland Tanzania, which calls for setting up coordination mechanisms that will foster active collaboration of stakeholders in advancing the youth agenda; the draft is currently in approval process.
2021 Highlights

Midwifery

Reviewed Nurses and Midwifery Scope of Practice and Essential Midwifery Competencies in line with International Confederation of Midwives standards

Reviewed and updated the Nursing and Midwifery Curriculum certificate and diploma levels to integrate the essential midwifery competencies and adolescent health, family planning, GBV, disability and ensure responsiveness to emerging issues like COVID-19

Advocated for establishment of a stand-alone midwifery programme for advanced diploma. The pilot of the curriculum will start in September 2022
Built capacity of 180 health care workers to offer quality services, 40 on post-abortion care and 140 on Emergency Obstetric Care management

The mentorship programme with four junior Obstetric/Gynecologists and 12 Medical Doctors is supporting the program goal in reduction of Preventable Maternal Deaths in Zanzibar. The same four Obstetric/Gynecologists were also trained on the repair of Obstetric Fistulas. The mentorship program has enabled the successful management of several complicated cases.

Refurbished and fully equipped nine EmONC health facilities by improving the maternity wings in the supported regions in Tanzania mainland; and strengthened referral system by providing one ambulance.

Strengthened maternal and perinatal death reviews in Zanzibar and Kigoma in selected facilities.

47 healthcare providers in refugee camps with increased capacity on monitoring of women during labour and delivery using partograph and on Focused Antenatal Care.

Emergency Obstetric and Newborn Care (EmONC)
The experience of childbirth makes a big difference in whether women seek care during future pregnancies.

Let us celebrate all those working to save the lives of women and babies by supporting safer pregnancies and deliveries—workers such as Mwanida, a midwife and trained mentor working in Tanzania’s Lake Zone Region.
Mwanida Edward, 26 years of age, is a nurse/midwife practitioner, nurse manager, and lead clinical mentor in Muriti Health Centre, Ukerewe, Mwanza. Mwanida enrolled in the School of Nursing and Midwifery at Bugando College of Nursing in 2006, becoming a midwife in 2013, before pursuing a Bachelor of Science degree in nursing at the Bugando University, Mwanza Tanzania. Mwanida’s dedication to maternal and newborn health pushed him from his comfort zone in the heart of Mwanza to Ukerewe District— one of the most rural areas in the country. In addition to providing midwifery services, Mwanida actively mentors young nurses and midwives, equipping them with knowledge and skills that make a difference between life and death.

This young midwife is worthy of admiration, for he has placed his ambitions on caring for pregnant mothers and he loves newborn babies. Mwanida is prepared to work in any place and at any time. While many young midwives shy away from the difficult working conditions and remote locations of many hospitals and health centers, Mwanida has persevered. He continues to pursue his career in this challenging setting in order to assist poor mothers and their newborns who are in great need of services. The difficult living conditions in the area means that midwives often don’t stay long in their posts and thus the health centres are frequently short-staffed. Mwanida, however, remains dedicated to serving the area and sometimes uses personal holidays to work in the health centres. He likes midwifery because he can instantly see the benefits of his work, a newborn baby. His happiest moment is when he delivers a bouncing healthy baby to a healthy, live mother. But he also takes every sad moment to heart, which motivates his work since he doesn’t want it to occur again and will always avoid it.

That is why Mwanida will continue to dedicate his life to midwifery. Every morning, his shift starts at 3:00 AM. Five hours later, in one routine day of work he had already assisted two normal deliveries, was preparing to transfer a woman to the hospital due to complications, had two additional women in labor, and was preparing to provide antenatal care. In between, he had decontaminated and sterilized the few delivery instruments and cleaned the delivery room. On average Mwanida supports 203 newborn deliveries per month.

Mwanida makes an effort to see that family planning supplies are available at the clinic, and supports provision of contraceptives for voluntary family planning.

Imagine being the only midwife or person with midwifery skills in such a setting. It’s an opportunity to call for more mentors and supervisors like Mwanida who look at every situation from the client’s perspective and who model empathy, good interpersonal relationships, and understanding. It’s an
opportunity to make almost every antenatal, childbirth, and postpartum care experience a positive one and boost women’s confidence in seeking skilled birth attendance.

