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FOREWORD

2019 WAS A YEAR OF MILESTONES.

We commemorated 50 years of UNFPA and the 25th anniversary of the International Conference on Population and Development (ICPD).

At the 1994 ICPD in Cairo, 179 governments adopted a visionary Programme of Action that put individual rights and choices and women and girl’s empowerment and gender equality at the heart of sustainable development efforts - the world has not been the same since. In the quarter of a century since Cairo more women and girls have been able to exercise their rights and choices, advancing gender equality and paving the way for healthier, more productive lives for untold millions.

In 2019, we celebrated this progress at the Nairobi Summit on ICPD25, where – together with the Governments of Denmark and Kenya, and stakeholders from around the world – we regalvanized commitment to complete the unfinished business of the ICPD and to accelerate action on UNFPA’s three transformative results – zero maternal death, zero unmet need for family planning, and zero gender-based violence and harmful practices – within the framework of the 2030 Agenda.

We came away from the Summit with a clear roadmap of what we need to do to deliver on the bold promise of Cairo for those who have been left behind as we adapt to new challenges and new realities.

We will carry this powerful momentum forward as we enter the Decade of Action to achieve the Sustainable Development Goals by 2030, and as we celebrate 75 years of the United Nations and 25 years since the Beijing World Conference on Women.

Together with our partners we will do more and do it better to realize our three transformative results and the world we imagined in Cairo – and keep our promise of a better future for women and girls and young people in Tanzania…leaving no one behind.

Ms. Jacqueline Mahon
UNFPA Representative,
United Republic of Tanzania.
WHERE WE WORK

30,605,555
Total population in programme areas

15,621,833
(51%)
women

5,815,055
(19%)
adolescents and youth
(19 to 24 years)

265,831
refugees in Kigoma Region


TOWARDS ZERO
UNMET NEED FOR FAMILY PLANNING

Highlights of progress in 2019

Impact of contraceptives procured by UNFPA Tanzania

<table>
<thead>
<tr>
<th>Service</th>
<th>TODAY</th>
<th>2030 TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Couples provided with one years’ supply of modern contraceptives</td>
<td>2.3 million</td>
<td></td>
</tr>
<tr>
<td>Unintended pregnancies prevented</td>
<td>661,459</td>
<td></td>
</tr>
<tr>
<td>Unsafe abortions averted</td>
<td>148,598</td>
<td></td>
</tr>
</tbody>
</table>

Contraceptives procured by UNFPA Tanzania

<table>
<thead>
<tr>
<th>Contraceptive Type</th>
<th>TODAY</th>
<th>2030 TARGET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral contraceptives (the pill)</td>
<td>28,800</td>
<td></td>
</tr>
<tr>
<td>Doses of injectables</td>
<td>1,946,000</td>
<td></td>
</tr>
<tr>
<td>Implants</td>
<td>733,922</td>
<td></td>
</tr>
</tbody>
</table>

People reached with voluntary family planning services and information through outreach activities in Zanzibar

33,020
Towards zero unmet need for family planning information and services

We are committed to supporting government and communities to expand access to high-quality, client-orientated, rights-based voluntary family planning services - both contraceptives and counselling.

Our focus is to support efforts that strengthen systems and build human resources to ensure that the full range of quality contraceptives are consistently available and accessible to women, adolescents and youth, and populations in underserved and humanitarian settings.
UNFPA Tanzania provided support to the government to procure contraceptives on their behalf and to strengthen the forecasting and quantification of reproductive health commodities for 2019/2020.

IN 2019

50 service providers received training and support to strengthen their capacity to provide rights-based, client-orientated, voluntary family planning services.

7,140 women made an informed choice to use a voluntary family planning method in Nyarugusu refugee camp, Kigoma Region.

12 HIV Care and Treatment Centres integrated voluntary family planning and cervical cancer screening and treatment into routine HIV services, offering clients the convenience of accessing multiple sexual and reproductive health services in one place.

133 teams were established to take the lead in strengthening supply chain management, logistics and forecasting to ensure the full range of quality contraceptives are consistently available at health facilities.

1,130 staff from all levels of the health system received training and mentoring in supply chain management, logistics and forecasting.

