



**Convention on the
Rights of the Child**

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COMMITTEE ON THE RIGHTS OF THE CHILD

CONSIDERATION OF REPORTS SUBMITTED BY STATES PARTIES
UNDER ARTICLE 44 OF THE CONVENTION

Initial Reports of States parties due in 1993

Addendum

UNITED REPUBLIC OF TANZANIA

[20 October 1999]

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It was sent back for preliminary consideration in 1994 as it did not fully meet all the requirements for reporting as defined in the general guidelines under article 44 of the Convention. In May 1998, the Cabinet of the United Republic of Tanzania approved this report after it was prepared and published by the Ministry of Community Development Women Affairs and children (MCDWAC) in Tanzania.

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Abbreviations

ADIC	Anti Drug Information Centre
CCM	Chama Cha Mapinduzi (Tanzania ruling political party)
CDP	Child Development Policy in Tanzania
CSPD	Child Survival, Protection and Development
DAC	Day of the African Child (16 June)
DANIDA	Danish International Development Agency
ERP	Economic Recovery Programme
ESR	Education for Self Reliance
FAWE	Forum for African women Educationalists
ICRC	International Committee of the Red Cross
ILO	International Labour Organization
IPEC	International Programme for the Elimination of Child Labour
<i>Kulena</i>	A non-governmental organization dealing with the rights of children in Tanzania
LRC	Law Reform Commission
MCH	Maternal and Child Health
MCDWAC	Ministry of Community Development, Women Affairs and Children
MLYD	Ministry of Labour and Youth Development
MOH	Ministry of Health
MOEC	Ministry of Education and Culture
MSWC	Ministry of State for Women and Children, Zanzibar
NGO	Non-governmental organization
NPA	National Programme of Action: Achieving the Goals for Tanzanian Children by the Year 2000
NPF	National Provident Fund
PPF	Parastatal Pension Fund

SAP	Structural adjustment programme
SCI	Sara Communication Initiative
SIDA	Swedish International Development Agency
TAHEA	Tanzania Home Economics Association
TAMWA	Tanzania Media Women's Association
TAWLA	Tanzania Women Lawyer's Association
TFNC	Tanzania Food and Nutrition Centre
TGNP	Tanzania Gender Networking Programme
UNICEF	United Nations Children's Fund
WHO	World Health Organization

Tanzania at a glance**Basic data**

Total population (1197 est.)		31 million
Children under 18		16 million
Children under 5		6 million
Under-five mortality rate		137/1.000 live births
Infant mortality rate		88/1.000 live births
Maternal Mortality ratio		539/100.000 live births
Life expectancy (est.1996)		52 years
Gross domestic product (GDP) per capita (1996)		US\$ 201

Status of health, Nutrition, water and sanitation

Principal diseases: diarrhoea, malaria, acute respiratory infections, vaccine-preventable diseases, protein energy malnutrition, micronutrient deficiencies

Children fully immunized		83%
Access to safe water	Total	38%
Access to sanitation	Any latrine	81.8%
	MOH-approved standard	49.1%
Low birth weight (1995)		14%
Moderate and severe stunting (under-fives)		43.4%
Moderate and severe wasting (under-fives)		7.2%
Low weight-for-age (under fives)		30.6%
Vitamin A deficiency (pre-school children)		30%
Iron deficiency anaemia	Pregnant mothers	80%
	Children under five	45%
Goitre rate (school children 9-11 years)		25%

Educational status

Adult literacy rate	15+ years	68%
	Female	57%
	Male	79%
Primary school enrolment Ratio (1196)	Gross (all ages)	77.8%
	Female	76.7%
	Male	81.5%
	Net (7-13 years)	57.3%
	Female	56.7%
	Male	57.8%
Transition (Primary to form one)(1996)	Total	14.6%
	Public	7.3%
	Private	7.2%
	Female	...%
	Male	...%
Teacher/pupil ratio (1995)		1/36
Standard one enrolment as % of 7-year olds		14
Primary school teachers	Total	108.874
	Proportion with grade A	41%

Total budget allocation to MOEC 1995/96		2.5%
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Source: State of the World's children reports Tanzania Demographic and Health Survey (TDHS) 1996, school mapping reports 1997

Executive Summary

Introduction

This report contains eight chapters. The introduction contains a short history, a brief description of the land and people and a discussion of the political and economic situation of the country. Information on aspects of the Tanzanian tradition of devotion to children and religious and cultural aspects are included. Key indicators of the situation of children and women in Tanzania in terms of their well-being are presented and briefly analysed.

Chapter I

This chapter discusses implementation of article 4 of the Convention.

Process of preparing the report

Mechanisms existing within the Government to implement the Convention

- Political will
- Existence of a national, multisectoral strategy or policy for children

Resources, coordination, effectiveness and strengths and weaknesses of existing mechanisms

Proportion of budgetary resources allocated to children

- Whether “child impact assessments” are undertaken to analyse the impact of budgetary, policy, and legal decisions on children

Adequacy of linkages between the Government mechanisms and NGOs

National Programme of Action (NPA)

- Responsibility for NPA implementation
- Considerations, if any, of broadening the NPA to include all aspects of the Convention

Type of professionals working with children trained in human rights and the Convention: training still required; involvement of NGOs and international bodies in such training; Translation of the Convention into local languages(s)

- Efforts made by the Government to disseminate the Convention, the State party report and other information on children’s rights

Measures taken to harmonize national law and policy with the provisions of the Convention

- Existing or planned mechanisms at national or local level for coordinating policies relating to children and for monitoring implementation.

Chapter II

This chapter discusses implementation of article 1 of the Convention.

Whether the definition of the child, as described in the State party report, is accurately reflected both in law and practice.

Differences, if any, between national legislation and the Convention in terms of the various age definitions of a child

What has been done to harmonize legislation with the Convention

Chapter III

Information on the principle non-discrimination (art. 2) is included according to the Constitution of the United Republic of Tanzania. The right to life, survival and development (art. 3) and respect for the child (art. 12) is also discussed. In addition to this, the following information is provided:

Whether discrimination against certain groups of children exists in practice (discrimination based on gender, race, ethnicity, religion, socio-economic status, birth born in/out of wedlock, urban/rural, etc.)

Whether the principle of the best interest of the child is taken as a primary consideration in family life, school life, courts of law, etc.

- Whether this principle is reflected in the Constitution and other legislation

General societal attitudes towards children

General attitudes toward the right of children to express their views

- In practice, the degree to which children have opportunities to express their views and participate in decision-making process that affect them.

Chapter IV

This chapter provides relevant information on measures adopted to ensure that the civil rights and freedoms of children set forth in the Convention are recognized by law.

Whether the measures to protect children's rights to a name, nationality and identity, as described in the State party report, accurately reflect both law and practice

Awareness of society at large about the importance of birth registration

- Populations or situations in which birth registration may not occur systematically.

Quality of media programming (print, television, radio, etc.) available to children

- Description of existing mechanisms to protect children from harmful influences through the media (violence, pornography, etc.)

Freedom of children to join association and participate in peaceful assembly

Incidence of torture or other cruel, inhuman or degrading treatment or punishment of children

- Measures adopted to prevent the impunity of perpetrators of such treatment
- Punishment of perpetrators by criminal law
- Establishment of complaint procedures and what remedies are made available to the child.

Chapter V

Information on family structure within the society is provided. The measures adopted to ensure respect for the responsibilities, rights and duties of parents or, where applicable, the members of the extended family or community, as provided for by local custom, legal guardians or other persons legally responsible for the child, are discussed.

Societal norms as regards the position of the child within the family

- Degree to which children have a voice within family decision-making in light of existing law and practice

Degree to which the information on children deprived of their family environment provided in the report accurately reflects the situation in the country, in terms of both law and practice single parent households

- Impact of single-parent households on children

Assessment of incidence of violence within the family

- Societal attitudes towards violence against women and children within the family
- Levels of child abuse, neglect and mistreatment – actual and reported
- Steps taken by the Government to prevent such abuse and rehabilitate both victims and perpetrators of abuse

Extent of recognition of the problem of sexual abuse within the family

- Actions being taken to address this problem by Government, NGOs and others

Whether social workers and other professionals dealing with children and families receive training on the Convention and child rights

Law and practice regarding adoption and inter-country adoption and placement of children in institutions

Chapter VI

The most pressing health problems facing children under 5 years of age in Tanzania

- Government recognition of these problems and what it is doing to address them

The most pressing health problems facing adolescents in Tanzania

- Government recognition of these problems and what it is doing to address them
- Existence of problems of adolescent pregnancy, HIV/AIDS among adolescents and young adults, drug and alcohol use, suicide, or other forms of violence

Whether women's health is a priority for the Government or for society in general

- Measures taken to reduce the incidence of maternal mortality

Whether all children have access to primary health care services

- If not, the principal obstacles to such access
- Whether health workers receive training on children's rights

Whether adolescents have access to confidential sexual and reproductive health information, services and counselling

Extent to which the situation of disabled children, particularly their access to education, as described in the report, reflects the reality both in law and practice

Chapter VII

Whether all children have access to primary and secondary education

- Existence of any groups of children discriminated against in this regard (Specifically girls, children of minorities, refugee children, or rural children)

Societal attitudes regarding girls education

- Extent to which schools have a "girl friendly" environment
- Gender balance among teachers
- Availability of adequate water and sanitation in the schools
- Whether schools are within walking distance for girls in rural areas

How quality of education is assessed

- Extent of use of participatory teaching methods
- Whether peer education or counselling techniques are used

Whether the curricula include education about human rights, including child rights

- Whether curriculum includes sex education
- Whether curriculum includes life skills education (such as communication, conflict resolution, and decision making skills)

Whether teachers receive training on the Convention and child rights

Whether health services and counselling are available through schools

Chapter VIII

Description of the most vulnerable groups of children in the country

- General attitudes toward these children
- Studies carried out to assess their situation
- Efforts being made to reach them with services, outreach and care

Whether the minimum age for employment is followed or enforced

- If the age is below 15 years, what plans exist to raise it
- Sectors of the economy employing children
- Description of the working conditions
- Whether the minimum age of access to employment conflicts with the end of mandatory schooling

Studies that have done on the sexual exploitation of children

- Significance of sexual exploitation in Tanzania
- Children most at risk
- Efforts being made to prevent children from being sexually exploited and to recover and reintegrate those who have been sexually exploited
- Action agreed to in Stockholm at the World Congress Against commercial Sexual Exploitation of children
- Action taken on the Programme Action for the Prevention of the Sale of Children, Child Prostitution and Child Pornography

Extent to which the juvenile justice system is “child friendly”

- Whether children are treated with dignity and respect for their human rights
- Whether detention is used only as an option of last resort
- Whether children deprived of their liberty are held apart from adults in the cases

Whether professional staff working in the juvenile justice system have been trained in the provisions of the Convention and other relevant international instruments, including the “Beijing rules”, the “Riyadh guidelines” and the United Nations rules for the Protection of Juveniles Deprived of Their Liberty.

Children in situation of emergency

Refugee children (art. 22)

Children in armed conflicts (art. 38)

Physical and psychological recovery and social reintegration (art. 39)

Children in conflict with the law

The administration of juvenile justice (art. 40)

Children deprived of their liberty, including any form of detention, imprisonment or placement in custodial setting (art. 3(b),(c) and (d))

The sentencing of juveniles, in particular the prohibition of capital punishment and life imprisonment (art. 37 (a));

Children in situations of exploitation including physical and psychological recovery and social reintegration (art. 39)

Economic exploitation, including child labour (art. 32)

Drug abuse (art. 33)

Sexual exploitation and sexual abuse (art. 34)

Other forms of exploitation (art. 36)

Sale, trafficking and abduction (art. 35)

INTRODUCTION

Geography, history, culture and politics

1. Tanzania, comprising former mainland Tanganyika and the Zanzibar islands of Unguja and Pemba, which merged with the mainland in 1964, is a very large nation (covering 945.166 sqkm about twice the size of France), much bigger than other East African and its immediate bordering countries of Burundi, Democratic Republic of the Congo, Kenya, Malawi, Mozambique, Rwanda, Uganda and Zambia. The country has four distinct climatic zones: the humid coastal zone, the central plateau zone, which is the least populated, the Lake zone with high rainfall; and the southern highlands zone which is the most fertile and density populated. Most of Tanzania's high mountains, including Mount Kilimanjaro, Africa's highest, are volcanic in origin, created by the same forces which created the Great Rift Valley which forms a trench up to 2,000 metres deep through the plateau from the Dead Sea in Jordan to Mozambique.
2. Tanzania is bordered by three great lakes – Lake Victoria, the source of the River Nile, in the north, Lake Tanganyika to the west and Lake Nyasa to the south-west.
3. Tanzanian's fascinating history begins with the earliest relics of human evolution and continuous through the exotic influences of Zanzibar, the expeditions of early explorers, and the colonial presence of Germany and Great Britain which began over a century ago.
4. The discovery in 1957 of a 17.5 million-year-old skull at Olduvai gorge indicates that human evolution began in this part of the world. Tanzania's modern history began before the thirteenth century Shiraz Era of Persian origin. The island of Kilwa, with its then 10,000 inhabitants, had its own mint and splendid buildings and was a centre for the gold trade until the Portuguese invasion of 1505. In 1827, the Sultan of Muscat, Seyyid Said, captured Mombasa and the east coast region and based himself in Zanzibar where he established clove plantations and began a flourishing trade in slaves. Trade between the East African coast and the Persian Gulf, in gold, ebony, ivory and spices, goes back millennia.
5. Much of the land in East Africa was sparsely inhabited until 1840 when the Ngoni tribe, fleeing Natal from the Zulu leader Chaka, settled here. In 1855, the German missionary, James Erhardt, produced a map of Africa based on Arab accounts, and between 1884 ND 1918. Germany ruled much of the area they called Tanganyika. Zanzibar became a British protectorate in 1890 and Tanganyika came under British rule in 1918. Tanganyika attained full independence on 9 December 1961, and Julius Kambarage Nyerere, affectionately known as *Mwalimu*, the Teacher, became its first President. Zanzibar became independent on 12 of January 1964 with the late Abeid Amani Karume as its first President.
6. The United Republic of Tanzania was formed on 26 April 1964 when Tanganyika united with Zanzibar. In 1967, Tanzania embraced socialism but since the mid- 1980s, has adopted a free-market system. Present Nyerere fostered a strong sense of unity by making Kiswahili the national language of Tanzania. In 1985, Ali Hassan Mwinyi, a Zanzibarian, was elected President and in 1992, political changes which were taking place around the world influenced Tanzania to introduce a democratic, multi-party political system. In October and November of 1995, parliamentary and presidential elections were held and a third Phase government was brought to power under President Benjamin William Mkapa. Of 12 new political parties that were formed to challenge the ruling Chama cha Mapinduzi (CCM) party, only three gained seats in Parliament. However, the elections gave rise to intense discussions of social and economic development issues and generated a high level of popular participation.
7. Tanzania has 275-member Union Parliament, which meets quarterly in the capital, Dodoma. To increase women's participation in decision-making, the constitution was amended in 1992 to allow

special seats for women from parties which win at least 5 per cent of the votes. At present there are 37 women in reserved seats (15 per cent of Parliament) – 28 CCM, four Civic United Front (CUF), three National Convention for Reconstruction and Reform (NCCR.Mageuzi) and one each from Cahdema and United Democratic Party (UDP). Eight women were elected in their own right.

8. There are three women ministers and four deputy ministers in the Cabinet. The Union Government has 14 ministries and deputies. The leader of the Opposition in the Union Parliament is a woman from Pemba Island, Zanzibar (from CUF).

Administration

9. Tanzania is divided into 25 administrative regions, 20 in the mainland and five in the Isles. The mainland is divided into 106 districts which are subdivided into divisions, wards and villages. Zanzibar is divided into 10 districts between the islands of Unguja and Pemba. The government machinery was decentralized in 1972 to promote people's participation in development planning and facilitate local decision-making. The district is the key unit for administration, planning, budgeting and resource allocation.

Social and economic situation

10. Tanzania is among the poorest countries in the world, with a per capita GNP estimated in US\$ 110 in 1996, very low in comparison to the sub-Saharan African average of US\$ 640. The economy is based on agriculture which accounts for 45 per cent of GNP and 75 to 80 per cent of export earnings. 90 per cent of the total food requirement is locally produced.

Key indicators of the economy

	\$
Economic growth (1996)	4.2%
External debt	US 6.5 billion
Debt service	US 172.7
Debt service as ratio of exports of goods and services	13%
Inflation (June 1997)	+16%
Unemployment	10.7%
Poverty (1996)	51% of households below poverty datum line
Population growth	2.8% per annum

11. The country has a mixed economy – 77 per cent of the people live at subsistence level. Maize, millet, sorghum, cassava and rice are the staple crops. The major exports from mainland Tanzania are coffee, cotton, cashew nuts, sisal, tobacco, tea, minerals and precious stones. Gold, tin and coal are also mined. Zanzibar and Pemba export cloves and other spices.