The world needs more midwives like our unsung hero “Mwanida”, if we are to achieve the UNFPA’s vision 2030 Zero Maternal Death, a world where every pregnant woman and newborn receives high-quality care throughout pregnancy, childbirth, and the postnatal period. Midwives can also help achieve the UNFPA Mandate delivering a world where every pregnancy is wanted and every childbirth is safe.

The world must support every Mwanida with greater resources and better working environments. Those who succumb to the pressures of this difficult job need just as much help, so that they can become the midwives they aspire to be.

*Invest in midwives – Midwives save lives.*
3

ZERO GENDER-BASED VIOLENCE AND HARMFUL PRACTICES
Coordination and Implementation of National Policies, Strategies and Systems

2021 Highlights

Provided Technical Support to the evaluation process of the National Plans of Action of Violence Against Women and Children (NPA-VAWC) in Tanzania mainland and Zanzibar

Supported the establishment and orientation of a new national multi-sectoral committee on violence against women and children in Zanzibar

Increased awareness of 30 (18M/12F) new members of the Parliamentary Standing Committee on Community Development and Social Services in Tanzania mainland on the NPA–VAWC, GBV and harmful practices

Collaborated with the Government and other stakeholders to launch National Anti-Female Genital Mutilation Strategy and Implementation Plan (2020/2021 – 2024/2025) in Tanzania mainland and the creation of the national anti-FGM multi-stakeholder coordination group

UNFPA, in partnership with 17 civil society, women and youth-led organizations of persons with disabilities, conducted a National Dialogue on Realizing Sexual and Reproductive Health and Rights and a Life Free from Violence for Women and Young Persons with Disabilities in Tanzania. 143 people (81F/62M) participated, including 75 persons with disabilities

Supported the Government of Tanzania mainland to establish a National Framework to guide the establishment and provision of sexual and reproductive health, HIV, GBV and sexual exploitation abuse and harassment services in higher learning institutions which was launched by the Prime Minister during the 16 Days of Activism
Launched three district Police Gender & Children Desks in the district police stations of Buhigwe, Manyovu and Uvinza (Kigoma) and Simanjiro, and established one district Police Gender & Children Desk in Kiteto

UNFPA provided technical support in the development and finalization of the Standard Operating Procedures (SOPs) on Violence Against Children and Gender-Based Violence Case Call Management of the National Child Helpline (#116) in Mainland Tanzania

The National Child Helpline (#116) and the Afya Call Center (#199) were strengthened to provide information and counselling on GBV and harmful practices. The National Child Helpline reached out to 3,316 girls and 3,253 boys, while the Afya Call Center supported 48,491 women and girls and 43,648 men and boys. 9% of the calls and 0.7% of the calls, respectively, were related to incidences of GBV and harmful practices and were referred to the Social Welfare, Police Gender and Children’s Desks and health care facilities.
14 Women and Children Protection Committees at the ward and village levels were established, and 248 members were oriented on their roles in the prevention and response to violence against women and children in Tarime District, Mara Region and in Msalala District, Shinyanga Region.

676 inter-faith leaders were mobilized to prevent and respond to GBV and harmful practices in Mara Region, and received support to launch a regional-level statement to advocate for the abandonment of female genital mutilation.

330 young people in the Kigoma Region were oriented on the importance of male involvement in responding and prevention of VAWC.

481 community dialogues on the social norms and values that perpetuate gender equality and positive norms and behaviours to prevent and respond to GBV and harmful practices were conducted and aired through radio programmes in the regions of Mara, Manyara, Shinyanga, Kigoma Regions and in Zanzibar. The programmes reached an estimated 14.1 million people.

The awareness of 845 (583M/262F) refugees living in three camps in Kigoma Region on the Prevention of Sexual Exploitation and Abuse (PSEA) was raised, as part of the UNFPA Headquarters’ Global Advocacy and Awareness Raising Campaign launched in the context of the 2021 UNFPA Executive Director’s IASC Championship on Protection from Sexual Exploitation and Abuse and Sexual Harassment.

