



SOCIAL INSTITUTIONS AND GENDER INDEX

SIGI COUNTRY REPORT FOR TANZANIA

**KEY MESSAGES FOR ADVOCACY AND
POLICY RESPONSE**

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THESE ARE KEY MESSAGES DEVELOPED FROM THE SOCIAL INSTITUTIONS AND GENDER INDEX (SIGI) REPORT FOR TANZANIA CONDUCTED IN 2022.¹

GENERAL KEY MESSAGES

1. The SIGI Country Report for Tanzania unpacks and analyses gender related challenges to provide policy makers with concrete and actionable insights based on evidence and data.
2. The Government of the United Republic of Tanzania and the Revolutionary Government of Zanzibar firmly believe that gender is an important dimension of development at all levels of society.
3. This SIGI report highlights Tanzania's commitment to investigate and understand the factors that still constrain women's empowerment and obstruct gender equality.
4. The Government of the United Republic of Tanzania and the Revolutionary Government of Zanzibar will persevere with their efforts in favour of gender equality, seeking to address negative perceptions, attitudes and practices that still constrain women's empowerment.
5. Discriminatory social norms account for a large proportion of gender inequality yet often remain invisible. If left unaddressed, no real and definitive progress favouring equality between men and women will be made.
6. Discrimination in social institutions – the established set of formal and/or informal laws, norms and practices that govern behaviour in society – severely hamper empowerment opportunities for women and girls in Tanzania.
7. The SIGI Tanzania shows that women and girls in Tanzania face high levels of discrimination in social institutions – the established set of formal and/or informal norms and practices that govern behaviour in society. SIGI Tanzania's average score is 35.1.
8. Discrimination in social institutions is higher in Zanzibar, with a score of 44 than in Mainland Tanzania, with a score of 35. Similarly, women and girls encounter higher levels of discrimination in social institutions in rural areas (38) than in urban ones.
9. Deeply entrenched barriers to gender equality manifest in the form of girl child marriage and bride price, unequal intra-household dynamics, violence against women, and lack of reproductive autonomy, access to agricultural land, freedom of movement and access to justice.
10. Women's participation in paid work is socially accepted and translates into a high level of labour force participation, albeit slightly lower than that of men.
11. As women are still expected to work for pay, these norms impose a double burden of paid and unpaid work, often forcing them to make labour-related choices that offer a degree of flexibility to balance paid work with household duties.

¹ OECD. 2022. *SIGI Country Report for Tanzania, Social Institutions and Gender Index*. Paris: OECD Publishing. <https://doi.org/10.1787/06621e57-en>.

GENERAL KEY MESSAGES

12. Women's low ownership of land primarily results from two distinct discriminatory social norms: (i) customs dictating that land belongs to men shape inheritance practices by favouring sons over daughters and other male family members over widows; and (ii) social norms influence intra-household dynamics and establish the man as the family's primary decision maker.
13. Achieving gender equality in the private and family spheres is a prerequisite to realising women's empowerment in other key areas.
14. Discriminatory social norms and traditional roles are often the strongest and the most difficult to challenge in the household and the family.
15. At the national level, 19 per cent of women aged 15 years and older have been married before the age of 18, and 16 per cent of women aged 20-24 years have been married before the age of 18. Social acceptance of child marriage plays a fundamental role in upholding this harmful practice, particularly in rural areas.
16. Tanzanian women shoulder a disproportionate share of unpaid care and domestic work, particularly basic and routine household tasks, spending three times more time on such tasks than men.
17. More than half of all women in Tanzania have suffered from at least one form of violence in their lifetime – either intimate partner violence (IPV) and/or non-partner violence.
18. In concrete terms, 23 per cent of ever-partnered women in Tanzania reported experiencing some form of IPV over the past year, and 48 per cent of women reported experiencing such violence at least once in their lifetime.
19. Persistent violence against women and girls is rooted in social norms justifying violence, which is even stronger among women than men. Half of the population believes that a man can be justified in hitting or beating his wife under certain circumstances.
20. Overall, more than 2 million Tanzanian women report having been excised or having experienced FGM/C, but the practice is being progressively abandoned.
21. Discriminatory social norms and gendered power imbalances also restrict women's and girls' reproductive autonomy. Many women of reproductive age continue to face unmet needs for family planning. This issue is particularly acute among young women, who are also more likely to use fewer effective methods of contraception.
22. Across Tanzania, men remain the primary decision-makers within the household, including decisions related to children's health and education, household spending, and purchases and household income.
23. Women in Tanzania spend on average more than three times as much time as men on unpaid care and domestic work, with the majority (more than 60 per cent) of the population believing that tasks such as cooking for the household, cleaning the household, cleaning the bathroom/toilet and washing clothes are exclusively women's responsibilities.
24. High levels of discrimination are also found regarding women's physical autonomy – specifically concerning the indicators for “Violence against women” and “Reproductive autonomy” – and women's freedom of movement.
25. Half of Tanzania's women do not feel safe when walking alone at night in the neighbourhood where they live, and more than 90 per cent of the population agrees that a woman should ask her husband or partner for permission if she wants to go to public places.
26. Update laws and eliminate legal provisions that discriminate against women and girls. Ensuring that legal frameworks do not create inequalities between men and women and do not erect

