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Millennium Development Goals (MDG) Database
Metadata for Tanzania, 2011

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Preface

The Millennium Development Goals (MDG) was launched by the UN in 2000. The 8 goals are divided into 21 targets and 60 indicators, covering a wide range of areas. These indicators provide a detailed picture of living conditions and, as such, a good foundation for measuring progress in people's lives. This is again useful for measuring success or failure of the policies implemented by the governments.

The agreed upon indicators are supposed to be collected from the national statistics office in each relevant country. This is not always the case. Much of the data is estimated and disseminated by international organisations. This becomes a challenge when the statistics disseminated by national statistics offices and international organisations differ. It confuses users and leaves policy makers uncertain of whether the policy that has been implemented is successful.

Statistics Norway conducted a project to disseminate national MDG figures along with the international ones. The MDG project was conducted in partnership with our sister organisations in Bangladesh, Malawi, Mozambique, Nepal, Tanzania, Uganda and Zambia, with funding from Norad.

We would like to thank Bangladesh Bureau of Statistics, National Statistical Office in Malawi, Instituto Nacional de Estatística in Mozambique, Central Bureau of Statistics in Nepal, National Bureau of Statistics in Tanzania, Uganda Bureau of Statistics and Central Statistical Office in Zambia for the successful cooperation. We would also like to thank Norad for financial support making the project possible.

Abstract

The Millennium Development Goals (MDG) project aims at re-disseminating national statistical figures on MDG indicators already published at the national level. The project is a cooperation between Statistics Norway (SN) and seven of our partner countries. This document covers metadata for the data from Tanzania.

The international data was collected from the UN MDG database, while the national data was collected from National Bureau of Statistics (NBS). The cooperation on data collection was initiated by SN and NBS in Dar es Salaam in March 2010, and continued through the following year. The data collection was regulated by an agreement between NBS and SN. There will be annual updates of the data.

Different international institutions are responsible for delivering data on different data to the UN MDG database; the institutions and what indicators they are responsible for are documented in the chapter on collecting MDG data. The chapter also includes the sources of the national data.

The report presents metadata on all the indicators. Included here are the definitions (the indicators are defined by UN), how the international data are obtained on the specific indicators, the common statistical instruments and specifications on the national sources. The last part also includes relevant deviations from the definitions, and identifies additional information that is available through reanalysing raw data from earlier surveys.

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National data for monitoring the Millennium Development Goals

Population: 44.5 million (2011, est)

April 2011

National Bureau of Statistics Tanzania: www.nbs.go.tz

This fact sheet is part of a project focusing on data produced by national statistics offices monitoring the Millennium Development Goals. These pages bring a snapshot of available data. The complete set of available data, with definitions and metadata is found in the database at www.ssb.no/english/int/mdg.

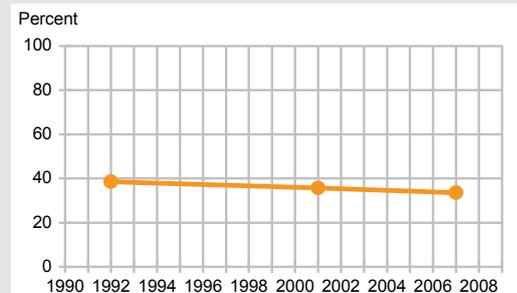
Goal 1: Eradicate extreme poverty and hunger

The first Millennium target is to halve poverty by 2015. According to the national basic poverty line in Tanzania, poverty has been reduced moderately from 39 to 34 percent of the population between 1992 and 2007. The *national basic poverty line* measures if a household can afford a minimum level of food and other essential goods. It is based on data on consumption collected in household surveys. The international poverty line should be used for comparing poverty between countries and is defined as those living on 1.25 US dollar purchasing power parity or less per day. National poverty lines are measured differently from country to country and should not be compared.

Poverty gap is a measure of how poor the people under the poverty line are. The higher the poverty gap, the poorer the poor are. If the poverty gap is close to zero, the poor are just below the poverty line. For Tanzania the poverty gap ratio was last measured in 2001 showing a ratio of 11 percent. The depth of poverty has been low and stable since the first observation in 1992 when it was measured to 12 percent.

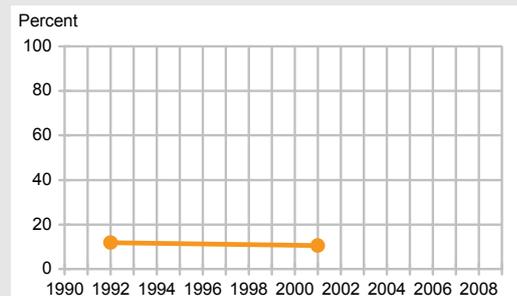
Prevalence of underweight children is an indicator used to measure hunger. What is measured in this indicator is the percentage of children under five years of age who is less than two standard deviations below the median weight for their age compared to an international reference population. In Tanzania 29 percent of the children were underweight in 1992, decreasing to 22 percent in 2004 according to survey data.

Indicator 1.1b: Rate of population below the national basic poverty line



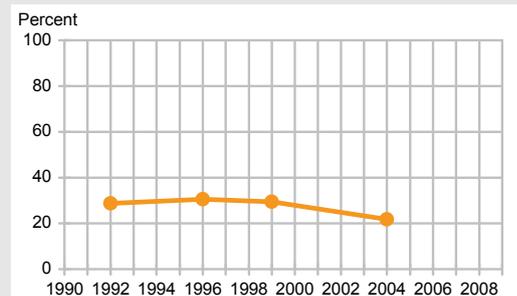
Source: NBS: Household Budget Survey (1991/92, 2001/02 and 2007). Mainland Tanzania

Indicator 1.2: Poverty gap



Source: NBS: Household Budget Survey (1991/92, 2001/02). Mainland Tanzania.

Indicator 1.8: Prevalence of underweight children



Source: NBS: Demographic and Health Survey (1991/92, 1996 and 2004/05), Reproductive and Child Health Survey 1999.

Disseminating Millennium Development Goal statistics

The Millennium Development Goals (MDGs) were launched by the UN in 2000. The 8 goals are divided into 21 targets and 60 indicators. The agreed upon indicators are supposed to be produced by the national statistics office in each relevant country. This is not always the case. Much of the data is estimated and disseminated by international organisations. Statistics Norway's MDG project aims at disseminating figures from national sources (census, survey and administrative) together with the international ones (United Nations and World Bank). The purpose is to make the national data and relevant documentation easily accessible to the users in Norway and partner countries. This fact sheet contains some of the available statistics, but the main tool for dissemination is the database to be found at www.ssb.no/english/int/mdg

The project is a cooperation between Statistics Norway and the national statistics offices in seven countries: Bangladesh, Malawi, Mozambique, Nepal, Tanzania, Uganda and Zambia. National data in the database is delivered by the national statistics offices, while the international data is drawn from the UNSTAT MDG database.

Goal 2: Achieve universal primary education

Enrolment is the absolute number of pupils who are enrolled in a school. This information is recorded by the schools for administrative purposes and submitted to the Ministry of Education.

Attendance is whether the child attended school during the school year. This is the measurement used in surveys by asking the question directly to the household the child belongs to.

Net enrolment/attendance rate in primary education is the number of children of official primary school age who are enrolled in/who attend primary education as a percentage of the total number of children of the official school age population. *Gross enrolment/attendance rate* includes the pupils who are out of school-age in the numerator, which is why the rate in countries with many pupils older than official school age often exceeds 100 percent.

Official school age in Tanzania is from age 7 to 13. In 2007, 84 percent of the children in that age group attended primary school according to survey data. 96 percent of the children were enrolled in 2009 according to administrative data. In 2007, the most recent available survey, attendance rate in urban areas was 91 percent and in rural areas it was measured to 82 percent.

Goal 3: Promote gender equality and empower women

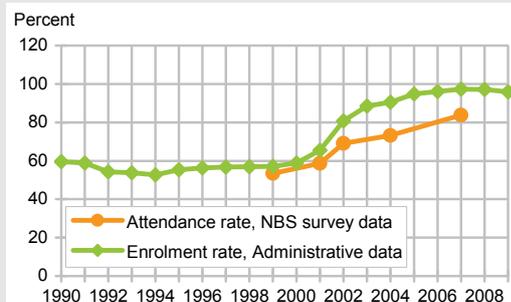
The *Gender Parity Index* shows the number of girls in school to the number of boys. If the ratio is 1, it means there are an equal number of girls to boys. Below 1 means more boys than girls are in school and above 1 means more girls than boys. In Tanzania, according to administrative data, the net gender parity index ratio has been stable around 1 since 1991, hence fulfilling the target of eliminating gender disparity for primary education.

Survey, census and administrative data

Survey and census: The National Bureau of Statistics (NBS) is in charge of national surveys. Survey means that the information is collected from a sample of the population. The results from the sample are then used to estimate the situation in the whole population. The NBS is also in charge of census, in which everyone is enumerated.

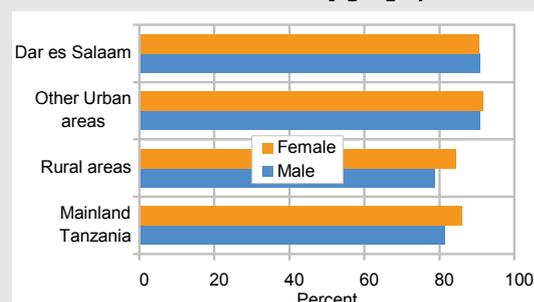
Administrative data: Administrative data is usually collected by the relevant ministries and is most often register. For instance the full number of children immunised, recorded by health stations and submitted to the Ministry of Health. The rates are found by dividing the recorded number by the number of people in the target group. This denominator is normally drawn from the population census, but sometimes other sources are used. The increased focus on documentation over the last years has in many countries led to major improvements in administrative data collection. Hence, older records may have quality problems that affect comparability over time.)

Indicator 2.1: Net enrolment and attendance rate in primary education



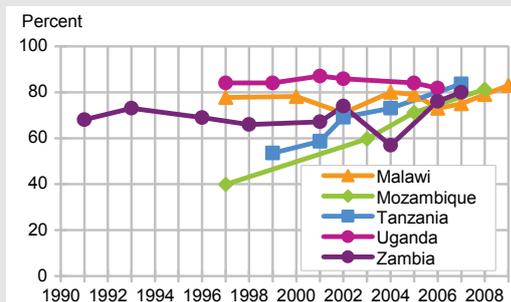
Source: NBS: Reproductive and Child Health Survey 1999, Household Budget Survey, Mainland Tanzania (2000/01, 2007), Population and Housing Census 2002, Demographic and Health survey 2004/05. Adm: Basic Education Statistics, Mainland Tanzania, 1990-2009, Ministry of Education

Indicator 2.1: Net attendance rate in primary education 2007 by geographical area



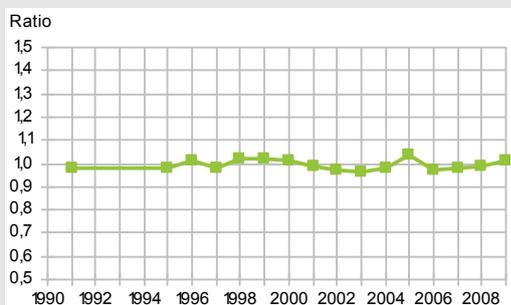
Source: NBS: Household Budget Survey 2007, Mainland Tanzania

Indicator 2.1: Net attendance rate in primary education



Source: Survey data from Malawi: National Statistical Office, Tanzania: National Bureau of Statistics, Uganda: Uganda Bureau of Statistics, Zambia: CSO

Indicator 3.1: Gender Parity Index in Primary Education



Source: Adm: Basic Education Statistics, Mainland Tanzania, 1990-2009, Ministry of Education

Goal 4: Reduce child mortality

The target for goal number four is to reduce the *under-five mortality rate* by two-thirds between 1990 and 2015. Mortality rate is expressed as the number of deaths per 1000 live births. The under-five mortality rate in Tanzania has decreased from 141 in 1992 to 112 in 2008. Infant (under 12 months) mortality rate is down from 92 to 72 in the same period.

It is generally recommended for children to be immunised against measles at the age of nine months, although some countries recommend later immunisation. *The proportion of 1 year olds immunised against measles* is found through surveys by using information provided by head of households on immunisation status for children between 12 and 23 months of age. Administrative data are recordings of immunisations by health personnel divided by the target group.

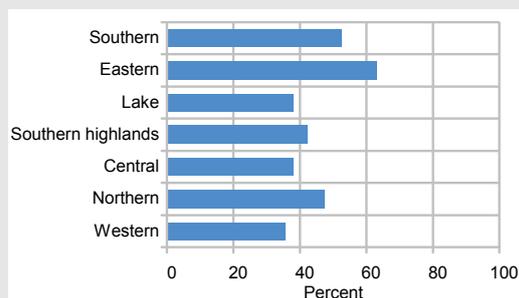
The survey data show a stable immunisation level in the period from 1992 to 2004 around 80 percent. Administrative data are available only from 2001, and show a somewhat higher immunization level in the period from 2002 to 2004 compared to survey data. In 2004 the proportion of one-year olds immunised against measles reached 89 percent according to administrative data.

Goal 5: Improve maternal health

Maternal mortality rate is the annual number of women who die from any cause related to or aggravated by pregnancy or its management. The indicator is expressed per 100,000 live births. The millennium target is to reduce the maternal mortality rate by three quarters between 1990 and 2015. Data on maternal mortality are in most countries collected through surveys only. As the surveys often are carried out every five years and the sample size is rather small for this purpose, it is difficult to assess to what degree the goal is/will be reached. The maternal mortality rate in Tanzania has in fact increased from 529 in 1996 to 578 in 2004. However, the preliminary report from DHS 2009/10 shows a decrease in this indicator to 454, placing Tanzania on track in reaching the millennium target.

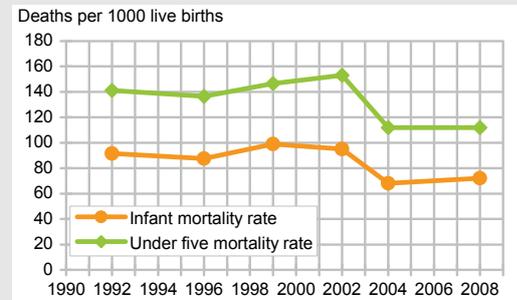
Proportion of births attended by skilled personnel is the percentage of deliveries attended by trained doctors, nurses or midwives. Traditional birth attendants, even if they receive a short training course, are not included. Access to skilled personnel is much higher in urban than rural areas and also varies geographically. For the country as a whole the proportion of births attended by skilled health personnel has decreased slightly from a recorded 44 percent in 1996 to 43 percent in 2004. If we look more closely at the developments in this period we find that the negative trend occurred in the period from 1992 to 1996. From 1996 to 2004 the proportion of births attended by skilled health personnel increased from 38 percent to 43 percent. We find that the Eastern part of Tanzania has the highest access to skilled personnel with 63 percent of births attended by skilled personnel, and the lowest access in the Western zone of the country with only 35 percent of the births attended by skilled personnel.

Indicator 5.2: Proportion of births attended by skilled health personnel by zone. 2004-2005



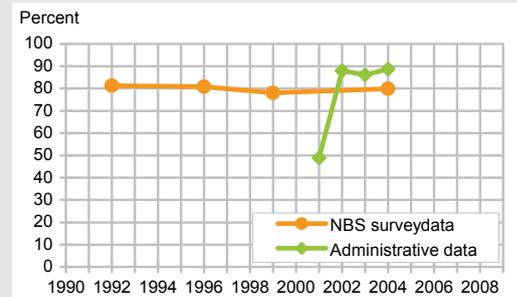
Source: NBS: Demographic and Health Survey (2004/05).

Indicator 4.2: Child mortality rates



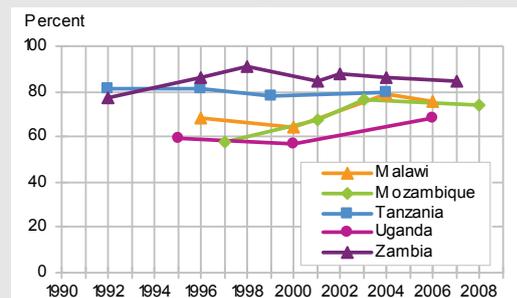
Source: NBS: Demographic and Health Survey (1991/92, 1996, 2004/05), Reproductive and Child Health Survey 1999, Population and Housing Census 2002 and HIV/AIDS and Malaria Indicator Survey 2007/08.

Indicator 4.3: Proportion of one-year olds immunised against measles



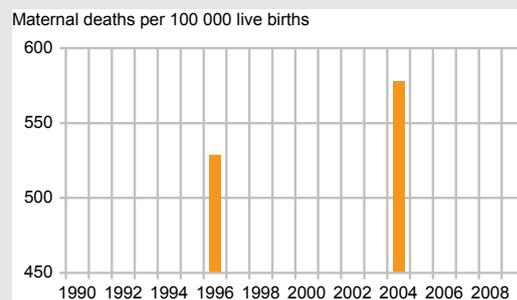
Source: NBS: Demographic and Health Survey (1991/92, 1996, 2004/05), Reproductive and Child Health Survey 1999. Adm: Annual Health Statistics Abstract. Mainland Tanzania (2001-2004).

Indicator 4.3: Proportion of 1 year-old children immunised against measles. Survey data



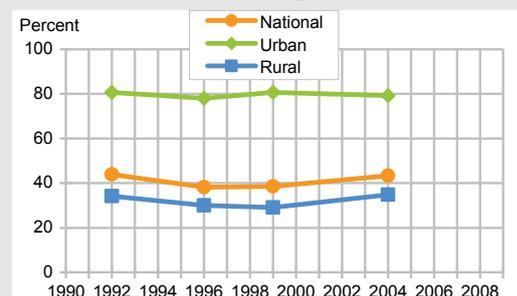
Source: Survey data from Malawi: National Statistical Office, Tanzania: National Bureau of Statistics, Uganda: Uganda Bureau of Statistics, Zambia: CSO

Indicator 5.1: Maternal Mortality Rate



Source: NBS: Demographic and Health Survey (1996, 2004/05)

Indicator 5.2: Proportion of births attended by skilled health personnel



Source: NBS: Demographic and Health Survey (1991/92, 1996, 2004/05), Reproductive and Child Health Survey 1999.

Goal 6: Combat HIV/AIDS, malaria and other diseases

Target 6A is to have halted by 2015 and begun reversing the spread of HIV/AIDS. The HIV infection rate is mainly monitored by international agencies. *Condom use during last high-risk sex* is the percentage of young men and women aged 15-24 that had more than one partner in the past 12 months reporting the use of a condom during their last sexual intercourse. In 2008 the percentage for women was 46 percent, representing an increase from 42 percent in 2004. For men this indicator showed an increase from 47 to 49 percent during the same period.

Percentage of young men and women aged 15-24 years with comprehensive correct knowledge of HIV/AIDS is the share of women and men aged 15-24 years who correctly identify the two major ways of preventing the sexual transmission of HIV, who reject the two most common local misconception about HIV transmission and who know that a healthy-looking person can transmit HIV. In Tanzania there has been a decrease in this indicator for both groups in the period from 2003 to 2008.

Goal 7: Ensure environmental sustainability

There are ten indicators measuring progress towards this goal, ranging from CO2 emissions to how many people are living in slums. The only ones so far disseminated by the NBS are obtained from household surveys: Access to improved drinking water and sanitation facilities. In Tanzania, the proportion of population using an improved drinking water source has increased from 46 percent in 1992 to 52 percent in 2007.