As part of commemorations for 16 Days of Activism to End Violence Against Women, UNFPA and partners selected and engaged 16 Champions of Change who were recognized and celebrated on their remarkable work in ending GBV and inspiring action among other community members, thus contributing to end GBV and harmful practices and to drive positive, transformational and sustainable change to advance gender equality.
1,275 girls empowered with information and life skills to recognize cases of GBV and harmful practices and stand up for their right to live a life free from violence through out of school Girls Clubs (250), safer shelter (925) and schoolgirl clubs and radio programmes (100)

263,333 school children and adolescents (158,070F/105,263M) received life-saving information about the consequences of female genital mutilation and the existence of a safe shelter for girls which runs a life-skills based “Alternative Rites of Passage to FGM” programme

52,985 school children and adolescents (26,330F/26,655M) reached with Information through the GBV campaign in Zanzibar
SUCCESS STORY

Improved Access to Gender-Based Violence Prevention and Response Create Change for Women and Girls in Bugarama Ward

Hilda is more than a survivor; she is an instigator of change who boldly stepped forward to seek support in response to gender-based violence in her household. A resident of Bugarama Ward, Msalala District, affected by alcohol-related domestic violence, Hilda successfully took action to improve her situation and resultantly empowered all women in Msalala.

Hilda and her husband, Mwinyishehe, now in their mid-30s, have two children; a seven-year-old boy and three-year-old girl. Soon after their marriage, Mwinyishehe developed negative alcohol consumption habits. After drinking with friends, he was often aggressive and violent towards Hilda and their children.

Through women in her community, Hilda was invited to join the Bugarama Knowledge Center,
where she participated in community dialogues about gender-based violence. She received psycho-social counselling and learned about her rights and opportunities to seek support from social welfare and health care providers at the Bugarama Health Center, who supported her to file a police report against her husband.

“It was the first time a woman from the Bugarama Ward had filed a domestic violence case against her husband. We hope that more survivors of gender-based violence will feel empowered to come forward and seek assistance. Through GBV case management trainings and mentorship, we are aware of the steps to manage these sensitive cases,” George Mwimboko, GBV Service Provider at the Bugarama Health Center.

Mwinyishehe was arrested, and simultaneous to his judicial court trial, he and Hilda went through marriage counselling. Within a month the couple reached a compromise and Hilda withdrew the case. Mwinyishehe received a warning from the judge that any further acts of domestic violence or alcohol abuse would result in a prison sentence. He pledged before local authorities to be a responsible husband and father and committed to financially provide for his family. He resumed employment as a security guard and reunited with his wife and children.

Hilda has taken further steps to share her story, to encourage other women to speak out and seek assistance. After Hilda’s case, women in Bugarama Ward became more aware of their rights and united their efforts to eliminate gender-based violence through awareness raising in the community on market days.

Since the KOICA funded UNFPA and UN Women Joint Programme: “Realizing Gender Equality through Empowering Women and Adolescent Girls” started in 2020, the women’s group in Bugarama have actively participated in Knowledge Centers dialogues, which provide education on their rights and promote community-led solutions and actions for prevention and response to violence against women.

As a specific action, the women’s group in Bugarama Ward collectively decided that they would no longer prepare and serve alcohol at home, and with local or traditional liquor no longer distilled in the village, they called upon men who want to drink to go outside the village. As a result, the overall consumption of alcohol decreased and male community members began to support women and girls who raised their voices against violence.

The UNFPA and UN Women Joint Programme aims to advance gender equality and empower women and adolescent girls in Shinyanga and Singida Regions. These regions were selected due to high poverty rate, low economic
empowerment of women, and prevalence of GBV and harmful practices. The programme promotes economic empowerment for female farmers through introduction of new horticulture and sunflower production practices and addresses GBV and child marriage through multi-sectoral prevention and response.

Key achievements under the KOICA-funded Joint Programme include the establishment of women and children protection committees; one at the district, 12 at the ward and 22 at the village level, outreach from 60 trained paralegals, and convening of two Knowledge Centers.

Women at the Bugarama Knowledge Center participate in community dialogues to end GBV in their community. The effort is supported by the UNFPA/UN WOMEN Joint Programme, with financial support from KOICA.
Tanzania HIV prevalence is still recorded as high (4.5%) with significant regional variations and adolescent girls and young women accounting for 80% of all new infections. UNFPA joins efforts with the Government of Tanzania and other UN agencies in Tanzania in addressing HIV prevention among young people and key and vulnerable populations. UNFPA partnered with the government to address and advocate for a comprehensive and integrated approach to HIV prevention aiming at reducing new HIV infection and ending the AIDS pandemic.
UNFPA provided technical support to the Ministry of Health to review and finalize the FP/HIV training Package, a package which is being used for capacity building of healthcare workers and guide facilities on FP and HIV services integration.

