

## Terms of reference Short-term policy-supporting research

### Harnessing the demographic dividend in Tanzania

#### 1. Context

*Eradicating extreme poverty by 2030 is the focus of [SDG target 1.1](#). Today, the largest number of extremely poor people are concentrated in Sub-Saharan Africa. In Sub-Saharan Africa the number of extremely poor has actually increased. Eight of ten countries with the **highest number of people living in extreme poverty** are in Sub-Saharan Africa. Tanzania is one of these eight countries (Source: [SDG Atlas](#)).*

Tanzania is characterized by a relatively **high fertility rate**: 5.4 children per woman in the 15-49 child bearing age group. The rate is 6.1 percent in rural areas compared to 3.7 percent in urban areas. The total fertility rate in Tanzania is higher than in comparator countries in the region such as Kenya and Rwanda (4.6), as well as other sub-Saharan African countries. Since 1991, this rate only declined by 13 percent in Tanzania, against 26 and 31 percent in Rwanda and Kenya, respectively. The relatively high total fertility rate is mainly due, in part, to low usage of modern family planning methods. Other factors contributing to this status are: (i) early motherhood: about 44 percent of Tanzanian women are either pregnant or mothers by the age of 19; and (ii) early marriages: the median age at first marriage in 2010 being 18.8 years in Tanzania compared, for example, to 20.0 for Kenya and 21.4 for Rwanda in same year. In rural areas, factors that further account for high fertility rate include: (i) low level of education for women relative to their counterpart in urban areas; (ii) limited access to employment opportunities for women; (iii) relatively high incidences of poverty in families, which thus attach more value to children's support in work; and (iv) high mortality rate: due to high death risk of children in rural areas with families tending to plan for many children to hedge the high risk of death of a child (Source: [National Five Year Development Plan](#)).

The relatively high total fertility rate is a major trigger for a **high population growth** rate. The population of Tanzania is growing at 2.7 percent per annum, which is more than twice the global average (1.2 percent) and above the average in Africa (2.5 percent). The population of Tanzania is expected to double in 26 years. At the same time, urbanization is accelerating at an annual rate of 5.2 percent, more than twice the world average (2.1 percent) and higher than the average for Africa (3.5 percent). Dar es Salaam, the commercial capital, is growing at 5.6 percent annually, becoming one of the fastest growing cities in Africa. Urbanization is already putting intense pressure on basic services and urban infrastructure at a time when emerging cities still lack the resources and institutions to provide

citizens with access to productive jobs, decent housing, and basic services (Source: [National Five Year Development Plan](#)).

Persistent high birth rate poses a risk for Tanzania to fall into a demographic trap and **fail to reap the demographic dividend**. Trends in population growth and urbanization change, risk derailing some of the developmental gains made. According to the latest [Household Budget Survey](#) the percentage of people living in poverty has reduced (a drop from 28.2 percent in 2011 to 26.4 percent in 2018). However, as mentioned in the latest [World Bank Economic Update](#) (p.16) "As the population continued to grow fast, the number of poor in Tanzania rose from 12.3 million in 2011 to about 14 million in 2018.". The World Bank concludes that **high economic growth did not translate into poverty reduction**.

Unfortunately, **family planning** is a more or less a **taboo** in current Tanzania. The current government of Tanzania, under the leadership of President John Magufuli, aims at high economic growth rates. It sees having a large population as a means to have a large economy. In 2019 President Magufuli urged Tanzania's women to "set your ovaries free" and bear more children as a way to help boost the economy into a regional powerhouse. The year before President Magufuli said curbing the birth rate was "for those too lazy to take care of their children", and the health ministry barred broadcasting of family planning ads by a U.S.-funded project (Source: [Reuters](#)).

President John Magufuli has supported a ban on **pregnant students in schools** and vowed to uphold it throughout his term. President Magufuli also accused nongovernmental organizations that have been urging the government to allow teen mothers back in school of "being used by foreign agents". Home Affairs Minister Mwigilu Nchemba threatened to rescind the registration of groups advocating for the education of teenage mothers (Source: [HRW](#))

## **2. Research purpose**

### **General objective**

Given that the current population growth in Tanzania is hindering the reduction of the number of people living in poverty, and given that the population growth is exacerbating other development problems such as climate change, education, health etc., the general objective is to determine whether donors can influence this trend - directly or indirectly - under the current regime, and if yes how it can be done most effectively.

### **Specific objectives**

1. SO1: Are there development actors who are still working **directly on family planning**? How do they interact on this sensitive topic with the government? To what extent is the government involved?
2. SO2: What are the **most effective ways** to tackle population growth in an environment where family planning is a taboo?
3. SO3: Which development actors work **indirectly on population growth**, e.g. by focusing on ending child marriage, education for women, job creation for women, maternal health, female political empowerment, eliminating violence against women etc.? Is population growth explicitly mentioned in the project documents? If yes, how do they interact on this topic with the government?

### **3. Expected results**

1. SO1: Overview of development actors (donors and implementing organizations) working **directly on family planning**. This should include amongst others a brief description of the project, the project size, the geographical intervention area, the way of interacting and/or cooperation with the government.
2. SO2: Practical suggestions of the **most effective ways to tackle population growth indirectly**. Numerical support is encouraged.
3. SO3: Overview of development actors (donors and implementing organizations) working **indirectly on population growth**. This should include amongst others a brief description of the project, the project size, the geographical intervention area, the way of interacting and/or cooperation with the government.

### **4. Suggested methodology and stakeholders to be involved**

1. SO1: Physical or virtual interviews with donor and/or implementing agencies. Those donors involved in the [Development Partners Group Gender Equality](#) would be a good starting point. The Embassy can provide introductions if necessary.
2. SO2: A literature review of the most effective ways to tackle population growth indirectly.
3. SO3: Physical or virtual interviews with donor and/or implementing agencies. Those donors involved in the Development Partners Group Gender Equality

would be a good starting point. The Embassy can provide introductions if necessary. Given that gender is mainstreamed in almost any development project, and there are innumerable development projects in Tanzania, it would be advisable to focus on those projects identified in SO2 as being the most effective to tackle population growth. If the scope of this specific objective is still too broad, it could be advisable to narrow the scope to the Kigoma Region. This is one of the poorest regions of Tanzania and the bilateral aid via Enabel is currently concentrated in that region.

*Note: Given the sensitivity of this topic, careful consideration should be given on how to introduce this topic to interlocutors and on if/how to disseminate the results within Tanzania. For example topics such as 'women empowerment' or 'violence against women' are much more commonly accepted, also in dialogue with the government, than a topic such as family planning.*

#### **5. Use of the research**

The preparation of a new bilateral programme in Tanzania has been suspended since the end of 2018. The research could provide guidance for a potential new programme on how to tackle poverty reduction effectively.