INTER-AGENCY REGIONAL ANALYSTS NETWORK

OVERCOMING THE CHALLENGES OF UNDERNUTRITION IN TANZANIA THROUGH 2021

Reflecting on trends, questions, and future scenarios for urgent nutrition action

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IN PARTNERSHIP WITH

KEY OBSERVATIONS

- **1.** Though malnutrition rates in Tanzania have decreased for children under five since 1999, it is still highly prevalent and statistics are worryingly high in some regions of the country.
- 2. As part of renewed commitment in addressing child undernutrition, the Tanzanian government has recently launched a comprehensive five-year National Multi-Sectoral Nutrition Action Plan (NMNAP 2016–2021);
- **3.** The primary drivers of undernutrition in Tanzania are: climate change, political continuity, demographic change, poverty, urbanisation and gender inequality;
- **4.** This report outlines three possible scenarios for the evolution of nutrition scale up efforts; a common element to these is national economic growth and the importance of increased allocation of resources to the NMNAP and nutrition more generally.

ABOUT THIS REPORT

This report provides a unique futures-focused analysis of the new nutrition scale up efforts in Tanzania, aimed at addressing both forms of child undernutrition: acute malnutrition and stunting. It does so through the analysis of main trends and by exploring three possible scenarios for the next five years.

Within the context of renewed efforts to address the plight of child undernutrition in Tanzania this report pre-empts key challenges that development partners are likely to face through 2021. It also aims to increase awareness and advocacy, energise scale-up efforts and

Foresight analyses such as this one, allow humanitarian and development operational agencies to prepare for the future and thus adapt programming as changes occur.

engagement plans, and encourage urgent priority-setting and committed and context-relevant action from all nutrition stakeholders, in order to effectively address acute and chronic child undernutrition.

CHILD UNDERNUTRITION IN TANZANIA

Undernutrition remains one of Tanzania's greatest human development challenges. Despite displaying a seemingly 'low' and 'acceptable' rates of acute malnutrition, the burden¹ of undernourished children is one of the highest in the East African region. An estimated 450,000 children in Tanzania are acutely malnourished or wasted, with over 100,000 suffering from the most severe form of acute malnutrition. Tanzania has one of the highest undernutrition burdens in East and Southern Africa, threatening not only individual lives but the next generation's economic advancement in lost educational achievement, lost income, and lost opportunities.

High rates and high burden

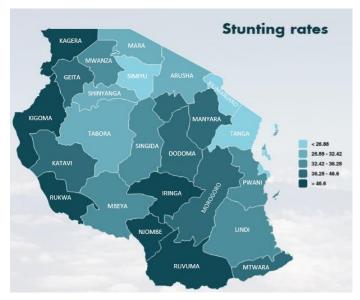
Despite Tanzania's steady trends in the reduction of the rates of undernutrition over the last two decades, the prevalence and the burden of undernutrition remains high in country. Due to the rate of population growth outstripping the rate of reduction, the absolute numbers of stunted and wasted children are high, and in some instances increasing.

¹ Rates are about percentage whilst burden is about the actual caseload or number. In Tanzania, acute malnutrition rates are low (below 5% is considered <u>'low severity'</u>) but the actual number (burden) of acutely malnourished children is high (over 450,000).





Stunted children in 2014²

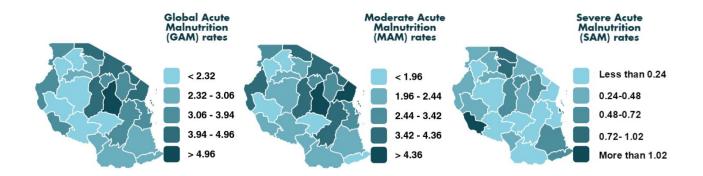


Nationally, chronic malnutrition or stunting affects 34.7% of children under the age of five. Severe stunting affected 11.5% of children nationwide.³ In six regions (Dodoma, Ruvuma, Rukwa, Kigoma, Katavi and Geita), chronic malnutrition exceeds 40%. In three regions, more than half children are chronically malnourished – Iringa (51.3%), Njombe (51.5%), and Kagera (51.9%). Overall, more than 2.7 million children under five in Tanzania are stunted, which affects their future learning, productivity, and their opportunities to escape poverty.