UNFPA trained health care workers from 12 health facilities on integration of reproductive health services and these 12 health facilities started provision of integrated reproductive health services in HIV Care and Treatment.

To strengthen condom programming in Tanzania UNFPA provided technical support in the development of the National Condom Distribution Guideline and supported the dissemination of the guideline in three zones.

95 peer educators from 3 Higher Learning and Tertiary Institutions (HLIs) were trained on sexual and reproductive health and rights and on GBV and HIV referral mechanisms. These peer educators are the focal points for SRHR information and guide on existing referral mechanisms for these services including HIV care and treatment.

Supported the Government of Tanzania mainland to develop a National Framework to guide the establishment and provision of sexual and reproductive health, HIV, GBV services in higher learning institutions.

UNFPA engaged 30 Key and Vulnerable Population (KVP) from 15 KVP networks to inform them about the condom distribution guideline and how the KVP network can strengthen access to condoms via the existing distribution system from the national to the community level. 3,974,910 condoms were distributed (4,398 female condoms) to various health facilities and hot spots with a focus on key populations.

UNFPA worked with the government to disseminate the amended HIV and AIDS Prevention and Control Act (HAPCA) in 10 Districts in the supported regions. The amended act was disseminated to police officers, district legal officers, gender desk officers, social service workers, health care workers, people living with HIV, youth and representatives from persons with disabilities. This aims to inform these gatekeepers about HIV self-testing and access to care and treatment among adolescents and young people as a key component in HIV Prevention.

2021 Highlights
UNFPA continued COVID-19 response and support with the aim to uphold sexual and reproductive health and rights and to safeguard essential health services during the pandemic, especially for women, girls and young people. The response effort builds on the plan to address COVID-19 prevention and adapts to emerging priorities for COVID-19 preparedness and response, while ensuring continuity of essential Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) services and GBV response.
As part of National Response to COVID-19, UNFPA continued to engage in the various government coordination pillars to ensure the continuity of essential health services and SRHR.

Strengthened reporting mechanisms of GBV and other harmful practices through online systems such as the National Helplines in both Tanzania mainland and Zanzibar.

Procurement of Personal Protective Equipment for health workers to continue safeguarding the provision of uninterrupted RMNCAH services

Health care workers directly supported and deployed to selected facilities for the provision of essential health services in the context of COVID-19 include:

Recruitment, training on COVID-19 prevention, and temporary deployment of 24 health care workers (nurse, midwives and clinical officers) in health facilities to ensure continuity of RMNCAH service provision in Simiyu region. In addition, 65 health care workers were trained as Trainers of Trainers on COVID-19 case management, surveillance, and preventive measures. To further reinforce health service provision in Simiyu region, the regional isolation centre - infectious disease ward at Bariadi Hospital was renovated and equipped.

Train and provide mentorship to 160 front line health workers newly recruited in selected health facilities in Dar es Salaam, Dodoma, Mwanza and Shinyanga especially those providing RMNCAH services in COVID-19 and infection prevention and control.

25 nurses contracted to offer Family Planning and SRH services to reinforce 12 health facilities in Zanzibar.
Facilitated the temporary hiring of 70 health care workers, mainly nurses and midwives to address increased workload due to COVID-19 (in Dodoma, Dar Salaam, Mwanza, Shinyanga), and continue provision of essential services. A further 320 frontline health care workers (nurse midwives, clinical officers) especially those providing RMNCAH services in COVID-19 facilities, were trained and mentored in infection prevention and provision services surrounding Sexual and Reproductive Health and GBV in the context of COVID-19. These health care workers reinforcement supported 69 health facilities in target regions to continue providing essential maternal health services.

Community dialogue activities conducted, including puppet shows, sensitization meetings, and radio programs, reaching over 100,000 people, supported by 70 community facilitators who were trained to support community dialogues in Dodoma, Mwanza and Shinyanga, in order to increase awareness of COVID-19 and utilization of SRHR and GBV information and services. Participatory community dialogues engaged community and religious leaders, influential community members, men’s and women’s groups, gender desk officers in respective districts. NGOs, young people and media were engaged to increase community awareness on SRHR, GBV prevention and COVID-19.

Radio spots and behaviour change communication materials produced and disseminated, with 25 local radios in selected regions airing COVID-19 messages.