A national strategy for condoms was created for the Tanzania mainland.
Meet Haji.
He lives in Magharibi District, Unguja, Zanzibar, with his wife, who is 24. They have four children who are all very close in age.

Haji was initially uneasy when a community health volunteer came to his house to speak with him and his wife about voluntary family planning. Although his wife was keen to talk about contraceptive options, Haji refused saying it was not something for a man to discuss.

The community health volunteer took Haji to one side and after a lengthy discussion – which both the health volunteer and Haji admit was extremely uncomfortable – he agreed to attend couples voluntary family planning counselling.

During the sessions, healthcare staff were able to allay Haji’s fears – and dispel some of his misconceptions around voluntary family planning – and together Haji and his wife agreed upon a modern contraceptive method – which they are still using for birth spacing. Their youngest child is now two-years-old.

People’s attitudes are now slowly changing in Zanzibar.

The contraceptive prevalence rate remains low in Zanzibar at 14 per cent with a significant unmet need and in 2019 we supported local volunteers to show families the benefits of voluntary family planning with funding from UNFPA Supplies. We also worked with men, including religious leaders and 335 village leaders (Sheha), supporting training on voluntary family planning and Islam.

Village leaders – and 14 male groups that were formed in 2019 – are now championing efforts to break down barriers that prevent people from seeking out voluntary family planning services and information, reinforcing their messages with evidence from the Quran and Hadith – and as Haji says, people’s attitudes are now slowly changing in Zanzibar.
Highlights of progress in 2019

Maternal deaths averted
impact of contraceptives procured by UNFPA Tanzania

Doses of life-saving maternal medicines and pregnancy supplements

Safe deliveries assisted in Nyarugusu refugee camp, Kigoma Region

Midwives trained and educated

Nurse-Midwifery Curriculum and practical books developed

Healthcare providers trained to provide emergency obstetric care (BeMONC) and other maternal health services

Service providers using the Portable Mobile Learning System for training

Nurse-midwives deployed to Nyarugusu refugee camp to provide skilled reproductive and maternal health care

Health facilities supervised in the delivery of emergency obstetric care

UNFPA Dignity Kits distributed

Participants attending Maternal and Perinatal Death Surveillance and Response refresher trainings

<table>
<thead>
<tr>
<th>Maternal deaths averted</th>
<th>1,483</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doses of life-saving maternal medicines and pregnancy supplements</td>
<td>229,645</td>
</tr>
<tr>
<td>Safe deliveries assisted in Nyarugusu refugee camp, Kigoma Region</td>
<td>9,475 (98%)</td>
</tr>
<tr>
<td>Midwives trained and educated</td>
<td>533</td>
</tr>
<tr>
<td>Nurse-Midwifery Curriculum and practical books developed</td>
<td>2</td>
</tr>
<tr>
<td>Healthcare providers trained to provide emergency obstetric care (BeMONC) and other maternal health services</td>
<td>40</td>
</tr>
<tr>
<td>Service providers using the Portable Mobile Learning System for training</td>
<td>1,980</td>
</tr>
<tr>
<td>Nurse-midwives deployed to Nyarugusu refugee camp to provide skilled reproductive and maternal health care</td>
<td>15</td>
</tr>
<tr>
<td>Health facilities supervised in the delivery of emergency obstetric care</td>
<td>8</td>
</tr>
<tr>
<td>UNFPA Dignity Kits distributed</td>
<td>6,132</td>
</tr>
<tr>
<td>Participants attending Maternal and Perinatal Death Surveillance and Response refresher trainings</td>
<td>62</td>
</tr>
</tbody>
</table>
Towards zero preventable maternal death

We are committed to making motherhood safer for women in Tanzania. We work at the national, regional and district level to support the government to improve infrastructure, ensure essential reproductive health supplies and to strengthen human resources for health.

Our goal is to ensure that all women can plan their pregnancies and space their births, and that pregnant women are able to access all the care they need, from prenatal HIV testing to antenatal care for newborns, at the same clinic or health centre. Skilled birth attendance at delivery, with backup emergency obstetric care and essential supplies in place, is also critical.