Goal 8: Develop a global partnership for development

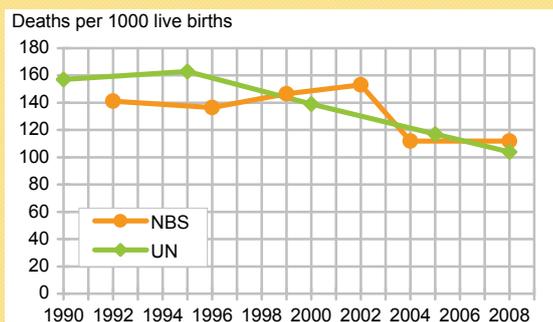
The last of the millennium goals is measured by 16 different indicators. Eight of the indicators measure the amount of official development assistance (ODA) and debt relief the country receives, while four relate to market access.

International approved versus official national data

UN is in charge of collecting the MDG data, and is therefore the main international source for MDG indicators. The data in the UN database is collected from different sources and by different methods, and are approved by UN. The national data is the official statistics of the specific country. Indicator 4.1 is collected by UNICEF, and the UN data for this indicator is estimated. UN estimates in cases when corresponding country data on a specific year or set of years are not available, or when multiple sources exist, or there are issues of data quality. Estimates are based often on data collected from national sources, such as surveys or administrative records. The national data on this indicator is collected by NBS in Demographic and Health Surveys, Reproductive and Child Health Survey 1999, Population and Housing Census 2002, and the HIV/AIDS and Malaria Indicator Survey 2008.

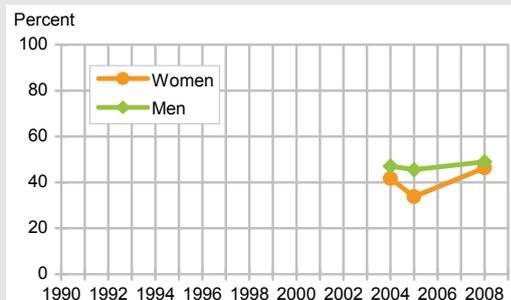
The data from NBS and UN cover mainly different years, and the graph shows a somewhat different trend. There is no documentation, neither in nor linked to the database, on how UN estimates this data and what national data that constitutes the basis for the estimates.

Indicator 4.1: Under-five mortality rate



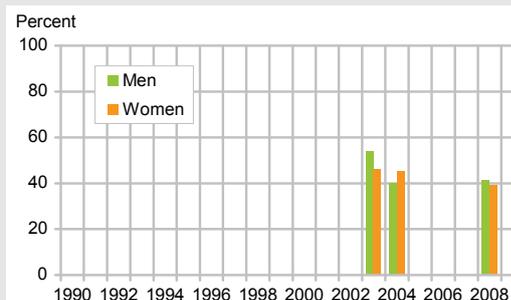
National data: NBS: Demographic and Health Survey (1991/92, 1996, 2004/05), Reproductive and Child Health Survey 1999, Population and Housing Census 2002 and HIV/AIDS and Malaria Indicator Survey 2007/08.
International data: UN MDG database: <http://mdgs.un.org/unsd/mdg/Data.aspx>

Indicator 6.2: Condom use at last high risk sex, 15-24 year-olds



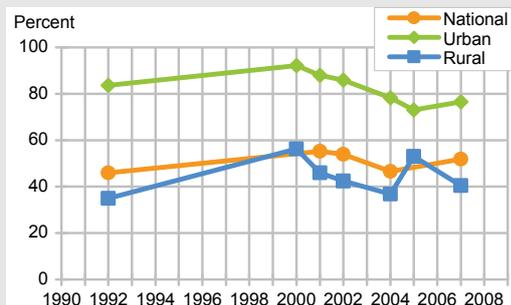
Source: NBS: HIV/AIDS Indicator Survey 2003/04, Demographic and Health Survey (2004/05), and HIV/AIDS and Malaria Indicator Survey (2007/08).

Indicator 6.3: Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS



Source: NBS: HIV/AIDS Indicator Survey (2003/04), Demographic and Health Survey (2004/05) and HIV/AIDS and Malaria Indicator Survey (2007/08).

Indicator 7.8: Proportion of population using an improved drinking water source



Source: NBS: Household Budget Survey (1991/92, 2000/01, 2007) Mainland Tanzania, Population and Housing Census 2002, Demographic and Health Survey 2004/05

1. Introduction

Statistics Norway's Millennium Development Goals (MDG) project aims at disseminating figures from national sources (census, survey and administrative sources) together with the international ones from the United Nations and the World Bank. The purpose is to make the national data and relevant documentation easily accessible to the users in Norway and in partner countries. A database and factsheets for each of the partner countries has been produced. These factsheets contain some of the available statistics, but the main tool for dissemination is the database to be found at www.ssb.no/english/int/mdg.

The project is based on a cooperation between Statistics Norway and the national statistics offices in seven countries: Bangladesh, Malawi, Mozambique, Nepal, Tanzania, Uganda and Zambia. National data in the database is delivered by the national statistics offices, while the international data is drawn from the United Nations Statistics Division (UNSTAT) database on the MDGs.

This is a documentation of the metadata relating to the national Millennium Development Goals statistics. It is disseminated by Statistics Norway (SN) and National Bureau of Statistics (NBS). The information has mainly been collected by Elide Mwanri, NBS, and Siv Irene Pedersen, Ellen Cathrine Kiøsterud and Sadija Jama, SN. The work is coordinated by Siv Irene Pedersen in Statistics Norway.

Tanzania is a country in East Africa bordering on Kenya, Uganda, The Democratic Republic of Congo, Rwanda, Burundi, Malawi and Mozambique. Tanzania has a population of 44.5 million (2011) on a total of 945.087 square kilometres. Tanzania includes Mount Kilimanjaro, Africa's highest Mountain, and parts of Lake Victoria, the world's second largest freshwater lake. Tanzania gained its independence in 1961 and was reunited with Zanzibar in 1964. The official statistics office in Tanzania is National Bureau of Statistics (NBS), based in Dar es Salaam (<http://www.nbs.go.tz/>).

1.1. Collecting MDG data

Collecting National Data

There are several relevant sources for national data. It is important to collect not only the data itself, but also documentation on how the data was collected and the weaknesses and strengths of the data.

There are some surveys especially relevant for collecting data for the MDG indicators:

- **Demography and Health Surveys (DHS)**
DHS is a nationally-representative household survey that provides data for a wide range of monitoring and impact evaluation indicators in the areas of population, health and nutrition. The DHS is often conducted by MICRO International. Some countries' national statistical office, however, has conducted DHS style surveys without involving MICRO International.
- **Integrated Household Surveys (IHS)**
IHS is conducted by national statistical offices. The content of IHS can change, and therefore the relevance for the different MDGs will also change.
- **Multiple Indicator Cluster Surveys (MICS)**
MICS is programme developed by UNICEF. It is meant to fill data gaps for monitoring the situation of women and children through statistically sound, internationally comparable estimates of socio-economic and health indicators. This household survey programme is the largest source of statistical information on children. Almost half of the MDG indicators are collected through MICS, making it one of the largest single sources of data for MDG monitoring.
- **Core Welfare Indicator Questionnaire (CWIQ)**
CWIQ focuses on access, usage and satisfaction of households with public service, supplemented by some welfare and demographic information, and is representative at district level.
- **Population Censuses**

Relevant surveys and censuses in Tanzania:

- Demography and Health Survey (DHS) 1991/92
- Demography and Health Survey (DHS) 1996
- Demography and Health Survey (DHS) 2004/05
- Household Budget Survey (HBS) 1991/92
- Household Budget Survey (HBS) 2000/01
- Reproductive and Child Health Survey (RCHS) 1999
- Knowledge, Attitudes and Practices Survey (KAPS) 1994
- HIV/AIDS Indicator Survey (HIS) 2003-04
- HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08
- Population and Housing Census (PHC) 2002
- Integrated Labour Force Survey (ILFS) 2000/01
- Integrated Labour Force Survey (ILFS) 2006

1.1.1.1. Administrative data

- Basic Education Statistics (BEST)
- Health Statistical Abstract (HSA)
- National Strategy for Growth and Reduction of Poverty "MKUKUTA"
Implementation Reports
- Poverty and Human Development Reports (PHDR)

Obtaining the international data

The United Nations (UN) uses several ways to obtain the data. Data initially were to be collected from different types of data collection, in particular surveys and administrative data. This does not always happen. The UN agencies use different procedures for data collection:

Country data (C)

The figure is the one produced and disseminated by the country (including data adjusted BY THE COUNTRY to meet international standards)

Country Adjusted (CA)

The figure is the one produced and provided by the country, but adjusted by the international agency for international comparability—that is to comply with internationally agreed standards, definitions and classifications (age groups, education, labour and industry, etc)

Estimated (E):

The figure is estimated by the international agency, when corresponding country data on a specific year or set of years are not available, or when multiple sources exist, or there are issues of data quality. Estimates are based on national data, such as surveys or administrative records, or other sources but on the same variable being estimated.

Modelled (M):

The figure is modelled by the agency when there is a complete lack of data on the variable being estimated. The model is based on a set of covariates—other variables for which data are available and that can explain the phenomenon (example: maternal mortality or slums, to a certain extent)

Global Monitoring Data (G):

The figure is regularly produced by the designated agency for the global monitoring, based on country data. However, there is no corresponding figure at the country level, because the indicator is defined for international monitoring only (example: population below 1\$ a day)

Non-Relevant (N):

The figure is not available because the indicator—as defined for the global monitoring—does not apply to the circumstances of the specific country, and therefore is not reported

Not Available (NA):

A figure was not provided, or the method by which the figure was calculated is unknown

Different international institutions are responsible for collecting different indicators for the UN MDG database. Included is some information on these institutions.

*Food and Agriculture
Organisation (FAO)*

FAO's own description of its nature and purpose: The Food and Agriculture Organization of the United Nations leads international efforts to defeat hunger. Serving both developed and developing countries, FAO acts as a neutral forum where all nations meet as equals to negotiate agreements and debate policy. FAO is also a source of knowledge and information. We help developing countries and countries in transition modernize and improve agriculture, forestry and fisheries practices and ensure good nutrition for all. Since our founding in 1945, we have focused special attention on developing rural areas, home to 70 percent of the world's poor and hungry people. FAO serves as a knowledge network. We use the expertise of our staff - agronomists, foresters, fisheries and livestock specialists, nutritionists, social scientists, economists, statisticians and other professionals - to collect, analyse and disseminate data that aid development. A million times a month, someone visits the FAO Internet site to consult a technical document or read about our work with farmers. We also publish hundreds of newsletters, reports and books, distribute several magazines, create numerous CD-ROMS and host dozens of electronic fora.

AQUASTAT is FAO's global information system on water and agriculture developed by the Land and Water Division. It collects, analyses and disseminates data and information by country and by region. Its aim is to provide users interested in global, regional and national analyses with comprehensive information related to water resources and agricultural water management across the world, with emphasis on countries in Africa, Asia, Latin America and the Caribbean.

FAO is responsible for collecting data for indicators 1.9, 7.1 and 7.5

*International
Telecommunication Union
(ITU)*

ITU is the leading United Nations agency for information and communication technology issues, and the global focal point for governments and the private sector in developing networks and services. For nearly 145 years, ITU has coordinated the shared global use of the radio spectrum, promoted international cooperation in assigning satellite orbits, worked to improve telecommunication infrastructure in the developing world, established the worldwide standards that foster seamless interconnection of a vast range of communications systems and addressed the global challenges of our times, such as mitigating climate change and strengthening cybersecurity.

ITU also organizes worldwide and regional exhibitions and forums, such as ITU TELECOM WORLD, bringing together the most influential representatives of government and the telecommunications and ICT industry to exchange ideas, knowledge and technology for the benefit of the global community, and in particular the developing world.

ITU is responsible for collecting data for target 8F.

*Inter-Parliamentary Union
(IPU).*

IPU's own description of its nature and purpose: The IPU is the international organization of Parliaments of sovereign States (Article 1 of the Statutes of the Inter-Parliamentary Union). It was established in 1889. The Union is the focal point for world-wide parliamentary dialogue and works for peace and co-operation among peoples and for the firm establishment of representative democracy. To that end, it:

- Fosters contacts, co-ordination, and the exchange of experience among parliaments and parliamentarians of all countries.
- Considers questions of international interest and concern and expresses its views on such issues in order to bring about action by parliaments and parliamentarians.
- Contributes to the defence and promotion of human rights -- an essential factor of parliamentary democracy and development.
- Contributes to better knowledge of the working of representative institutions and to the strengthening and development of their means of action.

The IPU supports the efforts of the United Nations, whose objectives it shares, and works in close co-operation with it. The Union also co-operates with regional inter-parliamentary organizations, as well as with international intergovernmental and non-governmental organizations which are motivated by the same ideals. The IPU is financed primarily by its members out of public funds. The site of the Union's Headquarters is Geneva (Switzerland).

IPU is responsible for collecting data for indicator 3.3.

*Joint United Nations
Programme on HIV/AIDS
(UNAIDS)*

UNAIDS' own description of its nature and purpose: UNAIDS, the Joint United Nations Programme on HIV/AIDS, is an innovative joint venture of the United Nations family, bringing together the efforts and resources of ten UN system organizations in the AIDS response to help the world prevent new HIV infections, care for people living with HIV, and mitigate the impact of the epidemic. With its

headquarters in Geneva, Switzerland, the UNAIDS Secretariat works on the ground in more than 80 countries worldwide. Coherent action on AIDS by the UN system is coordinated in countries through the UN theme groups, and the joint programmes on AIDS. Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. UNAIDS helps mount and support an expanded response to AIDS – one that engages the efforts of many sectors and partners from government and civil society.

UNAIDS uses the UN's MDG database. UNAIDS is responsible for collecting data for indicator 6.1.

The International Labour Organization (ILO)

The ILO's own description of its nature and purpose: The ILO is the only 'tripartite' United Nations agency in that it brings together representatives of governments, employers and workers to jointly shape policies and programmes. This unique arrangement gives the ILO an edge in incorporating 'real world' knowledge about employment and work. The ILO is the global body responsible for drawing up and overseeing international labour standards. Working with its Member States, the ILO seeks to ensure that labour standards are respected in practice as well as principle. The International Labour Organization (ILO) is devoted to advancing opportunities for women and men to obtain decent and productive work in conditions of freedom, equity, security and human dignity. Its main aims are to promote rights at work, encourage decent employment opportunities, enhance social protection and strengthen dialogue in handling work-related issues. In promoting social justice and internationally recognized human and labour rights, the organization continues to pursue its founding mission that labour peace is essential to prosperity. Today, the ILO helps advance the creation of decent jobs and the kinds of economic and working conditions that give working people and business people a stake in lasting peace, prosperity and progress.

ILO has data on Key Indicators of the Labour Market (KILM), but they do not have their own MDG database on their web site. ILO is responsible for collecting data for target 1B and indicator 3.2.

The World Bank (WB)

The World Bank's own description of its nature and purpose: The World Bank is a vital source of financial and technical assistance to developing countries around the world. We are not a bank in the common sense. We are made up of two unique development institutions owned by 185 member countries - the International Bank for Reconstruction and Development (IBRD) and the International Development Association (IDA). Each institution plays a different but collaborative role to advance the vision of an inclusive and sustainable globalization. The IBRD focuses on middle income and creditworthy poor countries, while IDA focuses on the poorest countries in the world. Together we provide low-interest loans, interest-free credits and grants to developing countries for a wide array of purposes that include investments in education, health, public administration, infrastructure, financial and private sector development, agriculture, and environmental and natural resource management (www.worldbank.org).

The World Bank has its own database that includes MDG indicators. The World Bank is responsible for collecting data for target 1A and target 8D.

United Nations Children's Fund (UNICEF)

UNICEF's own description of its nature and purpose: UNICEF is mandated by the United Nations General Assembly to advocate for the protection of children's rights, to help meet their basic needs and to expand their opportunities to reach their full potential. UNICEF is guided by the Convention on the Rights of the Child and strives to establish children's rights as enduring ethical principles and international standards of behaviour towards children. UNICEF responds in emergencies to protect the rights of children. In coordination with United Nations partners and humanitarian agencies, UNICEF makes its unique facilities for rapid response available to its partners to relieve the suffering of children and those who

provide their care. UNICEF is non-partisan and its cooperation is free of discrimination. In everything it does, the most disadvantaged children and the countries in greatest need have priority. UNICEF aims, through its country programmes, to promote the equal rights of women and girls and to support their full participation in the political, social, and economic development of their communities. UNICEF works with all its partners towards the attainment of the sustainable human development goals adopted by the world community and the realization of the vision of peace and social progress enshrined in the Charter of the United Nations.

UNICEF uses UN's MDG database. UNICEF is responsible for collecting data for goal 4 and indicators 1.8, 5.1, 5.2, 6.2, 6.3, 6.4, 6.7, 6.8. Together with WHO, UNICEF also collects data on indicators 5.5, 7.8 and 7.9.

*United Nations Department
of Economy and Social
Affairs (DESA)*

DESA's own description of its nature and purpose: The Department of Economic and Social Affairs promotes and supports international cooperation to achieve development for all, and assists governments in agenda-setting and decision-making on development issues at the global level. DESA provides a broad range of analytical products and policy advice that serve as valuable sources of reference and decision-making tools for developed and developing countries, particularly in translating global commitments into national policies and action and in monitoring progress towards the internationally agreed development goals, including the Millennium Development Goals.

DESA uses UN's MDG database. DESA is responsible for collecting data for indicators 5.3 and 5.4. Together with UNFPA, DESA also collects data on indicator 5.6

*United Nations Educational,
Scientific and Cultural
Organization (UNESCO)
Institute for Statistics*

UNESCO's own description of its nature and purpose: UNESCO - the United Nations Educational, Scientific and Cultural Organization (UNESCO) was founded on 16 November 1945. For this specialized United Nations agency, it is not enough to build classrooms in devastated countries or to publish scientific breakthroughs. Education, Social and Natural Science, Culture and Communication are the means to a far more ambitious goal: to build peace in the minds of men. Today, UNESCO functions as a laboratory of ideas and a standard-setter to forge universal agreements on emerging ethical issues. The Organization also serves as a clearinghouse – for the dissemination and sharing of information and knowledge – while helping Member States to build their human and institutional capacities in diverse fields. In short, UNESCO promotes international co-operation among its 193 (as of October 2007) Member States and six Associate Members in the fields of education, science, culture and communication. UNESCO is working to create the conditions for genuine dialogue based upon respect for shared values and the dignity of each civilization and culture. This role is critical, particularly in the face of terrorism, which constitutes an attack against humanity. The world urgently requires global visions of sustainable development based upon observance of human rights, mutual respect and the alleviation of poverty, all of which lie at the heart of UNESCO's mission and activities.

UNESCO uses UN's MDG database. UNESCO is responsible for collecting data for goal 2 and Indicator 3.1.

*United Nation
Environmental Programme
(UNEP) and UNEP World
Conservation Monitoring
Centre (UNEP-WCMC)*

UNEP's own description of its nature and purpose: Environmental development is key to achieving overall sustainable development. UNEP's work to promote environmental sustainability, the object of Millennium Development Goal 7, underpins global efforts to achieve all of the Goals agreed by world leaders at the Millennium Summit. UNEP supports assessments of environmental conditions and trends including building the capacity of its many partners to generate the information necessary for sound environmental decision making to support

sustainable development and the achievement of the Millennium Goals. UNEP's work encompasses:

- Assessing global, regional and national environmental conditions and trends.
- Developing international and national environmental instruments.
- Strengthening institutions for the wise management of the environment.
- Facilitating the transfer of knowledge and technology for sustainable development.
- Encouraging new partnerships and mind-sets within civil society and the private sector.