High numbers of acutely malnourished children

Nationally, the Global Acute Malnutrition (GAM)

rate is 3.8%, with a Severe Acute Malnutrition (SAM) rate of 0.9%. Interestingly, the region with one of the highest rates of stunting (Iringa) has the lowest rates of GAM (0.7%). Overall, GAM rates are considered 'acceptable' (<5%)⁴ in all regions except Dodoma, where 5.2% of children are malnourished. However, GAM rates are highest in some of the regions where stunting is not as high -- Tanga (4.8% GAM vs 23.9% stunted), Mara (4.9% GAM vs 32% stunted), and Singida (4.7% GAM vs 34.3% stunted). ⁵ Conversely, Iringa, the region with the lowest level of GAM, has one of the highest rates of stunting (0.7% GAM vs. 51.3% stunted). Wasting and stunting are two different forms of undernutrition. Stunting is chronic as opposed to wasting which results from an acute shortage of food and is reversible with feeding, though the long-term effects of wasting are still unknown.



⁵ Maps in this section were created by the Inter-Agency Regional Analyst Network (IARAN) with statistics from the baseline nutrition assessment.







² Ministry of Health and Social Welfare of the United Republic of Tanzania (2014) « Tanzania National Nutrition Survey 2014 ».

³ Ibid.

⁴ WHO, Global Database on Child Growth and Malnutrition.

THE NEW NATIONAL MULTISECTORAL NUTRITION PLAN

Tanzania is at a significant juncture whereby it can utitilise the opportunity to renew efforts in accelerating and scaling up nutriton action in country. Together with various development partners (Governmental, UN, CSOs), the Government of Tanzania has just finalised the new *National Multisectoral Nutrition Action Plan (NMNAP)* – *From Evidence to Policy to Action* for the period 2016 to 2021. The NMNAP is New country multi sector collaboration strategy, aimed at securing the country's nutritional future through a series of technical and social interventions; such as the integration of malnutrition treatment into the healthcare sector, capacity building, community participation, social and behavioural change, partnership and advocacy.

This multi year action plan is unique, calling for renewed efforts, multi sector coordination, financial and political commitment to nutrition action, as well as evidence-based decision making and stronger accountability. The NMNAP is also comprehensive in the way that it intends to address the double burden of malnutrition (undernutrition and obesity), make nutrition governance more efficient, and overcome key bottlenecks which impede progress towards better nutrition levels. The NMNAP displays its own theory of change to ensure that *children*, *adolescents*, *women and men in Tanzania are better nourished*, *leading to healthier and productive lives that contribute to economic growth and sustainable development*. In doing so, the NMNAP identifies various dimensions of nutrition intervention: *nutrition specific* (those addressing the immediate causes of undernutrition), *nutrition sensitive* (those addressing the underlying causes of undernutrition) and *enabling environment* interventions (those addressing the basic causes of undernutrition). Importantly, the NMNAP has a dedicated component to the scaling up of nutrition specific interventions in order to bring the integrated management of acute malnutrition at scale. This is a big step forward from previous years' trends, which focused the majority of nutrition investment on stunting, and thus missing the opportunity of adequately scaling coverage of acute malnutrition programmes with positive outcomes.

Also, for the first time in the last decade, this plan is bringing various sectors (health, agriculture, water and sanitation, finance, social protection, etc.) together to address acute malnutrition and stunting, within a wider multisector nutrition governance and information management system framework.

MAIN TRENDS

Tanzania is one of the most peaceful, stable and prosperous countries in Africa. Despite growth averaging 6.5% per annum for over a decade, GDP has struggled to stay ahead of high population growth (3% per year), leaving as many as 12 million Tanzanians below the poverty line. The country is ranked 151 out of 188 in the United Nations Human Development Index, which classifies it as a country of 'Low Human Development'. Nevertheless, Tanzania has a well-defined ambition to become a Middle-Income Country by 2025.