We put the most marginalized women and girls at the forefront of our efforts, including those in humanitarian settings, based on the principle of reaching the furthest behind first and leaving no one behind, harnessing innovation to reach the hardest-to-reach.
IN 2019

We continued to support the mentorship programme in Zanzibar that addresses the shortage of human resources for health – a barrier to the delivery of consistent and quality maternal health care. Two senior Obstetric and Gynaecologist consultants continue to mentor Junior Medical Officers, Midwives and Junior Specialists at six hospitals.

We supported training and education for 533 midwifery graduates to ensure that they are proficient in all essential competencies set by government and national and international regulatory bodies – particularly their competency to recognize and manage complications during pregnancy, labour and childbirth.

To capitalize on our investment in renovating and equipping health facilities in Simiyu, Geita, Mara and Mwanza Regions, we supported training and supervision for healthcare providers at eight renovated facilities to build their skills to identify and manage complications during pregnancy, labour and delivery.

15 nurse-midwives were deployed to Nyarugusu refugee camp, Kigoma Region, to provide skilled maternal and reproductive health care, including emergency care, during pregnancy, delivery and after birth, and counselling on voluntary family planning.

200 traditional birth attendants attended training in Nyarugusu refugee camp to learn how to recognize early danger signs in pregnancy. They encourage pregnant women in the camp to attend antenatal care and to deliver at health facilities.

An additional 1,980 healthcare providers used the environmentally-friendly Portable Mobile Learning System (PLMS) for training – bringing the total number of users to 7,678 since it was introduced in March 2016. The PLMS increases access to training that can save lives for midwives and health workers in some of the hardest-to-reach and remote settings of Tanzania – it can be operated without electricity and doesn’t require an internet connection. We also visited seven of the 45 health training institutions that are using the PLMS to get their feedback; as a result six modules have been localized and translated into Swahili.
MAKING MOTHERHOOD SAFER IN NYARUGUSU REFUGEE CAMP, KIGOMA REGION

Meet Hofne.

He’s one of UNFPA’s supported nurse-midwives in Nyarugusu refugee camp. Hofne ensures that women receive skilled care during pregnancy, delivery, and after they have given birth. He also counsels couples on voluntary family planning.

On a typical day on the ward Hofne admits patients for delivery – taking note of their antenatal care visits, vital statistics, and any complications – monitors and cares for them during labour, and reassures them during delivery.

He constantly looks for any signs of complications, particularly during the third stage of labour – Hofne still remembers how distressed he was the first time he witnessed a patient die of postpartum haemorrhage. In the case of an emergency he discusses the next steps with patients and theatre is prepared if needed.

Systems in place for obstetric complications are working well in the camp.

Systems in place for obstetric complications are working well in the camp, and, together with the provision of skilled care by nurse-midwives like Hofne, are saving lives.

New mothers also receive a UNFPA Dignity Kit on their discharge from the maternity ward to help them keep themselves and their babies healthy and clean in the days following birth. It’s also a good entry point to provide couples with sexual and reproductive health information, including on voluntary family planning.
TOWARDS ZERO GENDER-BASED VIOLENCE AND HARMFUL PRACTICES

TODAY

40% (Tanzania)

14% (Zanzibar)

2030 TARGET

of women and girls have been subjected to physical violence.

Highlights of progress in 2019

- People sensitized about GBV and harmful practices through outreach: 62,404
- Community members reached through Anti-FGM outreach in Mara Region: 4,625
- Sexual and GBV survivors attended within 72 hours in Nyarugusu refugee camp, Kigoma Region: 64%
- Police Officers trained at Gender and Children’s Desks: 40
- Participants who attended a National Dialogue on FGM, child marriage and teenage pregnancy: 450
- One Stop Centre opened in Dar es Salaam

1st Regional Inter-Ministerial Meeting to End Cross-Border FGM held in Kenya
Towards zero gender-based violence and harmful practices

We support the government 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, and, in partnership with multiple stakeholders, intensify efforts at the national, regional and community level to advance gender equality and realize reproductive rights for all through policies and programmes that address the causes and consequences of sexual and gender-based violence (GBV) and harmful practices, including female genital mutilation (FGM).
IN 2019

We opened a One Stop Centre at Mwananyamala Hospital in Dar es Salaam – a safe space that provides protection, information and support services for survivors of violence.