In recognition of the need for continuity of COVID-19 prevention and screening services, direct support was provided for 42 Port of Entry Staff.

To avoid the effect of COVID-19 causing delays in the production, shipment and arrival of commodities, UNFPA worked with suppliers to expedite family planning and maternal health supplies orders to ensure stock availability. UNFPA works closely with the Government of Tanzania and partners to closely monitor the commodities stock status and to place timely orders.
SUCCESS STORY

Undeterred by the Pandemic: How Athuman Delivered Comprehensive Healthcare in Communities Amid Crisis

In the wake of the COVID-19 pandemic, Mr Abdul Athuman, a Community Health Worker (CHW) in Mwanza Region of Tanzania has lived up to the promise of keeping his community healthy during the crisis.

“I have visited many households to deliver educative messages on COVID-19 prevention. But that isn’t all. I have assured my community that basic health services such as reproductive and child health are still accessible,” says Athuman, who resides and works in Buzuruga ward, Ilemela District.

He is one of the 1072 CHWs who were recruited by Benjamin Mkapa Foundation (BMF) under UNFPA support, and equipped with relevant knowledge to extend health services to communities that would have otherwise missed out on important healthcare services.

On top of raising awareness about COVID-19 in communities, the CHWs ensured continued access to better nutrition, reproductive and child health as well as sensitizing households to enroll in improved Community Health Fund (ICHF).

“What I particularly did was to sensitize men to get involved in antenatal healthcare,” he says. According to Athuman, male involvement in maternal and child health was low in Buzuruga ward. “Initially, we used to have an average of two men accompanying their spouses for antenatal clinic on a day. But since I started sensitizing the communities, the number of men has risen to 14. This to me is an achievement, and is a result of the knowledge and financial support I obtained through Mkapa Foundation.”

Like other CHWs in Ilemela and Nyamagana Districts of the region, Athuman was equipped with a mobile phone, protective equipment
and knowledge to extend door to door health services.
“I received incentives through the Mkapa Foundation to work. There was no time I couldn’t communicate with my fellow community health workers because of lack of airtime on my mobile phone.”

He further provided education on family planning to women in his community, alongside the awareness campaign on COVID-19. In collaboration with health staff at the health centers, he also provided education in healthy living to help people reduce the risk of noncommunicable diseases such as cancer.
“Through this project, we also visited households of clients who are on life-long HIV treatment to ensure that there is no client miss up or lost follow ups for those on the ARV medication.”

According to the Acting Regional Community-based Health Promotion Coordinator, Mwanza, Ms Claudia Kaluli, the Pambana na Korona Project implemented by BMF with UNFPA support has empowered 171 CHWs in Ilemela and 175 CHWs in Nyamagana District. Ms Kaluli says the CHWs have contributed to a rise in the number of women delivering at health facilities in the region.

“Two year ago, our region was recording less than 80% of women who deliver in health facilities but since CHWs started sensitizing communities, we have started recording more than 90% of health facility deliveries and our region is in the green zone in terms of indicator achievements.”

She attributes the improvement in emergency obstetric care in the region to the contribution of CHWs, in collaboration with other health staff in health facilities, through the referral system.

Mr Abdul Athuman conducts a session on health education at Buzuruga Health Center’s Reproductive and Child Health clinic.

“I have visited many households to deliver educative messages on COVID-19 prevention. But that isn’t all. I have assured my community that basic health services such as reproductive and child health are still accessible,”
- Athuman, Buzuruga, Ilemela District.
UNFPA collaborated with the National Bureau of Statistics and other Development Partners to prepare for the 2022 Census that will for the first time use digital technology. The census will establish the national count of population and houses. This is an important step in understanding the population structure, dynamics and transition.

UNFPA partnered with the Government, organizations of persons with disabilities and UN agencies for a comprehensive Situational Analysis on the Rights of Persons with Disabilities in the United Republic of Tanzania, which provided important recommendations for the development of the UN Joint Programme to Advance the Rights of Persons with Disabilities in the United Republic of Tanzania.
2021 Highlights

Digital Census
In 2021 a pilot census was conducted in 13 selected regions of Tanzania mainland and five regions of Tanzania Zanzibar; results from the Pilot Census provide necessary information to improve coordination and resources for the 2022 Population and Housing Census. Additional support included the provision of technical assistance to develop guidance materials and advocacy guidelines, and the development of over 11 district profiles.

