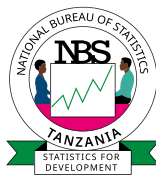


SUMMARY BRIEF

The State of Mainland Tanzania's Children:

EVIDENCE FROM THE
MAINLAND HOUSEHOLD
BUDGET SURVEYS
(2007–2018)



unicef 
for every child



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Acronyms

HBS	Household Budget Survey
MD	multidimensional
NBS	National Bureau of Statistics
UNICEF	United Nations Children's Fund
WHO	World Health Organization



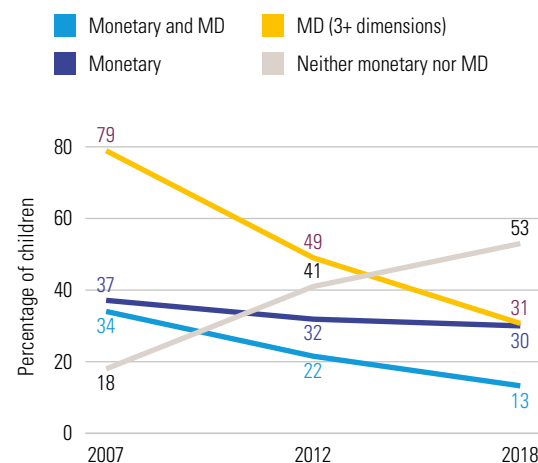
Progress

Between 2007 and 2018, both **monetary and multidimensional (MD) child poverty declined steadily**, with **child deprivation decreasing** in all five dimensions.

Despite this remarkable progress in Mainland Tanzania in just 10 years, in 2018:

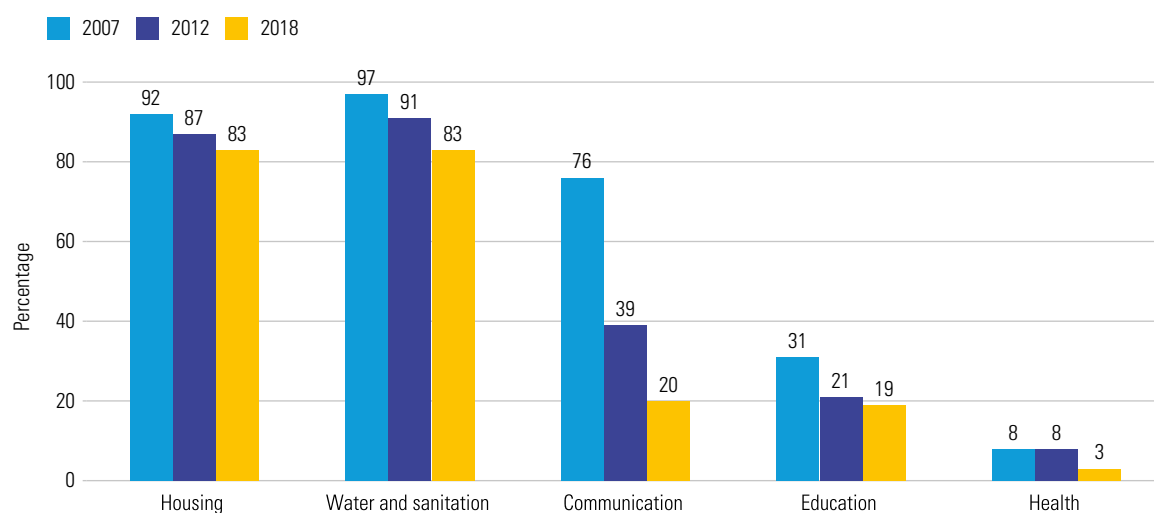
- 30 per cent of children live in monetary poor households;
- 31 per cent of children are multidimensionally poor; and
- 13 per cent of children are both monetarily and multidimensionally poor, and are the most vulnerable.

Figure 1: Trends in MD and monetary poverty in Mainland Tanzania, 2007–2018



Source: Authors' analysis of HBS 2007 (NBS, 2009), HBS 2011/12 (NBS, 2013) and HBS 2017/18 (NBS, 2020)

Figure 2: Percentage of children deprived in each dimension in Mainland Tanzania in 2007, 2012 and 2018



Source: Authors' analysis of HBS 2007 (NBS, 2009), HBS 2011/12 (NBS, 2013) and HBS 2017/18 (NBS, 2020)



Children in **monetary poverty** live in households whose consumption is below the national basic needs poverty line.