We equipped a Police Gender and Children’s Desk in Zanzibar, and supported training for 40 Police Officers who man these desks across Tanzania, to ensure an equitable and effective response for GBV survivors.

We worked with our partners to break the silence around GBV and harmful practices, reaching 67,029 people through outreach activities, including faith leaders, men and boys.

At the national level, in partnership with the European Union Delegation to Tanzania, we supported a Dialogue, led by government and attended by 450 participants, to determine priority actions to eliminate FGM, child marriage and respond to teenage pregnancy in six regions of Tanzania: Dodoma; Katavi; Mara; Manyara; Tabora; and Shinyanga.

As part of the UNFPA-UNICEF Joint Programme to Eliminate Female Genital Mutilation, and in partnership with UNFPA Kenya, we supported the Government of the United Republic of Tanzania to attend the 1st Regional Inter-Ministerial Meeting to End Cross-Border FGM, also attended by representatives from the Governments of the Federal Democratic Republic of Ethiopia, the Republic of Kenya, the Federal Republic of Somalia, and the Republic of Uganda. The resulting Declaration and Action Plan from the Inter-Ministerial Meeting marked the beginning of coordinated efforts in the region towards achieving the global goal of ending FGM by 2030.
Meet Bakome.
He’s a graduate of the Engaging Men in Accountable Practice (EMAP) GBV Prevention Programme in Kigoma Region. He was also one of the 70 men who recently gathered firewood and cooked food in Nyarugusu refugee camp, Kigoma Region, to show his peers that “real men” do their fair share of domestic chores.

Bakome is one of 170 men who is collecting his graduation certificate after completing the 16-week EMAP course in 2019, where he learned about gender equality, women’s empowerment and human rights – 200 women attended a shorter eight-week programme. With his certificate in hand, he confesses to his peers that he was not a good husband, and admits that he used to beat his wife, push her, and verbally insult her. Following his successful completion of the EMAP programme Bakome feels like a new man – his wife Masengu agrees that he is.

“REAL” MEN DO DOMESTIC CHORES!

Following his successful completion of the EMAP programme Bakome feels like a new man – his wife Masengu agrees that he is.
RELIGIOUS LEADERS TAKE THE LEAD IN TACKLING GBV IN ZANZIBAR

Meet Sheikh Ally Mohamed Said.
He’s a religious leader from Chake Chake District, Pemba Island, Zanzibar. Sheikh Ally is a member of a District Faith Leaders GBV Action Group. He leads community outreach sessions at different locations in the community and at Mosques and Madrassas (Islamic Religious Schools).

“We use a public announcement vehicle to gather the community together and then talk about issues relating to violence against women and children and the impacts of GBV and its effects on our community. We reference scriptures from the holy Quran to bolster our message that every woman and girl has the right to live a life free from violence.”

Gender-based violence (GBV) Action Groups were established voluntarily by faith leaders in all 11 districts of Zanzibar in 2019 and members have attended UNFPA-supported GBV capacity building sessions. In 2019, around 530 faith and religious leaders worked across Zanzibar challenging social norms that perpetuate GBV through community outreach activities.
#LEAVINGNO YOUTHBEHIND

**TODAY**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>32%</td>
<td>of the population are aged between 10 to 24 years (adolescents and youth).</td>
</tr>
<tr>
<td>42%</td>
<td>of unmarried adolescents girls aged 15 to 19 want to delay pregnancy but are not using a contraceptive.</td>
</tr>
<tr>
<td>27%</td>
<td>of adolescents girls aged 15 to 19 have either given birth or are pregnant with their first child.</td>
</tr>
<tr>
<td>37%</td>
<td>of 20 to 24-year olds married before the age of 18.*</td>
</tr>
</tbody>
</table>

**Highlights of progress in 2019**

- Adolescent and Youth-Friendly clinics renovated and equipped: 10
- Adolescents and youth who graduated from sexual and reproductive health and rights training as peer educators: 543
- Adolescents and youth reached with age-responsive sexual and reproductive health information and services: 82,773
- Adolescents (girls and boys) sensitized about menstrual hygiene management: 2,233
- New iPlan subscribers: 4,528
- Youth attending skills building training in leadership: 400
- Round 2 of the AMUA Accelerator launched
- AfriYAN chapters launched in Kigoma and Simiyu Regions

Adolescents and youth, especially adolescent girls, are at the forefront of our programmes in Tanzania. We support efforts that empower them with real rights and choices - in all contexts - so that they are able to transition safely through adolescence into a healthy and productive adulthood.