Regional Data at a Glance
Through Simiyu Info, a regional database, created by Simiyu regional secretariat, decision makers are provided access to regional data at a glance to support informed decision making. The database encompasses socio-economic indicators at the regional level. Simiyu Info serve is a global initiative to involve local government in the implementation, follow-up and review processes of Agenda 2030 and to support reporting.

Population Policies
The population policy is an overarching policy; UNFPA is supporting to review both the policy in Tanzania mainland and that for Zanzibar. This ongoing process of policy development will benefit
from data and information received through the 2022 Census and the ongoing demographic and health survey.

**Civil registration and vital statistics (CRVS)**
Three additional private health facilities in Zanzibar were integrated into the central CRVS database/server for vital events registration, which connects multiple private and public health facilities. The information is visible to all connected centres; the system can facilitate requests for printing of records from district registrar offices.

Zanzibar Civil Status Registration Agency was supported to organize data entry exercises digitizing archived records to facilitate the availability of such records for eight districts of Unguja and Pemba in which the CRVS system had been delayed. Over 176,000 records were fully digitized into the new CRVS system of Zanzibar beginning from the year 1907.

**Formation of Parliamentary Forum on Population and Development in Zanzibar**
Advanced Meeting of MPs in Zanzibar on budget for Family planning - leading to commitment for the allocation of funds for SRH services particularly family planning.
SUCCESS STORY

2022 Census Technology to Ensure that Everyone Counts

For every step of the census process: mapping, technology preparation, database development, training enumerators and beyond, extensive time and resources have been invested in preparation for the 2022 Population and Housing Census, conducted by the Government of Tanzania.

Led by the National Bureau of Statistics and the Office of Chief Government Statistician, the 2022 Population and Housing Census is the first digital census in Tanzania, and the first to conduct a housing count and physical addressing using digital software and equipment. For the first time, geospatial technologies were used to generate census field maps, and collect and digitize census information.

National Bureau of Statistics technical field teams conducted field mapping work in 2018 and 2019 using e-hand-held tablets with Geographical Information Systems (GIS) software to demarcate the country into enumeration areas – small geographic areas canvassed by one census enumerator during data collection. Enumeration areas incorporate administrative boundaries with the mapping of landmarks, including schools, health facilities and water points. These investments and level of detail will optimize population data accuracy, ensuring the generation of high-quality data.

Technological advancements for the 2022 census have required additional preparation and skill-building. As in all previous censuses in Tanzania, UNFPA serves as a technical partner throughout the census process, and has provided financial and technical assistance for the use of new technologies. UNFPA support in the preparation phase included assistance to prepare census cartography and develop guidance documents, questionnaires, and gather resources and support through inter-agency efforts.

In order to familiarize census staff with combined data collection methods and new GIS technologies, UNFPA facilitated the exchange of census knowledge and best practices through South-South cooperation, leveraging the expertise of countries that have successfully used these technologies.

Prior to the 2022 census, UNFPA conducted sensitization activities with youth to share information on the significance of census
participation, and organized symposiums of young people to exchange ideas and experience on the importance of population matters in linkages to socio-economic development.

The census is the primary source of national demographic, social and economic data. The once-a-decade exercise results in vast amounts of national and local level data, disaggregated by age and gender, which is an essential resource to identify population needs and development priorities. This resource provides government and development partners with data to inform decision making and resource allocation for development policies, plans and programmes.

By reaching all households in the country, the census is a unique source of information to map the needs of vulnerable and marginalized groups – women and girls, adolescents, older people, persons with disabilities. The data generated will be a cornerstone for tracking progress towards national, regional and global development commitments, including the Sustainable Development Goals, and the Programme of Action of the 1994 International Conference on Population and Development.

In collaboration with the Government of Tanzania, UNFPA will continue to support compilation, analysis and dissemination of the 2022 census results, to see that the data is widely accessible in order to enhance evidence-based decision making, accountability and transparency, with priority on leaving no one behind.
LOOKING AHEAD

Highlights

The Country Office engaged in development of the UNSCDF 2022-27

The Country Office developed the 9th Country Programme Document 2022-27

UNFPA to continue with fostering partnerships to address the three zeros


The Country Office led joint UN efforts and reported on the 2021 Universal Periodic Review for the United Republic of Tanzania
UNFPA Tanzania 9th Country Programme (2022-2027)

The new UNFPA Tanzania country programme is well aligned to the national Five-Year Development Plan III for mainland Tanzania, and the Zanzibar Development. The programme priorities are directly derived from three outcomes of the UNSDCF: (a) people; (b) prosperity; and (c) an enabling environment.