Children in **MD poverty** experience deprivation in dimensions such as housing, water and sanitation, communication, education, and health. MD poverty is assessed in these dimensions, as defined by national indicators:



Housing



Water and sanitation



Communication



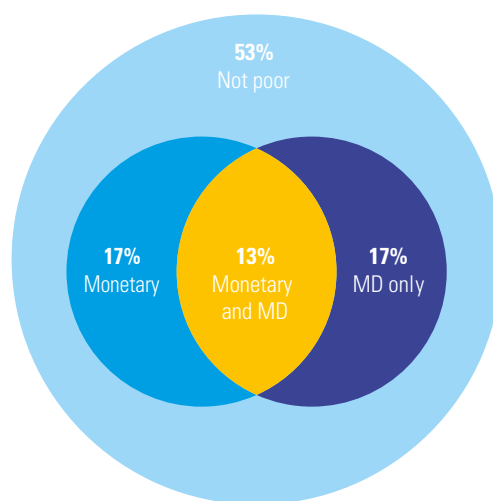
Education



Health

Children in Mainland Tanzania are defined as living in MD poverty if they suffer deprivation in at least three key dimensions of poverty.

Figure 3: Prevalence and overlap between child monetary and MD poverty (three or more dimensions) in Mainland Tanzania, 2018



Source: Authors' analysis of HBS 2017/18 (NBS, 2020)

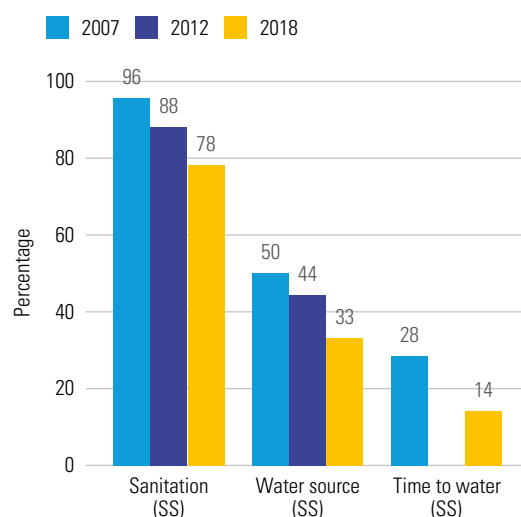




Challenges

Virtually all (98 per cent) children experiencing MD poverty in Mainland Tanzania in 2018 experienced deprivation in both the **water and sanitation**, and **housing** dimensions. Reducing deprivation in these two dimensions is one of the key challenges for the future of Mainland Tanzania's children.

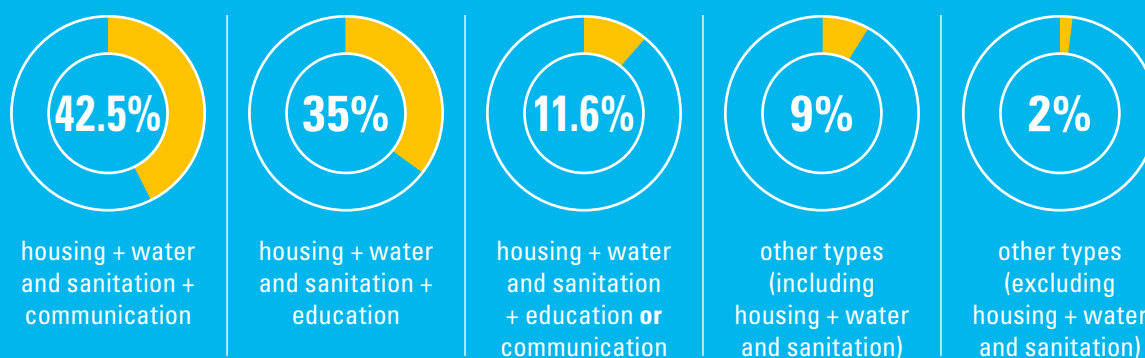
Figure 4: Percentage of children deprived in water and sanitation dimension indicators in Mainland Tanzania, 2007–2018



Note: SS = Statistically significant change between 2007 and 2018 ($p \leq 0.001$); NS = Not significant