12. The debt burden poses the most critical challenge to the resources balance sheet. Major issues on the economic development operations relate to the challenge to streamline indigenous systems of resource mobilization including tax revenue collection, on the one hand, and recurrent expenditure controls, on

the other. Coupled with rising demand for social services, the high costs of infrastructure maintenance, a rapidly growing population and excessive government employment, the situation is indeed daunting.

Profile of poverty in Tanzania

Debt burden: US\$ 8.5 bn.

Debt servicing: US\$ 35 per capita

Est. expenditure on health: US\$ 3 per capita

51% of Tanzanians are poor and 36% are very poor

59% of rural population is poor

39% of urban population is poor

9% of Dar es Salaam population is poor

The poor spend at least 75% of their income on food of low nutritional value (<2,100 calories per person) and what remains is not adequate to satisfy other basic needs, i.e.

Health: only 2%

Education: only 0.6%

32.2% of all poor and 56.5 of absolute poor have received no education at all. Only 2.2 of the poor and 1.3 of the absolute poor have completed secondary education

More than 40% of all households in Tanzania spend more than 15 minutes to reach the nearest water sources; 26.1% of rural households spend more than 30 minutes.

Nearly all the poor own some land

21% of the poor live in houses without mud walls: 69% without metal roof; compared to national average of 33% and 53%

Only 59% of the poor and 56.5 of the absolute poor are able to read and write

The poor have larger households and more children

10% of households are headed by women: this is higher in urban areas

Source: *Tanzania – A Poverty Profile, World Bank, Dec. 1993*

13. In the 1970s the country experienced a number of shocks to its economy including drought, war with Uganda, and the oil price crises. Agricultural production fell, and ever since, official producer prices have not kept up with consumer price increases. Manufacturing output also fell due to shortages of imported spare parts, fuel problems, infrastructural services, electricity and water supply. The real value of government budget and its spending on social services fell and the quality of education and health services deteriorated. Rural and urban households suffered due to falling real incomes and shortages of essential commodities. Public sector wages and salaries also fell. The country has since been struggling to reverse the situation, with mixed success.

14. The economic crisis of the 1980s led to a series of government measures to address structural problems in the economy, including the Structural Adjustment Programmes (SAP) in 1982-1985 and the Economic Recovery Programme (ERP), which was launched in 1988. While these programmes have helped to improve the performance of the economy, particularly agriculture, they have demanded

substantial sacrifice from the social sectors. ERP has had tremendous impact on people's lives as a result of the decline in real incomes, among other things. By 1984, the real wage of workers in the manufacturing sector was estimated to be 70 per cent lower than that of 1972. Adults and children alike are forced to pursue multiple economic activities in an attempt to ensure that the family survives.

15. Improving in recent years, economic growth averaged 4.35 per cent between 1990 and 1993. But over half of Tanzanian households still live in poverty and spend 75 per cent of their income on food.

16. In spite of these daunting economic indicators, Tanzania ranks 148th on the Human Development Index, better than many of its immediate neighbours such as Uganda (154), Malawi (157) and Mozambique (159).

The people

17. Since independence, censuses conducted at 10-year intervals are the main source of population data. Other sources are sample surveys such as the 1973 National Demographic Survey and the 1991/92 and 1996 Demographic and Health Surveys.

18. In 30 years, the population has more than doubled, from 12.3 million in 1967 to a projected 29.8 million in mid-1997 at the rate of 2.8 per year (1988 census). If population growth continues at this rate, the population of Tanzania would again nearly double in size in the next 20 to 25 years. There are 16 million children under 18 years of age – 54 per cent of the population. 51 per cent of the population are women and 25 per cent of Tanzanian households are headed by women.

19. Most people live in rural areas, in small, scattered communities: only 24 per cent live in urban areas. However, migration to towns and cities has soared since independence and the urban population is growing at the rate of 6.8 per cent annually, the fourth highest rate in eastern and southern Africa.

20. Traditionally, the family is regarded as the basic unit of production, reproduction and consumption. Family structures are varied and changeable. Polygamy is common although it is not formally accepted by Christians. Women generally occupy an inferior position in society in comparison to men and as a result suffer various kinds of discrimination. Discriminatory practices against the girl child in education, nutrition, daily chores, in games and leisure and cultural practices, if left unattended may slow the anticipated development and progress for the women and girls of Tanzania. For example, wives are widely considered a part of their husbands labour force, and married women are largely not given inheritance rights but only enjoy the use of their deceased husband's property to virtue of their male children. Childless women are therefore accorded very limited rights. Unmarried daughters also suffer from similar problems since they have no full inheritance rights to family property compared to their brothers. Thus the adult woman of today is very much a product of the socialization process and lack of opportunities that faced her as a child since the day of her birth.

Religion

21. There is no official religion in Tanzania; every citizen has the freedom to choose religion she or he likes. The major religious groups are Christian, Muslim and Traditionalist. Islam is the religion of about one third of the Mainland population and more than 98 per cent of the population of Zanzibar. About one third of the Mainland people are Christian. There are also Hindu, Sikh and Bahai, communities and followers of traditional beliefs.

Language

22. The official language is Kiswahili, which is spoken throughout the country. However, local ethnic languages are spoken by different tribes, which number more than 120. Kiswahili is used in primary schools while English is used in secondary education and in institutions of higher learning. English and Kiswahili are both accepted as the languages of communication in the workplace.

The situation of children and women

23. A major challenge remains in linking the macroeconomic and structural reforms in a dynamic manner to the fundamental goal of reducing poverty and enhancing the quality of people's lives. At present a worrying dichotomy exists between the intensive focus on macroeconomic issues, and insufficient attention and unsatisfactory progress in the critical areas of human and social development. The social fabric of Tanzania is becoming fragile and the social system is under heavy stress. Key indicators of this are given below.

24. Nearly half of Tanzania's 16 million children are not in school or learning life skills or employment skills.

25. Many children are on the streets and many girls bear children even when they are children themselves, and cannot assume any meaningful parenthood role. These child mothers and their children are being pushed further into poverty in the coming century. These children are just some of at least nine categories of children in need of special protection measures (children living on the streets; child sex workers; abused and neglected children; child domestic workers; orphan children; children with disabilities; children in institutions; refugee children; and children experiencing early marriage and early pregnancy).

26. The status of women is improving but not fast enough. Rural women in particular are overburdened with risky and repetitive child-bearing which leads to 8,000 maternal deaths annually. Maternal mortality is now estimated to average 539 deaths per 100,000 live births. The lifetime risk of a Tanzanian woman dying from causes related to pregnancy and childbirth is one in 31, compared to a ratio of 1 in 10,000 in Europe. The immediate causes of death (haemorrhage, sepsis, abortion and complications from toxemia) are avoidable or preventable. Only 52 per cent of women deliver in health facilities, which often lack basic equipment and properly trained personnel, and the referral system is poor. For every woman who dies, 20 to 30 others – totalling about 200,000 women – are significantly disabled through pregnancy-related causes (fistulae, prolepses of the womb, pelvic inflammatory disease, severe anaemia, Vesicovaginal fistula). They bear excessive workloads and lack guarantees of their rights to knowledge, information and resources especially land, cash and credit.

27. Adolescent girls experience more health problems than boys due to an early start in their reproductive role. According to a 1993 study in Dar es Salaam. 10 per cent of first pregnancies occurred in children of 15 years of age and below.

28. Well over a million Tanzanians are HIV positive, an estimated 65,000 new-born babies are seropositive; AIDS cases are presently estimated at 430,000; children affected by AIDS are estimated to number 800,000; the number of orphans is expected to be 1 million by the year 2000; and very many families are forced to give care and support to an increasing number of sick relatives.

29. Worst hit are the 20-29 and 30-39 age groups, with seroprevalence significantly higher among women. This is partly because girls become sexually active earlier than boys and also because older men regard younger women as being safe from HIV.

30. In 1994, the proportion of newborns infected with the HIV virus was as high as 8.3 per cent in some regions; most of these children perish before their second birthday. In 1994, it was estimated that 250,000 children had lost their parents to AIDS, and today the number could be twice that. More than 100,000 children orphaned by AIDS live in the north-western region of Kagera along. Many of these children are themselves heads of households.

31. The economic impact of the AIDS epidemic is becoming more obvious as people are having to shift from income-earning activities to caring for dying relatives, who themselves are usually in the productive age group. The lifetime cost of treating an AIDS patient in Tanzania is about US\$ 295 for an adult and US \$ 195 for a child. The burden of this cost is apparent when compared with the amount of the Government presently spends on all health care for each person per year: US\$ 3.50. A 1993 study projects that GDP will be 20 per cent less by 2005 than it would have been without the HIV/AIDS pandemic.

32. Two and a half million Tanzanian children under five are malnourished and malnutrition in combination with largely preventable diseases contributes to the death of at least 450 children every day. 43 per cent of children are stunted and 31 per cent are under weight. 45 per cent of children are anaemic, contributing to a loss in intelligence of about nine IQ points. About 30 per cent of school-age children are deficient in vitamin A and this is a leading cause of preventable childhood infections and blindness.

33. In the 64 districts supported by UNICEF through the Community Based Child Survival, Protection and Development (CSPD) programme on the Mainland (54 districts) and Zanzibar (10 districts), good progress has been made towards achieving the nutrition goals. However, progress in reducing the frequency of low birth weight and child malnutrition requires acceleration, and the national goal for severe malnutrition will require more rapid progress, outside the CSPD programme areas, to achieve a reduction from 7.1 to 3 per cent or lower.

34. Vitamin A deficiency and anaemia are widespread problems linked closely with poor food intake and heavy workload burdens of both adolescent children and women.

35. Nearly half of all Tanzanians live in iodine-deficient areas and are therefore at risk of iodine deficiency disorders. These disorders threaten at least 10 million people with ailments such as goitre, irreversible mental retardation and other forms of impaired physical and mental development. Such vitamin and mineral deficiencies can cost 5 per cent or more of gross national product in terms of lost lives, disability and productivity. This situation clearly undermines the country's efforts to alleviate poverty.

36. Malaria, the leading killer disease of children under five, is responsible for 15 per cent of child deaths and is the reason for nearly, a third of all hospital attendances. Pneumonia kills about 38,000 children each year. Diarrhoea accounts for 8 per cent of all out-patient diagnoses; and although children suffer two episodes of diarrhoea each year, diarrhoeal disease is no longer the primary killer of young children because of the successful promotion and widespread use of oral dehydration therapy.

37. In most cases these deaths are related to the poor health status of women during pregnancy and childbirth. Women who are over worked and suffer from anaemia, malnutrition and malaria risk giving birth to babies with very low weight and poor health.

38. Mortality and malnutrition rates are highest in the economically less developed areas of the country, notably in the southern and western parts of the Mainland and in the rural areas of Zanzibar.

Child survival in Tanzania

Born alive	Alive at 1 month	Alive at 1 year	Alive at 5 years	Alive at 15	Alive at 18
100	94	91	87	83	80

39. The country suffers a heavy debt load of US\$8.5 billion with a debt service burden of US\$ 35 per capita. Poverty is not only widespread but is also becoming deep seated in a way that may threaten the long-established values of social cohesion and mutual support within the family and community, the hallmarks of Tanzania's human-centred development.

I. GENERAL MEASURES OF IMPLEMENTATION

Measures taken to harmonize the United Republic of Tanzanian Law, Policy and Practices with the Provisions of the Convention (art. 4)

Political commitment to children and women

40. In the last decade, the Government of Tanzania has taken many steps which demonstrate its commitment to ensuring the human rights of children and women. Some of the major actions are summarized below.

41. Tanzania ratified the Convention on the Elimination of all Forms of Discrimination in 1985 and the Convention on the Rights of the child in 1991, without reservation.

42. Tanzania participated in the 1990 World Summit for Children and organized a National summit for Children in 1991. A National Programme of Action for Achieving the Goals for Tanzanian Children by the Year 2000 (NPA) was prepared and launched in December 1993. The NPA promoted on a national scale the community-based strategies which hitherto were advocated and implemented on individual project/programmes basis, including the UNICEF-assisted CSPD.

43. Tanzania participated in the Education for All Conference in Jomtien, Thailand (1990), the United Nations Conference on Environment and Development in Rio de Janeiro (1992), the International Conference on Population and Development in Cairo (1994), the world Summit for Social Development in Copenhagen and the Fourth World Conference on Women in Beijing (1995).

44. Many of the standards and goals of these deliberations have been incorporated in national policies and are placed high on the agenda of the Third Phase Government (1995-2000).

45. Soon after the World Summit for Children took place in September 1990, the Ministry of Community Development, Women Affairs and Children (MCDWAC) was established in Mainland Tanzania and in Zanzibar, the Ministry of State, Women and Children (MSWC) was established.

46. In 1994, national regulation on the marketing of breast milk substitutes was passed. A code was adopted prohibiting the sale of baby milk products and supporting the establishment of 33 baby friendly hospitals to date.

47. Between 1993 and 1996, the Ministry of Health and all major donors and development partners reviewed and approved a Health Sector Reform as well as a Plan of Action for 1996-1999. With strong

leadership provided by the Ministry of Health and with many donors as stakeholders in the Plan, it will strengthen the effectiveness and coordination of health interventions.

48. Tanzania is very close to achieving universal salt iodation. Salt iodation is enforced by legislation and supported by more than 200 salt producers organized into a Salt Producer's association to ensure sustainability. Advocacy and sensitisation campaigns help to keep the issue high on the agenda.

49. A national Water Policy adopted in 1991 empowers local water management bodies and communities to manage their own services. It modifies the role of the Government in the sector from purely that of service provider to facilitator.

50. Education reform is under way to improve access, quality and equity for all children.

51. A Women in Development Policy was prepared in 1992. MCDWAC and the Law Reform Commission (LRC) have recommended amendments to various social legislation, now awaiting parliamentary approval.

52. A National Policy on Children and a Policy on Community Development have been introduced in Tanzania Mainland, while a Policy on child Survival, Participation, Protection and Development; and Policy on Women Empowerment and Development have been developed in Zanzibar.

53. H.E. President Benjamin William Mkapa has always been a staunch advocate for children, as has the first Lady, Mrs. Anna Mkapa.

Mechanisms for monitoring, reporting and implementing the convention

54. The formation of the Ministry of community Development, Women Affairs and Children represented an important step forward at central level in monitoring compliance with and reporting on the implementation of the Children's and Women's Conventions. The Department of social welfare in the Ministry of Labour and youth Development (MLYD) is charged with overseeing the institutional care of children in need of special protection measures. Both ministries have officers at regional and district levels, who are members of the district management teams headed by the District Executive Directors.

55. The country's first juvenile court was established by the Ministry of Justice and Constitutional affairs in September 1997 in Dar es Salaam, with assistance from the Government of Canada. The intention is to create a juvenile court in each region. A programme to train magistrates and law enforcement offices in the administration of juvenile justice will be implemented in 1998 with assistance from Canada and UNICEF.

56. A Human Rights Commission has been proposed with strong support from a coalition of NGOs and human rights activists. It is expected that the Commission will be established in 1999, subject to funding, and its Constitution and terms of reference have been prepared in consultation with a broad cross-section of government and civil society bodies as well as with the heads of the Human Rights Commissions in South Africa and Malawi. When established, the Human Rights Commission will have powers to monitor, investigate and refer abuses of children's rights and non-compliance with the provisions of the Convention, complementary mechanisms for ensuring such compliance, such as the institution of a Child Rights Committee or Commission, with or without a Child Rights Committee or Commission, with or without a children's Ombud, have been proposed by UNICEF and are under consideration by MCDWAC.

57. Staff of the MCDWAC, the Zanzibar MSWC and the Central Department of Statistics in the Planning Commission. Office of the President, along with UNICEF staff, have received training in monitoring implementation of the convention. This expertise is being applied to developing monitoring indicators and establishing mechanisms for community-based monitoring and reporting.

Legal framework and harmonization of legislation with the Convention

58. The Tanzanian Constitution has been dynamic in safeguarding and enhancing the country's socio-economic and political development which began from the time of independence in 1961. The 1984 Constitutional amendments were the climax of a democratisation process which aimed at reasserting the people's power and control of government functions especially with the introduction of the Bill of Rights which marked a turning point in the struggle to enjoy the fruits of independence. This amendment empowered courts which are the vital instrument for the administration of justice, to review existing laws which defy the spirit of the rule of law.

59. Tanzania adheres to the rule of law and separation of powers. The Government, the police, prisons and the judiciary are all involved in the administration of justice with the judiciary influencing the first three. It is excluded from direct government control in line with the separation of powers and independence of the judiciary doctrines.

60. As in any other State which generally upholds the rule of law, the Tanzanian constitution provides guarantees for various human rights, such as equality before the law, to all classes of people regardless of colour, status, religion, political inclination, etc. the existence of an independent judiciary capable of safeguarding individual liberties against encroachment by the State is a clear indicator of adherence to the rule of law. Under the Constitution, the right to be heard is guaranteed which means no person can be condemned unheard and no one can be punished without guilt being proven beyond reasonable doubt by the court of law. The Constitution empowers the courts to try cases of abrogation of human rights.

