





# Where we Work





## 19.9 m

Total population in UNFPA programme areas



## 4.85 m

Women aged 15 to 49 years (47.3 per cent of women)



#### 3.8 m

Adolescents and youth aged 10 to 24 years (19.2 per cent of population)



# 206, 350

Refugees in camps (as of December 2022)

KEY:

- ▲ UNFPA Field Office
- UNFPA Main Office
- UNFPA Liaison Office
- 9th Country Programme Regions of Focus

#### **9th Country Programme Regions of Focus**

- Dar es Salaam
- Dodoma
- Geita
- Kigoma
- Mara

- Pemba South
- Shinyanga
- Unguja North
- Unguja West



# **Foreword**

The 2022 Tanzania Demographic and Health Survey (TDHS) demonstrates Tanzania's advancements in sexual and reproductive health. The mortality rate for children under the age of five has declined, there have been increases in the rates of births assisted by skilled birth attendants and an increase in the number of women who got four or more prenatal care visits

Forward steps are celebrated alongside the recognition that rapid acceleration is required to achieve the 2030 Agenda for Sustainable Development and the Transformative Results of ending the scourge of unmet needs for family planning, ending preventable maternal deaths, ending gender-based violence and harmful practices, and ending new HIV infections.

The 2022 Population and Housing Census, conducted under the leadership of the National Bureau of Statistics, with technical support from UNFPA further revealed that the dynamic youth population of Tanzania is growing. To harness the demographic dividend of this growth, In order to empower youth, immediate investment is needed to meet the demand for expanded opportunities and the provision of health services including sexual and reproductive health.

This report, celebrates our 2022 July-December joint achievements, taking place in the first six months of the 9th Country Programme (2022-2027). Key achievements highlighted in this report includes: the establishment of One-Stop Centres, enhancing capacity of maternal health facilities, strengthening



# Mark Bryan Schreiner

**UNFPA Country Representative, United Republic of Tanzania.** 

national data systems, forwarding gender equality by upholding positive social norms, and more.

As we move forward together in the 9th Country Programme, we thank and recognize the Government of the United Republic of Tanzania for their leadership and our partners and donors for their dedication to uphold the rights of women and girls in Tanzania. We recognize our joint goal: to ensure reproductive rights for all, so that all people, especially women and young people, are able to access high-quality sexual and reproductive health services.



# Zero Unmet Need for Family Planning



A total of 1,384 healthcare workers were trained in supply chain system management for timely request, reporting, procurement and last mile assurance of reproductive health commodities.



National Contingency Plan for Family Planning/Reproductive Health Commodity Security Supply Chain, was developed to enhance stock availability of life-saving contraceptives and maternal health medicines, particularly in humanitarian settings.



The Compact Agreement on domestic financing for reproductive health commodities was signed, following successful orientation of Parliamentarians on ICPD+25, FP2030 and the importance of domestic financing for family planning.



Family planning guidelines and training manuals for health care workers reviewed, printed and distributed to 120 health facilities in Zanzibar with the aim to improve the quality of Family Planning services.

# UNFPA through procurement of family planning commodities contributed to the prevention of an estimated:











And savings of more than \$11 million USD in direct health costs, and over 1,006,233 couple years of protection generated

# Zero Preventable Maternal Deaths



Emergency Obstetric and Newborn Care (EmONC) Guidelines and Management Protocol printed and distributed to 150 health facilities in Zanzibar in order to scale up EmONC.



Maternal and Perinatal Death Surveillance and Response (MPDSR) guidelines distributed to 70 health facilities in Zanzibar in order to scale-up utilization.



Supported Partnership on Midwifery Improvement in Tanzania (PAMIT) in the capacity of Chair and Secretariat, which has contributed to increasing the visibility of midwifery in the country.



Enhanced the midwifery content in the reviewed Nursing and Midwifery Curriculum, National Technical Awards level 6 diploma by almost 70% of the International Confederation of Midwives (ICM) requirements.



Enhanced knowledge and skills of health care workers on EmONC service provision through mentorship and coaching of 248 health care workers from selected health facilities in Kigoma and Dodoma regions, in Mainland; and training of 120 health workers (40 on post-abortion care and 80 on EmONC) from 117 health facilities in Zanzibar.