Source: Authors' analysis of HBS 2007 (NBS, 2009), HBS 2011/12 (NBS, 2013) and HBS 2017/18 (NBS, 2020)

Percentage of children in Mainland Tanzania experiencing MD poverty in three or more dimensions (2018):



Source: Authors' analysis of HBS 2017/18 (NBS, 2020)

WATER AND SANITATION

The proportion of children with **consistent access to improved sanitation and safe drinking water has improved** in the last 10 years, but it is still too high (from 93 per cent in 2007 to 83 per cent in 2018). High levels of water and sanitation deprivation are driven primarily by sanitation deprivation, with **78 per cent** of all children in Mainland Tanzania deprived of access to improved sanitation in 2018.

HOUSING

The proportion of children who live in **overcrowded households** has remained **unchanged**. Moreover, although there has been some progress in house material deprivation, **the majority (58 per cent) of children live in unimproved housing** (with either floors made of earth/palm bamboo; or roofs made of mud, grass, or plastic; or walls made of mud or grass).

EDUCATION

Although there has been considerable improvement in educational outcomes for younger children, enrolment, attendance and literacy have declined among children above the age of 12.

2018 MD POVERTY

The State of Mainland Tanzania's Children: Evidence from the Mainland Household Budget Surveys (2007–2018) also explored **two further dimensions** (nutrition and protection) **for the 2018 MD poverty headcount**. With the inclusion of these dimensions, the 2018 MD poverty figure increased to **74 per cent of children deprived in three out of the following seven dimensions**: housing, water and sanitation, protection, nutrition, communication, education and health. The figure is higher than the 2018 MD poverty headcount reported above and comparable over time (31 per cent). This discrepancy is driven by the inclusion of the protection dimension and more specifically, the widespread lack of birth certificates (71 per cent) among Mainland Tanzania's children.

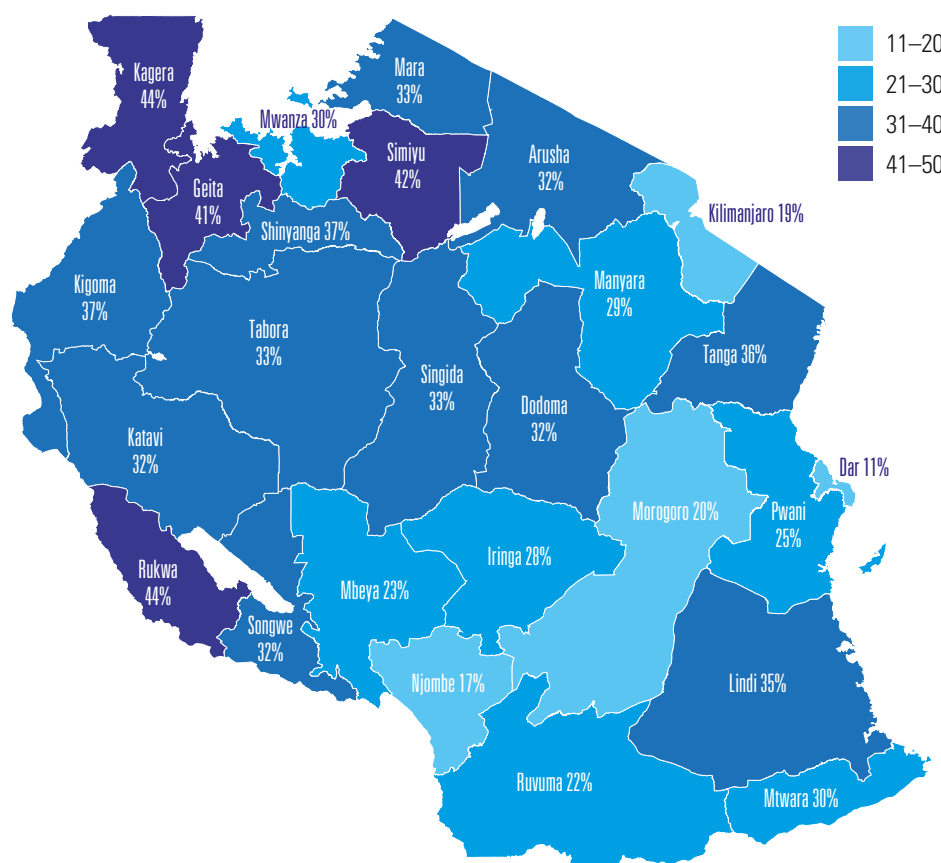


Key drivers of poverty:

Which children are more likely to be multidimensionally deprived?