GENERAL KEY MESSAGES

- formal barriers to women's empowerment is a fundamental prerequisite to addressing deeply entrenched discriminatory social norms.
27. Design, implement and support initiatives that transform discriminatory social norms into gender-equitable ones. Promote gender-equitable norms of masculinities and a shift in girls' and women's status and roles within society.
 28. Discriminatory social norms and practices have multidimensional impacts that often cut across different sectors – education, health, politics, the economy, etc. – requiring coordinated and multisectoral responses.
 29. Leverage opportunities for engagement within existing educational structures such as schools and health centres. Successful programme delivery requires effective partnerships. Stakeholders involved in designing and implementing programmes and policies that seek to change rigid gender norms and power imbalances sustainably should seek effective cooperation with existing educational structures and facilities, including schools, health centres, community centres and more.
 30. Transforming attitudes requires a whole-of-society approach that targets all individuals at all levels – from individuals and communities to national structures. Programmes and interventions designed to transform discriminatory social norms into gender-equitable ones should be carefully crafted to ensure all relevant stakeholders are taken into account and included from the outset.
 31. Engaging with men and boys as allies is particularly critical for the success of any policy or programme aiming to transform deeply entrenched discriminatory social norms. Tanzania's government should continue to incorporate a gender perspective into national development strategies systematically.
 32. Gender equality should be embedded into future strategies and plans as a fundamental cross-cutting element that feeds into each objective and policy priority concerning the national economy, the environment, employment, natural resources or social services.
 33. Tanzania must maintain investment in sex-disaggregated data collection to identify gender gaps and gain a better understanding of how social norms evolve.
 34. Bride price," "Reproductive autonomy" – which includes access to contraception and women's ability to make decisions over their own body – and "Freedom of movement" were identified as particularly problematic.
 35. High levels of discrimination in the "Household responsibilities" indicator reflect significant discriminatory attitudes towards the distribution of labour within the household and gender task associations. Measures of opinions regarding whether a task is considered solely a woman's responsibility, a shared responsibility or solely a man's responsibility show that a large majority of the population considers certain routine household tasks to be the exclusive responsibility of women.
 36. More than 60 per cent of the population considers cooking for the household, cleaning the household, cleaning the bathroom/toilet and washing clothes as women's exclusive responsibilities.
 37. Beyond social acceptance of the practice, a large share of the population believes that paying a bride price implies that the husband owns his wife. The practice of bride price is widely endorsed and supported by Tanzanian society, with 92 per cent of the population of the opinion that a marriage requires a bride price.
 38. Unequal decision-making power within the household is an important source of discrimination against Tanzanian women.

GENERAL KEY MESSAGES

39. In the majority of Tanzanian households (60 per cent), decisions regarding children's health or education – regardless of the sex of the child – are taken together by both parents. However, in more than one-quarter of all households, the father makes such decisions alone, without consulting the mother.
40. 37 per cent of Tanzania's population identifies the male household head as the sole decision maker for basic purchases such as food or clothes. In the case of productive assets, more than 40 per cent of the population identifies the male household head as having the last word on important decisions such as choosing farm inputs, buying or renting a house or purchasing vehicles.
41. About half of women in Tanzania have survived intimate partner violence during their lifetime (48 per cent), and one in four women has experienced IPV over the last 12 months (23 per cent).
42. Women's ownership of agricultural land is significantly lower than that of men. At the national level, 33 per cent of women own agricultural land, compared to 47 per cent of men, translating into a gender gap of 14 percentage points.
43. Half of Tanzanian women do not feel safe walking alone at night in the neighbourhood where they live, compared to one-quarter of all men. As a result, 68 per cent of those who do not feel safe walking alone at night are women.
44. Discriminatory social norms and attitudes restrict women's ability to access the justice system and to seek redress through Tanzania's legal institutions. Although a large majority of the population believes that men and women should have equal opportunity to file a complaint at a police station, more than three-quarters hold the opinion that a woman needs her husband's or partner's permission if she wants to contact the police (77 per cent) or a court (83 per cent).