The programme mobilizes efforts to achieve the three transformative results, in both development and humanitarian contexts, by supporting the government and national partners to accelerate actions to enhance universal access to Sexual and Reproductive Health services.

**OUTPUT 1.** Laws, policies and plans, and accountability frameworks are developed, harmonized and strengthened to address reproductive health and rights, including prevention and response to GBV for all people, in particular women, adolescents and youth, PWDs and those in humanitarian contexts.

**OUTPUT 2.** Capacities of systems, institutions and communities strengthened to provide people-centred, high-quality and comprehensive SRH information and services, including supplies and services to address HIV and GBV in humanitarian and development contexts.

**OUTPUT 3.** Women, girls, young people and vulnerable population groups are empowered through gender-transformative approaches to exercise their reproductive health rights and utilize SRH and GBV prevention and response services in a safe and supportive environment.
OUTPUT 4. Strengthened skills and opportunities for adolescents and youth to ensure bodily autonomy, leadership, voice and participation, and to build human capital.

OUTPUT 5. National data systems are strengthened to account for population dynamics and population groups left behind in development and humanitarian policies and programmes, as they relate to ending unmet needs for family planning, ending preventable maternal death, and ending GBV and harmful practices in the United Republic of Tanzania.
The 8th Country Programme enabled significant progress towards the UNFPA mission to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled. Programme efforts increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV that are gender-responsive and meet human rights standards for quality of care and equity in access.

In partnership with the Government of Tanzania, donors, civil society organizations, youth-led organizations, disabled person’s organizations, and sister UN Agencies, programme achievements included:

**Establishment of:**
- 9 Police Gender and Children Desks
- 3 One-Stop Centres for GBV case management
- 103 additional health facilities, increasing access to emergency obstetric and newborn care (EmONC) and youth-friendly services

**Family planning**
Through family planning availability, and coverage of millions of couples with modern contraceptives, significant impact to:

<table>
<thead>
<tr>
<th>metric</th>
<th>quantification</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,524,695</td>
<td>Unintended pregnancies were prevented</td>
</tr>
<tr>
<td>839,986</td>
<td>Unsafe abortions were prevented</td>
</tr>
<tr>
<td>7,694</td>
<td>Maternal deaths were averted</td>
</tr>
<tr>
<td>$190 m</td>
<td>Health care costs* were saved</td>
</tr>
</tbody>
</table>

* Estimated figures
The procurement of family planning commodities covered 100 per cent and 49 per cent, respectively, of family planning commodity needs for Zanzibar and mainland Tanzania. It also led to a 95 per cent availability of family planning commodities in health facilities.

Forecasting, quantification and procurement of reproductive health commodities including Personal Protective Equipment were fully met, achieving 100% procurement of life-saving maternal health commodities.

With complimentary funding from FCDO and UNFPA Supplies, the supply chain was strengthened, with 64 health care providers trained on the Logistic Management Information System to ensure visibility and availability of commodities; for Zanzibar, a total of 212 were similarly trained.

**Maternal health**

Through maternal health programming, UNFPA increases the capacity of government, civil society organizations and private institutions to deliver comprehensive maternal health services. Projects supported expanded access to Emergency Obstetric and Newborn Care, including through the construction and refurbishment of facilities to deliver quality maternal and newborn health care and reduce maternal mortality and morbidity.

Increased number of Emergency Obstetric and Newborn Care (EmONC) sites:
Comprehensive EmONC sites from **two to 15**; Basic EmONC sites increased from **nine to 47**

**Sexual and Reproductive Health and Rights**

Through a system strengthening approach, progress in Sexual and Reproductive Health and Rights related indicators including:

**Increased institutional delivery** from 55 percent in 2015 to 83 percent by 2020

**Increased antenatal care coverage** (four ANC visits and above) from 43 percent in 2015 to 90 percent by 2020
Adolescents and Youth
Through enhanced capacity of partners to reach marginalized adolescents and implement community-based life skills education programmes, UNFPA supported the establishment of youth-led networks on leadership and effective participation in decision making.