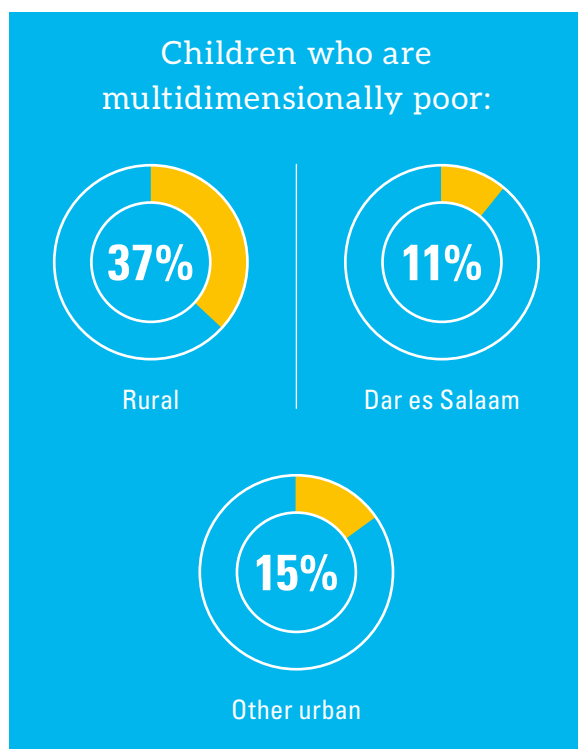
Geographical disparities: The region in which children are born still plays a key role in determining whether they will experience poverty.

Figure 5: Percentage of children in MD poverty (three or more dimensions), by region, 2018

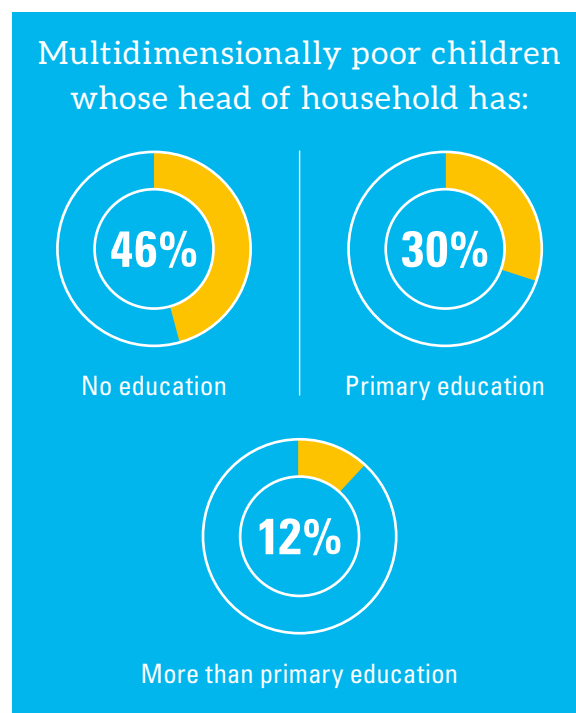


Source: Authors' analysis of Household Budget Survey 2019/20 (OCGS, 2020)

Children living in rural areas: Children who live in rural areas are more likely to be multidimensionally poor than children living in urban areas.



Low education: Children whose head of household have no education are more likely to be multidimensionally poor than children whose head of household has primary education or more.

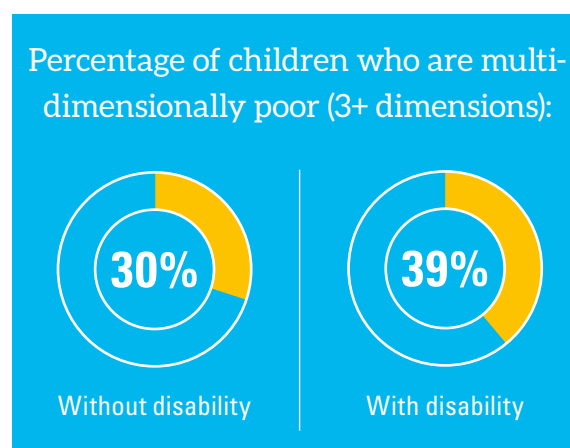


Sex: Overall the likelihood of a child being multidimensionally poor is similar for boys and girls.