61. Tanzania is signatory to a number of international human rights instruments in addition to Convention on the Rights of the Child. While these instruments do not automatically become part of the national legal system, their provisions can be incorporated in municipal laws or new laws, which confirm to the stipulations of the conventions, can be enacted. A good example is the introduction of a Bill of Rights in the Constitution of the United Republic of Tanzania of 1984 to incorporate provisions of various human rights instruments including the Universal Declaration of Human Rights.

62. The Government, through the Law Reform Commission, conducted a study of various laws on children to see whether children's rights have been adequately safeguarded as per the stipulations of the Convention. This study looked at the following aspects all laws affecting children:

- Different definitions of the term "child"
- Inheritance, succession, maintenance and custody off children.
- Adoption
- Child labour and juvenile prostitution
- Other issues affecting children's welfare as a whole

63. Some of the recommendations have already been worked on to ensure that children's rights are fully protected under the law. An example of this the submission of a bill on sexual offences to Parliament to effect amendments in the Penal Code so that those accused of sexual abuse can be given stiff sentences, and also to simplify and render the procedure involved in the prosecution of such cases

more “user friendly” in Zanzibar, an initiative to review the laws on women and children was started early in 1997.

64. The government has also put in place a Child Development Policy to give direction on how children’s issues should be handled and given priority in accordance with the stipulations of the Convention. This includes advocacy on child rights whereby all stakeholders, including NGOs are given a role in ensuring that children’s rights are not only enforced but are widely publicized through the media and through interpersonal communication, workshops, seminars, etc.

65. Data on children are gathered at the district and regional levels with respect to certain sectors such as education (primary and secondary schools), health and nutrition and registration of birth in CSPD programme areas, i.e in 54 districts of Mainland Tanzania (out of a total of 113 districts) and all 10 districts of Zanzibar. This information, including District Profiles, is maintained by MCDWAC and UNICEF.

Steps taken for the implementation of the Convention

66. One of the major problems facing the social sectors is the recurrent cost burden. Enormous capital investments were made in health, education and water services, and in the training of large numbers of personnel. While donors were willing and able to finance much of the capital cost of developing the infrastructure, financing of the recurrent expenditure was largely left to the Government, which in turn depended on too narrow a tax base.

67. Due to economic hardship facing the country, there have been drastic changes in the budget allocations to programmes benefiting children. For example, in the education sector, the central government allocation stood at 11.7 per cent of the total government budget in 1980/81, and rose to 13.3 per cent in 1982/83. However, the allocation to the sector fell drastically to 2.5 per cent in 1995/96, according to the Basic statistics in Education, 1992-1997.

68. In the health sector, curative services in dispensaries, rural health centres and hospitals account for the vast majority of public expenditures. Approximately 14 per cent of the health budget is allocated to preventive activities.

69. In the water sector, the Government had instituted a policy of free water supply in the rural areas. The goal was to provide the rural population with a clean, potable water supply within 400 meters of the household. However, the water policy is currently under review with a view to emphasizing that water is an economic good and therefore no longer a free service.

70. However, the Government has increased the allocation of recurrent and development budget for social services, from 30 per cent in the 1996/97 budgets to 48.1 per cent in the 1998/99 budget.

71. Measures to reduce educational disparities among children between different regions and groups of children have been started by promoting affirmative action for children in those areas. NGOs such as Tumaini Centre for Street Children (Dodoma), *Kuleana* (Mwanza) and Dogodogo Centre for Street children (Dar es Salaam) have started projects to ensure that children, particularly those belonging to the most disadvantaged groups, are protected against the adverse effects of economic policies.

72. The negative impact of structural adjustment programmes on these children is to a limited extent mitigated by grants from national NGOs to enable the poorest children to attend schools.

73. There are also programmes in other areas such as water and education.
74. The Convention has been translated into Kiswahili which is the national language spoken throughout the country, and widely distributed through the government structures at national, regional, district, ward and village levels, as well as to families and individuals through community leaders, NGOs, legislators and other organs of civil society.
75. The Government and civil society have taken measures to make the principles and provisions of the convention widely known by conducting advocacy and social mobilization activities such as meetings, workshops and seminars. Radio programmes, traditional drama, songs and dance performances, and as well as television programmes on CSPD and IPEC, and the introduction of the Sara Communication Initiative are some of the key activities being carried out.
76. Actions have also been taken to disseminate the Convention through workshops in which parliamentarians, government officials and NGO personnel have been sensitised. International theme days such as the Day of the African Child (16 June), World Health Day (7 April), World AIDS Day (1 December) and the World AIDS Campaign 1998. International Women's Day (8 March), Family Day (15 May), and annual launching of the UNICEF State of the World's Children Report (11 December) use thematic messages to advocate children's rights.
77. Curriculum changes have been made in some of the training institutions to ensure that children's rights are taken into account. For example, child rights are included in the curricula of the national Community Development Training Institutes, the social welfare Training Institute and the College of Education.
78. Efforts to ensure that the Convention is widely known to children have also been made through children's activities during the annual commemoration of DAC, by involving children to actively promote rights through drama, songs, dance and other performances. Child-friendly illustrated booklets have been produced by *Kuleana* and distributed among school children and those out of school.
79. Sara, an animated cartoon character developed under the UNICEF Sara Communication Initiative (SCI) through a regional collaborative process involving 12 African countries, has become a role model representing the whole Tanzanian girl who has the self-esteem and the quiet courage to pursue a course in life that she believes is right for herself, her family, her friends, community and nation. Sara cuts a positive figure – instead of presenting herself as a victim to be pitied and helped by benefactors, she proudly proclaims her human potential as a girl and in doing so, she exposes the problems that hinder the development of girls.
80. Through a multi-media package consisting of animated videos, radio programmes, audio tapes, comic books, posters, manuals and novelettes. Sara's stories are being used in schools, in centres for children in need of special protection measures, sporting events involving children, in magazines. TV programmes and radio programmes to communicate messages on education, health and development with gender equity, as well as other issues relevant to the survival, protection, development and participation of girl children throughout the country.
81. *Kuleana*, for example, has published pocket-sized (A5) booklets in child-friendly Swahili with accompanying English text, and cartoon illustrations, on child rights and responsibilities, children's rights to education, girls' and women's rights, children's rights to protection against exploitative and hazardous labour and children's, especially girls', rights to health. The booklets are widely distributed among children in and out of school, as well as among parents and community leaders. The booklets include pullouts to allow children to respond through the post. Calendars, posters and T-shirts are also

being widely distributed to promote child rights through culturally relevant messages such as “Beat a drum, not your child”, “My friend with AIDS is still my friend”, “If children have a right go quality education, how long shall we wait until we get it?”, “If every child has a right to education ,why should not she be in school (caption for a picture of a pregnant girl carrying water and firewood?)”, “Thrashing is educating?”, “should a child miss school because parents can not pay fees?” etc. In addition, *Kuleana* cooperates with The Guardian, a leading English daily newspaper, in publishing a weekly child rights Club section. Orphanages have been doing a lot of work for the welfare of children. Orphanages like Mgolole convent in Morogoro and Bethlehem at Ifakara have been taking care of motherless or parentless infants including newborns. NGOs, on the other hand, have been doing a good job to promote children’s well-being.

82. Non-governmental organization such as *Kuleana*, Dogodogo Centre for Street children, TAMWA, TAWLA, TGNP, TAHEA, FAWE and others are actively involved in awareness – raising and advocacy campaigns on behalf of children, and the Government collaborates closely with these organizations in these activities.

83. The government has agreed to create an independent Human Rights Commission following civil society advocacy and in response to a review of the finance and legal sector that was completed in October 1997. Consultations for drafting the terms of reference and set-up of the Human Rights Commission are at an advanced stage and the Ministry of Justice and Constitutional Affairs is seeking funding for its establishment. The Government of Tanzania – UNICEF Country Programme of Cooperation 1997-2001 aims to establish a National Child Rights Committee as one of the activities of the Children’s and Women’s Rights programme (Programme Four).

II. DEFINITION OF THE CHILD

Legal framework

84. Various laws define childhood depending on the context within which that person is referred to. The Tanzania Law Reform Commission has worked on this aspect in its study on children and the law in Tanzania and has observed contradictions which exist not only in statutory laws but also in customary law. Failure to provide a consistent definition of a child, the laws have failed to give full protection to various categories of children who have different problems, such as street children and working children such as domestic workers.

85. The Government of Tanzania recognizes that the age of a child is crucial for the implementation of the Convention in general, and child protection in particular. In order to protect and enjoy their rights, children should have the opportunity to participate in making decisions affecting them.

86. According to the Age of Majority Act, the age of majority is attained at 18 years, which means that any person below 18 is a minor. The age of majority in Zanzibar is 18 and as a general rule children become adults at that age (Age of Majority Decree (Cap 53)).

87. However, there are exceptions as follows;

- Islamic law recognizes puberty (which normally occurs around 15) as the age of capacity.
- The children and Young Persons Act of 1953 defines a child as under 14 years of age.

- The Employment of children, Young Persons and Adolescents (Restriction) Decree of 1952 a child as under 15 years of age.
- The Penal Code states that a child has criminal capacity at the age of 12 years.

88. Under the Constitution of the United Republic of Tanzania only those persons 18 years and above can vote and be elected. For the purpose of entering into contracts 18 years is the age at which one can have legal capacity as per the Contract Ordinance (Cap 433). In marriage, the minimum age for marriage is 15 for girls and 18 for boys as per the Law of marriage Act 1971. The same Act states that a married woman at 15 years and above is longer a child.

89. The adoption Ordinance (Cap 355/1955) defines a child as anyone under 21 years who is not married.

90. The Children and Young Persons Ordinance (Cap 13/1937 rev. 1964) defines a child as anyone under 12 years of age. A person between the ages of 12 and 16 is defined as a young person. In the Employment Ordinance, a child is one who appears to be under 15 years of age. From the foregoing it is evident that each law defines a child differently. The Tanzania Law Reform Commission has recommended to the Government to define the child in accordance with the age criterion provided by the Convention.

The minimum legal age defined by the national legislation

Legal representation

91. Under the Evidence Act 1967 children of tender years can testify in both civil and criminal proceedings and they are considered competent witnesses. However, their evidence has to be corroborated by another person. In criminal matters they can be allowed to participate in the proceedings, not only as witnesses, but also as accused persons. In civil matters, children under 18 years can only sue or be sued through a “next friend” or a representative because they do not have capacity or locus standi.

Administration of justice

92. According to the Children and Young Persons Ordinance juveniles have to be tried under juvenile courts. Usually the practice has been for an ordinary court to reconstitute itself into a juvenile court when children are involved. Children who are in conflict with the law are by law supposed to be put in children’s remand homes, and on being found guilty, they are not to be imprisoned but have to be sent to approved schools.

93. However, lack of resources to establish enough facilities result in children being mixed with adult accused persons or convicts.

Criminal capacity

94. According to the Penal Code (Cap 16) a child of 7 years is not criminally responsible. However, between the ages of 7 and 14, there is a rebuttable presumption that this child was capable of knowing that what he did, or omitted to do, was wrong. In this regard such a child can be held criminally liable.

95. There is Sexual offences Special Provisions Act of April 1998, which, among other things, raises the age of criminal responsibility to 10 years. However, there are mixed feelings as regards the advantages and disadvantages of raising this age.

96. In Zanzibar, a person under the age of 12 is not criminally responsible for any act or omission, and a child between 12 and 14 is presumed not to have capacity unless the contrary is proved (Act No. 11 of 1986)

Consent to sexual intercourse

97. According to Penal Code, a girl of 14 years and below cannot give consent to sexual intercourse. The Sexual Offences Special Provisions Act of 1998 has proposed to raise the age to 18 years, save where the girl concerned is the wife of the one with who she has had sexual intercourse, but she has to be at least 15 years old, which is the minimum age for girls to marry. Recent research on adolescent sexuality shows that about 50 per cent of young people, boys and girls, have had sex by the age of 15.

98. In Zanzibar, the age of consent is 14 or at whatever age a girl reaches puberty (sects. 124 and 125, Penal Code). No age of consent for boys is created, although a boy under 12 is not considered capable of intercourse (sect. 14, Penal Code). The Ministry of State for Women and Children (MSWC) has recommended the age of sexual consent to be 17 years.

Consent to medical treatment

99. There is no legal provision as to the age at which a child can give consent to her treatment without parental consent.

Age for military service

100. Voluntary enlistment in the armed forces is set at 15 years. Defence Forces Regulations restrict children under 15 years to be employed in the army.

Employment

101. The Employment Ordinance prohibits employment of children under the apparent age of 12 years.

102. In Zanzibar, no child under 12 years can be employed except in rural areas where children over 10 years can do light work, which includes some agricultural activities and domestic service. Such children should not work more than six hours a day, and only domestic servants may be employed at night (rule 2 of the Employment of children, young Person and Adolescent (Restriction) Decree of 1952). The following restrictions also apply:

(a) No child under 15 can work in industrial undertakings (broadly defined) unless in a family concern which does not involve danger to the child. Similarly, no child under 15 may work at sea unless in a family boat (sect. 6 and 12);

(b) No child under 16 can work in a mine (sect. 16);

(c) Children between 15 and 18 must have medical certificates to work at sea and in industrial undertakings (sects. 7 and 13);

- (d) No child under 18 can work at night (sect. 9).

Marriage

103. Islamic law seems to permit the marriage of individuals who have reached puberty, at which point they are considered to be adults.
104. It also seems to recognize the possibility that girl children may be married before they reach puberty and without their consent. A girl so married has the possibility of repudiating the marriage when she reaches adulthood.

School and education

105. The Education Act of 1978 stipulates compulsory enrolment in primary education between the ages of 7 and 13 years.
106. While the correct age of entry into primary school is 7 years, the average age of children entering standard one is 9 years. Most children complete standard seven at 16 years.
107. In Zanzibar, primary education is compulsory according to the Education Act. No. 6 of 1982. Compulsory basic education constitutes 10 years of schooling: 7 years of primary education and 3 in junior secondary school.

The right to vote

108. The right to vote begins at age 18 according to the Constitution of the United Republic of Tanzania.

Deprivation of liberty

109. If under 14, a child should not be sentenced to imprisonment and if over that age and under 16, should only be sent to prison if there is no suitable alternative (Children and Young Persons Act, sect. 12).

Capital punishment and life imprisonment

110. No relevant provisions can be found in the laws relating to art. 37 of the convention, that children under 18 should not be sentenced to death or to life imprisonment without release.

Consumption of alcohol and other controlled substances

111. Many religious bodies prohibits the use of all intoxicants.
112. The Pharmaceutical and Dangerous Drugs Act (No. 6 of 1986) prohibits the use, cultivation, possession or sale of dangerous and noxious drugs and prescribes heavy penalties.

Relation between minimum age of employment and age of completion of compulsory education, and how it affects the right to education

113. Both Tanzania Mainland and Zanzibar have policies on child survival, participation, development and protection which, among other things, deal with the issues of child labour, taking into account the Convention.

114. The Government of Zanzibar has drafted a “Policy on child survival, Participation, Development and Protection (1997)” which, among other things, deals with the issue of child labour, taking into account the Convention.

III. GENERAL PRINCIPLES RELATING TO RIGHTS OF THE CHILD

Non-discrimination (art. 2)

115. Article 13 of the Constitution of the United Republic of Tanzania provides for equality of all persons. Article 13 (5) defines “discrimination” in line with article 2 of the Convention, except that “sex” is not mentioned as a discrimination criterion.

116. The Constitution of Zanzibar clearly establishes the principle of equality in article 11(1) and (2) which states that “all people are born free and equal and every person is entitled to respect and human dignity”. In addition, the application of fundamental rights to all is specifically made irrespective of sex (but not age) under article 25.

117. The Constitution also contains a prohibition against discrimination in article 12, which states “No law shall make any provision which is discriminatory either in itself or in effect”. However, in defining “discriminatory”, discrimination on the basis of either sex or age is not mentioned.

Legal context

118. Much as equality of all persons has been guaranteed by the Constitution, there are a number of laws which will discriminate against women/girls. As glaring example is the inheritance laws and particularly the Customary Law Declaration Order, 1963, rules 21, 22, 25 and 30 of which provide, *inter alia*, that whereas boys are heirs in the first and second degrees, girls are heirs in the third degree.

119. Although compulsory education is for both boys and girls, girls’ education is hampered by a number of factors as they go up through the levels of education. Among these factors is discrimination against girls by parents who favour boys, especially now that parents have to share in the cost of education. The tendency has been for parents to pay fees for boys and leave girls at home, either to help with household chores to supplement the household/family income, or to prepare them for marriage.

120. The Government, NGOs and human rights activists are working each in their own areas of comparative advantage, competence and interests to ensure that discrimination against women and girls is removed.

121. NGOs and activists in human rights have called for inclusion of ‘sex’ as a criteria for discrimination in the Constitution, but the Constitution has not yet been amended to that effect.

122. The Government through the Law Reform Commission has already conducted a study on the Laws of Inheritance and Succession and recommended the enactment of a uniform law on inheritance. If

this law is enacted, the problem of discriminatory customary law, which discriminate against a girls and women, will be minimized. However, its enforcement as it relates to customary law would need special consideration.