Inequality has persisted in Tanzania despite twenty years of solid economic growth. This would seem to indicate widening inequalities between rich and poor, and while the country has maintained a lower level of inequality relative to the rest of southern/eastern Africa, its Gini coefficient⁹ of 38 is stubbornly high.

Urbanisation and the rural/urban divide has been growing in recent years, with Dar es Salaam and the coast developing faster than the interior. Though 70% of Tanzania's population lives in rural areas, the annual rate of migration to cities is relatively high at 5.36% (2010-2015 est.). 10% of the population lives around the de

⁹ World Bank Definition: "The Gini index measures the extent to which the distribution of income (or, in some cases, consumption expenditure) among individuals or households within an economy deviates from a perfectly equal distribution"

¹⁰ CIA WorldFactbook, *Field listing: urbanization*





⁶ UNICEF, 2016, Tanzania joint multi-sectoral nutrition review

⁷ Over the next five years, the goal is to maintain the prevalence of global acute malnutrition below 5% and to scale up the management of acute malnutrition to achieve a target coverage of 75% of expected case load while effectively curing 60% of cases by June 2021. (in NMAP, *Tanzania National plan to scale up integrated Management of acute malnutrition*, p.5)

⁸ The bottleneck analysis from 2015 identified the coverage of the SAM treatment as low as 20% and of moderate acute malnutrition as low as 1%. These bottlenecks include: the availability of essential commodities, lack of qualified human resources, a need for outreach, increased coordination, and the need for a functional nutrition information system for data tracking and evidenced-based policy. (in NMAP, *Tanzania National plan to scale up integrated Management of acute malnutrition*, p.11)

facto capital Dar es Salaam. Education, employment, and family structures are better in urban areas, which could reinforce generational inequality in the future.¹¹

Gender inequality is a major challenge in Tanzania, even though there is an enabling policy and legal framework. Men and women have equal rights in parental authority, and there is no known legislation restricting women from becoming head of household. However, in practice, customary norms in rural areas are still biased against women, limiting their ownership of and control over money and other household resources. Tanzanian women make up 50% of the population, 52% of the employed population¹² and 54% of agricultural labour.¹³ In 2006, it was recorded that women worked up to 62.3 hours/week, while men worked up to 48.3 hours/week.¹⁴ In addition to long hours of heavy labour, many women have low literacy levels, poor control over the use of household income, and lack decision-making authority (for example over when to seek health care). The Social Institutions and Gender Index (SIGI) of Tanzania is between 0.22 and 0.35, a rate considered high. It shows that discrimination is embedded in customary laws, social norms and practices and by inappropriate legal protections against gender discrimination in all dimensions of social institutions.¹⁵ Gendered institutions change slowly, and gender inequality should be considered a heavy trend affecting the evolution of the nutrition system as gender empowerment is heavily linked to nutrition outcomes.

Climate Change As the rainy and dry seasons become more extreme and change in unpredictable ways, the impact on the clear majority of rural poor in Tanzania will continue to threaten gains in human development. It is predicted that future climate change effects could cost Tanzania the equivalent of 2% of GDP per year by 2030¹⁶. 67% of Tanzanians¹⁷ are employed in the agricultural sector, and volatile seasonality will put further pressure on livelihoods and human development for poor farmers. Without the implementation of adaptive capacities, the resilience of the rural poor will continue to be stressed.

Political Continuity Straddling the artificial divisions between East and Southern Africa, Tanzania's strong sense of national identity has placed it in a highly influential role across the continent, with steady economic growth averaging 6.5% per annum for over a decade and recent elections that saw a continuing trend of peaceful, democratic transition. The ruling party Chama Cha Mapinduzi (CCM) has held political power in Tanzania since independence. The party's history of governance, stability, and grassroots outreach has made Tanzania one of the most peaceful in Africa, with regular elections since the transition to multiparty democracy in 1992. Despite a healthy opposition, CCM has managed to retain its control of the state and is expected to do so for the near future.