MORE THAN 60%

of the population considers cooking for the household, cleaning the household, cleaning the bathroom/toilet and washing clothes as women's exclusive responsibilities.

At the national level

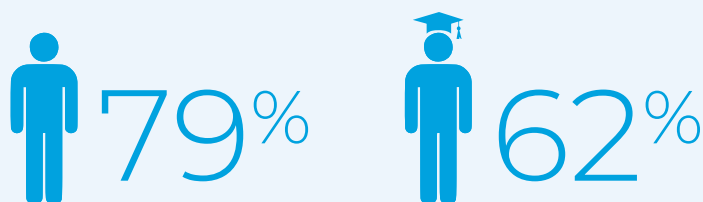
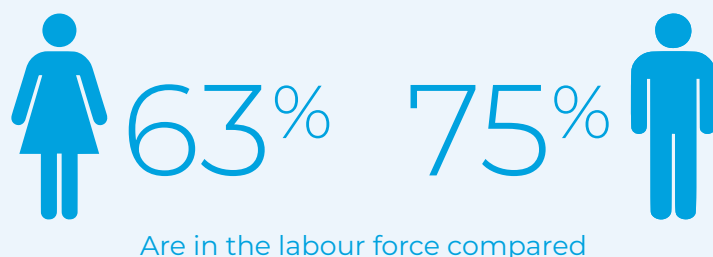


33% women own agricultural land, compared to 47 per cent of men, translating into a gender gap of 14 percentage points.

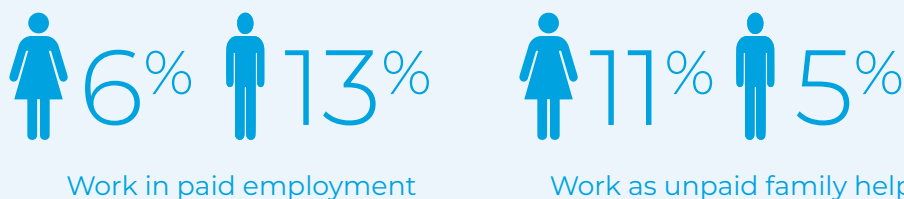
LABOUR FORCE PARTICIPATION

1. Women's participation in the labour force is high at 80 per cent in 2019. However, it remains below that of men with a gender gap of 7 percentage points, which is in line with Tanzania's neighbour countries and lower than the sub-Saharan Africa average at 12 percentage points. Among respondents to the SIGI Tanzania, 63 per cent of women were in the labour force compared to 75 per cent of men.
2. On average, young and married men with low levels of education and from poorer households are more prone to hold discriminatory norms that curtail women's access to labour. For instance, 79 per cent of men without formal education believe that men should decide whether a woman can work outside the house, compared to 62 per cent of men who went to university.
3. The gender gap in labour force participation in the SIGI Tanzania sample is particularly wide among young men and women, reaching 29 and 25 percentage points for individuals aged 25 to 29 years and 30 to 34 years, respectively. However, the labour force participation gap between men and women is much smaller for older generations.
4. Across all age brackets, the age at which women's labour force participation rate is highest is older than for men. Men attain their employment peak between the ages of 25 and 29 years old. During this period, 93 per cent of men are in the labour force, and 84 per cent are employed. In contrast, women attain their employment peak between the ages of 45 and 49 years, with 81 per cent in the labour force and 75 per cent employed. These distinct age profiles suggest that many women delay their entry into the labour market, most likely due to childbearing and childcare.
5. Wide variations in labour force participation exist across regions, reflecting that women's inclusion in the labour market is higher in urban areas than in rural areas and Mainland Tanzania than in Zanzibar.
6. Women's employment is also characterised by certain specific forms of employment, such as unpaid family workers or own-account workers. Women's waged employment is minimal, with only 6 per cent of working women in paid employment compared to 13 per cent of working men. Conversely, 11 per cent of women work as unpaid family helpers compared to 5 per cent of working men.
7. In Tanzania, social norms dictate that men should control whether a woman is allowed to work outside the household. Discriminatory attitudes restricting women's free choice to have a job are widespread, with 88 per cent of the population agreeing or strongly agreeing with the statement, "Women should ask the permission of their spouse/partner to have a paid job outside the home/family business."
8. Women's employment is constrained by their low level of education. In Tanzania, women's likelihood of becoming part of the workforce or being employed rises significantly as their educational level increases. While 59 per cent of women with no formal education are in the workforce, this share increases to 65 per cent and 85 per cent, respectively, for those with a primary education and a university degree. Yet, women's level of education remains significantly lower than that of men. At the national level, 20 per cent of women have no formal education, compared to only 9 per cent of men. In contrast, 11 per cent of women have completed secondary education compared to 17 per cent of men.
9. Social norms that ascribe certain types of professions to women perpetuate the horizontal and vertical segregation of Tanzania's labour market. Biases and stereotypes regarding the type of job that may be fit or appropriate for a woman or a man tend to confine women to certain sectors or positions. For instance, regional results show that the share of the population who believes that being a bar or a restaurant employee is more appropriate for women is reflected in the larger share of women among workers in the "Accommodation and food service" sector.