The UNEP World Conservation Monitoring Centre (UNEP-WCMC) is a collaboration between the [United Nations Environment Programme](#), the world's foremost intergovernmental environmental organization, and [WCMC 2000](#), a UK-based charity.

UNEP-WCMC Vision: A world where biodiversity counts

UNEP-WCMC Mission: To evaluate and highlight the many values of biodiversity and put authoritative biodiversity knowledge at the centre of decision-making

UNEP-WCMC Mandate: The Centre has a mandate from the UNEP Governing Council to provide a range of biodiversity-related services to UNEP, the biodiversity-related conventions and their constituent party-states and other bodies in the non-governmental and private sectors (Decision GC 22/1/III).

Other more specific mandates derive from the UNEP Governing Council, decisions taken by Conferences of the Parties to specific international conventions, the World Parks Congress and elsewhere.

UNEP is responsible for collecting data for indicator 7.3. UNEP-WCMC collects data on indicator 7.7. Together with WCMC and UNEP-WPDA collects data on 7.6

*United Nations Framework
Convention on Climate
Change (UNFCCC)*

Over a decade ago, most countries joined an international treaty -- the [United Nations Framework Convention on Climate Change](#) (UNFCCC) -- to begin to consider what can be done to reduce global warming and to cope with whatever temperature increases are inevitable. More recently, a number of nations approved an addition to the treaty: the [Kyoto Protocol](#), which has more powerful (and legally binding) measures. The [UNFCCC secretariat](#) supports all institutions involved in the climate change process, particularly the COP, the subsidiary bodies and their Bureau.

UNAIDS is responsible for collecting data for indicator 7.2.

*The United Nations Human
Settlements Programme
(UN-HABITAT)*

The United Nations Human Settlements Programme, UN-HABITAT, is the United Nations agency for human settlements. It is mandated by the UN General Assembly to promote socially and environmentally sustainable towns and cities with the goal of providing adequate shelter for all.

UN-HABITAT's strategic vision is anchored in a four-pillar strategy aimed at attaining the goal of Cities without Slums. This strategy consists of advocacy of global norms, analysis of information, field-testing of solutions and financing. These fall under the four core functions assigned to the agency by world governments - monitoring and research, policy development, capacity building and financing for housing and urban development.

UN-HABITAT is responsible for collecting data for indicator 7.10

*United Nations Population
Fund (UNFPA)*

UNFPA's own description of its nature and purpose: UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programmes to

reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect.

UNFPA uses the UN's MDG database. Together with DESA, UNFPA collects data on indicator 5.6

*World Health Organization
(WHO)*

The WHO's own description of its nature and purpose: WHO is the directing and coordinating authority for health within the United Nation's system. It is responsible for providing leadership on global health matters, shaping the health research agenda, setting norms and standards, articulating evidence-based policy options, providing technical support to countries and monitoring and assessing health trends. In the 21st century, health is a shared responsibility, involving equitable access to essential care and collective defence against transnational threats.

WHO does not have their own MDG database, but they have a database called Core Health Indicators that includes the indicators WHO is responsible for. WHO is responsible for collecting data for indicators 6.5, 6.9 and 6.10. Together with UNICEF, WHO also collects data on indicators 5.5, 7.8 7.9 and 8.13.

*Organisation for Economic
Co-operation and
Development/ The
Development Assistance
Committee (OECD/DAC)*

OECD brings together the governments of countries committed to democracy and the market economy from around the world to:

- Support sustainable economic growth
- Boost employment
- Raise living standards
- Maintain financial stability
- Assist other countries' economic development
- Contribute to growth in world trade

The organisation provides a setting where governments compare policy experiences, seek answers to common problems, identify good practice and coordinate domestic and international policies.

The Development Assistance Committee (DAC, www.oecd.org/dac) is the principal body through which the OECD deals with issues related to co-operation with developing countries

OECD/DAC is responsible for collecting data for targets 8A and 8B, and indicators 8.8 and 8.9.

*World Trade Organization
(WTO)*

The World Trade Organization (WTO) is the only global international organization dealing with the rules of trade between nations. At its heart are the WTO agreements, negotiated and signed by the bulk of the world's trading nations and ratified in their parliaments. The goal is to help producers of goods and services, exporters, and importers conduct their business.

WTO is responsible for collecting data for indicators 8.6 and 8.7.

1.2. Goal 1: Eradicate extreme poverty and hunger

The first millennium development goal is to eradicate extreme poverty and hunger, and consists of three targets:

1A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day

1B: Achieve full and productive employment and decent work for all, including women and young people

1C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger

The goal consists of 9 indicators.

Target 1A: Halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day

Target 1A is to halve, between 1990 and 2015, the proportion of people whose income is less than one dollar a day, and consists of three indicators:

Indicator 1.1 Proportion of people below \$1 (PPP) per day

Indicator 1.2 Poverty gap ratio

Indicator 1.3 Share of poorest quintile in national consumption

The measuring indicator for this target is indicator 1.1, while the other indicators measure the sustainability of the results.

Indicator 1.1 Proportion of people below \$1 (PPP) per day

UN definition and relevant divisions

The poverty rate at \$1.25 a day is the proportion of the population living on less than \$1.25 a day, measured at 2005 international prices, adjusted for purchasing power parity (PPP). Purchasing power parities (PPP) conversion factor, private consumption, is the number of units of a country's currency required to buy the same amount of goods and services in the domestic market as a US dollar would in the United States. This conversion factor is applicable to private consumption.

Division of indicator

The MDG indicator uses the international poverty line (\$1 (PPP) per day). Due to the release by the International Comparison Program, the World Bank postponed publishing poverty estimates using the international poverty line. The World Bank did publish numbers based on the national poverty line. According to the World Bank, the national population below national poverty line is defined as:

“...the percentage of the country's population living below the national poverty line. National estimates are based on population weighted subgroups estimates from household surveys.”

Due to different advantages and disadvantages of using the two poverty lines, we will include both of them in the database

Obtaining the international data

The indicator is produced by the World Bank Development Research Group, using nationally representative household surveys that are conducted by national statistical offices or by private agencies under the supervision of government or international agencies and obtained from government statistical offices and World Bank Group country departments. Only nationally representative surveys that are of good quality, contain sufficient information to produce a comprehensive consumption or income aggregate, and allow for the construction of a correctly weighted distribution of per capita consumption or income are used. As described above, poverty indicators are produced for each country based on an international comparable poverty line, enabling comparisons across countries. The World Bank has records from 675 household surveys covering 115 developing countries collected between 1979 and 2007. More than 1.2 million randomly sampled households were interviewed in these surveys, representing 96 percent of the population of developing countries. Not all these surveys are comparable in design and sampling methods. Non-representative surveys, though useful for some purposes, are excluded from the calculation of international poverty rates. There are 508 surveys for 115 countries used for deriving poverty estimates.

The basis for the data on national poverty level in Tanzania is global monitoring data, using expenditure based data from The Household Income and Expenditure Survey 1991-92 and Household Budget Survey (HBS) 2000-01. What is meant with expenditure data and the national source for the expenditure data is not defined. The documentation on how the data has been estimated based on these data is not available. The data on national poverty line is country adjusted data, but data source is not provided

National sources*NBS data*

Basic needs poverty line

2007: Household Budget Survey (HBS) 2007, table 7.2, page 49, basic need poverty line. Mainland Tanzania (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.

2001: Household Budget Survey (HBS) 2000/01, table 7.2, page 80, Mainland Tanzania (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.

1992: Household Budget Survey (HBS) 2000/01, table 7.2, page 80, Mainland Tanzania (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data. Original source is Household Budget Survey 1991-92. There is some evidence of under-reporting consumption expenditure in Dar es Salaam in the 1991-92 survey.

Administrative sources

There is no administrative data on this indicator.

Sources available on internet

www.nbs.go.tz: Household Budget Survey (HBS) 2007

Indicator 1.2 Poverty gap ratio

UN definition

Poverty gap is the mean shortfall of the total population from the poverty line (counting the non-poor as having zero shortfall), expressed as a percentage of the poverty line. This measure reflects the depth of poverty as well as its incidence. The indicator is often described as measuring the per capita amount of resources needed to eliminate poverty, or to reduce the poor's shortfall from the poverty line to zero, through perfectly targeted cash transfers. In the UN database, data reported with a value of 0.5 signify a poverty gap of less than 0.5 percent.

Obtaining International Data

The indicator is produced by the World Bank Development Research Group, using nationally representative household surveys that are conducted by national statistical offices or by private agencies under the supervision of government or international agencies and obtained from government statistical offices and World Bank Group country departments. Only nationally representative surveys that are of good quality, contain sufficient information to produce a comprehensive consumption or income aggregate, and allow for the construction of a correctly weighted distribution of per capita consumption or income are used. As described above, poverty indicators are produced for each country based on an international comparable poverty line, enabling comparisons across countries. The World Bank has records from 675 household surveys covering 115 developing countries collected between 1979 and 2007. More than 1.2 million randomly sampled households were interviewed in these surveys, representing 96 percent of the population of developing countries. Not all these surveys are comparable in design and sampling methods. Non-representative surveys, though useful for some purposes, are excluded from the calculation of international poverty rates. There are 508 surveys for 115 countries used for deriving poverty estimates.

The basis for the data on international poverty level is calculated through global monitoring data. The data used for Tanzania is global monitoring data, using expenditure based data from The Household Income and Expenditure Survey 1991-92 and Household Budget Survey 2000-01. What is meant with expenditure data and the national source for the expenditure data is not defined. The documentation on how the data has been estimated based on these data is not available.

National sources*NBS data*

2001: Household Budget Survey (HBS) 2000/01, table 7.2, page 80, basic need poverty gap. Mainland Tanzania. (national, rural). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.

1992: Household Budget Survey (HBS) 2000/01, table 7.2, page 80, basic need poverty line. Mainland Tanzania (national, rural). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data. Original source is Household Budget Survey 1991-92. There is some evidence of under-reporting consumption expenditure in Dar es Salaam in the 1991-92 survey

Administrative sources

There is no data on this indicator from administrative data.

Sources available on internet

www.nbs.go.tz: Household Budget Survey (HBS) 2007

Indicator 1.3 Share of poorest quintile in national consumption

UN definition

The poorest quintiles' percentage share of national income or distribution is the share that accrues to the bottom fifth (quintile) of the population.

Obtaining International Data

The World Bank Development Research Group produces the indicator using nationally representative household surveys that are conducted by national statistical offices or by private agencies under the supervision of government or international agencies and obtained from government statistical offices and World Bank Group country departments. For most countries the income distribution indicators are based on the same data used to derive the \$1.25 a day poverty estimates. The World Bank is developing a time series database of distributional information. At present, only data for the most recent year and for surveys determined to be nationally representative are reported in the World Bank database. To allow comparability across countries, measures are estimated from the primary data source (tabulations or household level data) using a consistent method of estimation rather than relying on existing estimates. The estimation from tabulations requires an interpolation method. Parameterized Lorenz curves with flexible functional forms are mainly used.

The data used in Tanzania is global monitoring data, using expenditure based data from The Household Income and Expenditure Survey 1991-92 and Household Budget Survey 2000-01. What is meant with expenditure data and the national source for the expenditure data is not defined. The documentation on how the data has been estimated based on these data is not available.

National sources*NBS data*

2007: Household Budget Survey (HBS) 2007, table 7.5, page 52, Mainland Tanzania (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.

2001: Household Budget Survey 2000/01, table 7.5, page 83, Mainland Tanzania(national, rural, urban). Indicator is 6.9 percent, but was changed to 7.1 in the 2007 Household Budget Survey report due to a printing error in the earlier report.

1992: Household Budget Survey (HBS) 2000/01, table 7.5, page 83, Mainland Tanzania . Not comparable to later calculations. (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data. Original source is Household Budget Survey 1991- 92. There is some evidence of under-reporting consumption expenditure in Dar es Salaam in the 1991-92 survey.

Administrative sources

There is no data on this indicator from administrative sources

Sources available on internet

www.nbs.go.tz: Household Budget Survey (HBS) 2007

Target 1B: Achieve full and productive employment and decent work for all, including women and young people

Target 1B is to achieve full and productive employment and decent work for all, including women and young people, and consists of four indicators

Indicator 1.4 Growth rate of GDP per person employed

Indicator 1.5 Employment-to-population ratio

Indicator 1.6 Proportion of employed persons living below \$1 (PPP) per day

Indicator 1.7 Proportion of own-account and contributing family workers in total employment

Target 1B was added in 2008 after a review of the MDGs.

Indicator 1.4 Growth rate of GDP per person employed

UN definition

The growth rate of GDP per person employed or labour productivity is defined as the growth rate of output per unit of labour input. Output is measured as “value added”, which is the total production value minus the value of intermediate inputs, such as raw materials, semi-finished products, services purchased and energy inputs. Value added, called “gross domestic product” (GDP) in the National Accounts, represent the compensation for input of services from capital (including depreciation) and labour directly engaged in the production. Labour input is defined as number of persons involved.

Obtaining International Data

ILO gathers data to estimate the indicators from international data repositories managed by various international organisations. It rarely collects information directly from national sources. The estimates for the aggregate economy are derived from the Total Economy Database of The Conference Board (TCB) and the Groningen Growth and Development Centre (GGDC) (University of Groningen, the Netherlands). TCB and GGDC have long-standing expertise in developing and analysing data on productivity performance. Complete documentation of sources and methods by country and underlying documentation on the use of PPPs, etc. can be downloaded from the website of the Groningen Growth and Development Centre <http://www.ggdc.net/>. For other countries outside of the OECD, the national accounts and labour statistics assembled from national sources by international organizations such as the World Bank, the Asian Development Bank, the Food and Agriculture Organization (FAO), the ILO and the United Nations Statistical Office, are mostly taken as the point of departure. In individual cases use has also been made of national accounts statistics. The total economy series are linked to a benchmark estimate of GDP at market prices in US dollars for 1990 from Maddison (2003, op. cit.). Maddison’s dollar estimates are based on purchasing power parities for GDP. The original PPPs were obtained from the ICP. The PPPs for the total economy used by Maddison represent multilaterally weighted PPPs. Multilateralization implies that the weights of all economies are used to obtain the aggregate PPPs, which makes comparisons between economies fully transitive, i.e. comparisons between economies A and B and economies B and C equal a comparison between economies A and C. The year 1990 was chosen because it is still the latest for which a reasonably comprehensive and reliable set of PPPs can be obtained for a largest possible range of economies in the world economy. The multilateral weighting system for the aggregate economy is the Geary-Khamis system, which essentially weighs PPPs for each country on the basis of its relative size in terms of GDP.

Whenever information was available from more than one repository, the information and background documentation from each repository was reviewed in order to select the information most suitable for inclusion, based on an assessment of the general reliability of the sources, the availability of methodological information and explanatory notes regarding the scope of coverage, the availability of information by sex and age, and the degree of historical coverage. Occasionally, two data repositories have been chosen and presented for a single country; any resulting breaks in the historical series are duly noted. For countries with less-developed labour market information systems, such as those in the developing economies, information may not be easily available. Many of these countries, however, do collect labour market information through household and establishment surveys, population censuses and administrative records. Limitations to comparability are often indicator-specific; however, there are standard issues that require attention with every indicator. For example, the precision of the measurements made for each country and year, and systematic differences in the type of source, related to the methodology of collection, definitions, scope of coverage and reference period, will certainly affect comparisons. In order to minimize misinterpretation, detailed notes are provided that identify the repository, type of source (household and labour force surveys, censuses, administrative records, and so on), and changes or deviations in coverage, such as age groups and geographical coverage (national, urban, rural, capital city and so on).

There is no data on growth rate of GDP per person employed in Tanzania in the UN database.

The World Bank data on growth rate of GDP per person employed are from the World development indicators database (WDI) from 2009, but the source are not given.

National sources

NBS data

No data on this indicator from surveys or census

Administrative sources

No data on this indicator from administrative sources

Indicator 1.5 Employment-to-population ratio

UN definition

The employment-to-population ratio is the proportion of a country's working-age population that is employed. Employment is defined as persons above a specific age who perform any work at all, in the reference period, for pay or profit (or pay in kind), or were temporarily absent from a job for such reasons as illness, maternity or paternal leave, holiday, training or industrial dispute. Unpaid family workers who work for at least one hour should be included in the count of employment, although many countries use a higher hour limit in their definition. For most countries, the working age population is defined as persons 15 years and older, although this may vary slightly from country to country.

Obtaining International Data

The ILO has made an intensive effort to assemble data on labour market indicators for as many countries, areas and territories as possible. Where there is no information for a country, it is usually because the country involved was not in a position to provide information for the indicator. Even when information for an indicator was available, it may not have been sufficiently current or may not have met other qualifications established for inclusion in the Key Indicators of the Labour Market (KILM), on which the information for the employment-to-population rate is based. In compiling the KILM, the ILO concentrates on bringing together information from international repositories. In other words, the KILM team rarely collects information directly from national sources, but rather takes

advantage of existing compilations held by various organizations, such as the following:

- International Labour Office (Bureau of Statistics)
- United Nations Statistics Division
- Organisation for Economic Co-operation and Development (OECD)
- World Bank
- United Nations Industrial Development Organization (UNIDO)
- Statistical Office of the European Union (EUROSTAT)
- United Nations Educational, Scientific and Cultural Organization (UNESCO)
- United States Bureau of Labor Statistics (BLS)

Information maintained by these organizations has generally been obtained from national sources or is based on official national publications. Whenever information was available from more than one repository, the information and background documentation from each repository was reviewed in order to select the information most suitable for inclusion, based on an assessment of the general reliability of the sources, the availability of methodological information and explanatory notes regarding the scope of coverage, the availability of information by sex and age, and the degree of historical coverage. Occasionally, two data repositories have been chosen and presented for a single country; any resulting breaks in the historical series are duly noted. For countries with less-developed labour market information systems, such as those in the developing economies, information may not be easily available. Many of these countries, however, do collect labour market information through household and establishment surveys, population censuses and administrative records, so that the main problem remains the communication of such information to the global community. In this situation, the ILO Labour Market Indicators Library (LMIL) programme was used. The LMIL is a system for sharing information between the ILO regional offices and headquarters. ILO regional offices are closer to the original micro-sources of data and have therefore been successful in filling in numerous gaps where data at headquarters – used in the production of the KILM – had not existed. It is an ongoing programme that continues to assist the KILM and other ILO publications and research programmes in the expansion of its country and yearly coverage of indicators.

The UN data on employment-to-population ratio is estimated. The basic data for the estimates are not provided, and there is no documentation on how the data has been estimated. There is no information on what, if any, national data has been used.

National sources

NBS data

- 2007: Household Budget Survey (HBS) 2007, table 5.1, page 35, Mainland Tanzania (national, rural). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.
- 2006: Integrated Labour Force Survey (ILFS) 2006, Key finding for Integrated labour Force Survey, page 6. Mainland Tanzania (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.
- 2001: Integrated Labour Force Survey (ILFS) 2000/01, Analytical Report, table 3.1, page 24. Estimated. Integrated Labour Force Survey 2006, Key findings for Integrated labour Force Survey, page 6 Mainland Tanzania (national, rural, urban). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.
- 1991: Integrated Labour Force Survey (ILFS) 2006, Key findings for Integrated labour Force Survey, page 6. Original source Integrated Labour Force Survey 1990-91.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Household Budget Survey (HBS) 2007, Integrated Labour Force Survey (ILFS) 2006, Integrated Labour Force Survey 2000-01

Indicator 1.6 Proportion of employed persons living below \$1 (PPP) per day

UN definition

The proportion of employed persons living below \$1 (PPP) per day, or working poor, is the share of individuals who are employed, but nonetheless live in a household whose members are estimated to be living below the international poverty line of \$1 (PPP) per day.