Demographic Change Tanzania's population is expected to grow from 55,155,000 in 2016 to 64,139,000 by 2021. Pover the last 4 decades, the population growth rate has averaged between 2.7% and 2.9% per annum, a trend which is set to continue over the coming five years. Tanzania's high birth-rate of 5.2 children per women puts the country 17th worldwide at 36.82 live births per 1000 people. One of the greatest demographic challenges is the country's sizeable youth population, which while generating a potential demographic dividend, will put a considerable strain on health and education services for the foreseeable future. 44% of Tanzania's population is under the age of 15, and a demographic transition is not expected before 2050.

²¹ World Population review, 2015, Population Data via UN WPP





¹¹ Hassine, Nadia Belhaj and Albert Zeufack. 2015. "Inequality of Outcomes and Inequality of Opportunity in Tanzania." World Bank Policy Research Working Paper 7260.

¹² Ellis A., Blackden M., Cutura J., MacCulloch F., and Seebens H., 2007, "Gender and economic growth in Tanzania", *The World Bank*

¹³ FAO, IFAD, ILO, 2010, « Gender dimensions of agricultural and rural employment: Differentiated pathways out of poverty ».

¹⁴ Figures from Tanzania National Bureau of Statistics, 2006.

¹⁵ Social Institutions & Gender Index (2014). The OECD Social Institutions and Gender Index (SIGI) is an index designed to measure gender equality in a society.

¹⁶ UNFCC, Tanzania: Intended nationally determined contribution (INDCs), p.1

¹⁷ World bank

¹⁸ World Population review, 2015, Population Data via UN WPP

¹⁹ UNICEF, Tanzania Statistics,

²⁰ Index Mundi, Demographic birth rate,

LIKELY CHALLENGES & KEY QUESTIONS ON SCALING UP NUTRITION ACTION

The enabling environment

The main trends identified in the previous section of this report are intrinsecally linked to key aspects of the so called *enabling environment*, which includes:

- Knowledge and evidence;
- Politics and governance;
- Leadership, capacity and financial resources;
- Social, economic political and environmental context.²²

The NMNAP has identified the *enabling environment* as a key priority for action in reducing undernutrition:

Basic causes of malnutrition in Tanzania are predominantly in enabling environment. They include among others: income disparity, poverty, inadequate nutrition and general political governance, ignorance due to low education, nutrition unfriendly customs and traditions, and inadequate functional institutional capacity at all levels for nutrition. Others are inadequate linkages with nutrition of sectoral policies, strategies and programmes especially in the key nutrition sensitive sectors of agriculture, education, WASH, social protection and climate change and environment. Moreover, enforcement of nutrition relevant laws and regulations is inadequate and tracking of both nutrition specific and nutrition sensitive interventions for results and investments is not systematized and institutionalised. [...] Enabling environment interventions have progressed in recent years, but are not adequately

institutionalized or enforced.²³

In order to sustain nutrition outcomes, the NMNAP recognises that the enabling environment needs to be strenghtened hand in hand with the scale up of nutrition specific and nutrition sensitive action. Strenghtening the nutrition enabling environment includes:

- Government commitment through political engagement and increased funding;
- Good governance and adequate coordination of multisectoral nutrition work at all levels;
- Increased capacities to coordinate nutrition interventions:
- Evidence based decision making and programming action.

With widespread challenges such as: widespread poverty, gender inequality, general political nutrition governance, climate change, urbanisation, fast demographic change - will NMNAP efforts be enough to affect change in the basic causes of child undernutrition in Tanzania? Or will there be a need for increased nutrition collaboration, funding and programming from actors who are not traditionally part of the nutrition system?

²³ In NMNAP United Republic of Tanzania (2016): National Multisectoral Nutrition Action Plan (NMNAP) for the period July 2016 – June 2021, § 58.







²² The Conceptual Framework of Interventions to Address Malnutrition from *The Lancet Series on Maternal and Child Undernutrition* (2013), which is adopted by the NMNAP

Keeping pace with scale up ambitions

The NMNAP provides a comprehensive framework to address both forms of child undernutrition: stunting and acute malnutrition. This section focuses the latter.