10. In the SIGI Tanzania sample, men were more likely to hold discriminatory attitudes that constrain women's participation in the labour market. More specifically, men are less likely than women to consider that it is perfectly acceptable for a woman to pursue a paid job outside of the home and are also more likely than women to think that women should ask their partner or spouse for permission if they want to have a paid job outside of the home or family business.
11. Age, marital status, education and wealth are key determinants of discriminatory social norms and attitudes. For all three attitudes measured, the likelihood of holding discriminatory attitudes towards women's access to labour seems to decrease as age increases. Marital status also appears to constitute a strong determinant of holding discriminatory attitudes: single individuals are significantly more likely to hold attitudes favourable to women's access and labour market participation compared to those who are married or living together.



of men without formal education believe that men should decide whether a woman can work outside the house, compared to men who went to university.



ACCESS TO AGRICULTURAL LAND

1. Improving women's access to agricultural land and securing land rights would help strengthen their access to financing, with positive spillovers for business creation and economic growth.
2. Women's ownership of agricultural land is significantly lower than that of men. At the national level, controlling for various socio-demographic factors, men are significantly more likely than women to own agricultural land: 33 per cent of women own agricultural land compared to 47 per cent of men. This disparity translates into a gender gap of 14 percentage points.
3. Differences in land ownership between men and women are larger in rural areas and regions where most of the population relies on agriculture. In rural areas, where 81 per cent of the workforce works in the agricultural sector – and 78 per cent of employed women – the gender gap in agricultural land ownership reaches 17 percentage points.
4. Women are significantly more likely than men to share ownership of agricultural land with someone else rather than being the sole owner.
5. At the national level, only 38 per cent of agricultural landowners have a formal document that can legally prove their land ownership. The proportion is similar for men and women owners, regardless of whether they live in urban or rural areas. This lack of formal documentation exposes agricultural landowners to risks, including enforcing customary and traditional practices that disadvantage women.
6. Beyond ownership, women's control over land use and the ability to make decisions related to its administration remains limited in many parts of Tanzania. Among individuals who own agricultural land, regardless of the sex of these owners, nearly half reported that only a man had the right to sell the land in question.
7. In Tanzania, discriminatory social norms limiting women's inheritance of land and favouring sons over daughters – or other men from the family over widows – are significantly associated with lower rates of land ownership among women. They reflect that inheritance practices provide more chances and opportunities for men than women to acquire land, except in a few circumstances where a woman is the only heir.
8. Discriminatory social norms restricting women's access to land ownership are primarily upheld by men and poorer individuals with low educational background.
9. Education and wealth are key determinants of whether an individual holds discriminatory social norms and attitudes curtailing women's ownership of agricultural land, particularly in relation to the inheritance rights of daughters and widows. Individuals who have completed at least primary education are more likely to believe that widows, widowers, daughters, and sons should have equal rights and opportunities to inherit land assets. They are also less likely to hold discriminatory attitudes towards women's and men's equal decision-making power over land. The effect of primary education is particularly strong for attitudes towards equal inheritance and decision-making power.