Obtaining International Data

The ILO has made an intensive effort to assemble data on labour market indicators for as many countries, areas and territories as possible. Where there is no information for a country, it is usually because the country involved was not in a position to provide information for the indicator. Even when information for an indicator was available, it may not have been sufficiently current or may not have met other qualifications established for inclusion in the Key Indicators of the Labour Market (KILM), on which the information for working poverty is based. In compiling the KILM, the ILO concentrates on bringing together information from international repositories. In other words, the KILM team rarely collects information directly from national sources, but rather takes advantage of existing compilations held by various organizations, such as the following:

- International Labour Office (Bureau of Statistics)
- United Nations Statistics Division
- Organisation for Economic Co-operation and Development (OECD)
- World Bank
- United Nations Industrial Development Organization (UNIDO)
- Statistical Office of the European Union (EUROSTAT)
- United Nations Educational, Scientific and Cultural Organization (UNESCO)
- United States Bureau of Labor Statistics (BLS)

Information maintained by these organizations has generally been obtained from national sources or is based on official national publications. Whenever information was available from more than one repository, the information and background documentation from each repository was reviewed in order to select the information most suitable for inclusion, based on an assessment of the general reliability of the sources, the availability of methodological information and explanatory notes regarding the scope of coverage, the availability of information by sex and age, and the degree of historical coverage. Occasionally, two data repositories have been chosen and presented for a single country; any resulting breaks in the historical series are duly noted. For countries with less-developed labour market information systems, such as those in the developing economies, information may not be easily available to policy-makers and the social partners, and even less so to international organizations seeking to compile global data sets. Many of these countries, however, do collect labour market information through household and establishment surveys, population censuses and administrative records, so that the main problem remains the communication of such information to the global community. In this situation, the ILO Labour Market Indicators Library (LMIL) programme is used. The LMIL is a system for sharing information between the ILO regional offices and headquarters. ILO regional offices are closer to the original micro-sources of data and have therefore been successful in filling in numerous gaps where data at headquarters – used in the production of the KILM – had not existed. It is an ongoing programme that continues to assist the KILM and other ILO publications and research programmes in the expansion of its country and yearly coverage of indicators.

The data on proportion of employed persons living below \$1 (PPP) per day is calculated through global monitoring data. There is no documentation on what national data, if any, that forms the basis of the calculation. Nor is there any documentation on how the calculations are made.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

*Indicator 1.7 Proportion of
own-account and
contributing family workers
in total employment*

UN definition

Vulnerable employment is defined as the sum of the employment status groups of own-account workers and contributing family workers. Own-account workers are those workers who, working on their own accounts or with one or more partners, hold the type of jobs defined as a self-employed jobs (i.e. remuneration is directly dependant upon the profits derived from the goods and services produced), and have not engaged on a continuous basis any employees to work for them during the reference period. Contributing family workers, also known as unpaid family workers, are those workers who are self-employed, as own-account workers in a marked-oriented establishment operated by a related person living in the same household.

Obtaining International Data

In compiling the KILM, the ILO concentrates on bringing together information from international repositories. In other words, the KILM team rarely collects information directly from national sources, but rather takes advantage of existing compilations held by various organizations, such as the following:

- International Labour Office (Bureau of Statistics)
- United Nations Statistics Division
- Organisation for Economic Co-operation and Development (OECD)
- World Bank
- United Nations Industrial Development Organization (UNIDO)
- Statistical Office of the European Union (EUROSTAT)
- United Nations Educational, Scientific and Cultural Organization (UNESCO)
- United States Bureau of Labor Statistics (BLS)

Most of the information for the indicator Status in Employment is gathered from three international repositories of labour market data: (a) the ILO Bureau of Statistics, Yearbook of Labour Statistics (LABORSTA) database, (b) the Organisation for Economic Co-operation and Development (OECD); and the ILO Labour Market Indicators Library (LMIL). Additional documentation regarding national practices in the collection of statistics is provided in ILO: *Sources and Methods: Labour Statistics*, Vol. 3: *Economically Active Population, Employment, Unemployment and Hours of Work (Household Surveys)*; Vol. 5: *Total and Economically Active Population, Employment and Unemployment (Population Censuses)*. The *Sources and Methods* are available online at the country level on website: <http://laborista.ilo.org>. Information maintained by these organizations has generally been obtained from national sources or is based on official national publications.

Whenever information was available from more than one repository, the information and background documentation from each repository was reviewed in order to select the information most suitable for inclusion, based on an assessment of the general reliability of the sources, the availability of methodological information and explanatory notes regarding the scope of coverage, the availability of information by sex and age, and the degree of historical coverage. Occasionally,

two data repositories have been chosen and presented for a single country; any resulting breaks in the historical series are duly noted. For countries with less-developed labour market information systems, such as those in the developing economies, information may not be easily available to policy-makers and the social partners, and even less so to international organizations seeking to compile global data sets. Many of these countries, however, do collect labour market information through household and establishment surveys, population censuses and administrative records, so that the main problem remains the communication of such information to the global community. In this situation, the ILO Labour Market Indicators Library (LMIL) programme is used. The LMIL is a system for sharing information between the ILO regional offices and headquarters. ILO regional offices are closer to the original micro-sources of data and have therefore been successful in filling in numerous gaps where data at headquarters – used in the production of the KILM – had not existed. It is an ongoing programme that continues to assist the KILM and other ILO publications and research programmes in the expansion of its country and yearly coverage of indicators

The data on proportion of own-account and contributing family workers in total employment is based on country data. The data from Tanzania is from “household or labour force type survey), includes persons 10 years and older (2001) or 15 years and older (2006). The data excludes Zanzibar.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 1C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger

Target 1C is to halve, between 1990 and 2015, the proportion of people who suffer from hunger, and consists of two indicators:

Indicator 1.8 Prevalence of underweight children under five years of age

Indicator 1.9 Proportion of population below minimum level of dietary energy consumption

Indicator 1.8 Prevalence of underweight children under five years of age

UN definition

Prevalence of (moderate or severely) underweight children is the percentage of children aged 0-59 months whose weight for age is less than two standard deviations below the median weight for the age of the international reference population. The international reference population, often referred to as the NCHS/WHO reference population, was formulated by the National Center for Health Statistics (NCHS) as a reference for the United States and later adopted by the World Health Organization (WHO). The NCHS/WHO reference standard represent the distribution of height and weight by age and sex in a well-nourished population, 2.3 percent of the population fall below minus two standard deviations. A new standard reference population, the WHO Child Growth Standards, was released in April 2006 and is also being used to estimate underweight prevalence.

$$\% \text{ of children under 5 that are underweight} = \frac{\text{Number of children under five that fall below} \\ \text{minus two standard deviations from the median} \\ \text{weight for age of the NCHS/WHO standard}}{\text{Total number of children under} \\ \text{age five that were weighted}} * 100$$

Obtaining International Data

At the national level, data are generally available from national household surveys, including Demographic and Health Surveys, Multiple Indicator Cluster Surveys and national nutrition surveys. For international comparisons and global or regional monitoring, the United Nations Children's Fund (UNICEF) and WHO compile international data series and estimates based on data from national surveys.

The data on prevalence of underweight children under five years of age is based on country data. For Tanzania the data is from the Demography and Health Survey (DHS) 1991-92, 1996, 1999 and 2004-05.

National sources*NBS data*

2004: Demography and Health Survey (DHS) 2004-05, table 11.11, page 199 and Appendix F table, page 381 (national, rural/urban, female/male). Moderately underweight.

1999: Reproductive and Child Health Survey (RCHS) 1999, tables 9.5 and 9.6, page 122. (national, rural/urban, female/male). Moderately underweight.

1996: Demography and Health Survey (DHS) 1996, table 9.5, page 129 (national, rural/urban, female/male).

1992: Demography and Health Survey (DHS) 1991-92, table 9.9, page 109 (rural/urban) and table 9.8, page 108 (national female/male).

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

General DHS site:

http://www.measuredhs.com/countries/country_main.cfm?ctry_id=39&c=Tanzania

Indicator 1.9 Proportion of population below minimum level of dietary energy consumption

UN definition

The proportion of the population below the minimum level of dietary energy consumption referred to as the prevalence of undernourishment, is the percentage of the population that is undernourished or food deprived. The undernourished or food deprived are those individuals whose food intake falls below the minimum level of dietary energy requirement.

Obtaining International Data

Data are provided by National Statistical Offices, Ministries of Agriculture and other national institutions in charge of preparing national food balances or engaged in national food security. Data for the calculation of the indicator consist of:

- Food production
- Food trade
- Other information within the framework of the food supply and utilization accounts for the preparation of food balance sheets to estimate of food availability for human consumption (private and public)
- Means of dietary energy consumption (private consumption) on per person per day basis by income or total expenditure levels (deciles of per person income or total expenditure) derived from National Household Surveys collecting food consumption data (private consumption)
- Means of attained heights by sex and age-groups derived from National Anthropometric Surveys
- Population and sex and age population structure as compiled and disseminated by the UN Population Division using country data

The accuracy of dietary energy consumption estimates varies from country to country. Evaluation of accuracy consists both of internal and external consistency checks, based on a complete revision of all related information (underlying

concepts, definitions and methods of obtaining data comparisons with other related supplementary information).

Country data on changes of the variance of the distribution of dietary energy consumption in the population have been very limited during the last three decades due to the insufficient utilization of food consumption data in quantities collected in national household surveys which need to be converted to dietary energy consumption. The dietary energy consumption due to income levels may change over time; hence the variance of dietary energy consumption. Data on height secular trends by sex and age-groups are scarce since countries are not conducting regular anthropometric surveys in the total population but are limited to the child population for nutritional status assessment so that publications are limited to estimates of the prevalence of under-nutrition. Data on sex and age group population structure is updated periodically on the basis of UN Population Division estimates so that changes in both the minimum dietary energy consumption and the variance of dietary energy consumption induced by changes in sex-age population structure are taken into account. FAO has considered the estimate of the variance of the distribution of dietary energy consumption from two sources of variation: first the variation of energy consumption due to biological factors such as age, sex, height and physical activity level, and second, the variation energy consumption due to income levels

The data on prevalence of proportion of population below minimum level of dietary energy consumption is calculated by Global monitoring data. The data is based on three years averages, but there is no documentation on what source the averages are based on. There is no documentation on what, if any, national data has been used.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

1.3. Goal 2: Achieve universal primary education

The second millennium development goal is to achieve universal primary education. This goal consists of one target, to ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course by primary schooling, and three indicators.

Target 2A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course by primary schooling

Target 2A is to ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course by primary schooling, and is the only target under goal two. It consists of three indicators:

Indicator 2.1 Net enrolment ratio in primary education

Indicator 2.2 Proportion of pupils starting grade 1 who reach last grade of primary

Indicator 2.3 Literacy rate of 15-24-year-olds, women and men

The measuring indicator for this target is indicator 2.1, while the other indicators measure the sustainability of the results.

Indicator 2.1 Net enrolment ratio in primary education

UN definition

Net primary enrolment rate in primary education is the number of children of official primary school age (according to ISCED97¹) who are enrolled in primary education as a percentage of the total children of the official school age population. Total net primary enrolment rate also includes children of primary school age enrolled in secondary education. Where more than one system of primary education exists within the country the most widespread or common structure is used for determining the official school age group.

Obtaining International Data

The UIS produces time series based on enrolment data reported by education ministries or national statistical offices and UN population estimates. These data are gathered through questionnaires sent annually to countries which are typically completed by ministries of education and/or national statistical offices. Countries are asked to report data according to the levels of education defined in ISCED97 to ensure international comparability of resulting indicators. The data received by UIS are validated using electronic error detection systems that check for arithmetic errors & inconsistencies and trend analysis for implausible results. Queries are taken up with the country representatives reporting the data so that corrections can be made (of errors) or explanations given (of implausible but correct results). In addition, countries also have an opportunity to see and comment on the main indicators the UIS produces in an annual “country review” of indicators. National data derived from administrative records are not necessarily based on the same classification over time and may not be comparable with data for other countries, unless exactly the same classification is used. Enrolments data compiled by UNESCO are then adjusted to be consistent with the ICSCED1997 and are therefore comparable across countries.

The UIS also, if necessary, adjusts nationally reported data in order to take account either of under-reporting (i.e. data gaps) or over-reporting (i.e. inclusion of education programmes not covered by its surveys) before calculating indicators. In such cases, the results – if published – will normally be designated as UIS estimates.

The data on net enrolment ratio in primary education for Tanzania is from country data, except for the years 1991, 2000 and 2003 when the data was estimated. However, there is no documentation on what national data UNESCO has utilized.

National sources

NBS data

2007: Household Budget Survey (HBS) 2007, table 4.4 page 23, Mainland Tanzania (national, rural/urban, female/male). Attendance ratio. Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.

2004: Demography and Health Survey (DHS) 2004-05, table 2.5.1, page 17 and table 2.5.2, page 18 for Secondary School. Attendance ratio. Tanzania (national, rural/urban, female/male). Attendance ratio.

2002: Population and Housing Census (PHC) 2002, table 5.8, page 59, Analytical Report, Attendance ratio. The data for female/male and urban/rural can be recalculated from raw data

2001: Household Budget Survey (HBS) 2000/01, table 4.4, page 36. Attendance ratio. Mainland Tanzania (national, rural/urban, female/male). Urban is separated into Dar es Salaam and other urban areas. Can be recalculated from raw data.

¹ *International Standard Classification of Education (ISCED 97)*. Primary education is defined by ISCED97 as programmes normally designed on a unit or project basis to give pupils a sound basic education in reading, writing and mathematics along with an elementary understanding of other subjects such as history, geography, natural science, art and music.

1999: Reproductive and Child Health Survey (RCHS) 1999, table 2.7, page 17, Mainland Tanzania (national, rural/urban, female/male). Attendance ratio.

Administrative sources

For Male, Female and Total;

- 2009: Basic Education Statistics in Tanzania (BEST) 2005 – 2009, page 23, table 2.7.
- 2008: Basic Education Statistics in Tanzania (BEST) 2004 – 2008, page 18, table 2.4.
- 2007: Basic Education Statistics in Tanzania (BEST) 2003 – 2007, page 23, table 2.7. Poverty and Human Development Reports (PHDR) 2007, Figure 7, page 25, but the original source is from the Basic Education Statistics in Tanzania (BEST) as per PHDR report.
- 2006: Basic Education Statistics in Tanzania (BEST) 2002 – 2006, page 16, table 2.4. Poverty and Human Development Reports (PHDR) 2007, Figure 7, page 25, but the original source is from the Basic Education Statistics in Tanzania (BEST) as per PHDR report.
- 2005: Basic Education Statistics in Tanzania (BEST) 1995 – 2005, page 24, table 2.5. Poverty and Human Development Reports (PHDR) 2007, Figure 7, page 25, but the original source is from the Basic Education Statistics in Tanzania (BEST) as per PHDR report.
- 2004: Basic Education Statistics in Tanzania (BEST) 1995 – 2004, page 22, table 2.5. Poverty and Human Development Reports (PHDR) 2005, Appendix C, Table C.1, page 115. Original source is from various reports of Basic Statistics Education.
- 2003: Basic Education Statistics in Tanzania (BEST) 1999 – 2003, page 8, table 1.5. Poverty and Human Development Reports (PHDR) 2005, Appendix C, Table C.1, page 115. Original source is from various reports of Basic Statistics Education.
- 2002: Basic Education Statistics in Tanzania (BEST) 1998 – 2002, page 8, table 1.5. Poverty and Human Development Reports (PHDR) 2005, Appendix C, Table C.1, page 115. Original source is from various reports of Basic Statistics Education.
- 2001: Basic Education Statistics in Tanzania (BEST) 1997 – 2001, page 8, table 1.5. Poverty and Human Development Reports (PHDR) 2005, Appendix C, Table C.1, page 115. Original source is from various reports of Basic Statistics Education.
- 2000: Basic Education Statistics in Tanzania (BEST) 1996 – 2000, page 8, table 1.5.
- 1999: Basic Education Statistics in Tanzania (BEST) 1995 – 1999, page 8, table 1.5.
- 1998: Basic Education Statistics in Tanzania (BEST) 1994 – 1998, page 8, table 1.5. Rounded numbers. Exact numbers in Basic Education Statistics in Tanzania (BEST) 2004 – 2008
- 1997: Basic Education Statistics in Tanzania (BEST) 1993 – 1997, page 8, table 1.5.
- 1996: Basic Education Statistics in Tanzania (BEST) 1992 – 1996, page 8, table 1.5.
- 1995: Basic Education Statistics in Tanzania (BEST) 1991 – 1995, page 8, table 1.5.
- 1994: Basic Education Statistics in Tanzania (BEST) 1990 – 1994, page 8, table 1.5.
- 1993: Basic Education Statistics in Tanzania (BEST) 1989 – 1993, page 8, table 1.5.
- 1992: Basic Education Statistics in Tanzania (BEST) 1988 – 1992, page 8, table 1.5.
- 1991: Basic Education Statistics in Tanzania (BEST) 1987 – 1991, page 8, table 1.5.

1990: Basic Education Statistics in Tanzania (BEST) 1986 – 1990, page 8, table 1.5.

Sources available on internet

www.nbs.go.tz: Household Budget Survey (HBS) 2007

www.moe.go.tz: Ministry of Education

Indicator 2.2 Proportion of pupils starting grade 1 who reach last grade of primary

UN definition

The proportion of pupils starting grade 1 who reach last grade of primary education, known as Survival Rate to last Grade of Primary, is the percentage of a cohort of pupils enrolled in grade 1 of the primary level of education of in a given school year who are expected to reach the last grade of primary school, regardless of repetition. Primary definition is defined by the International Standard Classification of Education (ISCED97) as programmes normally designed on a unit or project basis to give pupils a sound basic education in reading, writing and mathematics along with an elementary understanding of other subjects such as history, geography, natural science, art and music.

Obtaining International Data

The UNESCO Institute for Statistics (UIS) produces time series on school enrolment and repeaters based on data reported by education ministries or national statistical offices. These data are gathered through questionnaires sent annually to countries which are typically completed by ministries of education and/or national statistical offices. Countries are asked to report data according to the levels of education defined in ISCED97 to ensure international comparability of resulting indicators.

The data received by UIS are validated using electronic error detection systems that check for arithmetic errors & inconsistencies and trend analysis for implausible results. Queries are taken up with the country representatives reporting the data in order that corrections can be made (of errors) or explanations given (of implausible but correct results). In addition, countries also have an opportunity to see and comment on the main indicators the UIS produces in an annual “country review” of indicators. The UIS also, if necessary, adjusts nationally reported data in order to take account either of under-reporting (i.e. data gaps) or over-reporting (i.e. inclusion of education programmes not covered by its surveys) before calculating indicators. In such cases, the results – if published – will normally be designated as UIS estimates.

The data on proportion of pupils starting grade 1 who reach last grade of primary is different in the countries in question. For Tanzania, the data is estimated for 2006, otherwise they are country data. There is no documentation on what national data has been used, and method used for estimation.