Improved the regional capacity of government institutions to provide essential RMNCAH services during health emergencies, including COVID-19 by refurbishing a maternity isolation ward at Amana Regional Referral Hospital. This involved procurement of equipment to ensure that pregnant and post-delivery women suspected or tested positive for COVID-19 and their babies have a safe place to stay and receive quality services.



The Swahili version of the life skills manual for out of school youth developed, validated and pretested by stakeholders.



Three private hospitals (Al Rahma, Tawakal and Global hospitals) established Maternal and Perinatal Death Surveillance and Response following the MPDSR training conducted in Zanzibar which was facilitated by Joint regional UNFPA, UNICEF and WHO technical team.

# Zero Gender-Based Violence and Harmful Practices



UNFPA supported finalization of the Women Development and Gender Policy and its implementation Strategy.



Supported the Government of Tanzania to launch the National anti-FGM strategy and the National Anti-Female Genital Mutilation Campaign in Manyara Region, which involved awareness creation for 5,000 students (2,500 boys, 2,500 girls) in selected schools, tertiary and high-level institutions.



UNFPA handed over three Police Gender and Children's Desks to Local Authorities in Manyara Region in order to expand infrastructure and capacity to support survivors and respond to gender-based violence.



To prevent GBV and harmful practices, a total of 840 men and boys were engaged in dialogues in Zanzibar (640) and in Kigoma Region, with both host and refugee communities (200).



Trainings on SRHR, GBV, life skills, leadership and entrepreneurship skills were offered to 1,045 marginalized and underserved youth (out-of-school youth, teenage mothers, youth with HIV and youth with disability) in Mara, Shinyanga, Dodoma, Singida and Simiyu Regions.



250 out-of-school adolescent girls who completed empowerment programmes on GBV and harmful practices, SRH, and leadership through life-skills and alternative rites of passage programmes.



During the 2022 'cutting seasons' in Mara region 1,144 girls were empowered to stand up against GBV and harmful practices by providing them with shelter and life skills-based alternative rites of passage activities.

# **Zero New HIV Infections**



UNFPA supported the Government to develop the national framework for the provision of SHRH, HIV and GBV services in Higher Learning and Tertiary Institutions, to guide health facilities to provide young people with quality information and services.



Build capacity of health care workers in 20 HIV care and treatment clinics to provide integrated HIV and Family Planning services.



Provided support to the Government to disseminate condom distribution guidelines and its M&E tools to health and local authorities in three regions in mainland Tanzania. This supports the government's effort to minimize stockouts and stock backlog and enhance the availability and accessibility of condoms in communities.

# Leaving No One Behind



With support from UNFPA, organizational partners WiLDAF and VODIWOTA, prepared the draft shadow report of the Convention on the Rights of Persons with Disabilities.



With support from UNFPA, the National Persons with Disability Rights and Privileges Act no. 9 was approved for Zanzibar, in greater alignment with the recommendations of the Convention on the Rights of Persons with Disabilities.

# Data for Development



UNFPA collaborated with development partners to convene and provide effective technical and financial support to the National Bureau of Statistics in conduct of the first digitalized Census; enumeration took place in August 2022.



In order to enhance analysis of Maternal and Perinatal Deaths, improved access to MPDSR data through its integration into the DHIS2 health management information system in Zanzibar for easy reference.





UNFPA 9th Country Programme (2022-2027) Designed in cooperation with the Government of Tanzania and development partners through a collaborative process, UNFPA, the United Nations Population Fund, following approval from its Executive Board, initiated the 9th Country Programme of Support to the Government of the United Republic of Tanzania in July 2022. The 9th Country Programme guides programme direction and activities for the five year period of 2022-2027.

## The 9th Country Programme is in alignment with:



National Five-Year Development Plan III for mainland Tanzania, and the Zanzibar Development Plan.



United Nations Sustainable Development Cooperation Framework (UNSDCF) Cycle, 2022-2027, reflecting the three outcomes: people; prosperity; and an enabling environment.



UNFPA Strategic Plan, 2022-2025, its outcomes and related indicators

The 9th Country Programme mobilizes efforts to achieve the transformative results, by supporting the government and national partners to accelerate actions to enhance universal access to Sexual and Reproductive Health (SRH). This includes voluntary family planning, preventing maternal deaths and reducing new HIV cases, and preventing and responding to gender based violence and harmful practices.