The goal on acute malnutrition is to maintain the prevalence of global acute malnutrition below 5% and to scale up the management of acute malnutrition to achieve a target coverage of 75% of expected case load while effectively curing 60% of SAM cases by June 2021.²⁴

The action plan is based on recent analysis that identified key bottlenecks that prevent the coverage of IMAM services. These bottlenecks include: the availability of essential commodities, lack of qualified human resources, a need for outreach, increased coordination, and the need for a functional nutrition information system for data tracking and evidenced-based policy. Essential treatment commodities are

Given both the social and technical nature of these bottlenecks, their interrelation with broader enabling environment challenges (low awareness of the condition of acute malnutrition and how to address it, lack of prioritisation, lack of funding), and given the new targets to bring the integrated management of acute malnutrition at scale, can the implementation of the scale up plan keep pace with the level of its ambition?

often limited due to poor supply chains, and many community health workers and health centres lack the human capacities to screen for and treat moderate and severe malnutrition. Communities are often not involved in referrals, and information management systems are limited in their collection of data. Finally, government and donor commitment to nutrition has been unreliable and it has been difficult to secure funding.²⁵

The funding gap vs. urgent resource mobilisation and allocation

In order to address the complex nature of nutrition challenges in Tanzania, the NMNAP's comprehensive dynamic and multidimensional approaches to undernutrition²⁶ require a substantial financial and human resources commitment from the Tanzanian Government, its partners, and international and national donors:

'The overall financial requirement for the NMNAP is TZS 590 billion (US\$268 million)' [...] 'the total resources available from the Government, development partners and the private sector is TZS 155.9 billion (US\$ 70.5 million) against a planned budget of TZS 590 billion (US\$ 268 million) giving a total funding gap of TZS 434.8 billion (US\$ 197.6 million). In proportionate terms, about 26.3% of the NMNAP funds is available leaving a gap of 73.7% yet to be mobilised.'27

With such a wide funding gap of financial resources, which are yet to be mobilised. can the Tanzanian Government and its partners mobiliseand allocate enough resources quickly enough to implement the NMNAP? How will implementation take place if resources are not available? Will human development gains be achievable with less external funding dedicated to nutrition action?

²⁷ In NMNAP United Republic of Tanzania (2016): National Multisectoral Nutrition Action Plan (NMNAP) for the period July 2016 – June 2021, § 161 and § 164.







²⁴ On stunting, the NMNAP target is to bring the national rate down from 34% to 28%.

²⁵ Bottleneck Analysis Exercise to support the Development of a Scale Up Plan for Management of Severe Acute Malnutrition in Tanzania, January 2016, TFNC/MOHSW/Zanzibar MOH/UNICEF

²⁶ They are dynamic as they are meant evolve as the nutrition landscape evolves too,; they are multidimensional because they operate in seven different levels: i) practice of optimal nutrition behaviours, ii) adequate micronutrient consumption, iii) demand, access and use of quality services on acute malnutrition, iv) healthy and active communities, v) nutrition sensitive interventions are scaled up across various sectors (government, civil society, private sector); vi) good nutrition governance from government and partners; vii) quality nutrition information used as evidence and decision making. In NMNAP *United Republic of Tanzania* (2016): *National Multisectoral Nutrition Action Plan (NMNAP) for the period July* 2016 – *June* 2021, *summary of theory of change.*

THREE SCENARIOS

Based on the main trends and questions outlined above, the following section explores three different future scenarios for 2021 (corresponding to the NMNAP's cycle duration). None of these scenarios should be considered definitive; they are rather presented here as plausible possibilities aimed at generating additional solutions-led and future oriented thinking, programming and learning throughout the scale-up period – ultimately contributing to wider efforts of the importance of multisector nutrition action.