Household type: One-adult households with children are more likely to be multidimensionally poor.

45% of one-adult households with three or more children are multidimensionally poor.

Disability: Children with disabilities face a higher number of deprivations than children without disabilities.





Child poverty: Monetary or multidimensional?

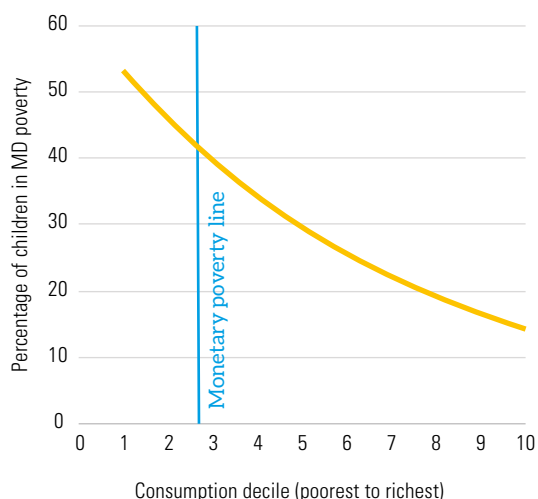
There is a strong association between the level of household consumption (the measure used to determine whether households are above or below the monetary poverty line) and child MD poverty. Children living in households with the lowest levels of consumption are the most likely to be multidimensionally poor, whereas those with the highest level of household consumption are the least likely to be multidimensionally poor.

However, **many children who live in households above the monetary poverty line still experience** housing, water and sanitation, nutrition, education and other **deprivations**.



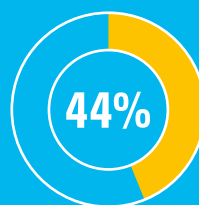
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Figure 6: Percentage of children experiencing deprivations, 2018

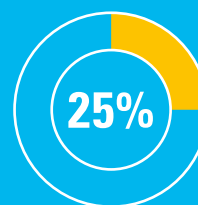


Source: Authors' analysis of HBS 2017/18 (NBS, 2020)

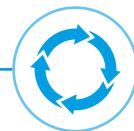
Household consumption level
of multidimensionally
poor children:



Monetarily poor



Not monetarily poor



Policy recommendations

Current levels of poverty can influence future levels of poverty, and children experiencing poverty in childhood are disadvantaged and sometimes unable to reach their full potential. Early and targeted investments in children's development are paramount. This analysis recommends the following strategic interventions:

- Deepen social protection programmes, such as a universal child grant, with a view to reducing MD and monetary child poverty.
- Improve dwelling quality and the construction of affordable housing through grants and financial support to boost child well-being and household welfare.
- Prioritize strategic investments to improve access to non-shared sanitation facilities and ensure access to improved water sources in both rainy and dry seasons.
- Decrease the use of polluting cooking fuels (like charcoal) by improving access to electricity and gas. Over 90 per cent of children in Mainland Tanzania live in households that use a polluting fuel, such as coal, crop residue and wood for cooking. This has negative implications for children's health (WHO, 2014 and 2018).
- Invest in quality education with a view to increasing school attendance for older children. Reduce drop-out and eradicate non-enrolment.
- Collect better data, especially with regard to (but not limited to) the health and child protection dimensions.

Key document

Government of the United Republic of Tanzania and United Nations Children's Fund (2023). *The State of Mainland Tanzania's Children: Evidence from the Mainland Household Budget Surveys (2007–2018)*. Dar es Salaam.

References

- National Bureau of Statistics (2009). 'Household Budget Survey 2006/7'. Dodoma: NBS.
- National Bureau of Statistics (2013). 'Household Budget Survey 2011/12'. Dodoma: NBS.
- National Bureau of Statistics (2020). 'Household Budget Survey 2017/18'. Dodoma: NBS.
- World Health Organization (2014). *WHO Guidelines for Indoor Air Quality: Household fuel combustion*. Geneva: WHO. Available at: <<https://www.who.int/publications/i/item/9789241548885>>.
- World Health Organization (2018). *Air Pollution and Child Health: Prescribing clean air*. Geneva: WHO. Available at: <<https://www.who.int/publications/i/item/WHO-CED-PHE-18-01>>.



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