123. Eradication of discrimination entails sensitisation and education aimed at changing attitudes of men (people) about women and girls, so that they may see that women deserve equal treatment.

Maintenance of children

124. The primary responsibility for care of children rests with parents. The law has put greater burden on the father as is stipulated by the Law of Marriage Act 1971. However, children born out of wedlock belong to the mother, and according to the law, it is the mother's responsibility to care for them.

125. The Affiliation Ordinance of 1949 has provisions that can be used by the mother to ask the court to order maintenance for such children from the putative father. This, however, is a process that has to go through courts. It entails time, resources and embarrassment to the mother.

126. There is no mechanism to follow up these orders. If the putative father is self-employed it becomes even more difficult to deduct the amount, which the mother can collect in court.

Refugee children

127. Rights of refugee children depend on the status of their parents. Being refugees, they certainly will be deprived of certain rights, which other children may have due to the difficult circumstance in which they are living. Lack of resources may hamper the enjoyment of rights by these children such as education, health, recreation, and so on.

Children in other social situations

128. Minority and indigenous communities are not a problem in Tanzania.

129. Children with disabilities have special schools that give them special education with consideration to their disability such as specialized schools for the deaf, the blind, and children with mental disabilities. These schools, however, are not enough to cater for all children with disabilities. In some cases, parents hide children who have disabilities, instead of sending them to school. The Government and NGOs are educating communities about the importance of taking these children to the special schools. The situation is the same in both Tanzania Mainland and Zanzibar. This is largely the case in urban areas where sizeable numbers of such children are found, but in the villages this does not apply.

Children living and working on the street

130. The primary duty to care for children is, by law, imposed on parents. Children who are on the street lack parental care. They lack access to basic necessities of life such as health care, education, shelter and sometimes food.

131. The Government, through its Department of Social Welfare, has the responsibility of providing alternative care. The NGOs and parents are supplementing government efforts by establishing centres for street children. These centres provide food, shelter, tuition and health care, education and counselling. However, they are few when compared to the demand.

132. Financial constraints make it difficult to have enough centres that could accommodate all children. The main aim of most programmes is to reintegrate the children back into the community. In order to have sustainable programmes for children who have special needs, a Study on Children in Need of Special Protection Measures has been initiated with a view to providing information that will help the various agencies design appropriate and effective programmes to confront these children's problems and their underlying causes.

133. In Zanzibar, those children who live and work on the street may be punished rather than protected by State legislation. It is a problem that they are vulnerable to being picked up as "idle and disorderly persons" under section 164 of the Penal Code.

134. According to government statistics the number of children living on the streets in Zanzibar remains small compared to other countries in the region, the highest number being recorded in Zanzibar town.

135. Street children in Zanzibar by constituency.

<u>Constituency</u>	<u>No. of children</u>
Zanzibar town	20
West	5
South	4
Central	4
North A	7
North B	3
Mkoani (South)	2
Chake Chake (South)	4
Wete (South)	6
Micheweni	2
Total	57

136. MSWC Zanzibar, in partnership with UNICEF, is conducting a national Study on Children in Need of Special Protection Measures, including street children.

Best interests of the child (art. 3)

The legal context

137. In deciding on issues affecting custody or maintenance of children, primary consideration is given to the best interests of the child. This principle is enshrined in the Law of Marriage Act, 1971.

138. The Constitution of the United Republic of Tanzania does not specifically mention children but rather refers to "persons", which includes children.

139. It seems that it is only in the courts that there is any legal articulation of the best interest concept in Zanzibar law. The Penal Code rules require that, "Every court in dealing with a child or young person who is brought before it (in any circumstances) shall have regard to (their welfare.... And in disposing of a case should obtain background information to ensure that the child's 'best interests' are take into account" (rule 7 and rule 25).

Respect for the views of the child (art. 12)

140. According to Islamic law a child over the age of seven has reached the age of discretion and is permitted to express his/her opinions, for example in custody matters, in which a child can choose for himself or herself if he/she wants to live with the father or the mother. Similarly, provision has been made for children to be heard under the Children and Young Persons Act. The Education Act also permits representatives from the student body to be on school committees. However, they have no influence in school decision-making.

141. Given this positive attitude towards the views of children under both Islamic and State law, it should be possible to ensure that children's voices are heard in Zanzibar.

Budgetary allocation in the social sector

142. Budget allocations to the social sector are very low. Parents have ensure they meet the costs of social services including housing, transport, health and education.

Right to life, survival and development (art. 6)

143. Under the Constitution the right to life is protected. Under the Penal Code, child survival is protected from conception to maturity. Abortion is a criminal offence. Free provision of antenatal care to expectant mothers and free maternal and child health care are other measures taken by government to ensure child survival ad development. Children under five years are given free primary health care and medical treatment in government hospitals, clinics and dispensaries.

144. Provision of day care centres is meant not only to care for children when their parents are working but also to prepare them for enrolment to primary education.

Non-discrimination in education between boys and girls

145. Section 50 of the Education Act (act No. 6 of 1982, as amended) clearly states that basic primary and junior secondary education is the right of every child aged between 7 and 17 in Zanzibar and that the Government is bound to provide education to every child. Also Islamic law seems to be extraneously supportive of child education and equally requires that no distinction should be made between the treatment of boys and girls.

146. However, the Education Act, and in particular section 20 (3) and (4), excludes girls from education by demanding that married pupils and those who have given birth should be expelled from school.

147. High drop-out rates, educational facilities that have not grown proportionally with the increase in enrolments, shortage of school desks. Unsuitable school curricula, inadequate staff levels and poorly trained and under qualified teachers are among the problems that effect the quality of education in the country/Zanzibar.

Respect for the views of the child in the administration of justice

148. Children have a right under the law to have their views heard throughout the whole process of administering justice. They are competent, for instance, to act as a witness in terms of the evidence Act, 1971.

Respect for the views of the child in family life (divorce, custody and maintenance)

149. In matters concerning divorce, custody and maintenance it is the best interests of the child that is given paramount importance by the court. In reaching a fair decision, courts have the powers to call children and get their views on a number of issues pertaining to their welfare, including which parent they would prefer to stay with.

Respect for the views of the child in schools

150. Primary and secondary schools at various levels have in-built mechanisms to ensure that the views of children are considered. School *Baraza* (councils) elected by the children through a democratic process are a mechanism to ensure the participation of children in making decisions concerning school activities and school life.

Respect for the views of the child in institutions

151. Usually decisions regarding the placement in and life of children in institutions is usually made by others – parents, relatives, religious organizations and even government authorities. Children generally have no say in these matters.

Awareness-raising/children and the media

152. Ways for children to find expression of their views through the media and other forms of communication are being developed and encouraged by the Government in close collaboration with civil society.

153. The Government, through a number of events such as the Day of the African Child (16th June) has organized essay-writing competitions and art competitions, where children write or paint about the theme of the year. In 1992, a Children's Parliament was organized with children participating from all regions. They discussed a number of serious issues of concern to their rights and advancement. This year, on 16 June, 1998, a similar event is being planned in Dodoma, in which children from every district of the country will interact with parliamentarians on key issues concerning child rights, particularly their right to protection from abuse and neglect.

154. Another example is *Flight of My Life*, a collaborative event organized in September/October 1997, by UNICEF, British airways, government ministries and a group of 17 NGOs and 17 private companies in which over 300 children, mostly children in need of special protection measures from 11 regions of the country, prepared a manifesto which they presented to His Excellency the President of the United Republic of Tanzania. The children also boarded a special British airways jumbo jet flight around Mount Kilimanjaro in the company of the First Lady and several cabinet ministers.

155. NGOs have a number of activities, albeit scattered, to encourage children to express their views. These include essay competitions, radio programmes, regular columns in newspapers and children's magazines to which children contribute articles.

156. The private sector, including privately owned television and radio stations, have programmes for children providing educational material and entertainment for children. Sometimes, children produce and present the programmes themselves.

157. The Zanzibar weekly newspaper, NURU, has a page on children's views and advertises events for children. There are also short stories and cartoons, which are intended to have educational value.

These include Sara comics. In the Mainland, several daily and weekly newspapers such as Daily News, Uhuru, Majira, Mzalendo, The Guardian, etc. have sections devoted to children and children's issues. For example on Thursdays, The Guardian publishes a section called "Child Rights Club" prepared by Kuleana, and the women's magazine Femina serializes Sara comic strips.

158. Television Zanzibar offers between 90 and 120 minutes of local and foreign children's programmes. Local programmes include discussion programmes for and about children in which children's opinions are sought. Radio Zanzibar has only one programme, which is intended for children and which gives an opportunity to air their views. The programme is designed for nursery and primary school children, and focuses on educational development and children's daily life. Occasionally, programmes are aired which address children's socio-economic issues such as child labour and child abuse.

Discrimination against girls

Age of consent

159. The Zanzibar Penal Code establishes an effective age of account of 14 or at whatever age a girl reaches puberty. Carnal knowledge (sexual intercourse) or indecent assault of a girl under that age is prohibited (sects, 124 and 125). Both offences carry heavy penalties. No age of consent for boys is created, although a boy under 12 is not considered capable of intercourse (sect. 14)

Child marriage

160. The Age of Majority Decree (Cap 53) defines the age of adult capacity as being 18 years, but the exception to this definition is the capacity to marry, especially as provided for in religious law (sects. 2 and 4). Islamic law seems to permit the marriage of individuals who have reached puberty, at which point they are considered adults.

161. However, Islamic law in Zanzibar also seems to recognize the possibility that girl children may be married before they reach puberty and without their consent. It is possible for a girl so married to apply to repudiate the marriage when she reaches adulthood, that is, puberty. The possibility of marriage before 15 is also recognized by the Zanzibar Penal Code. One defence to the charge of "carnal knowledge" with a girl who is under 14 is if man is married to the girl, and she has attained puberty and is over 13 (sect. 125)

162. As a consequence of this interaction of laws, early girl child marriage is legally possible in Zanzibar. These laws could be described discriminatory in that they deny such girls the opportunity of education and health development.

Discrimination against boys

163. In the case of prostitution and other unlawful sexual activities there are a number of provisions aimed at protecting girls under 16 (sect. 12, Penal Code). There are no provisions aimed at protecting boys and only limited protection of boys under 14 against sexual assault is provided. However, MSWC has already forwarded recommendations for amendments in this regard.

164. In principle sexes, boys and girls, in Zanzibar have equal access to education, health, sports and other social benefits. However, girls are encumbered by several social and cultural practices and beliefs, which hinder their progress in the social and economic spheres. In this regard, the Government is

committed to sensitising the society on female potentialities and advocates a positive image of the girl child.

Discrimination and illegitimate children

165. A difference seems to be made between children born within marriage and those who are not, although in Zanzibar it is in theory quite difficult for a child to be born illegitimate, that is, outside marriage. One commentator suggests that in the Shafii school of thought which is followed in Zanzibar, a child born within four years of the end of a marriage is regarded as the legitimate offspring of the former husband, unless he or she is born six months into a subsequent marriage. Should children be considered illegitimate despite this safeguard, they have little or no claim against their father.

166. Under State law a similar distinction applies. The maintenance provision under the Spinster and female Divorce Protection Act 1985, do require fathers to support their illegitimate children. A claim would have to be enforced through court proceedings.

167. In addition, if English common law principles are followed in the application of State law, the recognition of specific statements regarding legal or joint parental responsibility for illegitimate children will be restricted by provisions such as the Spinster Act. Under common law, as opposed to statutory development, the father has no responsibilities for his "illegitimate" child. It is also more likely that a child will be considered illegitimate under the State law than under Islamic law. This is because the Evidence Decree suggests that children may only be conclusively provided to be legitimate if born within 280 days of the dissolution of their mother's marriage, rather than the four years under Shafii law.

168. The distinction made in law between "legitimate" and "illegitimate" children in recognition of the basic parental relationship as well as rights of maintenance and succession could be said to amount to discrimination.

IV. CIVIL RIGHTS AND FREEDOMS

Legal framework

169. Civil rights and freedoms are safeguarded under the Constitution of the United Republic of Tanzania. Penal Code 5, 13-15 provide for a Bill of Rights protecting individual rights and freedoms and a procedure to be followed when these rights are infringed.

Registration of birth

170. Registration of birth is governed by the Registration of Births and Death Ordinance. Every child is required to be registered immediately after birth or within three months after birth. Every mother who gives birth in a hospital or dispensary is issued with a notification of birth which she then presents to a registrar of births, and is issued with a birth certificate. This system exists at various levels, from national to district level, to ensure that all children are registered.

171. In practice, most children are not registered, especially those who are born at home, and to some extent, those born in hospital due to cumbersome processes coupled with delays in issuing the certificate. Ignorance of the legal requirement is another factor. Where children are not registered within three months after birth, the parents may later be forced to apply for later registration, especially when enrolling children for primary education where a birth certificate may be required. This entails applying to a court of law. The certificate contains the names of both parents, date of birth, sex and nationality,

but not the marital status of the parents. Of late, many parents realize the importance of registering the birth of their children as a result of public education by both the Government and NGOs.

Name and Nationality (art. 7)

Legal and constitutional context

172. In Tanzania, no child is born stateless, because in this country a child born and registered within three months acquires Tanzanian citizenship of both parents' nationality or marital status. In this regard, the child may also have the citizenship of both parents until he/she attains the age of majority, which is 18 years, when he/she is required by law (Citizenship Ordinance) to denounce one citizenship.

Problems encountered

173. Children born outside the country of Tanzanian mothers sometimes encounter problems when their mothers return to Tanzania, because children born abroad do not have the right to acquire the citizenship of their mothers, and this poses a problem to many women.

Preservation of identity (art. 8)

Legal and constitutional context

174. The right to identity is not very explicit in law. However, under the penal laws, concealment of the birth of a child is an offence, which means that every child born has to be known. A child is then given a name, which can only be changed with the consent of parents, or authorized persons as recognized by law.

Freedom of expression (art. 13)

175. A child has a right as a person to express himself/herself. However, depending on its background and upbringing, there may be restrictions imposed by custom as to how this right can be exercised.

Freedom of thought, conscience and religion (art. 14)

176. A child can exercise this right in a limited manner. A child's religion is determined by the parents, particularly the father. Most schools will respect a child's religious belief. Being a secular State, Tanzania has no laws imposing religious teaching on children.

Freedom of association and peaceful assembly (art. 15)

177. This is enshrined in the Constitution although no specific mention is made of children. Children have a right to join associations and other groupings such as youth leagues of political parties, boy scouts, girl guides, and other groups. Most of these associations are meant to teach children their obligations in society, teach life skills and provide entertainment.

Protection of privacy (art. 16)

178. Most people do not think that children are entitled to privacy. Many parents would wish to know everything concerning their children, including the kind of correspondence they receive.

179. The Constitution of the United Republic of Tanzania provides the right to privacy to every person. Given the fact that parents make most decisions affecting their children's welfare, the tendency has been for parents and guardians to censor what their children receive or send as correspondence and in many instances it has turned out to be for the best interests of the child.

Access to appropriate information (art. 17)

180. Children, especially in urban centres, have access to diverse national and international sources of information such as local and international television and radio programmes as well as newspapers and books, audio and video tapes.

181. The question remains as to whether or not such information or material is aimed at the promotion of the child's social, spiritual and moral well being and physical and mental health. Some of the material, especially certain scenes in video tapes, may corrupt the morals of children and it is not easy to censor or control the importation of such items, even though there are laws that restrict the importation or display of such information.

Participatory Action Research with Children (PARC)

182. Participation in society begins when an infant enters the world and begins to discover the extent he/she is able to influence events; as children extend their influence on their families and, later on the institutions they attend and on other members of the community, the degree of their participation grows.

183. The degree to which children should have a say in the affairs of the family, the school, the neighbourhood and the community is a subject of strongly divergent opinions.

184. Widespread poverty is the most basic cause of the present situation of Tanzanian children. Children living in poverty cannot be expected to initiate actions for others when they themselves are struggling for survival. There is an urgent need, therefore, to find ways for children to help themselves understand their life situation, appreciate themselves better, and discover alternate pathways to the future. This is the main aim of Participatory Action Research with Children (PARC), a process in which children are active participants, facilitated by young men and women who themselves were children only shortly before.

The right not to be subjected to torture or other cruel, inhuman or degrading treatment or punishment (art. 37 (a))

Legal and constitutional context

185. Every citizen is supposed to be protected against torture and cruel, inhuman or degrading treatment as stipulated in the Bill of Rights in Tanzania. It is evident therefore, that children need special protection measures due to the fact that they are not capable of defending themselves against such treatment. This principle is reflected in the Children and Young persons Ordinance (Cap 13) which has special procedures to handle children who have problems. However, due to ignorance, parents and/or guardians sometimes have been involved in torturing or ill-treating children in their care, believing that they have a right to do so.

186. The Bill of Sexual Offences Special Provisions Act of 1998 has added a new section in the Penal Code section 169 A on "cruelty to children", to protect children against ill-treatment, neglect and injury.

Corporal punishment

187. Corporal punishment is still incorporated in our laws as a punishment that can be given to children and young offenders. In schools, the use of corporal punishment is officially strictly controlled. Punishment of children is an issue, which is being hotly debated, especially as regards corporal punishment.