National sources

NBS data

2004: Demography and Health Survey (DHS) 2004-05, Appendix F table, page 381 (national, male/female). Pupils starting grade 1 who reach grade 5. Attendance ratio.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

Indicator 2.3 Literacy rate of 15-24-year-olds, women and men

UN definition

Literacy rate of 15-24 year-olds, or the youth literacy rate, is the percentage of the population aged 15-24 years who can both read and write with understanding a short simple statement on everyday life.

Obtaining the international data

The UIS collects global literacy data on an annual basis and updates its statistics twice a year, in April and September. These data are based on observed data reported by countries and territories. Countries and territories are asked to respond to a questionnaire that collects information and data on literacy. The survey package typically consists of the literacy questionnaire and supporting documentation. The primary respondent is the National or Territorial Statistical Office (or equivalent agency) within each respective country and territory.

Data collected: these consist of the counts of the literacy status (total, literate, illiterate and not specified) for the population 10 years of age and older by geography (national, urban, and rural), age group (five-year age groups and age unknown) and sex (total, male and female). The questionnaire also includes a set of metadata questions that are asked in order for the UIS and data users to better understand and interpret the literacy data provided as well as forming part of the basis for the selection criteria.

Population and housing censuses are the primary source of basic literacy data. These data are usually collected together with other household characteristics concerning an individual's educational, demographic and socio-economic status. These literacy data are generally based on self-declaration (i.e. one person, usually the head of the household, indicates whether each member of the household is literate or not). The literacy definition may vary from one country to another. National sample surveys are a second source of literacy data and involve the use of a literacy variable in a household or individual sample survey. These surveys are often designed to meet immediate data needs and do not always include systematic strategies for future repeats. So even though they may provide timely data, they may not always be a consistently reliable source over time. International sample surveys, such as UNICEF's Multiple Indicator Cluster Surveys (MICS), are a third source and involve the use of a literacy variable in a household or individual sample survey. These surveys are designed to meet commonly agreed upon international data needs while also providing data for national policy purposes. These surveys are implemented on a regular basis in selected countries globally. They aim to assure cross-national comparability although they often integrate national modules to suit specific country data needs. Modules from international surveys are sometimes added to other on-going national sample surveys. To read more about the details, see <http://mdgs.un.org/unsd/mdg/Metadata.aspx>. The international comparability of literacy statistics has been improved in two ways by the UIS. First, by the fact that the data being reported are from data sources that have a similar methodology. Second, UN population estimates are used to calculate the number of literates and illiterates. These estimates are used because they are produced by UNDP using the same methodology and assumptions across countries. When UN population estimates are not available, national population estimates are used.

UNDP provides population estimates by single years of age for countries and territories with populations of 80,000 persons and greater. For countries or territories having a population of less than 80,000 persons, national country population data, when available, are used.

The UN data on literacy rate of 15-24-year-olds, women and men is partially country based (2002) and partially modelled (2007). There is no documentation on what national data has been utilized, nor is there any documentation on how the data has been modelled.

National sources

NBS data
National

- 2007: Household Budget Survey (HBS) 2007. Table 4.3 page 22. Age reference group 15 years and above. Mainland Tanzania.
- 2002: Population and Housing Census (PHC) 2002, table 5.3, page 53 Analytical Report
- 2000: Household Budget Survey (HBS) 2007. Table 4.3 page 22. Age reference group 15 years and above. Mainland Tanzania.

Female

- 2007: Household Budget Survey (HBS) 2007. Table 4.3 page 22. Age reference group 15 years and above. Mainland Tanzania.
- 2004: Demography and Health Survey (DHS) 2004-05, Appendix F table, page 381
- 2002: Population and Housing Census (PHC) 2002, table 5.3, page 53 Analytical Report.
- 2000: Household Budget Survey (HBS) 2007. Table 4.3 page 22. Age reference group 15 years and above. Mainland Tanzania.

Male

- 2007: Household Budget Survey (HBS) 2007. Table 4.3 page 22. Age reference group 15 years and above. Mainland Tanzania.
- 2004: Demography and Health Survey (DHS) 2004-05, Appendix F table, page 381
- 2002: Population and Housing Census (PHC) 2002, table 5.3, page 53 Analytical Report
- 2000: Household Budget Survey (HBS) 2007. Table 4.3 page 22. Age reference group 15 years and above. Mainland Tanzania.

Rural-Urban

- 2002: Population and Housing Census (PHC) 2002, table 5.5, page 55. Analytical Report.

1.4. Goal 3: Promote gender equality and empower women

The third millennium development goal is to promote gender equality and empower women. This goal consists of one target, to eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels no later than 2015, and three indicators.

Target 3A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels no later than 2015

Target 3A is to eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels no later than 2015, and is the only target under goal three. It consists of three indicators:

Indicator 3.1 Ratios of girls to boys in primary, secondary and tertiary education

Indicator 3.2 Share of women in wage employment in the non-agricultural sector

Indicator 3.3 Proportion of seats held by women in national parliament

The measuring indicator for this target is indicator 3.1, while the other indicators measure the sustainability of the results.

Indicator 3.1 Ratios of girls to boys in primary, secondary and tertiary education

UN definition

Ratio of girls to boys (gender parity index) in primary, secondary and tertiary education is the ratio of the number of female students enrolled in primary, secondary and tertiary education to the number of male students in each level. To standardise the effects of the population structure of the appropriate age groups, the Gender Parity Index (GPI) of the Gross Enrolment Ratio (GER) for each level of education is used. The GER is the number of pupils enrolled in a given level of

education, regardless of age, expressed as a percentage of the populations in the theoretical age group for the same level of education.

Division of indicator

The indicator has three sub indicators:

- Gender parity index in primary level enrolment
- Gender parity index in secondary level enrolment
- Gender parity index in tertiary level enrolment

Obtaining International Data

The UNESCO Institute for Statistics (UIS) produces time series based on enrolments reported by education ministries or national statistical offices and UN population estimates. These data are gathered through questionnaires sent annually to countries which are typically completed by ministries of education and/or national statistical offices. Countries are asked to report data according to the levels of education defined in ISCED97 to ensure international comparability of resulting indicators. The data received by UIS are validated using electronic error detection systems that check for arithmetic errors & inconsistencies and trend analysis for implausible results. Queries are taken up with the country representatives reporting the data in order that corrections can be made (of errors) or explanations given (of implausible but correct results). In addition, countries also have an opportunity to see and comment on the main indicators the UIS produces in our annual “country review” of indicators. The UIS also, if necessary, adjusts nationally reported data in order to take account either of under-reporting (i.e. data gaps) or over-reporting (i.e. inclusion of education programmes not covered by its surveys) before calculating indicators. In such cases, the results – if published – will normally be designated as UIS estimates.

The UN data on ratios of girls to boys in primary, secondary and tertiary education for Tanzania is partly country data. There is, however, no documentation on what national data is utilized.

National sources

NBS data

Primary

2004: Demography and Health Survey (DHS) 2004-05, table 2.5.1, page 17, indicator based on attendance.

Secondary

2004: Demography and Health Survey (DHS) 2004-05, table 2.5.2, page 18, indicator based on attendance.

Tertiary

2004: Demography and Health Survey (DHS) 2004-05, page 381, indicator based on attendance.

Administrative sources

Gender parity index in primary level enrolment

2009: Basic Education Statistics in Tanzania (BEST) 2005 – 2009, page 24, table 2.8. Mainland Tanzania. Net gender parity index.

2008: Basic Education Statistics in Tanzania (BEST) 2004 – 2008, page 24, table 2.8. Mainland Tanzania. Net gender parity index.

2007: Basic Education Statistics in Tanzania (BEST) 2003 – 2007, page 24, table 2.8. Mainland Tanzania. Net gender parity index.

2006: Basic Education Statistics in Tanzania (BEST) 2002 – 2006, page 22, table 2.7. Mainland Tanzania. Net gender parity index.

2005: Basic Education Statistics in Tanzania (BEST) 1995 – 2005, page 30, table 2.8. Mainland Tanzania. Net gender parity index.

- 2004: Basic Education Statistics in Tanzania (BEST) 1995 – 2004, page 28, table 2.8. Mainland Tanzania. Net gender parity index.
- 2003: Basic Education Statistics in Tanzania (BEST) 1999 – 2003, page 14, table 1.9. Mainland Tanzania. Net gender parity index.
- 2002: Basic Education Statistics in Tanzania (BEST) 1998 – 2002, page 14, table 1.9. Mainland Tanzania. Net gender parity index.
- 2001: Basic Education Statistics in Tanzania (BEST) 1997 – 2001, page 14, table 1.9. Mainland Tanzania. Net gender parity index.
- 2000: Basic Education Statistics in Tanzania (BEST) 1996 – 2000, page 14, table 1.9. Mainland Tanzania. Net gender parity index.
- 1999: Basic Education Statistics in Tanzania (BEST) 1995 – 1999, page 14, table 1.9. Mainland Tanzania. Net gender parity index.
- 1998: Basic Education Statistics in Tanzania (BEST) 1994 – 1998, page 14, table 1.9. Mainland Tanzania. Net gender parity index.
- 1997: Basic Education Statistics in Tanzania (BEST) 1994 – 1998, page 8, table 1.5. Mainland Tanzania. Net gender parity index.
- 1996: Basic Education Statistics in Tanzania (BEST) 1994 – 1998, page 8, table 1.5. Mainland Tanzania. Net gender parity index.

Gender parity index in secondary level enrolment

- 2009: Basic Education Statistics in Tanzania (BEST) 2005 – 2009, page 23, table 2.7. Mainland Tanzania.
- 2007: Basic Education Statistics in Tanzania (BEST) 2005 – 2009, page 27, table 2.9a. Mainland Tanzania.
- 2006: Basic Education Statistics in Tanzania (BEST) 2005 – 2009, page 27, table 2.9a. Mainland Tanzania.
- 2005: Basic Education Statistics in Tanzania (BEST) 2005 – 2009, page 27, table 2.9a. Mainland Tanzania.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

www.moe.go.tz: Ministry of Education

Indicator 3.2 Share of women in wage employment in the non-agricultural sector

UN definition

The share of women in the non-agricultural sector is the share of female workers in the wage employment in the non-agricultural sector expressed as a percentage of total wage employment in the same sector. The non-agricultural sector includes industry and services. ‘Industry’ includes mining and quarrying (including oil production), manufacturing, construction, electricity, gas, and water, corresponding to divisions 2-5 in the International Standard of All Economic Activity (ISIC-Rev.2) and to tabulation categories C-F in ISIC-Rev.3. ‘Services’ include wholesale and retail trade and restaurants and hotels, transport, storage, and communications; financing, insurance, real estate, and business services; and community, social and personal services, corresponding to divisions 6-9 in ISIC-Rev.2, and to tabulation categories G-Q in ISIC-Rev.3. Employment refers to the people above a certain age who worked or held a job during a specified reference period (according to the ILO Resolution concerning statistics of the economically active population, employment, unemployment and underemployment, adopted by the Thirteenth International Conference of Labour Statisticians (ICLS), October 1982). Wage employment refers only to wage earners and salaried persons, or “persons in paid employment jobs”. Employees are typically remunerated by wages and salaries, but may be paid by commission from sales, piece-rates, bonuses or payment in kind such as food, housing and training, etc. These persons are in wage employment as opposed to self-employment – that is employers, own-account workers, members of producers’ cooperatives and contributing family workers. The different status in employment are defined in according to the ILO Resolution Concerning the International Classification of Status in Employment (ICSE), adopted by the 15th ICLS (1993).

Obtaining International Data

Comprehensive, detailed statistics on total and paid employment disaggregated by sex, by branch of economic activity, occupation and status in employment are collected annually through a specialised questionnaire for the Yearbook of Labour Statistics sent directly to the official national authorities (ministries responsible for labour, central statistical services, etc.) in all member States and Territories. Statistics are also gleaned from national publications and websites. These statistics are published, respectively, in the ILO *Yearbook of Labour Statistics* and the *Bulletin of Labour Statistics*, and are also available online in LABORSTA. In addition to the statistics, the Bureau also collects and disseminates the relevant national methodological information used to produce these statistics. The methodological information on national practices is available for consultation at <http://laborsta.ilo.org/>, under "Sources and Methods". To improve country coverage a special action inquiry to national statistical offices was sent out in 2003. It consisted of a questionnaire requesting data, as of 1990, on Paid Employment in Non Agricultural Activities, and Unemployment by Age Group, for totals, women and men separately, from all available data sources (i.e. labour force survey, establishment survey, administrative records, official estimates). The annual questionnaire is pre-filled with the statistics provided in the previous years (maximum of ten), so that when countries update their series they also have the possibility to review, verify and, where needed, modify the data previously provided. In principle, the data are not adjusted, as they are collected through a standard questionnaire, and reported in line with the international classifications. All departures from the international standard definitions and classifications are indicated in notes

The UN data on the share of women in wage employment in the non-agricultural sector in Tanzania is country data for 2006 and estimated for 2001. The national data is from labour force surveys.

National sources

NBS data

2004 : Demography and Health Survey (DHS) 2004-05, Appendix F table, page 381 (national, female).

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

Indicator 3.3 Proportion of seats held by women in national parliament

UN definition

The proportion of seats held by women in national parliaments is the number of seats held by women members in single or lower chambers of national parliaments, expressed as a percentage of all occupied seats. National parliaments can be bicameral or unicameral. This indicator covers the single chamber in unicameral parliaments and the lower chamber in bicameral parliaments. It does not cover the upper chamber of bicameral parliaments. Seats are usually won in general parliamentary elections. Seats may also be filled by nomination, appointment, indirect elections, rotation of members and by-election. Seats refer to the number of parliamentary mandates, or the number of members of parliament.

Obtaining International data

The definition provided covers only lower chambers in bicameral parliaments. The number of women in upper chambers not covered, independent on whether the parliament is symmetric or asymmetric. According to IPU 77 parliaments (40.31 percent) are bicameral parliaments. IPU has data on both chambers on their web site. There is a slight difference between the upper and lower chambers concerning proportion of seats held by women. While 15.06 percent of the members of lower

chambers are women; the same is true for 14.79 percent of the members of the upper chambers.

The UN data on proportion of seats held by women in national parliament is country data. The UN database has no documentation on the source. According to IPU the data is collected directly from the national parliaments. The inclusion of only unicameral and lower chamber in bicameral parliament has no impact on Tanzania, the country has a unicameral systems.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

2006: MKUKUTA Annual Implementation Report 2008/2009, page 120, (national, female).

2005: MKUKUTA Implementation Report 2007/08 “Taarifa ya Utekelezaji wa MKUKUTA –2007/08”, page 79, (national, female). Note that, the report is written in Kiswahili. Likewise, the figure can be found under Poverty and Human Development Report (PHDR) 2009, page 134.

1.5. Goal 4: Reduce child mortality

The fourth millennium development goal is to reduce child mortality. This goal consists of one target, to reduce by two-thirds, between 1990 and 2015, the under-five mortality rate, and three indicators.

Target 4A: Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate

Target 4A is to reduce by two-thirds, between 1990 and 2015, the under-five mortality rate, and is the only target under goal four. It consists of three indicators:

Indicator 4.1 Under-five mortality rate

Indicator 4.2 Infant mortality rate

Indicator 4.3 Proportions of 1 year-old children immunized against measles

The measuring indicator for this target is indicator 4.1, while the other indicators measure the sustainability of the results.

Indicator 4.1 Under-five mortality rate

UN definition

The under-five mortality rate (U5MR) is the probability (expressed as a rate per 1,000 live births) of a child born in a specified year dying before reaching the age of five if subject to current age-specific mortality rates. A live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any sign of other evidence of life – such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles – whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered a live birth.

Obtaining International Data

The first step in the process is to proactively seek out all possible sources of data, including vital registration systems, national censuses, household surveys conducted by global programmes, and multi-purpose surveys conducted without international sponsorship. To seek out national data sources that might be overlooked, UNICEF conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING). CRING gathers recent information for all indicators regularly reported on by UNICEF, including the infant and under-five mortality rates.

The UN data on under-five mortality rate is estimated. No documentation is provided on how the estimations has been made, or what national data, if any, has been used.

National sources

NBS data

- 2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, Table 10.2 and Table 10.3, page 129 and 130 (national, male/female, urban/rural).
- 2004: Demography and Health Survey (DHS) 2004-05, Table 8.1, page 124. Indicator covers the last 5 years preceding the survey.
- 2002: Population and Housing Census (PHC) 2002, Analytical Report, Table 8.2, page 136. (national, male/female, urban/rural)
- 1999: Reproductive and Child Health Survey (RCHS) 1999, Table 7.1, page 86; Table 7.2, page 87 for rural- urban differential and Table 7.3, page 89 for gender differential. The indicator covers five- year periods preceding the survey for total, but Female-Male and rural-urban differential it covers ten-year periods preceding the survey.
- 1996: Demography and Health Survey (DHS) 1996, table 7.1, page 98. Poverty and Human Development Reports (PHDR) 2005, Table 10, page 21.
- 1992: Demography and Health Survey (DHS) 1991-92, table 7.1, page 71 and Table 7.2, page 73 for rural and urban for the ten-year period preceding the survey.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05, Population and Housing Census (PHC) 2002, Infant and Child Mortality Report 2006 Poverty and Human Development Reports (PHDR) 2005

Indicator 4.2 Infant mortality rate

UN definition

The infant mortality rate is the probability (expressed as a rate per 1,000 live birth) of a child born in a specific year dying before reaching the age of one if subject to current age-specific mortality rates. A live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any sign other evidence of life – such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles – whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered a live birth.

Obtaining International Data

The first step in the process is to proactively seek out all possible sources of data, including vital registration systems, national censuses, household surveys conducted by global programmes, and multi-purpose surveys conducted without international sponsorship. To seek out national data sources that might be overlooked, UNICEF conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING). CRING gathers recent information for all indicators regularly reported on by UNICEF, including the infant and under-five mortality rates. Different data sources and calculation methods often yield widely differing estimates of infant mortality for a given time and place. In order to reconcile these differences, UNICEF developed, in coordination with WHO, the WB and UNDP an estimation methodology that minimizes the errors embodied on each estimate and harmonize trends along time. Since the estimates are not necessarily the exact values used as inputs for the model, they are often not recognized as the official IMR estimates used at the country level. However, as mentioned before, these estimates minimize errors and maximize the consistency of trends along time. Applying a consistent methodology also allows comparisons

between countries, despite the varied number and types of data sources. After plotting all available values for infant and under-five mortality, analysts use weighted least squares to fit a multi-spine regression line to the data points and extrapolate the trend to the present. The use of weights allows analysts to make a judgment about the relative quality of each data set and how representative it is likely to be of the population. The last step is to decide which set of estimates (for infant mortality or under-five mortality) is more consistent and to use a model life table to derive the other set of estimates from it. Additional details of the methodology are available in the following working paper:

<http://mdgs.un.org/unsd/mdg/Resources/Attach/Capacity/Ind%204-1.pdf>

The UN data on infant mortality rate is estimated. No documentation is provided on how the estimations has been made, or what national data, if any, has been used.

National sources

NBS data

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, Table 10.2 and Table 10.3, page 129 and 130(national, male/female, urban/rural).

2004: Demography and Health Survey (DHS) 2004-05, Table 8.1, page 124. Indicator covers the last 5 years preceeding the survey (national, male/female).

2002: Population and Housing Census (PHC) 2002, Analytical Report, Table 8.2, page 136 (national, rural/urban).

1999: Reproductive and Child Health Survey (RCHS) 1999, Table 7.1, page 86; Table 7.2, page 87 for rural urban differential and Table 7.3, page 89 for gender differential. The indicator covers five– year periods preceding the survey for total but Female-Male and rural-urban differential it covers ten-year periods preceding the survey.