The programme prioritizes the regions that are farthest away from achieving the transformative results. Interventions target the population groups most left behind and that are disproportionately affected by poor SRH and GBV outcomes, especially:



Young people



Refugees



Adolescent girls and women, including first-time young mothers



Persons with disabilities



Those living in poor urban and peri-urban areas

## Programme priorities accelerate strides towards the Transformative Results to



End unmet need for family planning



End preventable maternal deaths

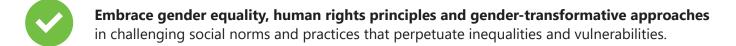


End gender based violence and harmful practices

**A regionalized approach is** adopted to integrated GBV and SRH programme delivery. **Flagship programmes are** pursued on:

- Advancing midwifery
- Integrated reproductive health services for the urban poor
- Sexuality education in vocational and technical education linked to youth-friendly services
- ✓ Greater youth involvement in decision-making
- ✓ Digitalization of census data

**The programme uses five accelerators** to accelerate actions on maternal health, family planning and GBV:



- Leverage partnerships and coalitions to advocate for policies and resource allocation.
- Use South-South and triangular cooperation for knowledge sharing and skills transfer.
- Adopt innovations and technology to accelerate progress towards the transformative results.
- **Embrace a continuum of resilience building** at the institutional, community and individual levels through four interlinked strategies: creating an enabling environment, strengthening supply side systems, empowering and mobilizing demand through social and behaviour change; and supporting data systems to generate evidence for actions.

# **Country Programme Outputs include:**



### **Output 1: Enabling Environment**

Laws, policies and plans, and accountability frameworks are developed, harmonized and strengthened to address reproductive health and rights, including prevention and response to GBV.



### **Output 2: Institutional and Systems Strengthening**

Capacities of systems, institutions and communities strengthened to provide people-centred, high-quality and comprehensive SRH information and services.



### **Output 3: Mobilize Social Structures for Empowerment**

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: Affirmative Action to Build the Agency of Young People**

Strengthened skills and opportunities for adolescents and youth to ensure bodily autonomy, leadership, voice and participation, and to build human capital.



## **Output 5: Integrating Population Dynamics and Evidence**

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 the Transformative Results.

# Programme aims to contribute to the achievement of the following results in five years:



Proportion of women (aged 15-49 years) who have their need for family planning satisfied with modern contraceptives (by 8 per cent)



Proportion of births attended by skilled health worker (by 8 per cent)



Proportion of seats held by women and youth (aged 15-35 years) in national parliaments and local governments



Increase to 40 per cent at both national and local level (from baseline of 37 percent at national and 30 per cent at local level, as of 2021);



Proportion of SDG indicators produced at the national level with full disaggregation when relevant to the target (Baseline: 27 per cent as of 2019; Target: 60 per cent)

# Programme aims to contribute to the achievement of the reduction of the following:



Per cent of women and girls aged 15-49 years subjected to physical or sexual violence in the past 12 months (by more than 7 per cent)



Proportion of women aged 20-24 years who were married or in a union before age 18 (by more than 6 per cent)

# **Overarching**



Proposed indicative UNFPA assistance for the 9th Country Programme is \$84.6 million, with \$24.6 million from regular resources and \$60 million through co-financing modalities or other resources.



**The Ministry of Finance and Planning**, working closely with UNFPA, is the government coordinating authority for programme planning, implementation, monitoring and review.



**UNFPA partners with government institutions,** the private sector, academia and civil society, including non-governmental and community-based organizations, to deliver the programme outputs.



**UNFPA continues to contribute to the UN reform process** and UNSDCF efforts through increased engagement with other agencies, joint programming, and providing strategic leadership, joint coordination and communication.







# Thank you for Ensuring Rights and Choices for All





























## **Managing Editor**

Warren Bright, Communications Analyst

#### **Sub-Editor**

**Jumanne Mbilao**, Monitoring & Evaluation Analyst **Sandra Black**, Communications Consultant

### **Design & Layout**

**Ayubu Lulesu,** *Communications Associate (Graphic Design)* 

## **Photography**

Ayubu Lulesu, Warren Bright @UNFPATanzania

#### **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.



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

- **f** unfpatz
- unfpatanzania
- unfpatanzania
- tanzania.info@unfpa.org



tanzania.unfpa.org