188. According to recent research on corporal punishment in schools carried out by *Juliana* in various parts of the country, punishment of children is prevalent in all schools. Teachers, pupils and parents as well as those in authority acknowledge its existence. Some think it is a good thing to administer corporal punishment as part of the socialization process – in fact, some parents believe that without corporal punishment, children will be “spoiled”. They argue that corporal punishment is part of the African way of rearing children.

189. A study carried out in four primary schools in two districts of Mara region yielded the following information:

Type of punishment	Number of times applied (%)		
	Once	2-5 times	5+ times
Contorted body positions	42.0	24.7	13.6
Frog jumps	29.6	14.8	3.7
Push ups	11.0	8.6	2.5
Kneeling down	33.3	34.6	27.1
Standing in bright sunshine	27.2	6.2	3.7
Lying on sand	8.6	2.5	2.5
Lifting stones	16.0	9.9	8.6
Other punishment	6.2	25.9	7.4

Source: *Kulena study on Corporal Punishment in Primary Schools in Mara region, 1997*

190. The majority of pupils participating in the study were subjected to more than two types of punishment. Boys and girls were subjected to similar punishments, with differences according to their ages. Younger pupils were given lighter punishments, such as carrying smaller stones. No marked difference was observed between urban and rural schools.

191. The disciplinary action books in the four schools surveyed showed very few records of pupils involved in corporal punishment. The books showed records of minor corporal punishments, such as verbal warnings and less than six cane strokes. Actually, the disciplinary action books are meant for recording serious offences or breaches of school regulations which may warrant expulsion or administration of more than five strokes of the cane at one time.

192. The following table summarizes how corporal punishment is accepted by the parents.

Accept corporal punishment	Responses (%)	
	Pupils	Parents
Yes	65.4	85
No	21.0	15
Don't know	13.6	0.0
Total (%)	(100.0)	(100.0)

Source: *Kuleana study on Corporal Punishment in Primary Schools in Mara region, 1997*

193. Children had various views, too. All of them disliked corporal punishment. They suggested that the teacher give them a warning if it is the first offence, and that other, less severe, types of punishment be used instead of corporal punishment. Suggested alternative punishments included cleaning of classrooms, maintaining the school premises, doing schoolwork during holidays, extra homework etc. Students did not condone misbehaviour in any way. They, however, suggested that before a punishment is administered, the teacher should try to find out the reason why the pupil misbehaved or made the mistake. Teachers should not rush into administering punishment before establishing the truth.

194. Others, however, think it is high time that the Government enacted a law to abolish this form of punishment in schools. However, consensus has not been reached as to the type of punishment that can appropriately replace corporal punishment.

195. In Zanzibar, the freedoms mentioned in articles 13-17 of the Convention are established under the Constitution, which it is assumed applies to children as well as adults.

196. Article 12 of the Constitution states that a detained person "shall not be subjected to torture or inhuman or degrading treatment". However, it should be noted that adult males and boys under 16 years may be liable to undergo corporal punishment if convicted of a criminal offence (Penal code and Criminal Procedure Code, sect. 291)

V. FAMILY ENVIRONMENT AND ALTERNATIVE CARE

Parental guidance (art. 5)

197. In Tanzania, children are brought up in their respective families which traditionally can be categorized as follows:

- (a) Nuclear family, made up of a mother, a father and children;
- (b) Single-parent family, made up of a single parent (mother or father) and children; and
- (c) Extended family, made up of parents, children and dependants.

198. However, there are exceptional circumstances within extended families whereby older dependants assume more powers over the children and parents. For example, older parents always provide guidance

and direction as to how children should be brought up to ensure that the child is living within the traditional limits of the family. This affects in one-way or another the cultural and social development of the child. For instance, in certain ethnic groups, female genital mutilation, early marriage and bride price are endemic and are major concerns. Each family, be it nuclear, single or extended, has duties towards the responsibilities for the children within the family. The responsibilities include ensuring the survival, protection and social cultural and economic development of the child. Under normal circumstances, these duties are always recognized and respected the State and the society at large.

199. However, there has emerged a fourth category of family primary as a result of the HIV/AIDS pandemic: the child-headed family.

200. In Zanzibar, the Penal Code clearly articulates an idea of parental responsibility. Under section 191 “the head of the family” is said to be responsible for providing a child under 14 with the necessities of life. If (he) fails to do so (he) will be deemed to have caused adverse consequence to the child’s life and health- the Penal Code makes it illegal to abandon wilfully or refuse to provide the necessities of life to a child.

201. The Government of Tanzania decided to establish policies relating to children, for example the National Policy on children, the Child Development Policy of 1996 (Mainland) and the Policy on Child survival, Participation, Protection and Development (1997) in Zanzibar. The objectives are to provide direction and guidance for ensuring child survival, protection, development and participation. Even before the formulation of the said policies, measures were being taken through the Law of Marriage Act of 1971, the Affiliation Ordinance (Cap 278) and the Adoption Ordinance, which impose the duty of care of a child on the parents and guardians as the case may be, and the Penal Code, which creates an offence for parents or guardians who fails to take care of their children.

202. Apart from policies and legislation, the Government has been implementing and supporting family counselling services through maternal and child health (MCH) and family planning programmes, which are attended by women during their reproductive period. Other awareness campaigns for parents and children on the rights of the child are provided through the CSPD programme, which is implemented in 17 (12 in Tanzania Mainland and 5 in Zanzibar) of the country’s 25 regions, and the Child Labour Campaign, which is being implemented throughout the country. Such programmes provide the structure and means for parents and other persons responsible for children to be aware of the rights of the child and the child’s needs for development to its full human potential.

203. However, some difficulties in the whole process of counselling and educating parents are inevitable. These difficulties include the economic incapacity of the Government to effectively reach all regions. Further, since many key programmes such as MCH services and family planning are targeted specifically at women, men and fathers have been automatically excluded. Efforts to encourage fathers to attend such services are under way.

Parental responsibilities (art. 18, paras. 1 and 2)

204. The Government of Tanzania has the responsibility to ensure that the parental duties and responsibility for a child are performed within the limits of the given legislation or policies and without any kind of discrimination.

205. The Convention on the Rights of the Child provides the framework for decisions regarding children. Article 3 of the Convention emphasizes that all actions concerning the child should take full account of his or her best interests. In Tanzania the life of the child is placed in the hands of the parents or guardians; the personal views or best interests of a child are not always taken into account in making

decisions on the child's behalf. Various laws, which provide for children require that decision-makers take into account the welfare of a child before executing any order affecting a child. Such provisions can be seen in the Law of Marriage Act, the Affiliation Ordinance and the Adoption Ordinance.

206. Presently, there is no legislation, which provides for the child's right to his/her opinion and neither is there any legislation, which provides for respect for the views of the child as stipulated in the Convention.

207. Measures adopted by the government to render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities include:

(a) Economic empowerment of families through structural adjustments. The Government has since 1986 been implementing some economic policies and institutional reforms with the overall aim of reducing poverty and restoring macro-economic balance. Statistics show that the inflation rate, for instance, has been reduced from 30 per cent to 16 per cent in 1997 and the GDP growth rate has improved from 2 per cent during the 1980s to 4.5 per cent in 1996. The long-term effect of an improved economic standard is generally a situation in which families are economically better off, meaning that parents and legal guardians are better placed to take care proper measures of care for their children. However, the immediate effects of the measures taken have added misery to the majority of the people, including children.

(b) Establishment of special funds for provision of credits for income-generating activities. The Government has initiated and established special funds, targeting special groups. These initiatives including:

- Extension and Rural Credit Fund Services (1990);
- Small Business and Farm Input Credits (1990)
- Women in Development Fund (1994);
- Women entrepreneurship Development Trust Fund (Zanzibar 1993);
- Youth Development fund (1994).

These funds give financial assistance to the target groups to help improve productivity and, subsequently their earnings. However, due to generally scarce financial resources, the funds suffer from inadequate resources;

(c) The Government provides subsidies for social and economic services such as water and sanitation, education, health and agricultural inputs. In the course of implementing the above-mentioned reforms, however, Government is increasingly withdrawing the subsidies;

(d) The formulation of a National Poverty Eradication Strategy is deemed to give overall guidance as to how poverty-related matters would be addressed nationally;

(e) Skill-training in specialized fields such as agriculture, livestock-keeping, primary health care, home management, nutrition and environment and sanitation is being provided by the Government and NGO partners through extension services;

(f) As regards children from single-parent families and children belonging to the most disadvantaged groups: including those living in extreme poverty, the Government so far has done little apart from the global assistance highlighted above. This is due to the fact that there is no comprehensive

social security system in place. Another contributing factor to the failure to take proper care of children is ignorance. Most of the members of the community have not yet recognized their own abilities and potential to identify their problems and use the available resources to earn and increase their income, and build a better life for themselves and their children. This is the reason behind the establishment of the of the Community Development Policy in 1996, which gives guidelines on how communities can be helped to strengthen their capacities to make decisions and implement them, using locally available resources, to improve their living conditions.

Separation from parents (art. 9)

Legal Context

208. **Marriage Act No. 5 of 1971.** When the stability of a marriage is threatened because of disharmony, separation or divorce, the issue of custody of the children becomes important and quite often contestable. In that case, custody of a child may be awarded by the court to either parent subject to factors such as the age of the child, the wishes of the parents, or on rare cases, the wishes of the child where the child is able to express an opinion, and also to the customs of the community to which the parents belong. However, the paramount consideration in matters of custody is the welfare of the child.

209. **Affiliation Ordinance (Cap. 278).** Custody of a child born out of wedlock is assumed by the mother. The putative father is nevertheless obliged to pay money to the mother for maintenance and education of the child. However, custody may be given to the putative father, a relative or any other fit person in the circumstances that the mother becomes irresponsible or of unsound mind is imprisoned or died.

210. **Adoption Ordinance.** The Adoption Ordinance (Cap. 335), 1955 sets out legal mechanisms by which the right to custody of a child may be transferred from one person to another. In essence, the adoption order has the effect of obliging the legal custodian of such a child to provide him/her with care, maintenance and education, and the adopted child has the same legal rights in matters of kin and inheritance as natural children. Hence adoptive parents have the right to determine the residence of the child.

211. **Children and Young Persons Act.** The Children and Young Persons Act (Cap. 13) of 1937, which was revised in 1964, provides the legal framework for the protection of children from being separated from their parents.

212. In Zanzibar, the Children and Young Person's Act No. 10 of 1951 establishes grounds which can be characterized as child neglect, ill-treatment, or misbehaviour for the removal of any child below the age of 16.

213. All of the above legislation imposes the duty of childcare on the parents, whether before or after separation, and on the guardians.

214. However, there is a common tendency whereby after the order of the court awarding custody of a child, parents transfer the child to some other relatives, e.g. grandparents, in contravention of the court order. The child is thus deprived of his/her right to live with at least one of her/his parents and at her/his parent's standard of life. Though there is a checking mechanism through the Social Welfare Department, MLYD, the Department's capacity to reach particular parents is limited due to economic constraints and legal limitations. The checking exercise, which is done by the Department, is more administrative than legal because such duty is not specifically provided for in certain legislation, e.g. the Law of Marriage Act 1972 and the Affiliation Ordinance.

Return of the children

215. A child taken out of its mother's custody may be returned upon making application to court and if the child is returned to any other person in contravention of the court order, this constitutes an offence punishable by a fine or imprisonment under the Adoption Ordinance.

Implementation

216. The incidence of divorce and separation is on the rise. Statistics compiled by the Social Welfare Department show that between 1993 and 1997, 548 cases of matrimonial conflict were dealt with by the Marriage Reconciliation Board for the Commissioner of Social Welfare; of which 87 cases were reconciled and 335 cases were referred to court for divorce.

217. The Department of Social Welfare both in Mainland and Zanzibar provide counselling services to people intending to divorce. They are advised to reconsider carefully all the implications of such a decision, especially as it may relate to the children's welfare. In addition to the governmental department of social Welfare, counselling is provided to parents by religious institutions, non-governmental organizations and local and village authorities. Whenever children's welfare is jeopardized, the national reconciliation body is consulted.

218. The counselling of unmarried parents is done by the Department of social Welfare to see that the welfare of children born out of wedlock is secured through mutual understanding between the parties concerned; otherwise, the matter may be referred to court for judicial decision. In 1994-1997, 36,466 affiliation cases were dealt with, among which 10,018 were reconciled and 4,870 were referred to court for further ruling.

219. The Social Welfare Department also handled 35 cases of adoption between 1991 and 1997. this involved counselling of perspective parents, arranging for foster care placements and collaborating with the High Court to facilitate relevant matters pertaining to the making of adoption orders.

220. As far as the problem of lost street or working children is concerned, the mass media play an important role in locating them and seeking that they return safely to their families. In addition, NGOs provide special services to help such children. Such NGOs include the Kwetu Counselling Centre of the Salvation Army, the Dogodogo Centre for Street Children, Child in the sun, Tuamoyo Children's Home, African Education Fund, Umatic, ADIC and other members of the Dar es Salaam Street Children's Network; as well as the Tumaini Centre in Dodoma, and *Kuleana* in Mwanza, among others. These organizations make efforts to investigate the background of each child, facilitate the admission of the children into school, provide non-formal education, life skills training and vocational training and placement, and reunite children with their parents, or find them temporary homes.

221. So far there is no problem of separation of children from one or both parents due to State actions. State actions result in imprisonment, court orders, etc; such actions are merely coercive measures which are taken by the State against ill-intentioned people to ensure the maintenance of peace and order. In this way the State creates a good environment for the exercise of the rights of children and their parents or guardians.

Family reunification (art. 10)**Legal context and implementation**

222. Article 10 of the Convention provides for the rights of children and their parents to leave and enter any country for the purpose of reunion or the maintenance of the child-parent relationship. In Tanzania, such matters are dealt with by the State under the procedures and laws providing for immigration, where by applicants are required to submit their applications for consideration. Applications for the purpose of family reunification are dealt with in the normal procedure just like any other applications. There is no special procedure through which such applications are treated. The Tanzania Constitution of 1977 as amended in 1984 provides for the right of movement or freedom of movement. However, such freedom and rights have to be exercised in accordance with the relevant legislation. Therefore, any movement outside or inside the country has to be guided by the existing laws.

Recovery of expenses associated with childcare in cases of divorce (art. 27, para. 4)**Legal context**

223. In the case of divorce or separation, the Law of Marriage Act No. 5 of 1971 states that the parent with or without custody of the child or children concerned must be responsible for care by meeting the expenses of bringing the children up. In cases of default, courts may require payment of the sums due and in extreme cases may make deductions directly from the defaulter's salary or his/her other incomes.

224. However, this exercise can be applicable only to parents with salaries. It cannot extend to parents whose income is not known, such as petty traders and peasants. There is a procedure for recovery of maintenance for the child, but what is recovered is often negligible compared to the cost of maintenance. The problem has been taken care of by the Government, which intends to amend the relevant law to that effect.

Children deprived of a family environment (art. 20)

225. Of more than about 150,000 orphans in Tanzania, half are street children, according to the survey.

Legal context

226. The Children and Young Persons Act and the Adoption Ordinance have provisions for children who for various reasons cannot be brought up by parents to be placed in the custody of another person or institutions dealing with such issues.

227. Islamic law in Zanzibar pronounces on matters related to placing children under custody. Children permanently without families are often described as "orphans". Under Islamic law, an orphan is a child who has lost his or her father. The Wakf and Trust Commission will administer any property of such child for his/her benefit.

Implementation

228. There are about 40 main centres, mainly for orphans: one under the Government and the remainder established and run by religious institutions and several NGOs who together care for more than 3,000 orphans. They take care of orphans, children of single parents upon application, street

children drug addicts and other children in need of special protection measures. The Ministry of Community Development, Women Affairs and Children is establishing a special National Fund for Orphans to enable them to meet educational and health care expenses.

229. There are two institutional care facilities in Zanzibar established to meet the needs of orphans – the children's home run by the Government, which houses 23 children, and one run by the SOS Children's Village (an international NGO) with a total of 99 children. There are more than twice the number of boys as girls in both facilities.

Constraints

230. It is not easy to assess how many children fall into the orphan category and where they are, since they often become street children and very difficult to trace. A national survey of eight categories of children in need of special protection measures is under way in seven districts of Mainland Tanzania and certain wards in Zanzibar, representing a mixture of rural, semi-urban and urban settings, as well as geographical, socio-economic and cultural varieties. The children studied are: children living on the streets, child sex workers, abused and neglected children, child domestic workers, children who experience early marriage and pregnancy, orphan children, children with disabilities and children in institutions. The study takes a participatory approach in order to learn from children's own perspectives on their own lives. The views of the children are supplemented by information from adults, including parents, teachers and community leaders. It is expected that the study will reveal the magnitude of the problem and thereby help the various agencies to design appropriate and effective programmes to confront these children's problems and the underlying causes.

231. Lack of funds, especially government funding, is another constraint. Most funding is provided by international agencies, NGOs and religious institutions.