RURAL AREAS



of the workforce works in the agricultural sector

EMPLOYED WOMEN



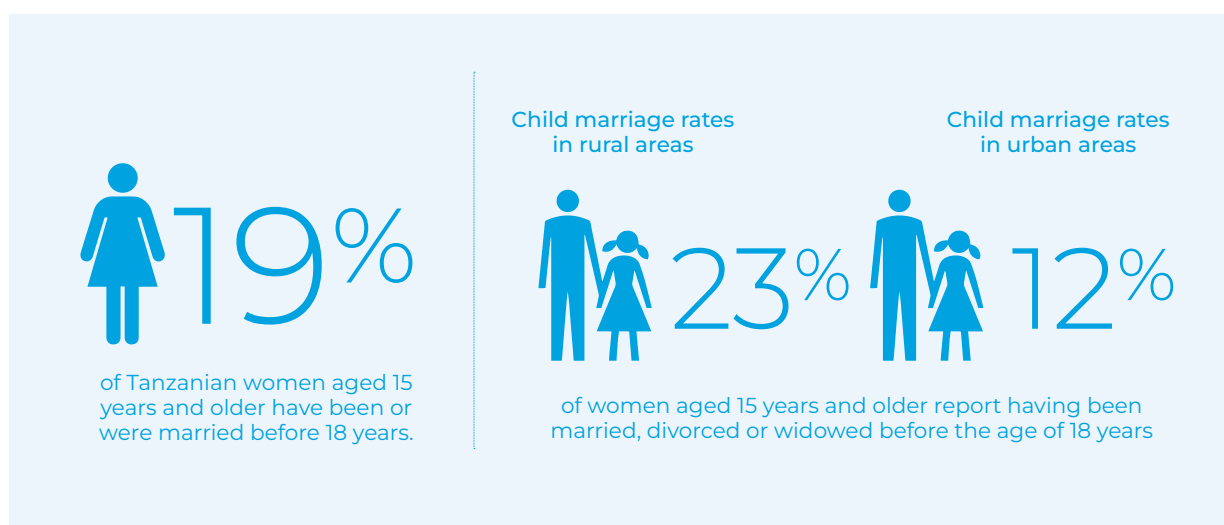
of the workforce works in the agricultural sector

DISCRIMINATION IN THE FAMILY

GIRL CHILD MARRIAGE

1. Child marriage is also associated with lower educational attainment – especially at the secondary school level. This, in turn, curbs the empowerment, decision-making power and financial independence of women and girls, as well as their ability to contribute to the socioeconomic development of their households, communities and society. These negative effects of child marriage may have long-term consequences, including for future generations.
2. In 2016, Tanzania amended the Education Act to prohibit child marriage for children attending primary or secondary school in Mainland Tanzania. It is hence unlawful for any person to marry a schoolboy or girl and vice-versa (Government of Tanzania, 2016).
3. SIGI Tanzania finds that 19 per cent of Tanzanian women aged 15 years and older have been or were married before 18 years.
4. Gaps in the legal framework of marriage may contribute to the continued prevalence of girl child marriage. For example, Zanzibar does not have a minimum age for marriage, whereas in Mainland Tanzania, the law permits girls as young as 15 years to marry with a court order.
5. Child marriage rates are significantly higher in rural areas than in urban settings. In rural areas, 23 per cent of women aged 15 years and older report having been married, divorced or widowed before the age of 18 years, compared to 12 per cent in urban areas.
6. Girl child marriage has severe negative consequences for women's health and human capital accumulation.
7. Girl child marriage is perpetuated by a complex set of factors ranging from bride price to social acceptance of the practice and restrictive gender norms that deny women and girls decision-making power over their own lives and relationships.
8. In Tanzania, for instance, 75 per cent of the population believes that a husband owns his wife once he has paid a bride price. The consequences of this assumption can be far-reaching, constraining women's independence, well-being and decision-making power in the household.
9. Social acceptance of child marriage is associated with higher prevalence rates of this harmful practice.
10. Social norms, particularly those related to restrictive masculinities, may explain differences in perceptions regarding the appropriate age to marry for men and women.
11. Restrictive gender norms place decision-making power in the hands of men and deny girls and women decision-making power over their lives and relationships, especially in regard to marriage (Jayachandran, 2015).
12. Attitudes denying girls control over their marriage are more acute in Zanzibar and certain regions of Mainland Tanzania. On average, 37 per cent of the population in Mainland Tanzania considers that a girl should make decisions over her marriage, compared to only 28 per cent in Zanzibar. Conversely, 40 per cent of Zanzibar's population thinks the father should be responsible for his daughter's marriage decisions.
13. Women undertake significantly more unpaid care and domestic work than men. Women spend 4.4 hours per day on unpaid care and domestic work, compared to 1.4 hours daily for men. Variations across rural and urban areas and between Mainland Tanzania and Zanzibar are minimal. Consequently, women spend three times more time on unpaid care and domestic work than men.

