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Tanzania Social Action Fund (TASAF) was established in 2000 by the Government of the United Republic of Tanzania.

The first phase of TASAF (2000-2005) covered 40 most poor districts on Tanzania Mainland and Unguja and Pemba in Zanzibar.

The second phase (2005-2013) covered all districts (Mainland and Zanzibar).

During TASAF I and TASAF II, a total of 1,704 and 12,347 community projects were implemented, US$ 66 million and US$ 291 million was used reaching 7.3 million and 16 million beneficiaries, respectively.

Both phases focused on improvement of social services.
Extreme poor households were not using improved social services from created facilities (health facilities, schools): Basic needs poverty 28.2% and food poverty: 9.7 per cent [HBS, 2011-2012].

Malnutrition and stunted growth among the children: Mainland 34.7%, Zanzibar 23.4%, poor households: 39.9% [TDHS, 2015-16].

Poor enrolment and completion: Net enrolment rate, pre-primary level: 33.4%, primary: 84.4, Percent of cohort competing STD VII: 56.3% (2014), [FYDP II, 2016]

Implementation of Community-Based CCT scheme in three districts improved the indicators.
PSSN Overview

• Government decided to implement PSSN in the third phase to address the challenges, launch was in 2012.

• The objective is to enable poor households to increase incomes and opportunities while improving consumption.

• Direct beneficiaries are households currently living below the food poverty line.

  ▪ Beneficiaries receive safety net support as well as opportunity to participate in livelihood enhancing activities.
To cope with chronic poverty through increased consumption (Targeting and Enrolment)

To mitigate shocks by smoothing consumption (CCT)

To reduce vulnerability in the mid- and long-term by investing in children’s human capital and linking to income generating activities (compliance and PWP)

Graduation from Poverty

Poor and vulnerable households require different types of support – A single intervention is not enough
PSSN: A system to support the poor and vulnerable

**CCTs**
(HH with children and pregnant women)
Incl. monthly community sessions

**PWP**
(HH with adults able to work)
Plus savings promotion

Unified registry of Beneficiaries

Common targeting

Income generating activities, Savings, Training

- Smooth consumption, accumulation of assets
- Improved community assets

Education, health and nutrition services

Human capital accumulation and sustained reduction of poverty

*A household becomes a beneficiary of both programs*
Beneficiaries attending clinic, Mpalu Village, Newala District Council
Benefit structure

**Conditional Cash Transfer:**
- Basic benefit: US$ 5 per month
  - Children under 18 years: US$2 per month
- Health variable benefit: Children under 5 years  US$ 2 per month
- Education variable benefit:
  - Primary school  US$ 1 per month  with CAP: US$4
  - Junior Secondary US$ 2 per month with CAP: US$6
  - Senior Secondary US$ 3 per month with CAP: US$6

**Public Works:**
- US$ 1.35 per day for up to 60 days in 4 months per household
PSSN is a generous program...

Size of the benefit as % of pre-transfer consumption among beneficiaries
PSSN is affordable

Annual cost of cash transfer programs as a % of the GDP

- Indonesia PKH (2010)
- Turkey CCT (2008)
- Malawi CCT (2011)
- Peru Juntos (2011)
- Guatemala MFP (2010)
- Jamaica PATH (2011)
- Colombia FA (2011)
- Honduras PRoF (2010)
- Philippines 4Ps (2013)
- Mex-Oportunidades (2011)
- Brazil LEAP (2014)
- Ghana LEAP (2014)
- Indonesia UCT (2006)
- South Africa CS6
- Ethiopia PSMR
- Namibia (SP)**
- Lesotho (SP)**
- Mauritius (SP)**

*Estimated
**Social Pensions
Financing of the Program

- PSSN cost per annum is approximately 0.6% of the GDP.

PSSN Institutional Arrangement

- TASAF is anchored in the Office of the President of the United Republic of Tanzania
- Implementation is through Government structure
Expected Results of PSSN

- Extreme poverty reduction by 52%.
- Reduction of poverty gap by 43%.
- Increased access to education and health services.
- Improved human capital indicators incl. reduced cases of malnutrition.
- Increased participation of members vulnerable and poor households
- Increased engagement of poor household in savings and economic activities.
PSSN-supported school children in class in Pemba
Delivery of cash benefits, Ngeta Village, Kibaha District Council
The initial target was to reach 275,000 poor and food insecure households by 2017 (for 5 years).

In 2013, the Government made a decision to scale up PSSN to support around one million extreme poor and food insecure households.

Massive rollout to cover approximately 15 per cent of the population (1,358,168) was achieved in 18 months.
Achievements

- Transferred US$ 158.8 million in 16 rounds of payment to beneficiary households; (88%)
- Transferred US$ 21.7 million to support operation costs at regional, LGA’s and Village level [Mainland] and SVPO, Zanzibar (12%).
- Rollout of Public Works in 42 LGAs & Zanzibar
- Delivery of wages: US$ 8.1 million to households in 42 LGAs, Unguja & Pemba
- Formed savings and investment groups: 2,925.
- Empowered of women in management and leadership.
- Increased social, economic and political inclusion and participation of the poor
Capturing households data in the MIS
Fatih Pınarbaşı

Contribution to a single SP System

- Implementation of massive scale up of PSSN has contributed to building a single social protection system in Tanzania through:
  - Putting in place a Unified Registry of Beneficiaries (URB)
  - Facilitating registration of approx. 30% of beneficiaries in health insurance scheme (Community Health Fund).
  - Building a payment mechanism for 15% of the population.
  - Donor Coordination mechanism
Contribution to a single SP System...

- Development of Grievance Redress Mechanism operational at community, LGA and national levels.
- Decentralization of MIS in more than 80% of LGAs which are having connectivity.
- Capacity building on SP to key implementors at national, LGA and community levels (464,144) Trained/oriented officers, community committee members, leaders).
- Broadening evidence base on knowledge of SP in Tanzania through a number of studies and impact evaluations.
Way Forward

• Consolidate Unified Registry of Beneficiaries (URB) for SP.
• Enhance Grievance Redress Mechanism
• Implement e-payment system.
• Conduct follow up surveys of IE.
• Finalize Graduation Strategy.
• Cover remaining villages/mtaa/shehia.
Thank you for your attention