Adoption (art. 21)

Legal context

232. This article is covered by the Adoption Ordinance as indicated in paragraph 210.

Implementation

233. Adoption is almost non-existent in Tanzanian society, both Mainland and Zanzibar, and wherever necessary the matter is taken care of by religious institutions. Traditionally, adoption is not possible as the extended family system allows children to remain within the family. For instance, in the case of the death of the parents, children are taken care of by other members of the family.

Abuse and neglect of children and their physical and psychological rehabilitation and social reintegration (arts. 19 and 39)

Legal context

234. As regard abuse and neglect of children, the matter is taken care of by the Government, which intends to enact a special law providing for offences against children and women. The Sexual Offences Special Provisions Act of 1998 intends to protect children from abuse and neglect.

Periodic review of placement (art. 25)

Legal context

235. The Marriage Act stipulates that any citizen acting as a guardian shall be subject to supervision.
236. The Adoption Ordinance stipulates a special programme to monitor children under a guardian's supervision.
237. In order to make sure that children not living with their immediate families are well looked after, the Affiliation Ordinance (Cap. 278) stipulates that periodic follow-up be made.
238. Under the Children and Young Persons Ordinance (Cap. 13) police or administrative officers from the Social Welfare Department may file claims in courts on that matter.

Implementation

239. Although various laws provide for supervision of adopted children or children placed in children's homes, little has been done to this effect. Such supervision is not done regularly due to reasons already discussed.

Tanzania's fulfilment of child rights concerning the family environment and alternative care: comments and concerns

Legal framework

240. Despite the existence of a legal instrument on paper, economic problems and the absence of clear guidance as to how to apply the law and inadequate civic education mean that in practice the law is not applied thoroughly or uniformly.
241. However, there is a great need to examine existing laws so that they are made to respond to current realities and the real situation of the welfare of the child.
242. Government policies already developed are the Policy on Child Survival, Participation and Development (Mainland (1996) and Zanzibar (1997) and the Community Development Policy (1996).
243. The Government has also initiated the development of a Family Policy in a bid to ensure and safeguard the provision of all the essential needs of children within the family.
244. The Family Policy is particularly supportive of the development of the household economy and pays greater attention to families in special need. The policy will translate in more concrete terms the strategies for poverty alleviation in the country endorsed by the Government (1997).

Funding

245. Governing funding of social policies is limited by Tanzania's weak economic situation. It is essential that in the future more attention be devoted to funding of these service from sources other than the national budget.

Monitoring and evaluation

246. Monitoring and evaluation of child-oriented activities is at present weak, yielding incomplete, inconsistent and outdated information. The improvement of monitoring and evaluation systems and techniques is a priority concern. In this context two aspects are of great importance: the indicators to be used in monitoring; and the mechanisms to be used in tracking those indicators.

Social attitudes and change

247. The shift to privatization in the economy and the open-market policy in the absence of adequate social safety nets has had a negative impact on Tanzanian society. Indications of this are the increasing problems of drug abuse and alcohol addiction, commercial sex work, street children, child labour and crime in general. Urgent measures are needed to minimize their negative effects on the situation of children, especially as they relate to the health, education and general welfare of children.

248. According to studies carried out under the Safe Motherhood Initiative, only a few mothers received training in child-rearing and did not have the basic knowledge of child care necessary to ensure that their children's development would not suffer as a result of parental ignorance. Problems, such as lack of respect for the child, physical abuse or over indulgence of the child require specialized programmes to address them.

249. Most of these serious problems can be traced back to two factors: poverty and some difficulties in the transition to a market economy. It is to be hoped that since economic transition has largely been achieved, increasing prosperity amongst the people will lead to tangible improvements in the situation of children.

VI. BASIC HEALTH AND WELFARE

Survival and development (art. 6, para. 2)

Legal context

250. The following laws apply:

(a) Day Care Centres Act No.17 of 1981, the Children and Young Persons Ordinance 1937, revised in 1964, the Children Homes Act No.4 of 1968, and Urban Councils (Interim Provisions) Act 1975. All these laws and acts provide for the survival, health and development of children. In spite of these laws, children's health and development are below the expected levels due to inadequate implementation;

(b) The Law on Protection of Public Health states that the child is entitled to medical examination and treatment as well as immunization against the six main childhood diseases (tuberculosis, poliomyelitis, diphtheria, pertussis, measles and tetanus) as well as treatment for malaria, diarrhoea and respiratory infections. Child health care is normally provided by the Maternal and Child Health (MCH) services at the local health unit;

(c) The Law on Protection of Public Health also states that all children under the age of five are entitled to medical treatment at government hospitals, health centres, dispensaries and MCH clinics.

Major national goals for children to be achieved by the year 2000

251. The Tanzania NPA of 1993 states seven goals relevant to child health to be achieved by the year 2000. These goals, which have been adopted by Mainland Tanzania and Zanzibar, are given below (Zanzibar statistics are in brackets):

(a) Reduction of infant and under-five mortality rates by one third or to 50 and 70 per 1,000 live births respectively whichever is less. The 1988 population census estimated infant and under-five mortality rates to be 115 (120) and 191 (202), respectively. By 1996 infant and under-five mortality rates remained very high at 92 and 141 per 1,000 live births in Mainland Tanzania;

(b) Reduction of maternal mortality by half. Currently, material mortality is estimated at (300) per 100,000 live births;

(c) Reduction of moderate and severe malnutrition among children by half. The 1992 rates are 47 (37) per cent and 7 (5) per cent for moderated and severe malnutrition, respectively;

(d) Universal access to drinking water and sanitary means of excreta disposal. In 1993, only 48 per cent and 65 per cent of the rural and urban population respectively had access to clean water. For Zanzibar 65 per cent of the population in Unguja and only 16 per cent in Pemba had access to clean water. The coverage for sanitary means of excreta disposal is 62 per cent and 74 per cent in the Mainland rural urban areas, respectively (67 and 24 per cent for Unguja and Pemba);

(e) Universal access to basic education and completion of primary education by at least 80 per cent of school-age children. Only 75 (62) per cent of school-age children are currently enrolled in primary schools;

(f) Reduction of adult illiteracy to at least half of the 1990 level with special emphasis on female literacy. For 1993 only 96 (68) per cent of adult males and 94 (53) per cent of females are literate;

(g) Improved protection of children in especially difficult circumstances.

252. Apart from these goals, Tanzania has other goals related to the reduction of morbidity and mortality due to malaria and the control of HIV/AIDS.

Implementation and achievement

253. The ongoing health sector reform part of the institutional reforms in Tanzania is aimed at improving the health services and directed towards activities that will enable the health delivery systems to be self-reliant and sustainable. The strategies that have been proposed are the following:

(a) Empowering district community and household initiatives through the development and implementation of proper district health plans;

(b) Seeking alternative financing options which will bridge the existing financing gap in the health sector.

(c) Continuous revision of the implementation of various Acts ordinances and regulations pertaining to health management and administration.

254. A number of programmes designed to mitigate the effects of certain conditions that affect the health of pregnant women and children under five have been operating in Tanzania since the early 1970s. For instance, the expanded programme on immunization (EPI) against the six immunizable diseases of childhood, the control of diarrhoeal diseases (CDD) programme, acute respiratory infections (ARI), malaria control; the current introduction of the integrated management of childhood illnesses (IMCI) strategy and initiatives in community-based nutrition have enjoyed considerable support from UNICEF, WHO, WFP and some NGOs.

255. In this regard, Zanzibar has made enormous strides in developing primary health care (PHC) and establishing an immunization programme. No cases of polio have been reported since 1990 and Zanzibar has a higher rate of vaccination coverage; 90 per cent of the population live within 5 km of a health facility.

256. The Ministry of Health figures reveal improvements in home care of children with diarrhoeal diseases: 64 per cent of children under five are being provided with oral rehydration salts (ORS) according to the CDD Household Survey of 1991.

257. The incidence of malnutrition has fallen from 47 per cent to 37 per cent and moderate and severe malnutrition from 7.1 per cent to 3 per cent in Tanzania Mainland.

258. In Zanzibar, measurements used to assess chronic and acute malnutrition seem to suggest that under fives in rural areas have a worse nutritional status than children in urban areas. In 1996 using the weight-for-age measurement 12 per cent of rural under-fives were severely undernourished compared to 4.3 per cent in urban areas 14.5 per cent of the 9 to 11- month age group was recorded to be suffering from severe chronic and acute malnutrition.

259. Malaria and meningitis have been increasing in many areas of the country including areas thought to be free of these diseases. They are now found along the coastal strip, South Highlands zone, Lake zone, central areas, and even mountainous areas. Both diseases have disastrous effects on the health of women and children. Currently, the two diseases emerge in the form of outbreaks.

260. The following are efforts, which have been put in place by the two Governments to help control such outbreaks:

(a) The Ministry of Health has formed a Section for Emergency Preparedness under the Directorate of Preventive Services;

(b) Specific guidelines for the control of outbreaks have been updated and various channels have been used to disseminate information related to these diseases to districts and communities;

(c) A better coordination mechanism has been formed by establishing a task force, which is multisectoral in composition. It draws relevant members from different sections of the Ministry of Health; the Ministries of Water, Education, Community Development, and Women and Children Affairs; international and bilateral agencies and NGOs.

261. Nearly half of all Tanzanians live in iodine-deficient areas such as Mebya, Iringa, Rukwa, Kigoma, Kagera and Mara, and are therefore at risk of iodine deficiency disorders. These disorders threaten at least 10 million people with ailments such as goitre, irreversible mental retardation and other forms of impaired physical and mental development. Goitre is endemic in several regions in Tanzania. For this reason, the national campaign against goitre was initiated in 1989 by iodating table salt consumed by human beings and animals throughout the country.

262. Excellent progress has been made towards adding iodine to all the 150,000 MT of salt produced by large- and medium-scale producers. 74 per cent of Tanzanian households now consume iodised salt, according to the UNICEF State of the World's Children 1998 report. Much of the credit for this achievement goes to the private sector who are members of the Tanzania Salt Producers Association and the donors who have supported the salt iodation programme. Tanzania became the first nation in Africa to implement this programme. This was made possible by the personal involvement and commitment of the then President H.E. Ali Hassan Mwinyi. In 1994-1995, legislation amending the Food Act and the Miner's Act to enforce mandatory salt iodization was put in place. Mobilization of all 200 salt producers in the country and widespread public advocacy and sensitization were also carried out

263. The incidence of dry eye and other eye-related diseases, which are attributable to vitamin A deficiency, remains a severe problem in some areas, especially in the central parts of Tanzania. In other areas where palm oil is taken daily in means, such as the northern, western and southern highlands and coastal regions, the problem is less severe.

264. Particular emphasis is laid by the Government on providing lactating mothers and children under two years of age with large medicinal doses of vitamin A through the Tanzania Food and Nutrition Centre (TFNC).

265. Although the status of child health is improving, levels of global health indicators such as IMR and MMR are still very high; there is hence a need to improve the poor living standards that are largely responsible for these child health problems. Emphasis is being put on the following interventions.

- (a) Improving reproductive health practices;
- (b) Improving child feeding practices including exclusive breastfeeding of children below four months;
- (c) Raising and maintaining high immunization levels of under-fives and women of child-bearing age (15-45 years);
- (d) Improving health-care-seeking behaviour;
- (e) Improving home care of children.

Safe water and sanitation

266. Immediately after independence in 1961, Tanzania Mainland and, in 1964, the Government of Zanzibar, made drinking water from public water taps free of charge. In rural areas water wells and springs were kept in good condition for use by the community. As the cost of constructing maintaining and running the water projects has increased the Government is mobilizing communities to contribute in funds and/or labour for the water projects. Rural water projects include elements of environmental sanitation and health whereby toilets (mainly pit latrines) are constructed and their use encouraged. Donors such as UNICEF, DANIDA, SIDA, The Netherlands Water Aid, etc. have been assisting Tanzania with rural water supply programmes since 1960.

267. The aim of the programme was to supply water to rural people at a distance of not more than 400 meters from the home. As of 1992 an estimated 46 per cent of the national population was being served with water. Under the National Water Supply and Sanitation Programme 1993 – 2003 the first priority is the rehabilitation of water supply schemes.

268. The two governments are making efforts to advocate for improvements in people's hygiene and sanitation behaviour.

Constraints to achieving better results

269. The initial capital investments needed to construct water projects are generally high. However these costs become increasingly unaffordable as easily exploitable sources become difficult to find.

270. Traditional beliefs about the causes of diseases are not consistent with modern science. The contamination process is not easily conceptualised and therefore the measures suggested to control the faecal-oral routes of transmission of diseases are not easily appreciated and followed.

271. However more efforts are being made by the Government to finance water projects with components of hygiene and sanitation in partnership with agencies donors and the concerned communities:

(a) The community contribution to funding water projects is increasing through coordination by the local government authorities . Water committees at village level are being formed to take care of small water projects. These form an integral part of the village councils;

(b) For sustainability of water projects cost- sharing is being reinforced at the local level and cash is collected from the community for the operation and maintenance of the water projects

Children with disabilities (art. 23)

Legal context

272. Tanzania passed two Acts in 1982 Act No. 2 on Disabled Persons (Employment) Act and Act No. 3 on Disabled Persons (Care and Maintenance) Act.

Implementation

273. By these Acts a National Advisory Council was established together with regional and district committees to look after the rehabilitation centre for disabled children. To date the country has a total of 34 rehabilitation centres of which Tanzania Mainland has 30 and Zanzibar four. However, most children with disabilities such as visual oral or speech impairments physical handicaps, etc. do not attend school due to a number of constraints. Among these are:

- Inadequate facilities;
- Long distances to schools;
- Ineffective learning/teaching approaches and materials;
- Non-availability of teachers with special skills,
- Weak support provided to them from their respective communities,
- Large numbers of children with special needs;
- Uneven distribution of schools with more schools in urban centres than in rural areas; of the four in Zanzibar three are in Unguja and only one is in Pemba.

274. The Uhuru Mchanganyiko primary school in Dar es Salaam, the country's oldest school, was founded in 1921 in 1961 became the first mainstream school to integrate blind and visually impaired children into the normal school stream. Among the 1,200 pupils there are 62 blind children (20 girls and 42 boys) 55 children with mental retardation (17 girls 38 boys) and 11 deaf and blind children (4 school boarders and 7 day students)

275. A major reason for the existence of so few schools for children with disabilities is the lack of funds for their establishment and maintenance.

276. The Government is coordinating the efforts of some religious institutions. NGOs and private centre in supplementing general and special education for the blind, deaf and others.

277. At present there are 34 rehabilitation centres in the country, with a total capacity of over 700 children.

278. There are 138 special schools for children with disabilities. There are about 1,245 children known to be mentally retarded.

279. Religious institutions, NGOs and private centres, however, play an important role in supplementing general and special education for the blind, deaf, mute and mentally handicapped children. However, these activities are not adequate.

Health and health services (art. 24)

280. In both Tanzania Mainland and Zanzibar children below five years of age, and women of child-bearing age (15-45), including adolescents, have long been recognized as the most vulnerable groups in terms of health and social development. The high infant and maternal mortality rates are attributable to the poor quality of MCH care both at health facilities and at the household level. The major killer diseases for these groups are childhood illnesses and HIV/AIDS – prenatal and maternal complications.

The health of children under five

281. The most pressing health problems facing this age group in Tanzania are a group of conditions which together are termed childhood illnesses. These illnesses include malaria, pneumonia, diarrhoea and measles, coupled with malnutrition. The Tanzania Health abstract of 1996 shows that in 1995, 38.4 per cent of all under-five medical visits were due to malaria, followed by pneumonia, 23 per cent and diarrhoea, 4 per cent. Measles is still a concern while neonatal tetanus remains a silent killer in the community.

282. Both governments recognize this burden of conditions, which cause ill health to this group. A number of interventions are being implemented to save this group from suffering disabilities and even death. These include:

(a) The introduction of a new approach – IMCI (integrated management of childhood illnesses) – to tackle childhood illnesses. The guidelines for implementing the approach have been adapted to the Tanzanian situation. Training has been conducted for front-line health workers in the use of this approach. Tanzania will put into practice very soon the community component of IMCI. The approach replaces the now outdated vertical approaches targeting specific diseases, such as the CDD and ARI programmes;

(b) Restructuring of the health service delivery system, which takes the form of Health sector Reform (HSR) part of the ongoing Institutional (Civil service) Reform. HSR aims at providing improved, more efficient and cost-effective services;

(c) Strengthening of immunization services through sustainable social mobilization activities in order to achieve higher vaccination coverage which will in turn protect the under-fives from the six childhood diseases;

(d) Strengthening of an effective surveillance system for early detection of measles, ARI and neonatal tetanus;

(e) Emphasis is being placed on educating household members, families and communities about preventive health practices;

(f) The Government is encouraging the private sector to increasingly contribute in providing health services to the entire population. The public-private mix is being encouraged and facilitated. Similarly, the activities of bilateral and multilateral organizations and donor agencies are being coordinated by the government in their efforts to provide basic services to the public.