14. Decision-making power over household consumption is largely in the hands of men, especially in rural areas. Men are often the exclusive decision-makers within Tanzania's households regarding basic spending on food and clothing and large and/or productive purchases such as a house, land, equipment or farm input. Specifically, 37 per cent of Tanzania's population identifies the male household head as the sole decision maker over basic consumption spending. This share is significantly higher in rural areas than in urban ones. While 27 per cent of the urban population identifies the male household head as the sole decision maker over basic consumption spending, this share reaches 43 per cent in rural areas.
15. Men also exert primary control over household income, particularly in rural areas where such income is often earned through farming activities. Evidence from focus group discussions in the rural community of Shinyanga indicates that men are solely responsible for decisions concerning income generated from farming activities. Men have access to markets and make decisions regarding crop sales. After the sale, men often choose how to spend the money without necessarily involving their wives/partners or other members of the household who participated in the farming and harvesting activities.
16. Population attitudes consider women primarily responsible for most unpaid care and domestic work tasks. This is particularly true for tasks perceived as basic and routine unpaid care and domestic work. More than 60 per cent of the population believes that tasks such as cooking for the household, cleaning the household, cleaning the bathroom/toilet and washing clothes are the exclusive responsibilities of women within the household.
17. Imbalances between men and women start at a young age, strengthening the unequal gendered patterns associated with unpaid care and domestic work. Girls assist their mothers with domestic chores from a young age and to a greater extent than boys. For example, 91 per cent of women aged over 15 years reported performing basic household tasks all the time or often when a teenager, compared to 63 per cent of men.
18. Evidence suggests that male role models who share basic household tasks more equitably may play a critical role in breaking the cycle of unequal distribution of unpaid care and domestic work. Men whose fathers undertook basic household tasks such as cooking, washing clothes, cleaning the house or the toilets/bathroom, and caring for the elderly or the sick are more likely to take on household duties.
19. Social norms that govern intra-household relationships between men and women task men with protecting and exercising guardianship over women in the household. In particular, married women are expected to seek their husband's approval before leaving the private sphere of the household and going to public places.



WOMEN AND GIRLS' PHYSICAL AUTONOMY

1. Violence against women and girls has far-reaching effects on women and girls and is perpetuated by power imbalances between women and men.
2. It covers a wide range of harmful practices, including intimate partner, non-partner and family violence – including physical, sexual, psychological and economic abuse – as well as FGM/C.
3. Violence against women and girls is a persistent and important problem in Tanzania. Indeed, more than half of all women in Tanzania (55 per cent) have suffered from at least one form of violence in their lifetime and are more likely than men to experience any kind of violence¹ – intimate-partner violence (IPV) and non-partner violence alike. Significant shares of women in Tanzania experience intimate partner as well as non-partner violence, including physical, sexual, economic and psychological abuse.
4. Intimate-partner violence against women is pervasive in Tanzania. While reporting likely underestimates the total instances of violence, 23 per cent of ever-partnered women in Tanzania reported experiencing some form of IPV over the past year, and 48 per cent of women reported experiencing such violence at least once in their lives.
5. Although rural and urban areas present similar levels of IPV against women, rates are significantly higher in Mainland Tanzania than in Zanzibar. In Mainland Tanzania, 24 per cent of women reported experiencing some form of IPV over the last 12 months, but only 7 per cent of women made similar reports in Zanzibar. Likewise, the lifetime IPV rate is 49 per cent in Mainland Tanzania compared to 20 per cent in Zanzibar. The prevalence of IPV against women also varies among Tanzania's regions. In the last 12 months, prevalence rates of violence ranged from 4 per cent in Mjini Magharibi and Kaskazini Unguja and 7 per cent in Zanzibar to 40 per cent in Mbeya and 46 per cent in Arusha.
6. IPV takes various forms, with physical and psychological violence being the most pervasive. At the national level, 15 per cent of ever-partnered women report having been physically assaulted by their current or former partner or spouse over the past year, and 38 per cent of these women report having experienced this form of physical violence at least once in their lifetime.
7. Regarding psychological IPV, 16 per cent of women report that they have been humiliated, threatened, insulted or frightened by a current or former partner or spouse within the last 12 months, while 35 per cent had experienced such behaviour at least once in their lifetime. Intimate partner sexual violence is seemingly less prevalent. Still, it remains significant: 9 per cent of women report that their current or former spouse or partner forced them to have sexual intercourse without their consent over the last 12 months, and 16 per cent report having experienced this at least once in their lifetime.
8. Younger women, especially those aged 20-39 years and those with children, are more likely to have experienced IPV.
9. Factors such as age at marriage, type of marriage and exposure to other types of violence also increase women's likelihood of experiencing IPV.
10. Evidence suggests that violence against women, especially IPV, remains significantly underreported in Tanzania despite the existence of mechanisms for reporting violence. Evidence from a 2005 study in Dar es Salaam and Mbeya revealed that 60 per cent of victims of physical IPV never sought help (WHO, 2005). This reluctance is related not only to shame and stigma around violence against women but also to the belief that such violence is normal (Rugira, 2015). Among the women in Dar es Salaam and Mbeya who never sought help, 56 per cent and 48 per cent, respectively, say that they did not do so because they thought violence was normal or not serious enough (WHO, 2005).