1. Stay on Target

By 2021, Tanzania has sustained strong growth thanks in part to foreign direct investment, investment in infrastructure and human development, and reforms that have improved tax collection and good governance. Though donor countries still hunger for ever more reforms and cases of best practice, they cannot complain with the gains made and funding may even increase. Under this positive scenario, the various components of the NMNAP have made great strides, and in particular the implementation of the IMAM Scale Up Plan is on track to meet its goals. Government funding is strong and fiscal gains are positive. Gains may appear shaky at times, but the enabling environment, nutrition outcomes and mobilised resources for nutrition are on track and is approaching sustainability. Nutrition surveys mostly support this assertion. Specifically, major gains have been made in the access and reach of the integrated management of acute malnutrition, which are sustainable and efficient in the prevention and treatment of SAM.

2. Patchy Achievements

By 2021, Tanzania has maintained high economic growth, but it has been somewhat diminished from previous years' trends and the funding allocation to nutrition action still falls short of national needs. Scale up programmes have been compromised and, as a result, the management of acute malnutrition is not in the 'self-propelling' stage. The causes of key bottlenecks from the enabling environment identified in 2016 persist, and therefore the magnitude of child acute malnutrition remains as an unaddressed problem. Despite delays to the NMNAP which has occurred across its various dimensions, it managed to somewhat stay on track in the year by year scenarios, but the pace and scope of the efforts in nutrition action cannot keep up with the magnitude of past and emergent issues. New problems related to the undernutrition system, such as urban malnutrition, are emerging which have not been considered in the early days of the NMNAP.

3. Challenges and Challenges

Tanzania has maintained its positive economic growth for five years, but unfortunately there have been losses in human developmental gains. Getting closer to a middle-income country status, most of the foreign development investment is on infrastructure and energy. Rural areas remain more isolated from access to nutrition awareness and services. In urban areas, high population density combined with unemployment leads to poor health and nutrition practices. Without a real commitment, political and financial push to nutrition, both nationally and internationally, the efficiency of nutrition coordination and services delivery systems collapses. The absence of any meaningful gains on nutrition outcomes combined with challenging enabling environment is emphasized through a lack of prioritisation of nutrition action. The cycle of intergenerational undernutrition is perpetuated, with vulnerable women carrying the harsh burden once more. Undernutrition rates increase again – development partners need to go back to the drawing board strategizing, planning and advocating for renewed action.





CONCLUSION

Tanzania's impressive growth since 1995 has not translated into adequate human development. Child undernutrition will remain one of the largest human development challenges for the country in years to come.

This report has pointed to the current increased momentum to renew efforts to tackle undernutrition in country. Well-coordinated, multisectoral, partnership strategies for effective nutrition action are shaping the national agenda for nutrition. The NMNAP in particular, is seen as an important marker of renewed political will and commitment in the combat against child undernutrition.

Through the analysis of the nutrition situation and the main trends affecting it, this report has also highlighted some challenges that are likely be faced in the scale up plan: particularly the thorough achievement of nutrition outcomes under the NMNAP umbrella.

This report has explored future possibilities through three different scenarios of nutrition action and outcomes by 2021: one where nutrition gains are made steadily; another where there are patchy achievements of nutrition action; and a third where collective efforts under the NMNAP have failed to address child undernutrition.

By reflecting on key challenges and three different scenarios in equal measure, development actors now have the opportunity to prepare for various possible futures; indeed, they may be further prompted to (re)position themselves and adequately target programmes, advocacy, funding mobilisation and multi sector collaboration as result. The hope is that despite likely challenges of the scale up plan, major nutrition milestones will be met for undernourished children across the country.

RECOMMENDATIONS

For the Tanzanian Government, Civil Society Organisations, the Private Sector and the Donor Community:

- Continue political commitment to the cause of undernutrition, as a major development issue
- Urgently mobilise and allocate resources to the NMNAP's priority areas;
- Lead by example on adequate and innovative nutrition governance and collaboration across sectors and layers of government;
- Continuously integrate main trends and enabling environment aspects identified in this report as part of nutrition sensitive programming responses;
- Ensure programming and evidence-led advocacy in increasing the awareness and demand for good quality nutrition services from undernutrition-affected communities;
- Maintain an open and reflective dialogue for learning and collaboration, based on experience, evidence, and scenario formulation throughout the 2017 -2021 period.

For more information about this report and the Interagency Regional Anlaysts Network, contact us.