Nutrition

283. In Tanzania, children suffer from different forms of malnutrition that together threaten their survival and development. The most critical forms of malnutrition are protein-energy malnutrition, iron-deficiency anaemia, vitamin A deficiency and iodine deficiency. Two and a half million Tanzanian children under five years of age are malnourished and malnutrition contributes to the death of at least 450 children every day. One out of every three children under five is underweight and 43 per cent are stunted, according to the 1996 Tanzania Demographic and Health Survey.

284. Nearly half of under-fives are anaemic, contributing to a loss in intelligence of about nine IQ points. 80 per cent of pregnant women are anaemic, contributing to the very high maternal mortality rate in Tanzania, where 8,000 women die every year from causes related to pregnancy and childbirth.

285. Approximately 30 per cent of pre-school children are deficient in vitamin A and this is a leading cause of preventable childhood infections and blindness: Improving vitamin A intake is now known to reduce mortality in children and pregnant women.

286. The community-based CSPD programme has made a significant contribution to reducing child malnutrition in the country. Progress in the past 14 years since the programme started in Iringa and its subsequent expansion to nearly 4,000 villages in 64 districts is quite impressive. By the end of 1996, the nutritional status of 1.7 million children under five covered by the programme had improved quite dramatically. Severe malnutrition had been reduced by 60 per cent and moderate malnutrition, which is much more difficult to eliminate by 40 per cent.

Intervention

287. Community-based nutrition approaches using the Triple-A cycle – Assessment-Analysis-Action – have been in use, especially in the CSPD districts. Through this intervention:

(a) More than 3,000 village feeding centres have been established for children whose weight-for-age has faltered. These centres are operated by the village governments without external support;

(b) Day care centres were opened;

(c) Growth monitoring is being implemented both in health facilities and during village health days which are organized by the communities every three months in the CSPD districts;

(d) Breastfeeding, especially exclusive breastfeeding up to 4-6 months, is being promoted; 33 hospitals have been declared baby friendly;

(e) A national programme for providing vitamin A capsules to children is being started;

(f) The IMCI approach is being used to promote vitamin A use, proper feeding practices and immunization;

(g) Legislation amending the Food Act and the Miners' Act was passed to enforce universal salt iodination;

(h) A country-wide mobilization took place for salt producers to iodate salt and this was widely published through mass media, seminars and workshops organized by the Government, supported by NGOs and other partners.

The health of children above five years, particularly adolescents

288. Health care services for children in the 6-18 age group, which includes adolescents, are inadequate. Though there is inadequate information about this age group, studies show that the following are the major health problems encountered by them:

- Exposure to HIV/AIDS sexually transmitted infections;
- Early and unwanted pregnancies leading to abortions;
- Juvenile delinquency;
- Substance abuse (drugs, chemicals, alcohol, tobacco);
- Drop-out behaviours;
- Female genital mutilation (FGM);
- Child labour;
- Violence;
- Suicide.

289. Common diseases are skin and eye infections, malaria, bilharzias, HIV/AIDS and sexually transmitted infections and malnutrition.

290. Adolescents are particularly vulnerable to HIV infection because of the deteriorating social and economic situation, which places girl children at high risk of agreeing to have sexual relations with individuals sometimes not even known to them. This situation is compounded by:

- Lack of education (most of them are dropouts or out of school);
- Exposure to street conditions;
- Substance abuse and prostitution, which are on the rise because of the complexity of the society.

291. Most of the adolescents have misconceptions and misinformation about transmission and prevention of HIV/AIDS. The number of HIV infections through unsafe sexual practices is rapidly increasing. By the end of 1996, a total of 88,000 AIDS cases were reported out of which 800 belonged to the age group 5-19 years.

292. Adolescents, both boys and girls do not have adequate information on reproductive health. Girls tend to have more problems than boys due to an early start in their reproductive role ("Poor Urban Children at Risk in Dar es Salaam" – a study by Save the children Fund, 1997). This leads to unplanned and wanted pregnancies, which in turn result in risky abortion practices. Adolescents also face a major problem of violence. The forms of violence common to them are:

- Sexual harassment;
- Corporal punishment;
- Female genital mutilation;
- Violence against girl domestic workers.

293. Sexual harassment in the form of rape or cruelty older members of the society using financial inducements and other provocative means is reported.

294. Corporal punishment is practised in schools and in the communities at large. Gangs of boys have been reported in some studies to have beaten street girls. Police and prison officers also use corporal punishment.

295. Efforts being made by the two governments to minimize the occurrence of these conditions include the strengthening of the School Health programme to improve services to schoolchildren and adolescents, by providing the following services:

- Provision of relevant health education to equip them with knowledge and practices promoting good health, e.g. construction and use of latrines; reproductive health; HIV/AIDS prevention; and family life education;
- Screen individuals with common diseases, e.g. skin, eyes, worm infestations, biharzia;
- Immunization, especially against tuberculosis and tetanus.

296. Both governments are introducing topics on family life skills in the curricula of primary and secondary schools, and for out-of-school children.

297. A Zanzibar report of 1997 indicates that 60 child sexual abuse cases were reported to the Ministry (this is still regarded as greatly under-reported). The Tanzania Survey by Save the Children fund of 1997 shows that among 342 children interviewed. 77 of them (23 per cent) before going to street were severely beaten by guardians or parents while 33 per cent were beaten by police in the streets.

298. Both government are reviewing their Penal Codes and among the recommendations are:

(a) The establishment of an age of consent for both sexes and that boys as well as girls be protected from sexual abuse;

(b) Securing consistent and sufficient penalties for sexual offenders;

(c) A bill for an Act to amend several written laws, making special provision in those laws with regard to sexual offences and others, hence to further safeguard personal integrity. Mass campaigns are being conducted against child sexual abuse, exploitation and all sorts of violence.

On female genital mutilation

299. The practice is common in Tanzania Mainland among certain ethnic groups especially in the northern regions. Statistics show that up to 80 per cent of females in Arusha between the ages of adolescents and adulthood have been partially or totally circumcised TAMWA the Association of Midwives. MOH and MCDWAC are advocating for the total elimination of the practice.

300. Adolescents have limited access to confidential sexual and reproductive health information, services and counselling because of various obstacles, which are deeply rooted in culture and lack of education, such that parents and children do not discuss issues pertaining to sexual and reproductive health, as this would violate cultural values and norms.

301. Mechanisms are being worked out to facilitate and increase the use of family planning services by this age group.

Women's health

302. Women's health continues to be at risk because of a combination of poor nutrition, a heavy workload, inadequate services, and powerlessness to make decisions affecting their health and lives. The maternal mortality rate is 529 per 100,000 live births (Tanzania Demographic Health Survey, 1996) and 250 per 100,000 in Zanzibar. About 8,000 women die every year (22 every day) from causes related to pregnancy and child birth. For every death, 20 women become significantly disabled owing to problems of infertility, fistulae, anaemia and inflammatory diseases of the pelvis. Most of the causes are either avoidable or preventable. Even when services are functioning well (which is not the case in our country), women with pregnancy-related complications face a variety of barriers to using them. Some of these barriers are economic (lack of money to pay for transport or services), cultural (the low value placed on women); and geographic (long distances and poor roads). There are several factors, which delay pregnant women experiencing problems in getting the right treatment in time. These factors include:

- Delay in deciding to seek cure;
- Delay in reaching the treatment facility;
- Delay in receiving adequate treatment at the facility.

303. Both governments are strengthening MCH services in all the government health facilities and most of the missionary health facilities:

(a) At present the MCH services are under the Reproductive and child Health Service Unit in the MOH. More women have been receiving the necessary information and their male counterparts are currently being educated on reproductive health for their full involvement;

(b) At the community level, efforts to train birth attendants for clean and supervised deliveries are being strengthened;

(c) Health Units are being provided with essential equipment to ensure safe motherhood from the antenatal to the postnatal period;

(d) More community awareness-raising is being advocated at different levels through the involvement of religious leaders, Community's Own Resource Persons (CORPS) and channels such as advocacy meetings, discussions and establishment of social committees dealing with maternal health.

304. In some areas, community-based monitoring systems such as village register books, special registers maintained by traditional birth attendants (TBAs) who monitor the progress of pregnancy, have been instituted. Pregnancy-related maternal deaths are discussed among village communities.

305. In most of the district health plans, maternal health has been categorically indicated to be a priority in their interventions.

306. In terms of geographical access, 70 per cent of children on the Mainland have access to primary health care services, while in Zanzibar geographical access to primary health care for children is 100 per cent. However, not all those with geographical access make use of the services due to economic and socio-cultural factors and the inadequacy of some of the services.

307. Health workers are demotivated along with other social/community development workers.

308. The introduction of a cost-sharing system also contributes to reduced usage of health services except by children under five and pregnant women.

309. The formal and the informal health delivery systems are not coordinated. The informal system, which is dominated by traditional healers, seems to attract more users than the formal system, even though it is likely that the services provided are not regulated and may lead to greater risk of death, disability and suffering.

310. Health workers do not receive training on children's rights. However, there are plans in Zanzibar to provide such training to health workers.

VII. EDUCATION, SPORTS, LEISURE AND CULTURAL ACTIVITIES

Education (art. 28)

Introduction

311. The Convention states that all children are supposed to be protected and assured of survival, physical and psychological development, and have, above all, the right basic to primary education. Education is a process by which the individual acquires knowledge and skills necessary to appreciating and adapting to the environment and the ever-changing social, political and economic conditions of society and as a means by which one can realize one's full human potential.

312. In Tanzania, traditional education emphasized principles of good citizenship, attainment of a good, healthy lifestyle and the perpetuation of valued customs and traditions. During the colonial period, education was restricted to a few individuals who were earmarked to serve the colonial interests.

313. Two decades ago, Tanzania was in the limelight for the great achievements it attained in education. At that time, basic education gross enrolment ratio (GER) reached 98 per cent and attainment in adult literacy was over 90 per cent. The universal primary education (UPE) success created the demand for more secondary education places, thus placing heavy demands on the already constrained government budget for education. Achievements in terms of equity considerations were also impressive

with the enrolment ratio of girls to boys rising to about 50 per cent and remaining relatively stable at the basic education level, and 43 per cent at secondary level. However, the ratio has been less impressive at the tertiary level where women and other disadvantaged groups are poorly represented.

314. The poor performance of the economy and its continued deterioration through the 1980s and 1990s, coupled with the high rate of population growth, has meant that proportionately less funding is available for both recurrent and development expenditures in education, which resulted in the reversal of the educational achievements made earlier.

315. The quality of education at all levels suffered. Geographical and social disparities have been widening. Adult illiteracy has increased from 10 per cent in 1986 to 16 per cent in the early 1990s and is currently growing at an estimated rate of 2 per cent per year. The gross enrolment ratio for primary education has declined from 98 per cent in 1981 to about 75 per cent in 1996. Participation rates are low among low income social groups due to the increasing cost of education.

316. Despite the fact that secondary enrolment tripped over the last two decades, it is still one of the lowest in Africa. Only 7 per cent of the secondary education age group are receiving secondary education. This is a serious bottleneck for the expansion of tertiary education. Enrolment in tertiary education is about 1 per cent of the age group with similar gender, social and regional disparities.

317. Against the above backdrop, it seems clear that the right of the child to education has witnessed drastic erosion.

Measures adopted to improve the situation

318. To improve the situation the Government has tried to liberalize the economy. Consequently, it has embarked on a series of reforms. These include reforms in the civil service, local government, the health sector and the education sector. With respect to the education sector, the reform started with institution of the Education and Training Policy (1995). This has provided direction in addressing the challenges of access, equity, quality, participation, management and funding that plague the education sector.

319. Furthermore, the Government has tried to operationalize the Education and Training Policy through the development of the Basic Education Master Plan (1997). Both the policy and the master plan have provided strategic guidance in the harmonization of all structures, plans and practices, to ensure access, equity and quality at all levels; as well as proper and efficient mechanisms for management and financing of education for improved realization of the child's education rights.

320. Major problems facing primary education are summarized below:

(a) **Access.** Very few children attend primary school. Two million school-aged children are not in school, i.e. 40 per cent of the relevant age cohort. Only 40 per cent of the enrolled children complete the primary cycle and Tanzania has one of the world's lowest transition rates to secondary schools. Poor school/learning environments and corporal punishment practised in primary schools contribute to high drop-out rates, especially for girls;

(b) **Equity.** While girls' enrolment is almost at par with that of boys, girls consistently perform poorer than boys. The school environment is not girl-friendly, there are very few female head teachers and the number of trained female teachers is also low. Girls tend to have less time for studies at home because of domestic chores. Even in school girls are forced to do household chores like carrying water, cleaning and cooking. Both male and female teachers generally pay more attention to boys. Girls

are particularly victimized by the routine expulsion of pregnant girls. On another level, the existing education system is extremely inequitable with respect to rich and poor. The World Bank supported social Sector Review reveals that the richest 20 per cent of the population captures about 38 per cent of government subsidies for education, while the poorest 20 per cent captures only 14 per cent. Most of this inequity is caused by the way secondary and tertiary places are rationed and financed. But even in primary education, the poorest 20 per cent captures 19 per cent of subsidies against 18 per cent for the richest 20 per cent. Resources must clearly be targeted towards the poor and among them, particularly the girl child;

(c) **Quality.** The quality of primary education has declined significantly over the last decade or more. Quality is low in terms of inputs such as training of teachers, the physical environment, teaching/learning materials, supervision and assessment;

(d) **Processes,** i.e. relations between school and community, school management, classroom instruction, curriculum and district educational planning. Over 80 per cent of students entering the Primary School Leaving Examination (PSLE) score less than 50 per cent of the total subject scores. Only 6 per cent of children who complete primary school proceed to public secondary schools, making Tanzania the second lowest in the world in terms of transition rate;

(e) **Management.** This tends to be poor at all levels. While management at central level has been considerable improvement since the inauguration of the Third Phase Government in November 1995, the Planning and Primary Education Departments of the Ministry of Education and Culture have not yet fully overcome past constraints in providing effective and clear policy guidance, goal-setting and overall management to primary education. Despite ongoing review and reform initiatives, a national primary education development plan is not yet in place and it is not always conducive to efficiency and effectiveness that two ministries (Ministry Education and culture and the Prime Minister's Office) play key, yet very different roles in providing technical, financial and managerial resources in primary education. At district level, Funding for primary education is low, the capacity of officials to plan, coordinate, manage and monitor primary education is relatively weak, and accountability not well spelled out. Although ward officials are catalytic in managing social development, the ward education coordinators' capacity to manage education is still weak. At community level, the school management committees and village social services committees do generally not receive adequate training and therefore lack basic skills for planning and managing activities, At the school level, most head teachers do not have special training in administrative and instructional leadership and in-service training of teachers. Furthermore, head teachers are not accountable to the community;

(f) **Gender inequality.** Although enrolment of boys and girls is near parity, traditional gender inequalities are reinforced in primary schools where girls are often subjected to discrimination and abuse. At times, teachers neglect girls in the classroom and textbooks reinforce traditional biases against girls. In all subjects, girls consistently perform lower than boys. Over 3,000 girls are expelled annually from primary school due to pregnancy. Education regulations still require girls to discontinue schooling upon becoming pregnant and many more discontinue school because of unfavourable traditional values and practices such as initiation rites and early marriages. Girls' transition from primary to secondary school is lower than that of boys at a time when Tanzania ranks among the lowest in the world for enrolment ratios in secondary education;

(g) **Financing.** Under-funding is undoubtedly the most critical issue facing primary education. The Government is committed to providing free primary education to all, yet is not able to allocate the required resources. A total of 6.1 per cent of GNP is spent on education. Of the total expenditures for education, 60 per cent is provided by the Government, 30 per cent by households and only 10 per cent by external donors. Tanzania has seen an unfortunate shift in public expenditure on

education from basic to higher education. For example, in 1982/83, 58 per cent of educational expenditures were allocated to primary education against 16 per cent to higher education, while in 1990/91, only 46 per cent was allocated to primary education against 30 per cent to higher education.

321. Given the prevailing poverty situation and the many indirect household expenditures for uniforms and other unofficial fees, it is important to reiterate the commitment of the Government to providing free basic education in accordance with the stipulations of the Convention, at the very least to the poor. Likewise, experience shows that primary education can only be sustainably funded if:

- Internal and external inefficiencies are addressed;
- Donor funding is concentrated in agreed priority human development programmes; and
- Communities are involved in planning processes.

Policy context

322. The Education Sector Development Programme (SDP): Medium-Term Strategic and Programme Framework 1998-2003 represents the basis on which education development in Tanzania Mainland will be designed and implemented. The document also provides the long-term policy and strategic guidelines for sectoral development over the period 1998-2015. This framework document derives from and is consistent with the Education and Training Policy Paper (1995), the Basic Education Master Plan 1997, and is in line with civil service and local government reform policies and plans.

323. The Government vies to education SDP framework is pivotal in achieving the human development and poverty alleviation goals and objectives set out in the Vision 2025 and Poverty Alleviation Plan. The Government also aims at enabling new alignments between the public and private sectors, central and district authorities and school committees/village councils, so as to adequately manage the process towards achievement of the goals.