Number of youth-led organisations with the capacity to provide out-of-school youth with life skills and sexuality education using national guidelines increased from zero to 45

Gender Equality and Women’s Empowerment
Through support for community empowerment initiatives, interventions on ending FGM and on prevention of early, forced and child marriage, and development of community awareness.

Number of adolescent girls completed empowerment programmes in selected districts for protection from female genital mutilation and child marriage: over 3,600

Maternal and Perinatal Death Surveillance
In multiple regions, accountability was enhanced through institutionalizing the Maternal and Perinatal Death Surveillance and Response (MPDSR) database, an electronic database to count and determine the cause of every prenatal and maternal death, with the aim of improving the quality of care for pregnant women. UNFPA supported MOH in the implementation of MPDSR cycle at national and sub-national levels.

Census preparation
Provided support to the Government of Tanzania through the National Bureau of Statistics in preparation for the 2022 National Population and Housing Census as a technical partner. Support included financial assistance and training, including through the provision of assistance to develop guidance materials, questionnaires, and the 2022 census cartography.
**Prevention of GBV and other harmful practices**

Strengthened support for transformation of negative social norms and values that perpetuate gender inequality, GBV, VAWC, FGM and other harmful practices.

- GBV awareness-raising reached 18 million people through radios and jingles in community radios
- 500 religious leaders in Zanzibar, and 102 in Kigoma were trained to prevent and refer gender-based violence survivors to health, police and social services
- Through the establishment of Knowledge Centres and organization of over 100 community dialogues in Kigoma and Shinyanga Regions, over 1,000 community members were reached with information on GBV and harmful practices

**Database development**

Strengthened capacity of government and national institutions for the availability and utilization of high-quality disaggregated population data, according to sex and other factors including GBV and disability, for formulation, implementation and monitoring of policies and programmes, including in humanitarian settings.

- Support creation and set-up of 11 databases with population based-data for mapping of socio-economic and demographic inequalities

**Strategic documents**

In support of providing rights and choices for all, during the eighth country programme, UNFPA supported the development of multiple strategic documents, policies, plans, curricula, and strengthened databases, including for disability, population, and civil registration and vital statistics.
Supported mainland Tanzania and Zanzibar to develop:

- National Population Policy
- Higher diploma curriculum for midwifery and anesthesia
- Health sector strategic plans, including the Reproductive, Maternal Newborn, Child and Adolescent Health Plan III
- COVID-19 Guidelines for Reproductive Health Services

Supported the development of the:

- National Youth Policy
- National Standards for Provision of Adolescent-friendly Services
- Youth Participation Strategy
- Youth Council Regulations
- Shinyanga Regional Strategic Plan on GBV

In the area of family planning, supported the Government of Tanzania through the Ministry of Health to develop:

- National Family Planning costed Implementation Plan (2019-2023)
- First costed Family Planning implementation plan for Zanzibar
- Family Planning Costed Investment Cases

Strategic document development and review in support of Family Planning:

- The Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) COVID-19 response guideline and guidance on COVID-19 for Community Health Volunteers were developed, and Health Service Providers were oriented on the procedures to facilitate safe service provision.
- Review of the National Youth Development Policy, 2007- for mainland Tanzania
- Review of the national life skills training manual and standard guide for out of school youths
- UNFPA supported the government in the development of the Health Sector Strategic Plan (HSSP V)
- UNFPA supported the government in the development of the National Plan for Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition (2021/2022 - 2025/2026) - One Plan III
Programme Expenses by Thematic Area 2021

Expenses in USD

- Sexual and Reproductive Health and Rights: 2,798,128
- Adolescents and Youth: 625,387
- Gender Equality and Women’s Empowerment: 1,963,657
- Population and Development: 713,364
- Organizational Effectiveness and Efficiency: 166,458

Core Resources

Non-Core
Thank you for ensuring rights and choices for all
Delivering a world where every pregnancy is wanted, every childbirth is safe, and every young person’s potential is fulfilled.

1131C Msasani Road, Masaki, P.O. Box 9182, Dar es Salaam, Tanzania

tanzania.info@unfpa.org
tanzania.unfpa.org
facebook.com/UNFPATZ/
twitter.com/UNFPATanzania/
instagram.com/unfpatanzania/