Our focus is to expand access to comprehensive and age-responsive information, education and adolescent and youth-friendly sexual and reproductive health services - including by harnessing technology - so that adolescents and youth can make informed and free decisions and choices.

We are committed to our pledge ‘nothing for young people without young people’ empowering youth as leaders and change makers to influence and design solutions to address the challenges they face.
IN 2019

► We supported the renovation of two adolescent and youth-friendly clinics and equipped eight existing clinics – the clinics provide a safe space for vulnerable adolescents and youth to meet and to access a range of comprehensive and age-responsive adolescent sexual and reproductive health services and information; the clinics are also a hub for training activities.

► Expanding our network of peer educators in Tanzania, 543 adolescents and youth attended training and graduated as sexual and reproductive health and rights peer educators. They act as an important bridge between the community and youth-friendly clinics, promoting positive behaviours that support their peers to make healthy decisions and choices about their future.

► As part of our activities under the Irish-funded Ujana Wangu Nguvu Yangu project, 3,278 adolescents and youth accessed age-appropriate sexual and reproductive health services and information at the three adolescent and youth-friendly clinics in Nyarugusu refugee camp, Kigoma Region.

► We supported menstrual hygiene management training for 972 adolescent girls and 1,261 adolescent boys.

► 143 service providers received training in adolescent sexual and reproductive health and rights, to ensure the services they provide meet their clients’ needs, including the unique needs of first-time youth mothers.

► Round II of the AMUA Accelerator was launched – Tanzania’s young entrepreneurs are again designing inclusive, innovative solutions that respond to the unique sexual and reproductive health needs of people living with disabilities. Teams selected through a competitive process are receiving seed funding, training, and mentoring to develop a market-ready product that will be launched in 2020.

► An additional 4,528 young people signed up to the iPlan microinsurance health scheme – a UNFPA/DKT partnership – that provides young people at universities in Dar es Salaam, Dodoma, Mbeya and Mwanza with comprehensive sexual and reproductive health services and information for a year for a one-time nominal fee of TZS 20,000 (around $USD9); 15,789 young people were also reached through DKT events and social media platforms, including out-of-school youth.

► We supported training for 400 youth, primarily young women, to build their skills to lead and influence decision-making that affects them, and their communities.

► We supported the launch of additional chapters of the African Youth and Adolescents Network on Population and Development (AfriYAN) East and Southern Africa in Simiyu and Kigoma Regions – AfriYAN is now represented in nine regions of Tanzania.
BREAKING THE SILENCE AROUND MENSTRUAL HYGIENE MANAGEMENT

Meet Zainab and Kagoma.
Zainab is 14-years-old and lives in Kasalu, Kigoma. She is one of 972 girls who recently attended a menstrual hygiene management session at the youth-friendly clinic in Nyarugusu refugee camp, Kigoma Region.

Zainab has never felt able to talk openly about her periods before. Following the training she now understands that the menstrual cycle is a normal, natural and healthy part of life. She says that like many of her friends she used to miss school and stay at home during her monthly cycle.

Kagoma, who attended a His Chance workshop in Kasulu, now knows that menstruation is a natural bodily function and that there is no reason whatsoever why his mother or sister should be confined to the house during their period. He says he is going to support his female peers at school – so that they do not miss lessons when they are menstruating – and champion menstrual hygiene management rights and understanding.

Zainab now understands that the menstrual cycle is a normal, natural and healthy part of life.

Puberty and menstruation can be confusing times for adolescents, particularly if they have no one to talk to at home or at school about the changes they are experiencing, and challenging for the girls of Kigoma, where stigma and social norms mean that this healthy, biological process can restrict their daily activities and lead to isolation.
MAKING EVERYBODY VISIBLE

We support government to strengthen national and subnational population data collection and analysis to improve both the availability and use of data to inform plans, policies and programmes – ensuring targeted investments achieve sustainable national and global development goals, and everyone, everywhere is counted, including those furthest behind.