Enabling broad development objectives

324. The education SDP framework is designed to help secure Government's long-term human development and poverty eradication targets, given below:

- (a) A 50 per cent reduction in the incidence of poverty;
- (b) Provision of high-quality universal primary education;
- (c) Provision of appropriate and high-quality secondary and tertiary and higher education;
- (d) Population growth rates reduced to around 2.4 per cent per annum, through reduced fertility rates;
- (e) A better and appropriately educated and trained work force for a diversified and industrializing economy.

325. Government's commitment to education development as a bridge to broader social development objectives will be achieved through the following strategies:

- (a) Prioritize public spending on basic education, through a target 70 per cent share over the period 1998-2015;

(b) Improve secondary school opportunities, especially in underserved areas, for disadvantaged groups and girls;

(c) Enable post-secondary/higher education management and financing for adequate institutional mechanisms within Government to manage Vision 2025, poverty eradication and SDP progress monitoring.

Legal context

326. Immediately after independence in 1961, Tanzania underwent education system changes. In 1962 the Government passed the Education Act of 1962 to regulate the provision of education. This Act repealed and replaced the 1927 Education Ordinance.

327. Despite these new policy measures, there were no significant changes in the goals and objectives of education until 1967 when the philosophy of Education for Self-Reliance (ESR) was introduced to guide the planning and practice of education. The philosophy emphasized the need for curriculum reform in order to integrate theory with the acquisition of practical life skills. Between 1967 and 1978 the Government took several steps and enacted several laws in order to legalize actions taken as a result of the Arusha Declaration on Education for Self-Reliance.

328. The Education Act No. 25 of 1978 was passed to legalize changes that introduced in 1967 and 1978 following the implementation of ESR. Among the changes legalized by the Act included:

(a) The establishment of school categories for all public schools, other than primary schools or adult education managed by a local authority;

(b) Making primary school enrolment and attendance compulsory for children aged 7-13 years;

(c) The centralization of school curricula or syllabi.

329. According to section 10 (6) of the Zanzibar Constitution of 1984, education is to be provided equally to all citizens. In 1964, the post-revolution government of Zanzibar declared free compulsory education. The education Act No. 6 of 1982 requires every child of school-going age to be enrolled in primary school and provided with access to education.

Implementation

330. Tanzania has not had a comprehensive education and training policy. The programmes and practices of education and training in the past have been based on and guided by short- and long-term development plans- Existing educational plans and programmes have emphasized the needs and demands of formal education and vocational training, with little or no regard to the need to integrate these plans and those of non-formal education and training.

331. In 1995, the Government issued an Education and Training Policy to guide, synchronize and harmonize all structures, plans and practices, to ensure access, equity and quality at all level, as well as proper and efficient mechanisms for management, administration and financing of education and training.

332. The Education and Training Policy emphasizes all the changes in education between 1961 to date. It also enforces the formal education and training system, which is predominantly academic. The structure of the Tanzania education system is briefly outlines below.

(a) **Pre-primary education.** Two years of pre-primary school education for children aged 5-6 years has been formalized and integrated in the formal school system;

(b) **Primary education.** Primary education is of seven years' duration. At the end of this cycle, pupils can go on to secondary education or vocational training. In the case of Zanzibar, enrolment is mandatory; however, nearly 40 per cent of registered children are denied access to primary education due to lack of space and other facilities. The government of Zanzibar strives to build new schools to cater for the purpose. In October 1996, there were approximately 1,648 continuing education students of whom 1,136 were women (70 per cent of the total);

(c) **Secondary education.** By 1996, there were 303 government secondary schools in Tanzania Mainland while private secondary schools numbered 353. Due to an inadequate number of places in secondary schools, only 14.6 per cent of children from primary school enter Form One. Post-primary formal education is not compulsory and is offered to those who have successfully completed the compulsory basic primary education and meet required Form One secondary school requirements in order to further their scope of ideas, knowledge, skills and principles acquired in primary school;

(d) **Vocational education including training and guidance.** The most prominent vocational education and training institutions include national vocational training centres, folk development colleges, technical secondary schools and private vocational schools and centres. Admission requirements to formal and non-formal vocational education and training courses range from primary school leavers to anybody with a subsequent level of education wishing to acquire the requisite skills for employment and self-advancement. There are three areas of specialization in the vocational training currently being offered. These are:

- (i) Vocational technical education which includes carpentry, blacksmithery, masonry and tinsmithery;
- (ii) Agriculture and livestock education;
- (iii) Home economics education.

There is a pilot project in four zones of the country for integrated community-based adult education-

(e) **Non-Formal education and training.** Non-formal education and training serves a variety of learning needs of different groups of youth and adults in the population. The basic learning needs of young and adult persons are diverse and may be met through various delivery systems such as informal education, the different stages of adult literacy, evening schools, libraries, correspondence courses, radio, television and other forms of media and distance education.

333. The Government is implementing the International Programme for the Elimination of Child Labour (IPEC) sponsored by ILO, whose main objective is to eliminate child labour by improving school enrolment and school attendance and discouraging drop-outs in primary schools.

Efforts by the Government with a view to reducing existing disparities

334. A number of efforts are being undertaken with a view to reducing the existing disparities in the education system. These include:

- Establishing special funds for girls who are bright but whose parents cannot afford the costs of education;
- Setting up schools for girls;
- Encouraging girls to complete primary schooling and migrate to the secondary level and beyond.

335. The Ministry of Education has a special unit which caters for children with special difficulties.

336. The current shortage of classrooms is so severe that it has necessitated the introduction of a multiple shift system, thus reducing the total teaching time. The average size of class reached 88 in 1996 compared with the benchmark of 45.

The aims of education in Tanzania (art. 29)

337. The general aims and objectives of education and training in Tanzania are:

(a) To guide and promote the development and improvement of the personalities of the citizens of Tanzania, their resources and effective utilization of those resources in bringing about individual and national development;

(b) To promote the acquisition and appreciation of the culture, customs and traditions of the people of Tanzania, and an understanding and respect for human dignity and human rights and a readiness to work hard for personal self-advancement and national improvement;

(c) To encourage students to develop and promote self-confidence and an inquiring mind and an understanding of other groups of people;

(d) To inculcate the principles of national ethics and integrity, national and international cooperation, peace and justice through study and understanding;

(e) To enable the rational use, management and conservation of the environment;

(f) To impart knowledge, training and skills to children for self-reliance.

Leisure, recreation and cultural activities (art. 31)

338. The school curricula cater for rest and leisure in the following ways:

(a) The Government has established primary school games and arts competitions from the village level up to the national level;

(b) The Government in collaboration with NGOs, establishes clubs in secondary schools;

(c) The National Arts Council in collaboration with the University of Dar es Salaam Department of Fine Arts has introduced children's theatre festivals, which cover two regions for the time being, with the expectation that coverage will be expanded to the entire country.

339. Children are involved in national campaigns and programmes such as environmental education, AIDS awareness and prevention, child rights, child labour and problems facing the girl child through the Sara Communication Initiative.
340. The Youth Cultural and Information Centre, a Dar es Salaam-based NGO working in the dramatic arts, conducted training in refugee camps in 1996 for theatre groups so as to use drama to address social problems and to effect positive changes in behaviour among refugee youth and adolescents. Drama was also used to spread awareness of child rights and responsibilities among refugee children, teachers and the refugee population in the camps.
341. Children's leisure and recreational facilities are highly respected in Zanzibar. There are two main fairgrounds, built in the 1970s: Kariakoo (Unguja) and Tibirinzi (Pemba). There are three major facilities for sporting events and ceremonies in which children participate fully; Kibanda Maiti, Mnazi Mmoja and Malindi.
342. A major athletic and sporting event is held annually on the occasion of the Free Education Festival. Children participate in a range of sports and athletics at venues across Zanzibar and both girls and boys are involved.
343. The Zanzibar Ministry of Information, Culture, Tourism and Youth Organizes children's football and netball competitions for juvenile and junior levels. The institution of children's sports and recreational clubs with games and sports competitions between shehias (communities) and between schools is a way of socializing children.
344. The Government prohibits any intrusion on the open spaces reserved for children's play and other cultural festivals.

VIII. SPECIAL PROTECTION MEASURES

Children in situations of emergency (arts. 22, 38, 39, 40, 37, 32)

Children in armed conflicts (art. 38)

345. Tanzania is a party to international law and documents such as the Humanitarian Law in Armed Conflicts and the Hague Convention and Geneva Convention of 1949. It therefore has to ensure that these conventions are followed. Tanzania has signed the Convention on Landmines, which is now awaiting ratification.
346. Tanzania has participated in only one war and in that war children were not involved as soldiers. Also, Tanzania has not been involved in armed conflicts inside its boundaries.
347. The Defence Forces Regulations prohibits children under 18 years from being employed in the army.
348. All soldiers are being trained in international humanitarian law as part of the army syllabus. The training is offered by ICRC within and outside the country.

Refugee children (art. 22)

349. The appropriate law under this article is the Immigration Act, which permits refugees to enter the country with children. Tanzania, as one of the countries of the great Lakes region has had the largest influx of refugees from neighbouring countries (Rwanda, Burundi and the Democratic Republic of the Congo) and they are handled equally, regardless of their ethnic group or place or origin. Tanzania has ratified international instruments on refugees to safeguard the interests of refugee children.

350. Rights of refugee children depend on the status of their parents. Being refugees, they certainly will be deprived of certain rights, which other children enjoy, due to the difficult circumstances in which they are living. Lack of resources may hamper the enjoyment of rights by these children such as education, health, recreation and so on. Tanzania respects the dignity of refugee regardless of their race or ethnicity.

Children in conflict with law (arts. 39 and 40)

351. According to the law, for example the Criminal Procedure Act. 1985, section 56, and section 5 of Cap. 13 after a child who has been arrested should receive special treatment. This includes informing the parents or guardians of the child about the arrest and keeping the child in custody from associating with child inmates. Also the Criminal Procedure Act. 1985, section 455 (2), prohibits persons under restraint being subjected to cruel, inhuman or degrading treatment. Section 32 (1) provides that offenders are to appear before the court within 24 hours of arrest, or, as stipulated in the law due to lack of awareness of the law among offenders and the delay in completing the investigation, 48 hours.

352. To a large extent, the legal safeguards demanded by article 40 already exist in Zanzibar. It is a basic constitutional principle that “every person who is charge with a criminal offence shall be innocent until he is proved guilty of an offence”.

353. The Penal Code establishes a minimum age of criminal responsibility. Under section 14, which was recently amended to increase the relevant ages, a pe4rson under the age of 12 is not criminally responsible for any act or omission, and a child between 12 and 14 is presumed not to have capacity unless the contrary is proved.

354. However, the law of Zanzibar under the Children and Young Person Act establishes a special procedure for dealing with offenders under the age of 16 for the best interest of the child.

Children in Situations of exploitation

Child labour (art. 32)

Legal Context

355. Children are exposed to exploitation by adults who use them to work at very low wages and/or in hazardous conditions. The law, which protects them, is the Employment Ordinance (Cap. 366) which prohibits employment of children under the prescribed ages and protects them from economic exploitation and work which may be harmful to their health and well-being.

356. In Zanzibar, the most significant legislation in this area is the Employment of Children, Young Person and Adolescents (Restrictions) Decree 1952, and the Labour Act of 1997. They prohibit employment of any child below the age of 18 depending on the nature of the work.

357. Child labour in Tanzania today is closely associated with the series of economic reforms, which the country has adopted over the past decade. There have been severe reductions in the social sector budget and worsening rural poverty. Consequently, the rate of rural-urban drift by the youth and children has increased. These children find their way into the urban informal sector, where children below 15 years of age constitute about half the workforce. Most of the children in the rural areas are employed in tea, pyrethrum, coffee, tobacco, sugar, cloves, rubber, sisal plantations. Other sectors include constructions, mining, transport, petty business and the informal sector including domestic service.

358. Despite the existence of the Employment Ordinance (Cap. 366) which prohibits employment of children under 12 years of age, the law is not fully enforced due to lack of awareness of children's legal rights among the children, employers, and among the law enforcers. The law also contains contradictions with respect to the employment age, with different laws stating different ages. For instance, under the Employment Ordinance (Cap. 366) sect. 77, it is prohibited to employ a child under the apparent age of 12 years, the Education Act of 1978 indicates that compulsory schooling ends at 13 years; under the law of Contract Ordinance a child cannot enter into a contract. However, in actual fact, children have to work towards the survival of their families, but the kind of work carried out by them should not be exploitative or hazardous and should not in any way interfere with their education and rights to rest and recreation.

Implementation

359. The Government is aware of the problems and contradictions are in the process of reviewing the laws and also drafting the Child Labour Policy, as a guideline for protecting children from exploitation. The Government is committed to adopting and implementing national legislation and policies on child labour in conformity with international standards. ILO Convention No. 138 due to the ratified in 1998, will raise the age of a admission to employment to 14 years.

360. There are several recent initiatives which serve illustrate the Government's commitment in combating child labour and accelerating social development. The International Programme on Child Labour (IPEC) has three priority target groups:

- Children working under forced labour conditions and in bondage;
- Children in hazardous working conditions and occupations;
- Very young working children (under 12 years of age) with special attention to working girls.

361. IPEC programmes, areas and strategies, which are being implemented, are:

- Protection of children working in plantations;
- Community mobilization and Information campaigns against child labour
- Legislation and enforcement through training of labour inspectors on child labour;
- Education and training through integration of child labour components in the curriculum of the Social Welfare and Community Development workers and also the promotion of pre-school education in selected regions by the Ministry of Education and Culture;

- Research on the situation of child labour on plantations in Zanzibar, 1994.

Drug Abuse (art. 33)

Legal context

362. The only provision in Zanzibar relevant to article 33 is the Pharmaceutical and Dangerous Drugs act No. 6 of 1986. It prohibits the use, cultivation. Possession or sale of dangerous and noxious drugs and prescribes heavy penalties. Islamic law is also clear in that it prohibits the use of all intoxicants.

Implementation

363. The Government organizes school and mass campaigns, through meetings and mass media, against the use of substance drugs and its adverse effects. Several people have appeared before the courts to answer charges of trafficking and abuse of drugs.

364. Both governments have instituted a National Unit on Drug Abuse under the Ministry of Home Affairs in the Union Government and in Zanzibar under the Chief Minister's Office. Also, non-government organizations, such as the anti-Drug Information Centre (ADIC), and civil society are campaigning against drug abuse. ADIC has conducted research on the prevalence and underlying causes of substance abuse among schoolchildren and youth.

Sexual exploitation (art. 34)

Legal context

365. The Zanzibar Penal Code establishes an effective age of consent at 14 or at whatever age a girl reaches puberty over 14 "Carnal knowledge" (sexual intercourse) or indecent assault of a girl under that age is prohibited. Both offences carry heavy penalties and in both cases a reasonable belief that the girl is over the relevant age acts as a sufficient defence.

366. No age of consent for boys is created, although a boy under 12 is not considered capable of intercourse. Limited protection of boys under 14 against sexual assault is provided. However, it is possible that boys may themselves be penalized for involvement in "unnatural acts" in view of the working of section 142. According to the Penal code, a girl of 14 years and below cannot give consent to sexual intercourse.

Implementation

367. The Government has made efforts to protect children, especially girls against sexual exploitation. The Sexual Offences Special provision Act of 1998 has proposed to raise the age to 18 years. Also the Penal Code (Cap. 13) of Zanzibar has been reviewed to raise the age of consent to 17 years. Other efforts include mobilization campaigns against sexual exploitation through the mass media, NGOs and civil society.

CONCLUSION

368. Since Tanzania ratified the Convention on the Rights of the Child in May 1991, a great deal of work has been done despite the economic constraints facing the nation. In 1993, the National Programme for Action (NPA) to Achieve the Goals for Tanzanian Children in the 1990s was formulated. The NPA is being implemented through the Government of Tanzania/UNICEF Country Programmes of Cooperation, 1992-1996 and 1997-2001. The Child Development Policy of 1996 defines the roles of the Government, non-governmental organizations, civil society, the community, parents and the children themselves in the implementation of the policy.

369. Other policies formulated, such as the Community Development Policy, the Poverty Eradication Policy, Gender and Women Development Policy, Education and Training Policy, Food and Nutrition Policy, to mention a few, have a great bearing and influence on implementing the Child Development Policy.

370. Since the ratification of the convention in 1991, strong partnerships between the Government and organs of civil society, including NGOs, community-based organizations religious institutions and parliamentarians, have been forged. Advocacy on children rights has been strengthened through the media, meetings, and seminars.

371. Over the next five-year period the challenge will be to implement the measures for which this framework has provided. The work ahead is very challenging. There are many problems and areas of concern about the situation of children, which need to be tackled. The financial crisis facing the nation is a great obstacle to rapid development and promotion of child rights.

372. There is a dire need to stimulate economic growth without which the best plans formulated will be meaningless. There is also a great need to promote and consolidate advocacy on children's rights so as to reduce the negative cultural aspects, which hinder the implementation of the convention.

373. Although many important actions have already been taken by communities and supported by government institutions at the district, regional and national levels, it is our belief that other influential groups, institutions and individuals have an important role to play.

374. We need to join forces to create alliances with all those who are already implementing activities contributing to the development of children in Tanzania.

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