11. Non-partner violence is also pervasive for both men and women. Throughout their lifetime, 26 per cent of women and 29 per cent of men have been beaten, slapped, kicked or physically assaulted with another kind of object by someone other than their spouse/partner.
12. More women than men fear walking alone at night in the place where they live because they fear violence specifically. Fear of violence is the main reason given by women, with 45 per cent citing fears of physical assault, being robbed, kidnapping, rape, being sexually harassed, verbal assault and obscene words, and exhibitionism.
13. Restrictive attitudes regarding women's sexual autonomy may also create contexts conducive to sexual violence in partnerships. At the national level, 42 per cent of the population disagrees or strongly disagrees that a woman should decide when she wants to have sex. The same percentage of people also report that they disagree that a woman has the right to refuse to have sex with her husband, with no significant differences between women and men. This result indicates that social norms view men as the main decision-makers when it comes to sexual activity in relationships. A woman is expected by many to engage in sexual activity with their partner/husband regardless of her personal preference. These social norms create a context in which sexual violence in partnerships is not only tolerated but accepted (OECD, 2021).
14. Restrictive masculinities that support men's control over women underpin the high prevalence rates of IPV and wide acceptance of violence in Tanzania. Restrictive masculinities encompass various socially constructed ways of being and acting as well as values and expectations associated with being and becoming a "real" man that, in practice, confine men to their traditional role as the dominant gender group and undermine women's empowerment and gender equality.



In Mainland Tanzania
24% of women
 reported experiencing some form
 of IPV over the last 12 months



In Zanzibar
7% of women
 reported experiencing some form
 of IPV over the last 12 months

The prevalence of IPV against women also varies among Tanzania's regions. In the last 12 months

4%
 in Mjini Magharibi
 and Kaskazini
 Unguja

7%
 in Zanzibar

40%
 in
 Mbeya

46%
 in
 Arusha

FEMALE GENITAL MUTILATION/CUTTING (FGM/C)