Leaving no one behind is a strong sentiment of the 2030 Agenda
IN 2019

We supported the launch of the “Jumuishi” – Inclusion – database in Zanzibar – the first database of its kind to collect comprehensive data on disability. People living with disabilities will now be visible, and data generated will be used to inform plans, policies and programmes that respond to this population group’s specific and unique needs.

We continued to support the strengthening of the electronic civil registration data system in Zanzibar, which has now registered over 39,000 births and also issues birth certificates - a critical first step to securing a legal identity and safeguarding human rights and access to justice and social services. The data system also addresses marriage, divorce and death certificates, as well as covering the full spectrum of civil registration, which makes it very unique.

We continued to support efforts to strengthen and update the Community Information System in Zanzibar - which collects vital statistics as well as data on migration and business intelligence at the ward level - the smallest administrative unit in Zanzibar. In 2019, we piloted an electronic database in two Districts of Zanzibar with a view to computerizing the system and inputting the vast amounts of data that have been collected manually in register books since Zanzibar’s independence.

We continue to support preparations for the 2022 Population and Housing Census - where geospatial and other innovative technologies will be used for the first-time - piloting the advanced Geographical Information System to generate census field maps, and collecting and digitizing census information using new e hand-held tablets in Dodoma Region.
MAKING ALL CHILDREN VISIBLE IN ZANZIBAR

Meet Leyla.
Her priority was to get her child’s birth registered as quickly as possible as her pregnancy progressed. “I know that a birth certificate is everything...we need it for National IDs, for school registration, for passports and visas and for employment,” she said, adding that she did not want to deny her child any of these rights.

Leyla waited almost five months for the birth certificate of her first-born son Suleiman so was delighted when she received a birth certificate for her third child Asrar in just 17 days – a result of the electronic birth registration system that is now operational in selected districts of Zanzibar. And all it took was one trip to the offices of the Zanzibar Civil Status Registration Agency (ZCRSA) with proof of identity to verify the information that had been recorded when Asrar was born in hospital.

The birth registration system, currently operational in three out of 11 districts of Zanzibar, including Mnazi Mmoja Hospital in the capital Zanzibar Town, has reduced the waiting time for birth certificates from an average of three months to less than two weeks, and, with UNFPA’s support, the ZCRSA is confident that by 2024 all births will be registered in Zanzibar.

“I know that a birth certificate is everything...we need it for national IDs, for school registration, for passports and visas and for employment.”
PROGRAMME EXPENSES BY PURPOSE 2018/19

<table>
<thead>
<tr>
<th>In millions of $US</th>
<th>CORE</th>
<th>NON-CORE</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual and reproductive health and rights</td>
<td>2,014,199</td>
<td>14,075,620</td>
<td>16,089,818</td>
</tr>
<tr>
<td>Youth and adolescents 4</td>
<td>169,254</td>
<td>187,712</td>
<td>356,967</td>
</tr>
<tr>
<td>Gender equality and women’s empowerment</td>
<td>501,778</td>
<td>1,072,197</td>
<td>1,573,974</td>
</tr>
<tr>
<td>Data for development</td>
<td>704,480</td>
<td>262,842</td>
<td>967,322</td>
</tr>
<tr>
<td>Organizational effectiveness and efficiency</td>
<td>1,105,048</td>
<td>-</td>
<td>1,105,048</td>
</tr>
</tbody>
</table>

3 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.

4 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 the subheading “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.
Partners

UNFPA Tanzania would like to express its gratitude to the Government of the United Republic of Tanzania, our donors, implementing partners and sister UN Agencies for their support in 2019. Together we accelerated progress towards zero unmet need for family planning, zero preventable maternal deaths, and zero gender-based violence and harmful practices for some of the most marginalized women, girls and young people in Tanzania.

Looking forward, as we enter the Decade of Action, we will continue to work closely with our partners to advance gender equality and expand rights and choices for all, delivering a better future for every woman, girl and young person wherever they live in Tanzania.

Data acknowledgement

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

Editor: Esther Bayliss

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