1996: Demography and Health Survey (DHS) 1996, table 7.1, page 98.

1992: Demography and Health Survey (DHS) 1991-92, table 7.1, page 71 and Table 7.2, page 73 for rural and urban for the ten-year period preceding the survey.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05, Population and Housing Census (PHC) 2002.

*Indicator 4.3 Proportions of
1 year-old children
immunized against measles*

UN definition

Proportion of 1 year olds children immunized against measles is the percentage of children under one year of age who have received at least one dose of measles vaccine. It is generally recommended for children to be immunized against measles at the age of 9 months. In certain countries in Latin America and the Caribbean it is recommended for the children to be immunized between the ages of 12 and 15 months.

Obtaining International Data

Data are collected through the WHO UNICEF Joint Reporting Form. This form is sent out by both organizations to the Ministries of Health with expected completion by April 15 of each year.

The World Health Organization (WHO) and the United Nation’s Children’s Fund (UNICEF) compile country data series based on both types of data gathered through the WHO/UNICER Joint Reporting Form (JRF) on Vaccine-Preventable Diseases. There are three types of data requested and collected through the JRF:

- Administrative coverage data. The number of doses administered as recorded by the health providers; The number of children in the target population, usually live births or infants surviving to the age of one year; and An estimate of

completeness of reporting, e.g., percentage of districts in the country that reported their data.

- Survey data (national surveys conducted by DHS, MICS, EPI Cluster or other valid instruments).
- Official national estimate (the estimate of coverage that the Ministry of Health believes to be correct; which may or may not coincide with the administrative or national survey data).

For additional details, see:

http://whqlibdoc.who.int/hq/2007/WHO_IVB_2007_eng.pdf

The content of the Joint Reporting Form was developed through a consensus process by staff from UNICEF, WHO and selected ministries of health. Data collected in the Joint Reporting Form constitute the major source of information on estimates of national immunization coverage, reported cases of vaccine-preventable diseases (VPDs), and immunization schedules, as well as indicators of immunization system performances. Surveys are frequently used in conjunction with administrative data; in other instances they constitute the sole source of information on immunization coverage levels. The principle types of surveys are the Expanded Programme on Immunization (EPI) 30-cluster survey, the Multiple Indicator Cluster Survey (MICS), and the Demographic and Health Survey (DHS). EPI 30-cluster surveys are frequently conducted by national EPI staff, are designed specifically for measuring immunization coverage, are simple to administer and easy to conduct, but have a precision plus or minus 10% points at 50% coverage. The MICS and DHS are more extensive surveys covering a variety of indicators, have a more rigorous design, and typically have a higher degree of precision, but are more expensive, logistically more complex and the questionnaire is longer and more difficult to administer. Draft reports produced by the WHO UNICEF working group are sent to each country for review, comment, contribution and final approval. Country correspondence adjustments are made to the estimates with consultation to the WHO UNICEF working group upon which final reports are completed. This collaboration prior to the public release of the final estimates is important not only to inform national authorities of the results of the review before its general release, but also to take advantage of local expertise and knowledge. The consultations with local experts attempt to put the data in the context of local events, both those occurring in the immunization system (e.g. vaccine shortage for parts of the year, donor withdrawal, etc.) and more widely occurring events (e.g. international incidences, civil unrest, heightened political commitment to immunization, etc.).

As mentioned previously, there are no adjustments made to reported data in cases where data for a country was available from a single source, usually the national reports to WHO. There is also no attempt to group countries based on income, development levels, population size or geographic location. The resulting estimates are based only on data from that country. Immunization coverage levels vary over time, and while there are frequently general trends, there is attempt to fit the data points to curve using smoothing techniques.

The UN data on proportions of 1 year-old children immunized against measles is estimated. No documentation is provided on how the estimations has been made, or what national data, if any, has been used.

National sources

NBS data

2004: Demography and Health Survey (DHS) 2004-05, Table 9.13, page 153.

1999: Reproductive and Child Health Survey (RCHS) 1999, Table 8.12, page 107 (National, male/female, urban/rural).

1996: Demography and Health Survey (DHS) 1996, Table 8.8, page 116 (National, male/female, urban/rural).

1992: Demography and Health Survey (DHS) 1991-92, Table 8.7, page 91
(National, male/female, urban/rural).

Administrative sources

2004: Annual Health Statistical Abstract (HSA) 2006, Figure 4.10, page 73.
2003: Annual Health Statistical Abstract (HSA) 2006, Figure 4.10, page 73.
2002: Annual Health Statistical Abstract (HSA) 2006, Figure 4.10, page 73.
2001: Annual Health Statistical Abstract (HSA) 2006, Figure 4.10, page 73.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

www.moh.go.tz: Ministry of Health

1.6. Goal 5: Improve maternal health

The fifth millennium development goal is to improve maternal health. Goal five consists of two targets:

5A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

5B: Achieve, by 2015, universal access to reproductive health

The goal consists of five indicators.

Target 5A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

Target 5A is to reduce by three quarters, between 1990 and 2015, the maternal mortality ratio, and consists of two indicators:

Indicator 5.1 Maternal mortality ratio

Indicator 5.2 Proportion of births attended by skilled personnel

The measuring indicator for this target is indicator 5.1, while the other indicators measure the sustainability of the results.

Indicator 5.1 Maternal mortality ratio

UN definition

The maternal mortality ratio (MMR) is the annual number of female deaths from any cause related to or aggravated by pregnancy or its management (excluding accidental or incidental causes) during pregnancy and childbirth or within 42 days of termination of pregnancy, irrespective of the duration and site of the pregnancy, for a specified year (expressed per 100,000 live births).

Obtaining International Data

Data on maternal mortality and other relevant variables are obtained through databases maintained by WHO, UNDP, UNICEF, and WB. Data available from countries varies in terms of the source and methods. Primary sources of data include vital registration systems, household surveys (direct and indirect methods), reproductive age mortality studies, disease surveillance or sample registration systems, special studies on maternal mortality, and national population censuses. Given the variability of the sources of data, different methods are used for each data source in order to arrive at country estimates that are comparable and permit regional and global aggregation. For a detailed description of the methodology please refer to the following, forthcoming publication: Hill K, Thomas K, AbouZahr C, Walker N, Say L, Inoue M, Suzuki E on behalf of the Maternal Mortality Working Group. Estimates of maternal mortality worldwide 1990 to 2005: an assessment of available data (*Lancet*, 2007). Figures for countries with generally complete civil registration systems and good attribution of cause of death are not adjusted. However, only one third of all countries/territories fall into this group. For another third of countries/territories, country-reported estimates of maternal mortality are adjusted for the purposes of comparability of the methodologies. For the final third of countries/territories—those with no appropriate maternal mortality data—a statistical model is employed to predict maternal mortality levels. Despite being based on established demographic techniques and empirical data from other countries, there is no guarantee that the

country specific point estimates obtained through the statistical model represent the true levels of maternal mortality. Estimated uncertainty margins are not confidence intervals in the epidemiological and statistical sense. Because these margins are extremely wide, one must be wary of interpreting small numerical differences in countries as representing real differences in maternal mortality levels. The wide lower and upper margins around the estimated figures reflect such uncertainty.

The data on maternal mortality ratio is country adjusted data. There is no documentation on what adjustments have been done, why they have been done or how. The national data used is classified under the group of countries that lack complete registration of deaths, but have estimates based on direct sisterhood methods.

National sources

NBS data

2004: Demography and Health Survey (DHS) 2004-05, Table 14.3, page 261 and appendix F table, page 381, (national, female).

1996 : Demography and Health Survey (DHS) 1996, table 10.2, page 137, (national, female).

Administrative sources

2004: Annual Health Statistical Abstract (HSA) 2006, table 4.13, page 75, (national, female).

2003: Annual Health Statistical Abstract (HSA) 2006, table 4.13, page 75, (national, female).

2002: Annual Health Statistical Abstract (HSA) 2006, table 4.13, page 75, (national, female).

2001: Annual Health Statistical Abstract (HSA) 2006, table 4.13, page 75, (national, female).

2000: Annual Health Statistical Abstract (HSA) 2006, table 4.13, page 75, (national, female).

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

www.moh.go.tz: Ministry of Health

Indicator 5.2 Proportion of births attended by skilled personnel

UN definition

Percentage of births attended by skilled personnel (doctors, nurses or midwives) is the percentage of deliveries attended by personnel trained in life saving obstetric care, including giving the necessary supervision, care and advice to women during pregnancy, labour and the post-partum period; to conduct deliveries on their own; and to care for newborns. Traditional births attendants, even if they receive a short training course, are not included.

Obtaining International Data

Data are collected through national-level household surveys, including Multiple Indicator Cluster Survey (MICS) and Demographic Health Surveys (DHS). These surveys are generally conducted every 3-5 years. Before acceptance into the global databases, UNICEF and WHO undergo a verification process that includes correspondence with field offices to clarify any questions regarding estimates.

The data on proportion of births attended by skilled personnel is country adjusted data. There is no documentation on what adjustments have been done. For Tanzania the national data is from the Demography and Health Survey (DHS) 1991-92, 1996 and 2005, and Tanzania Reproductive and Child Health Survey (RCHS) 1999. References for the DHS are in the UN database.

National sources*NBS data*

2004: Demography and Health Survey (DHS) 2004-05, table 9.6, page 142 and Appendix F table, page 381 (national, urban/rural). This does not include MCH aides. The official MDG data from the Demography and Health Survey (DHS) is 46.3 percent. This includes doctors/AMO, clinical officer/assistant clinical officer, nurse/midwife and MCH aides. The UN number is 43.4 percent. If you add MCH aides to this number you will get the national number.

1999: Reproductive and Child Health Survey (RCHS) 1999, table 8.6, page 100 (national, urban/rural, female).

1996: Demography and Health Survey (DHS) 1996, table 8.5, page 112 (national, urban/rural, female).

1992: Demography and Health Survey (DHS) 1991-92, table 8.4, page 85 (national, urban/rural, female).

Administrative sources

There is no data on this indicator from survey and census.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05 www.nbs.go.tz: Demography and Health Survey 2004-05

Target 5B: Achieve, by 2015, universal access to reproductive health

Target 5B achieve, by 2015, universal access to reproductive health, and consists of three indicators:

Indicator 5.3 Contraceptive prevalence rate

Indicator 5.4 Adolescent birth rate

Indicator 5.5 Antenatal care coverage (at least one visit and at least four visits)

*Indicator 5.3 Contraceptive prevalence rate***UN definition**

Percentage currently using, or whose sexual partner is using, a method of contraception among women of reproductive age (usually aged 15-49) who are married or in union.

$$\text{Contraceptive prevalence} = \frac{\text{Women of reproductive age (15 - 49) who are married or in union and who are currently using any method of contraception}}{\text{Total number of women of reproductive age (15 - 49) who are married or in union}} * 100$$

Obtaining International Data

Data are produced by the United Nations Population Division using data from nationally representative surveys including the Demographic and Health Surveys (DHS), the Fertility and Family Surveys (FFS), the CDC-assisted Reproductive Health Surveys (RHS), the Multiple Indicator Cluster Surveys (MICS) and national family planning, or health, or household, or socio-economic surveys. Survey data from sources other than the National Statistical system are included when other data are not available. The data are taken from published survey reports or, in exceptional cases, other published analytic reports. If clarification is needed, contact is made with the survey sponsors or authoring organization, which occasionally may supply corrected or adjusted estimates in response. In general, all nationally representative surveys with comparable questions on current use of contraception are included.

The data on Contraceptive prevalence rate is from country data. For Tanzania the national data is from the Demography and Health Survey (DHS), and the Knowledge, Attitudes and Practices Survey (KAPS) 1994. For the years 1999 and 2005, the Lactational Amenorrhea Method (LAM)² is included as a modern method.

National sources

NBS data

- 2004: Demography and Health Survey (DHS) 2004-05, table 5.4, page 74 (national, urban/rural, female).
 1999: Reproductive and Child Health Survey (RCHS) 1999, table 4.4.1, page 47, (national, female).
 1996: Demography and Health Survey (DHS) 1996, table 4.5.1, page 46, (national, female).
 1994: Knowledge, Attitudes and Practices Survey (KAPS) 1994, table 4.7, page 33, (national, female).
 1992: Demography and Health Survey (DHS) 1991-92, table 4.4, page 35, (national, female).

Administrative sources

- 2005: MDGs Progress Report 2006, Table 10, page 21, (national, female). The original source is from NACP Surveillance Report 19, (2004) as per MDGs Report. Mainland Tanzania.
 1999: MDGs Progress Report 2006, Table 10, page 21, (national, female). The original source is from NACP Surveillance Report 19, (2004) as per MDGs Report.
 1992: MDGs Progress Report 2006, Table 10, page 21, (national, female). The original source is from NACP Surveillance Report 19, (2004) as per MDGs Report.

Indicator 5.4 Adolescent birth rate

UN definition

The adolescent birth rate measures the annual number of births to women 15 to 19 years of age per 1,000 women in that age group. It represents the risk of childbearing among adolescent women 15 to 19 years of age. It is also referred to as the age-specific fertility rate for women aged 15 to 19.

Obtaining International Data

Data is obtained from several sources:

- (a) For civil registration data, data on births or the adolescent birth rate are obtained from country-reported data from the United Nations Statistics Division or regional Statistics Divisions or statistical units (ESCWA, ESCAP, CARICOM, SPC). The population figures are obtained from the last revision of the United Nations Population Division World Population Prospects and only exceptionally from other sources.
- (b) For survey data, the data are obtained from surveys such as the Demographic and Health Surveys (DHS), the CDC-assisted Reproductive Health Surveys (RHS), MICS and other nationally sponsored surveys. Whenever the estimates are available in the survey report, they are directly taken from it. In other cases, if microdata are available, estimates are produced by the United Nations Population Division based on national data.
- (c) For census data, the estimates are preferably directly obtained from census reports. In such cases, adjusted rates are only used when reported by the National Statistical Office. In other cases, the adolescent birth rate is computed from tables on births in the preceding 12 months by age of mother, and census population distribution by sex and age.

² Postponement of menstruation due to breastfeeding.

The adolescent birth rate is generally computed as a ratio. The numerator is the number of live births to women 15 to 19 years of age, and the denominator an estimate of exposure to childbearing by women 15 to 19 years of age. The numerator and the denominator are calculated differently for civil registration, survey and census data.

(a) In the case of civil registration the numerator is the registered number of live-births born to women 15 to 19 years of age during a given year, and the denominator is the estimated or enumerated population of women aged 15 to 19. For the numerator, the figures reported by National Statistical Offices to the United Nations Statistics Division have first priority. When they are not available or present problems, use is made of data from the regional statistical units or directly from National Statistical Offices. For the denominator, first priority is given to the latest revision of *World Population Prospects* produced by the United Nations Population Division in accordance with the recommendation of the 11th IAEF meeting on MDG indicators. In cases where the numerator does not cover the complete *de facto* population, an alternative appropriate population estimate is used if available. When either the numerator or denominator is missing, the direct estimate of the rate produced by the National Statistics Office is used. Information on sources is provided at the cell level. When the numerator and denominator come from two different sources, they are listed in that order.

(b) In the case of survey data, the adolescent birth rate is generally computed based on retrospective birth histories. The numerator refers to births to women that were 15 to 19 years of age at the time of the birth during a reference period before the interview, and the denominator to person-years lived between the ages of 15 and 19 by the interviewed women during the same reference period. Whenever possible, the reference period corresponds to the five years preceding the survey. The reported observation year corresponds to the middle of the reference period. For some surveys, no retrospective birth histories are available and the estimate is based on the date of last birth or the number of births in the 12 months preceding the survey. The information on sources at the cell level provides the name or acronym of the survey together with the beginning and end year of the reference period.

(c) In the case of census data, the adolescent birth rate is generally computed based on the date of last birth or the number of births in the 12 months preceding the enumeration. The census provides both the numerator and the denominator for the rates. In some cases, the rates based on censuses are adjusted for under registration based on indirect methods of estimation. For some countries with no other reliable data, the own-children method of indirect estimation provides estimates of the adolescent birth rate for a number of years before the census.

The data on adolescent birth rate is country data for Tanzania. The data is a five year average from the Demography and Health Survey (DHS) for 1991-92, 1996, 1999 and 2004-05 and from the Knowledge, Attitudes and Practices Survey (KAPS) 1994. There are references to the DHS in the UN database.

National sources

NBS data

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, Table 4.6, page 45 (national, urban/rural, female).

2004: Demography and Health Survey (DHS) 2004-05, Table 4.9, page 66 (national, urban/rural, female).

1999: Reproductive and Child Health Survey (RCHS) 1999, table 3.9, page 38 (national, urban/rural, female).

- 1996: Demography and Health Survey (DHS) 1996 : table 3.10, page 38 (national, urban/rural, female).
 1994: Knowledge, Attitudes and Practices Survey (KAPS) 1994: table 3.5, page 24 (national, urban/rural, female).
 1992: Demography and Health Survey (DHS) 1991-92: Table 3.9, page 30 (national, urban/rural, female).

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 5.5 Antenatal care coverage (at least one visit and at least four visits)

UN definition

Antenatal care coverage (at least one visit) is the percentage of women aged 15-49 with a live birth in a given time period that received antenatal care provided by skilled health personnel (doctors, nurses, or midwives) at least once during pregnancy, as a percentage of women age 15-49 years with a live birth in a given time period. *Antenatal care coverage (at least four visits)* is the percentage of women aged 15-49 years with a live birth in a given period that received antenatal care four times or more with any provider (whether skilled or unskilled), as a percentage of women aged 15-49 with a live birth in a given time period. A *skilled health worker/attendant* is an accredited health professional – such as a midwife, doctor or nurse – who has been educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancy, childbirth and the immediate postnatal period, and in the identification, management and referral of complication in women and newborns. Both trained and untrained birth attendants (TBA) are excluded. The antenatal period presents opportunities for reaching pregnant women with interventions that may be vital to their health and wellbeing and that of their infants. WHO recommends a minimum of four antenatal visits based on a review of the effectiveness of different models of antenatal care. WHO guidelines are specific on the content of antenatal care visits, which should include:

- Blood pressure measurement.
- Urine testing for bacteria & proteinuria.
- Blood testing to detect syphilis & severe anaemia.
- Weight/height measurement (optional).

Division of indicator

The indicator is divided into two sub indicators:

- Antenatal care coverage, at least one visit, percentage
- Antenatal care coverage, at least four visits, percentage

See above for definitions.

Obtaining International Data

UNICEF maintains antenatal care data (for at least one visit and four or more visits) and WHO (for at least four visits) and both collaborate to ensure the consistency of data sources. National-level household surveys are the main data sources used to collect data for the antenatal care indicators. These surveys include Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS), Fertility and Family Surveys (FFS), Reproductive Health Surveys (RHS) and national surveys based on similar methodologies. The surveys are undertaken every 3 to 5 years. For mainly industrialized countries (where the coverage is high), data sources include routine service statistics.

Before acceptance into the global databases, UNICEF and WHO undergo a verification process that includes correspondence with field offices to clarify any questions regarding estimates.

The UN data on Antenatal care coverage, at least one visit, is country adjusted data. There is no documentation on what adjustments have been done and how they have been done. The national data is from the Demography and Health Survey (DHS) 1991-92, 1996, 1999 and 2004-05. References are in the UN database. The

data on antenatal care coverage, at least four visits is country data. The data is from the DHS 2004-05.