1. More than 2 million women in Tanzania (12 per cent of the female population) report having experienced FGM/C.
2. Tanzania's national average conceals wide regional variations, and the practice of FGM/C is mainly confined to specific regions within the country, as demonstrated by the significant regional variation in the prevalence of excision. FGM/C is most widespread in northern Tanzania but virtually non-existent in Zanzibar.
3. The six regions where FGM/C is most common – Arusha, Dodoma, Kilimanjaro, Manyara, Mara and Singida – present similar characteristics in practice. However, some differences relate to the average age at which excision occurs and the primary decision maker. In four regions – Arusha, Dodoma, Manyara and Singida – the average age at which girls are cut is below the national average. For example, the average age in Dodoma is 8.8 years, nearly 2 years younger than the national average.
4. In Dodoma and Singida, a sizeable proportion of women – 45 per cent and 38 per cent, respectively – did not know at what age they were cut, likely signalling that they were very young at the time. In the other two regions, Kilimanjaro and Mara, the average age at which girls are cut is above the national average of 12.7 years.
5. While, on average, the vast majority of people in Tanzania believe that FGM/C should be abandoned, regional variations in attitudes persist. In 23 regions, the share of people favouring abandoning the practice is at or greater than 90 per cent. Morogoro (55 per cent) and Kaskazini Pemba (58 per cent) were the regions with the smallest share of people agreeing with this view. Notably, in the six regions where FGM is most prevalent, 88 per cent think that the practice should be abandoned.
6. In Tanzania, some communities continue to believe that FGM/C preserves virginity, prevents promiscuity and ensures faithfulness in marriage.
7. In certain regions, discriminatory attitudes that support the continuation of FGM/C have a bearing on the relatively high shares of women that have been cut. Controlling for various socio-demographic factors, more acute levels of discriminatory attitudes in regions of Mainland Tanzania result in higher shares of women who have been subjected to FGM/C.
8. A high percentage of men and women are aware of and support laws that criminalise FGM/C. At the national level, 83 per cent of men and 80 per cent of women are aware of the existence of a civil law criminalising FGM/C.



More than
2million



in Tanzania (12 per cent of the female population) report
having experienced FGM/C.

REPRODUCTIVE AUTONOMY

1. Women's reproductive autonomy entails the ability and freedom to control and make decisions concerning contraceptive usage, childbearing and pregnancy.
2. While the majority of women using contraceptive methods rely on modern methods, the use of traditional and natural methods is also prevalent in Tanzania. Such natural methods of contraception have been shown to have lower efficacy in typical use than modern methods of contraception.
3. Understanding the available sources of modern family planning methods and how they vary across different groups of women is crucial to improving women's access to contraception and guaranteeing equitable access.
4. Research on contraceptive usage in Morogoro found that young people fear the stigma and lack of privacy at health centres and prefer to use pharmacies to obtain contraceptives.
5. The data on decision-making show that choices regarding contraceptive usage and family size are often made jointly in Tanzania. Overall, 62 per cent of women report that they and their partners decided together to use a specific contraceptive method. However, joint decision-making does not necessarily imply equal influence; in practice, men often adopt the role of the primary decision-maker.
6. Only marginal differences in decision-making are apparent between rural and urban areas, with 70 per cent of people in rural areas and 67 per cent in urban areas reporting that decisions on the number of children are taken as a couple.
7. At the regional level, joint decision-making regarding family size is more common in some regions than others. For example, in Kilimanjaro and Gieta, more than 90 per cent of respondents reported making these decisions jointly with their partner. This proportion was significantly smaller in Kusini Unguja at 9 per cent. Notably, 90 per cent of women in Kusini Unguja report making this decision themselves, while 84 per cent of men also report making it alone.
8. Not currently having a partner or a spouse is the most common reason for not using contraception methods among Tanzanian women. 48 per cent of women with unmet needs for family planning cited not currently having a partner or spouse as the reason for not using any contraceptive method. In addition, 12 per cent of women cite concerns about side effects associated with contraceptive usage, 4 per cent report that they have sex infrequently, and nearly 3 per cent cite religious reasons.
9. At the national level, 33 per cent of women were pregnant for the first time before reaching 20 years of age. The share of women who had their first pregnancy before 20 years of age was higher in mainland Tanzania (33 per cent) than in Zanzibar (27 per cent). Furthermore, adolescent pregnancy was more common in rural settings than in urban areas: 35 per cent of women had their first pregnancy before turning 20 in the former compared to 29 per cent in the latter.
10. In Tanzania, 40 per cent of men disagree or strongly disagree that a woman should have the right to decide how many children she wants to have, and 38 per cent disagree or strongly disagree that a woman should have the right to decide when she wants to have a child. The share of men holding these discriminatory attitudes was higher in rural areas than in urban areas and greater among married/cohabiting men than among single men.
11. Gender inequality and power imbalances between women and men and boys and girls impede women's and adolescent girls' ability to negotiate safe sex and avoid unwanted pregnancy. Rooted in gendered power imbalances, sexual violence against girls is an important factor that likely contributes to adolescent pregnancy.

12. Sexual and reproductive education can contribute greatly to reducing unmet needs for family planning and adolescent pregnancies. This education equips individuals with the information they need not only to avoid unwanted pregnancy, sexually transmitted diseases and infections, including HIV-AIDS, but also to learn about sexual and reproductive rights.



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