National sources

NBS data

One visit

- 2004: Demography and Health Survey (DHS) 2004-05, table 9.1, page 133. This does not include MCH aides. (national, urban/rural, female).
 1999: Reproductive and Child Health Survey (RCHS) 1999, table 8.1, page 94. (national, urban/rural, female). Refer to most recent birth only.
 1996: Demography and Health Survey (DHS) 1996 : Table 8.1, page 106 (national, urban/rural, female).
 1992: Demography and Health Survey (DHS) 1991-92: Table 8.1, page 80 (national, urban/rural, female).

Four visits

- 2004: Demography and Health Survey (DHS) 2004-05, table 9.2, page 134. This does not include MCH aides. (national, urban/rural is Tanzania Mainland, female)
 1999: Reproductive and Child Health Survey (RCHS) 1999, table 8.2, page 95. Data for 1999 covers most recent birth only, (national, female).
 1996: Demography and Health Survey (DHS) 1996, table 8.2, page 107. Reproductive and Child Health Survey (RCHS) 1999, table 8.2, page 95, (national, female).
 1992: Demography and Health Survey (DHS) 1991-92, figure 8.1, page 81. Reproductive and Child Health Survey (RCHS) 1999, table 8.2, page 95, (national, female).

Indicator 5.6 Unmet need for family planning

UN definition

Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the next child. The concept of unmet need points to the gap between women's reproductive intentions and their contraceptive behaviour. For MDG monitoring, unmet need is expressed as a percentage based on women who are married or in a consensual union.

Unmet need for family planning =

(Women (married or in consensual union) who are pregnant or amenorrhic and whose pregnancies were unwanted or mistimed + fecund women who desire to either stop childbearing or postpone their next birth for at least two years, or who are undecided about whether or when to have another child, and who are not using a contraceptive method) / (Total number of women of reproductive age (15-49) who are married or in consensual union)

Obtaining International Data

Unmet need for family planning is measured using data that are gathered in special surveys such as the Demographic and Health Surveys (DHS), Reproductive Health Surveys (RHS) and national surveys based on similar methodologies. Data from Demographic and Health Surveys (DHS), collected from ORC Macro, are the primary source of data on unmet need for developing countries. Another important source of data is the Reproductive Health Surveys (RHS), which collect data from developing countries, with technical assistance provided by the Centers for Disease Control and Prevention (CDC), Division of Reproductive Health (DRH), MEASURE CDC. In reports from those surveys, women who are married or in a consensual union are considered to have an unmet need for family planning if they report that they are not using contraception, do not wish to become pregnant (either currently – desire to space the next birth – or ever – desire to limit family size), are fecund and sexually active, and are not currently pregnant. In some cases, other national survey efforts, which have incorporated the DHS methodology, but were

conducted by national authorities without international technical assistance (e.g., in India), are used as inputs. Similarly, some surveys did not receive technical assistance from CDC but have followed the CDC methodology for estimating unmet need. National surveys conducted as part of the European Fertility and Family Surveys (FFS), the Pan-Arab Project for Family Health (PAPFAM) and other national surveys might also vary in their definition of unmet need. Those differences are flagged with footnotes in the data. The data are taken from published survey reports or, in exceptional cases, other published analytic reports. If clarification is needed, contact is made with the survey sponsors or authoring organization, which occasionally may supply corrected or adjusted estimates in response. The data are not adjusted.

The data on unmet need for family planning is country data. The data is from Demography and Health Surveys (DHS) and the Knowledge, Attitudes and Practices Survey (KAPS) 1994.

National sources

NBS data

2004: Demography and Health Survey (DHS) 2004-05, table 7.3, page 115 (national, urban/rural, female).

1996: Demography and Health Survey (DHS) 1996, table 6.5, page 90 (national). DHS 1996 Preliminary report, Table 9, page 16 (urban/rural, female).

1994: Knowledge, Attitudes and Practices Survey (KAPS) 1994: Table 6.4, page 62 (national, urban/rural, female).

1992: Demography and Health Survey (DHS) 1991-92: Table 6.4, page 66 (national, urban/rural, female).

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

1.7. Goal 6: Combat HIV/AIDS, malaria and other diseases

The sixth millennium development goal is to combat HIV/AIDS, malaria and other diseases, and consists of three targets:

6A: Have halted by 2015 and begun reverse the spread of HIV/AIDS

6B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

6C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Target 6A: Have halted by 2015 and begun reverse the spread of HIV/AIDS

Target 6A is to have halted by 2015 and begun reverse the spread of HIV/AIDS, and consists of four indicators:

Indicator 6.1 HIV prevalence among population aged 15-24 years

Indicator 6.2 Condom use at last high risk sex

Indicator 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS

Indicator 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years

The measuring indicator for this target is indicator 6.1, while the other indicators measure the sustainability of the results. Indicators 6.2 and 6.3 are always divided by gender.

Indicator 6.1 HIV prevalence among population aged 15-24 years

UN definition

The prevalence of HIV among the population 15-49 years old is the percentage of individuals aged 15-49 living with HIV. Human Immunodeficiency (HIV) is a virus that weakens the immune system, ultimately leading to AIDS, the Acquired Immunodeficiency Syndrome. HIV destroys the body's ability to fight of infection and disease, which can ultimately lead to death.

The indicator itself covers HIV prevalence among population aged 15-24 years, while the UN metadata identifies the age group as 15-49 years.

Obtaining International Data

Regional workshops are conducted every 2 years to produce draft estimates. These are finalized through correspondence with the country. The UNAIDS Epidemiology team collaborates with national counterparts to generate HIV estimates for their country. Typically, the coordinating counterparts are based in the National AIDS Council or in the Ministry of Health, and they receive inputs from the AIDS programme (e.g. ART, Preventing Mother To Child Transmission programmes) and from the Statistics office. Country estimates are collected and reviewed based on new findings at the country level, as well as previous data trends. Country data is validated by country representatives for accuracy. No adjustments are made for international comparability. The data are comparable because of the well-standardised methodologies. HIV estimate data are reported as rounded figures.

The UN data on HIV prevalence among population aged 15-49 years is estimated. There is no documentation on why the data is estimated, how they have been estimated and what the basis is. Information on what national data, if any, has been used has not been provided.

National sources

NBS data

Age group 15-24 years

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 9.7, page 122 (national, urban/rural, female/male). Based on tests conducted during the survey.

2003: HIV/AIDS Indicator Survey (HIS) 2003-04, table 8.9, page 80 (national, urban/rural, female/male). Based on tests conducted during the survey.

Age group 15-49 years

2008: HIV/AIDS and Malaria Indicator Survey (HMIS). 2007-08, table 9.4, page 116 (national, urban/rural, female/male). Based on tests conducted during the survey.

2003: HIV/AIDS Indicator Survey (HIS) 2003-04, table 8.3, page 72 (national, urban/rural, female/male). Based on tests conducted during the survey.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08

www.moh.go.tz: Ministry of Health

Indicator 6.2 Condom use at last high risk sex

UN definition

Condom use during last higher-risk sex is the percentage of young men and women ages 15-24 that had more than one partner in the past 12 months reporting the use of a condom during their last sexual intercourse.

The indicator is divided by gender.

Obtaining International Data

These data are collected through household surveys, such as Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS), reproductive and health surveys and behavioural surveillance surveys. The results are reported regularly in the final reports of these surveys. In addition, most data are available at <http://www.measuredhs.com/hivdata>. Nationally representative population-based surveys, such as DHS and MICS, are conducted by national statistical offices or other relevant government offices under the supervision of government or international agencies. As part of routine data quality control, survey results are checked for inconsistencies and to ensure that data are collected using a clearly defined population-based sampling frame, permitting inferences to be drawn for the entire population. UNICEF also conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING), in which data maintained in the global databases at UNICEF for indicators regularly reported by UNICEF, are sent to countries for validation and updating. Updates from countries must be accompanied by original source documentation, e.g. survey reports. No adjustments are made to the data compiled from DHS, MICS and other surveys that are statistically sound and nationally representative.

The data on condom use at last high risk sex is country data for Tanzania. The national data for 2004 is from Tanzania Aids Indicator Survey 2003-04 and for 2005 and 2008 from DHS 2004-05. No source has been provided for the remaining years.

It seems the indicator from 2008 comes from the Tanzania HIV/AIDS and Malaria Indicator Survey (HMIS)2007-08.

National sources*NBS data***Men**

- 2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 8.5.2, page 102 (urban/rural, female/male).
- 2005: Demography and Health Survey (DHS) 2004-05, table 12.18, page 239 and Appendix F table, page 381. The description of the indicator does not specify that the person has more than one partner (urban/rural, female/male).
- 2004: HIV/AIDS Indicator Survey (HIS) 2003-04, table 7.6, page 62 (urban/rural, female/male).

Women

- 2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 8.5.1, page 102 (urban/rural, female/male).
- 2005: Demography and Health Survey (DHS) 2004-05, table 12.18, page 239. The description of the indicator does not specify that the person has more than one partner (urban/rural, female/male).
- 2004: HIV/AIDS Indicator Survey (HIS) 2003-04, table 7.6, page 62 (urban/rural, female/male).

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05, HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08

Indicator 6.3 Proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS

UN definition

Percentage of young men and women aged 15-24 years with comprehensive correct knowledge of HIV/AIDS is the share of women and men aged 15-24 years who correctly identify the two major ways of preventing the sexual transmission of HIV (using condoms and limiting sex to one faithful, uninfected partner), who

reject the two most common local misconception about HIV transmission and who know that a healthy-looking person can transmit HIV.

The indicator is divided by gender.

Obtaining International Data

These data are collected through household surveys, such as Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS), reproductive and health surveys, and behavioural surveillance surveys. The results are reported regularly in the final reports of these surveys. In addition most data are available at <http://www.measuredhs.com/hivdata>. Nationally representative population-based surveys, such as the DHS and MICS, are conducted by national statistical offices or other relevant government office under the supervision of the government or international agencies. As part of routine data quality control, survey results are checked for inconsistencies and to make sure that data are collected using a clearly defined population-based sampling frame, permitting inferences to be drawn about an entire population. UNICEF also conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING), in which data maintained in the global databases at UNICEF are sent to countries for validation and updates on recent information for all indicators regularly reported on by UNICEF. Updates from countries must be accompanied by original source documentation, e.g. survey reports. No adjustments are made to the data compiled from DHS, MICS and other surveys that are statistically sound and nationally representative.

The data on proportion of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS is country data for Tanzania. The national data for 2004 is from Tanzania Aids Indicator Survey 2003-04 and for 2005 and 2008 from DHS 2004-05 (DHS 2004-05 as a source for 2008 needs to be investigated). References are in the UN database.

National sources

NBS data

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 8.1, page 94 (urban/rural, female/male).

2004: Demography and Health Survey (DHS) 2004-05, Table 12.14, page 231 and 381 (urban/rural, female/male).

2003: HIV/AIDS Indicator Survey (HIS) 2003-04, table 71. (urban/rural, female/male). Age 15-49.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05, HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08.

Indicator 6.4 Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years

UN definition

The impact of the AIDS epidemic on orphans is measured through the ratio of the current school attendance rate of children aged 10-14 both of whose biological parents have died to the current school attendance rate of children aged 10-14 both of whose parents are still alive and who currently live with at least one biological parent.

Obtaining International Data

These data are collected through household surveys, such as Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS), behavioural surveillance surveys, and other nationally representative surveys. The results are reported regularly in the final reports of these surveys. In addition the data are

available at: www.childinfo.org and www.measuredhs.com/hivdata. Nationally representative population-based surveys, such as DHS and MICS, are conducted by national statistical offices or other relevant government offices under the supervision of government or international agencies. As part of routine data quality control, survey results are checked for inconsistencies and to ensure that data are collected using a clearly defined population-based sampling frame, permitting inferences to be drawn for the entire population. UNICEF also conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING), in which data maintained in the global databases at UNICEF for all regularly reported indicators are sent to countries for validation and updating. Updates from countries must be accompanied by original source documentation, e.g. survey reports. No adjustments are made to the data compiled from DHS, MICS and other surveys that are statistically sound and nationally representative.

The data on ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years is country data. There is no documentation on what national data has been used. The data for 1999 is value based on 25-50 cases.

National sources

NBS data

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 12.3, page 155 (national, urban/rural, female/male).

2004: Demography and Health Survey (DHS) 2004-05, table 12.23, page 245 and Appendix F table, page 381 (national, urban/rural, female/male).

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05, HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08.

Target 6B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it

Target 6B is to achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it. The target consists only of one indicator, indicator 6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs.

Indicator 6.5 Proportion of population with advanced HIV infection with access to antiretroviral drugs

UN definition

The percentage of adults and children with advanced HIV infection currently receiving antiretroviral therapy according to nationally approved treatment protocols (or WHO/Joint UN Programme on HIV and AIDS standards) among the estimated number of people with advanced HIV infection. The numerator (the number of people receiving antiretroviral therapy) is derived from national programme reporting systems, aggregated from health facilities or other delivery sites. The denominator (the total number of people who need antiretroviral therapy) is generated using a standardized statistical modelling approach. The Human Immunodeficiency Virus (HIV) is a virus that weakens the immune system, ultimately leading to Acquired Immunodeficiency Syndrome (AIDS). The number of adults with advanced HIV infection who should start treatment is estimated based on the assumption that the average time from HIV seroconversion to eligibility for the antiretroviral therapy is eight years and, without antiretroviral therapy, the average time from eligibility to death is about three years. These parameters were revised in 2007: The previous estimates were based on the assumption of seven years from seroconversion to eligibility and two years from eligibility to death in the absence of treatment.

Obtaining International Data

The data on people receiving antiretroviral therapy are collected through three international monitoring and reporting processes:

1. Health sector response to HIV/AIDS (WHO)
WHO sends an annual questionnaire to its regional and country offices in the fourth quarter of each year to collect data on key indicators related to the availability, coverage and impact of priority health sector interventions for HIV/AIDS.
2. Prevention of mother to child transmission and pediatric HIV care and treatment (Interagency Task Team on Prevention of HIV Infection in Women, Mothers and their Children – IATT)
An annual reporting form is sent to UNICEF and WHO country offices to facilitate data collection in collaboration with national governments and other in-country implementing partners.
3. UNGASS Declaration of Commitment on HIV/AIDS (UNAIDS)
With the adoption of the Declaration of Commitment on HIV/AIDS by the United Nations General Assembly Special Session on HIV/AIDS in 2001, countries committed to provide a progress report to the General Assembly every two years. The UNAIDS Secretariat facilitates this reporting and develops regular reports for submission to the Secretary-General of the United Nations. Country progress reports submitted to UNAIDS based on international guidelines for the construction of the core indicators are available online.

All three processes are linked through common indicators and a harmonized timeline for reporting. In order to facilitate collaboration at country level, the country offices of WHO, UNICEF and the UNAIDS Secretariat, work jointly with national counterparts and partner agencies to collate and validate data in a single collaborative consultation process. In addition, at least twice a year, international data reconciliation meetings are organized to review and validate data reported to WHO, UNICEF, the UNAIDS Secretariat, the Global Fund to Fight AIDS, Tuberculosis and Malaria; and the United States President's Emergency Plan for AIDS Relief. Where discrepancies are identified between data reported to the different organizations, follow-up letters are sent to UNAIDS, UNICEF and WHO country offices in order to liaise with national authorities to seek clarification and resolve discrepancies. Adjustments in reported data by countries are made in case they do not reflect end-of-year values. Furthermore, some countries only report data of the cumulative number of people receiving treatment, and adjustment are made to more accurately represent the value of people 'currently' on treatment at the end of the calendar year.

The data on proportion of population with advanced HIV infection with access to antiretroviral drugs is country adjusted data. There is no documentation on what adjustments have been done, or how. Information on the national data used is not provided.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 6C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Target 6C is to have halted by 2015 and begun to reverse the incidence of malaria and other major diseases, and consists of five indicators:

Indicator 6.6 Incidence and death rates associated with malaria

Indicator 6.7 Proportion of children under 5 sleeping under insecticide treated bed nets

Indicator 6.8 Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs

Indicator 6.9 Incidence, prevalence and death rates associated with tuberculosis

Indicator 6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment short course

There is no institution responsible for collecting data for the UN MDG database on indicator 6.6, which also results in missing definition on this indicator. This indicator is divided in three: Notified cases of malaria, Malaria death rate in the population and malaria death rate for children under five years of age.

Indicator 6.6 Incidence and death rates associated with malaria

There is no international institution responsible for this indicator.

UN definition

Division of indicator

The indicator is divided into three sub indicators:

- Notified cases of malaria per 100,000 population
- Malaria death rate per 100,000 population, all ages
- Malaria death rate per 100,000 population, ages 0-4

Obtaining International Data

There is no international data on this indicator.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

2003: Annual Health Statistical Abstract 2006: Page 32 and 33, table 3.1, 3.2 and 3.3. The number has been calculated using malaria figures and population projection numbers.

2004: Annual Health Statistical Abstract 2006: Page 32 and 33, table 3.1, 3.2 and 3.3. The number has been calculated using malaria figures and population projection numbers.

Notified cases of malaria per 100,000 population

The figure is calculated by dividing Malaria incidence by per 100000 population projection.

Malaria death rate per 100,000 population, all ages

The figure is calculated by dividing Malaria deaths by per 100000 population projection.

Malaria death rate per 100,000 population, ages 0-4

The figure is calculated by dividing Malaria deaths for under five by per 100000 population projection.

Sources available on internet

www.moh.go.tz: Ministry of Health

Indicator 6.7 Proportion of children under 5 sleeping under insecticide treated bed nets

UN definition

Percentage of children aged 0 – 59 months who slept under an insecticide treated mosquito net the night prior to the survey.

Obtaining International Data

Data from national-level household surveys, including Multiple Indicator Cluster Surveys (MICS), Demographic Health Surveys (DHS) and Malaria Indicator

Surveys (MIS), are compiled in the UNICEF global databases. The data are reviewed in collaboration with Roll Back Malaria (RBM) partnership, launched in 1998 by the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), the United Nations Development Programme (UNDP) and the World Bank.

The data on proportion of children under 5 sleeping under insecticide treated bed nets is country data. For Tanzania the national data is from DHS 1999 and 2004-05 and AIDS Indicator Survey/Malaria Indicator Survey 2007-08.

National sources

NBS data

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 11.2, page 136 (national, urban/rural, female/male).

2004: Demography and Health Survey (DHS) 2004-05, table 10.2, page 167 (national, urban/rural, female/male).

1999: Reproductive and Child Health Survey (RCHS) 1999, table 8.14, page 110. Ever treated bednets (national, urban/rural).

Administrative sources

2005: Annual Health Statistical Abstract (HSA) 2006, table 3.5, page 36.

2003: Annual Health Statistical Abstract (HSA) 2006, table 3.5, page 36.

2001: Annual Health Statistical Abstract (HSA) 2006, table 3.5, page 36.

Sources available on internet

www.nbs.go.tz: DHS 2004-05, HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08.

www.moh.go.tz: Ministry of Health

Indicator 6.8 Proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs

UN definition

Percentage of children aged 0-59 months with fever in the two weeks prior to the survey who received any anti-malarial medicine within 24 hours of the onset of symptoms.

Obtaining International Data

Data from national-level household surveys, including Multiple Indicator Cluster Surveys (MICS), Demographic Health Surveys (DHS) and Malaria Indicator Surveys (MIS), are compiled in the UNICEF global databases. The data are reviewed in collaboration with Roll Back Malaria (RBM) partnership, launched in 1998 by the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), the United Nations Development Programme (UNDP) and the World Bank. No adjustments are made to the data compiled from DHS, MICS and other surveys that are statistically sound and nationally representative.

The data on proportion of children under 5 with fever who are treated with appropriate anti-malarial drugs is country data. For Tanzania the national data is from DHS 1999 and 2004-05 and AIDS Indicator Survey/Malaria Indicator Survey 2007-08.

National sources

NBS data

2008: HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08, table 11.5, page 141 (national, urban/rural).

2004: Demography and Health Survey (DHS) 2004-05, table 10.5, page 172 (national, urban/rural).

1999: Reproductive and Child Health Survey (RCHS) 1999, table 8.13, page 109. Ever treated bednets (national, urban/rural, female/male).

1992: Demography and Health Survey (DHS) 1991-92, table 8.9, page 93 (National, urban/rural, male/female).

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05, HIV/AIDS and Malaria Indicator Survey (HMIS) 2007-08

Indicator 6.9 Incidence, prevalence and death rates associated with tuberculosis

UN definition

Tuberculosis prevalence refers to the number of TB (all forms) in a population at a given point in time (sometimes referred to as “point prevalence”). It is expressed as the number of cases per 100,000 population. Estimates include cases of TB in people with HIV. *The tuberculosis death rate indicator* refers to the estimated number of deaths due to tuberculosis (TB) in a given time period. In this database, the indicator reflects the number of deaths per 100,000 population per year. Deaths from all forms of TB are included. Deaths from TB in people with HIV are included. *Tuberculosis incidence* is the estimated number of new TB cases arising in one year per 100,000 population. All forms of TB are included, as are cases in people with HIV. TB is an infectious bacterial disease caused by *Mycobacterium tuberculosis*, which most commonly affects the lungs. It is transmitted from person to person via droplets from the throat and lungs of people with the active respiratory disease. In healthy people, infection with *Mycobacterium tuberculosis* often causes no symptoms, since the person’s immune system acts to “wall off” the bacteria. The symptoms of active TB of the lungs are coughing, sometimes with sputum or blood, chest pains, weakness, weight loss, fever and night sweats. Tuberculosis is treatable within a six-month course of antibiotics.

Division of indicator

The indicator has three sub indicators:

- Tuberculosis incidence rate per year per 100,000 population
- Tuberculosis prevalence rate per year per 100,000 population
- Tuberculosis death rate per year per 100,000 population

See above for definitions.

Obtaining International Data

Treatment success rates are calculated from cohort data (outcomes in registered patients) as the proportion of new smear-positive TB cases registered under DOTS in a given year that successfully completed treatment, whether with (“cured”) or without (“treatment completed”) bacteriologic evidence of success.

The data on incidence rate associated with tuberculosis and the data on prevalence and death rates associated with tuberculosis is estimated. There is no documentation on method used, or any information on what national data, if any, has been utilized.

The data from responsible institution are from WHO and the Global Health Observatory database: <http://apps.who.int/ghodata/>.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 6.10 Proportion of tuberculosis cases detected and cured under directly observed treatment short course

UN definition

The Tuberculosis (TB) detection rate is the percentage of estimated new infectious tuberculosis cases detected under the internationally recommended tuberculosis control strategy directly observed treatment short course (DOTS). The proportion of new smear-positive TB cases under DOTS in a given year that successfully

completed treatment, whether with or without bacterial evidence of success (“cured”) or without “treatment completed”. At the end of each treatment, each patient is assigned one of the six mutually exclusive treatment outcomes: cured; completed; died; failed; defaulted; and transferred out with outcome unknown. The proportion of cases assigned to these outcomes, plus any additional cases registered for treatment but not assigned to outcome, add up to 100% of cases registered. *TB* is an infectious bacterial disease caused by *Mycobacterium tuberculosis*, which most commonly affects the lungs. It is transmitted from person to person via droplets from the throat and lungs of people with the active respiratory disease. In healthy people, infection with *Mycobacterium tuberculosis* often causes no symptoms, since the person’s immune system acts to “wall off” the bacteria. The symptoms of active TB of the lungs are coughing, sometimes with sputum or blood, chest pains, weakness, weight loss, fever and night sweats. Tuberculosis is treatable within a six-month course of antibiotics. Smear-positive is defined as a case of TB where *Mycobacterium tuberculosis* bacilli are visible in the patient’s sputum when examined under a microscope. A new case of TB is defined as a patient who has never received treatment for TB, or has who has taken anti-TB drugs for less than 1 month. *DOTS* is the internationally recommended approach to TB control, which forms the core of the Stop TB Strategy (WHO, 2006). The five components are:

- Political commitment with increased and sustained financing.
- Case detection through quality-assured bacteriology.
- Standardized treatment with supervision and patient support.
- An efficient drug supply and management system.
- A monitoring and evaluation system.

In countries that has adopted the DOTS strategy; it might be implemented in all or some parts of the country, and all or some of the health-care providers. Only those TB patients notified by health-care facilities providing DOTS services are included in this indicator.

Division of indicator

The indicator has two sub indicators:

- Tuberculosis detection rate under DOTS, percentage
- Tuberculosis treatment rate under DOTS, percentage

See above for definitions.

Obtaining International Data

Estimates of incidence are based on a consultative and analytical process in WHO and are published annually. The DOTS detection rate for new smear-positive cases is calculated by dividing the number of new smear-positive cases treated in DOTS programmes and notified to WHO divided by the estimated number of incident smear-positive cases for the same year, expressed as a percentage.

Estimates of incidence (for additional details, please refer to the TB incidence indicator metadata) are based on a consultative and analytical process lead by the WHO and are published annually.

The data on proportion of tuberculosis cases detected under directly observed treatment short course is estimated. There is no documentation on method used, or any information on what national data, if any, has been utilized. The data on proportion of tuberculosis cases cured under directly observed treatment short course is country data. No information on the national data has been provided.

The data from responsible institution are from WHO and the Global Health Observatory database: <http://apps.who.int/ghodata/>.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

2007: MKUKUTA Annual Implementation Report 2008/2009, page 118.

2006: MKUKUTA Annual Implementation Report 2008/2009, page 118.

2005: Poverty and Human Development Reports (PHDR) 2007, Figure 18, page 40. The original data source is Ministry of Health and Social Welfare (MOHSW) Annual Reports of National TB & Leprosy Programme as per PHDR document. Note that the data is for Tuberculosis Treatment Success Rates 2001-2005.

2004: Poverty and Human Development Reports (PHDR) 2007, Figure 18, page 40. The original data source is Ministry of Health and Social Welfare (MOHSW) Annual Reports of National TB & Leprosy Programme as per PHDR document. Note that the data is for Tuberculosis Treatment Success Rates 2001-2005.

2003: Poverty and Human Development Reports (PHDR) 2007, Figure 18, page 40. The original data source is Ministry of Health and Social Welfare (MOHSW) Annual Reports of National TB & Leprosy Programme as per PHDR document. Note that the data is for Tuberculosis Treatment Success Rates 2001-2005. ASHA 2006, table 3.9, page 41.

2002: Poverty and Human Development Reports (PHDR) 2007, Figure 18, page 40. The original data source is Ministry of Health and Social Welfare (MOHSW) Annual Reports of National TB & Leprosy Programme as per PHDR document. Note that the data is for Tuberculosis Treatment Success Rates 2001-2005.

2001: Poverty and Human Development Reports (PHDR) 2007, Figure 18, page 40. The original data source is Ministry of Health and Social Welfare (MOHSW) Annual Reports of National TB & Leprosy Programme as per PHDR document. Note that the data is for Tuberculosis Treatment Success Rates 2001-2005.

Sources available on internet

www.moh.go.tz: Ministry of Health

1.8. Goal 7: Ensure environmental sustainability

The seventh millennium development goal is to ensure environmental sustainability, and consists of four targets:

- 7A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources
- 7B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss
- 7C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation
- 7D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

Target 7A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources

Target 7A is to integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources, and consists of five indicators

- Indicator 7.1 Proportion of land areas covered by forest
- Indicator 7.2 CO₂ emissions, total, per capita and per \$1 GDP (PPP)
- Indicator 7.3 Consumption of ozone-depleting substances
- Indicator 7.4 Proportion of fish stocks within safe biological limits
- Indicator 7.5 Proportion of total water resources used

Indicator 7.4 has no institution that is responsible for collecting data for the UN MDG database, which also results in missing definition on this indicator.

*Indicator 7.1 Proportion of
land areas covered by
forest*

UN definition

Forest is defined in the Food and Agricultural Organization's (FAO) Global Forest Resources Assessment as land spanning more than 0.5 hectares with trees higher than 5 meters and a canopy cover of more than 10 percent, or trees able to reach these thresholds in situ. It does not include land that is predominately under agricultural or urban use land use. Forest is determined both by the presence of tree and absence of other predominant land uses. The trees should reach a minimum height of 5 meters (m) in situ. Areas under reforestation that have not yet reached but are expected to reach a canopy of 10 percent and a tree height of 5 meter are included, as are temporarily unstocked areas, resulting from human intervention or natural causes, which are expected to regenerate. Includes: Areas with bamboo and palms provided that height and canopy cover criteria are met; forest roads, firebreaks and other small open areas; forest in national parks, nature reserves and other protected areas such as those of specific scientific, historical, cultural or spiritual interest; windbreaks, shelterbelts and corridors of trees with an area of more than 0.5 ha and a width of more than 20 meters; plantations primarily used for forestry or protective purposes, such as rubber-wood plantation and cork oak stands. Excluded: Tree stands in agricultural production systems, for example in fruit plantation and agroforestry systems. The term also excludes trees in urban parks and gardens.

Obtaining International Data

FAO has been collecting and analyzing data on forest area since 1946. This is done at intervals of 5-10 years as part of the Global Forest Resources Assessment (FRA). FRA 2005 contains information for 229 countries and territories on more than 40 variables related to the extent of forests, their conditions, uses and values for three points in time: 1990, 2000 and 2005. All data are provided to FAO by the countries in the form of a country report following a standard format, which includes the original data and reference sources and descriptions of how these have been used to estimate the forest area for different points in time. (For definitions, reporting guidelines and format in English, French, Spanish, Arabic and Russian see (<http://www.fao.org/forestry/site/32180/en>)). Officially nominated national correspondents and their teams prepared the country reports for the assessment. Some prepared more than one report as they also reported on dependent territories. For the few remaining countries and territories where no information is provided, a report is prepared by FAO using existing information and a literature search. Once received, the country reports undergo a rigorous review process to ensure correct use of definitions and methodology as well as internal consistency. A comparison is made with past assessments and other existing data sources. Regular contacts between national correspondents and FAO staff by e-mail and regional/sub-regional review workshops form part of this review process. All country reports (including those prepared by FAO) are sent to the respective Head of Forestry for validation before finalization. The data are then aggregated at sub-regional, regional and global levels by the FRA team at FAO. Documentation: <http://www.fao.org/forestry/home/en/>

The UN data on proportion of land areas covered by forest is country data for Tanzania. No information on what national data has been provided.

The World Bank data are from the 2009 World Development Indicators (WDI) database.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

2005: Millennium Development Goals Progress Report (MDG) 2006, Table 12, Page 25. The original source is from Environment Statistics Mainland Tanzania (URT 2005); WRI 2000.

2000: Millennium Development Goals Progress Report (MDG) 2006, Table 12, Page 25. The original source is from Environment Statistics Mainland Tanzania (URT 2005); WRI 2000.

1990: Millennium Development Goals Progress Report (MDG) 2006, Table 12, Page 25. The original source is from Environment Statistics Mainland Tanzania (URT 2005); WRI 2000.

Indicator 7.2 CO2 emissions, total, per capita and per \$1 GDP (PPP)

UN definition

Total CO2 emissions: Estimates of total carbon dioxide (CO₂) emissions include anthropogenic emissions, less removal by sinks, of carbon dioxide (CO₂). The term “total” implies that emissions from all national activities are considered. The typical sectors for which CO₂ emissions/removals are estimated are energy, industrial processes, agriculture, waste and the sector for land use, land-use change and forestry (LULUCF). National reporting to the United Nations Convention of Climate Change that follows the International Panel on Climate Change guidelines is based on national emission inventories and covers all sources of anthropogenic carbon dioxide emissions as well as carbon sinks (such as forests). CO₂ emissions/removals by land use, land-use change and forestry are often known with much less certainty than emissions from other sectors, or emissions/removals estimates for LULUCF may not be available at all. In such cases, “total” emissions can be calculated as the sum of emissions for the sectors of energy, industrial use, agriculture, and waste.

CO2 emissions per capita: Carbon emissions per capita are measured as the total amount of carbon dioxide emitted by the country as a consequence of all relevant human (production and consumption) activities, divided by the population of the country.

CO2 emissions per \$1 GDP (PPP): Total CO₂ Emissions divided by the total value of the gross national product (GDP) expressed in purchasing power parity (PPPs).

Division of indicator

The indicator has five sub indicators:

- Carbon dioxide emissions (CO₂), thousand metric tons of CO₂ (CDIAC)
- Carbon dioxide emissions (CO₂), thousand metric tons of CO₂ (UNFCCC)
- Carbon dioxide emissions (CO₂), metric tons of CO₂ (CDIAC)
- Carbon dioxide emissions (CO₂), metric tons of CO₂ (UNFCCC)
- Carbon dioxide emissions (CO₂), kg CO₂ per \$1 GDP (PPP)

See above for definitions.

Obtaining International Data

The information, including GHG and CO₂ data, is usually submitted by Parties through their national UNFCCC focal points, which can be found at:

<http://maindb.unfccc.int/public/nfp.pl>. The data submitted by Annex I Parties are subject to a rigorous review process, which is coordinated by the UNFCCC secretariat in accordance with the guidelines agreed under the Climate Change Convention and conducted by international teams of experts. The reviews of national GHG data are conducted annually and the international expert teams check the robustness of the estimates and their correspondence to the methodologies recommended by the IPCC. The results of reviews are publicly available in the form of the so-called review reports which can be found at the UNFCCC website at:

http://unfccc.int/national_reports/annex_i_ghg_inventories/inventory_review_reports/items/3723.php No adjustments to any international classification are used, but

all data have to be submitted electronically in an agreed common format (the Common reporting Format - CRF) and the methodologies for emission calculation should be consistent with those recommended by the IPCC, which is checked during the annual reviews by international expert teams.

The UN data on CO2 emissions, total, per capita and per \$1 GDP (PPP) is global monitoring data. There is no information on what, if any, national data has been used as a basis.

The World Bank data are from the 2009 World Development Indicators (WDI) database.

The data from responsible institution are from the web page of CDIAC:
http://cdiac.ornl.gov/trends/emis/tre_coun.html

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 7.3 Consumption of ozone-depleting substances

UN definition

The indicator is used to monitor the reduction in the usage of Ozone Depleting Substances (ODSs) as a result of the Montreal Protocol. Therefore only ODSs controlled under the Montreal Protocol are covered by the indicator. Reducing consumption ultimately leads to reduction in emissions since most uses of ODSs finally leads to the substances being emitted into the atmosphere. The Units of Measurement are metric tons of ODS weighted by their Ozone Depletion Potential (ODP), otherwise referred to as ODP tons. This indicator signifies the progress made toward meeting the commitment to phase out the use of ODSs of the countries which has ratified the 1987 Montreal Protocol on Substances the Deplete the Ozone Layer and its Amendments of London (1990), Copenhagen (1992) and Beijing (1999).

Obtaining International Data

The data on proportion of land areas covered by forest is country data. There is no information on the national data has been provided.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 7.4 Proportion of fish stocks within safe biological limits

There is no international institution responsible for this indicator.

UN definition

There is no UN definition of this indicator

Obtaining international data

There is no international data on this indicator

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 7.5 Proportion of total water resources used

UN definition

Proportion of the total renewable water resources withdrawn is the total volume of groundwater and surface water withdrawn from their sources for human use (in agricultural, domestic and industrial sectors), expressed as a percentage of the total volume of water available annually through the hydrological cycle (total renewable water resources). The terms *water resources* and *water withdrawal* are understood as *freshwater resources* and *freshwater withdrawals*.

Obtaining International Data

FAO has been collecting and analyzing data on water resources and their use through its AQUASTAT country surveys since 1992. The periodicity of country surveys is about 10 years due to budgetary constraints, but it could be reduced to 3-5 years relatively easily. Data on water resources, expressed in long-term averages of annual values, can be considered stable (they vary annually around a long term average which is constant, except on a long term basis where climate change can induce variations). They have been estimated by FAO on the basis of country information, complemented with available global datasets, and published in 2003 and are available for all countries at <ftp://ftp.fao.org/agl/aglw/docs/wr23e.pdf>. Updates are made when new information becomes available, and the latest country dataset is available online at http://www.fao.org/nr/water/aquastat/water_res/index.stm.

Water use data have been collected from information available at country level for the period 1990-2000 through the AQUASTAT country surveys. Estimates of water use, based on a standardized methodology, have been made by FAO for most countries for the year 2000 and are available at <http://www.fao.org/nr/water/aquastat/dbases/index.stm>. They are based on country information, complemented, when needed, with expert estimates based on unit water use figures by sector.

AQUASTAT data on water resources and use are also published every 3 years through the UN World Water Development Report. A comparative analysis of available country water resources data is carried out at regular intervals. On that basis, AQUASTAT compiles and updates its best estimates of the main elements of the water balance for each country. AQUASTAT collects statistics on water resources and data on water resources obtained from national sources are systematically reviewed to ensure consistency in definitions and between countries located in the same river basin. A methodology has been developed and rules established to compute the different elements of national water balances. In the case of conflicting sources of information, the difficulty lies in selecting the most reliable one. In some cases, water resources figures vary considerably from one source to another. Existing documentation: <http://www.fao.org/nr/water/aquastat/main/index.stm>

The data on proportion of total water resources used for Tanzania is estimates. There is no information what method was used or what national data, if any, has been used for the estimation. The data refers to 1998-2002.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 7B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss

Target 7B is to reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss, and consists of two indicators:

Indicator 7.6 Proportion of terrestrial and marine areas protected

Indicator 7.7 Proportion of species threatened with extinction

Indicator 7.6 Proportion of terrestrial and marine areas protected

UN definition

The unit of measure in this indicator is a “protected area”. The World Conservation Union – IUCN, defines a protected area as an area of land and/or sea especially dedicated to the protection and maintenance of biological diversity, and of natural and associated cultural resources, and managed through legal or other effective means. “Designated” is defined as: The authority that corresponds according to national legislation or common practice (e.g. by means of an executive decree or the like) officially endorses a document of designation.

Obtaining International Data

The World Database on Protected Areas (WDPA) is compiled from multiple sources and is the most comprehensive global dataset on marine and terrestrial protected areas available. It is a joint project of UNEP-WCMC and the IUCN World Commission on Protected Areas working with governments and collaborating non-governmental organizations (NGOs). A major source of information is through the UN List process, which takes place every 4-5 years. As part of this process, key stakeholders review and provide information to assist in the compilation of the UN List of Protected areas. In the intervening period between UN Lists, UNEP-WCMC works closely with national authorities and NGOs to continually update the WDPA, as new information becomes available. Partnerships such as the one between UNEP-WCMC and the European Environment Agency have aided the collection of information on a regional scale. Collaborative projects such as the ‘MPA Global’ project, undertaken through the Sea Around Us Project and the University of British Columbia, with the support of WWF and UNEP-WCMC, have enhanced the amount and quality of marine protected areas data for the WDPA. Early 2008 will see a transition of MPA Global back into the WDPA, which includes the data and the mechanisms for data collection, ready for the re-launch of the redeveloped online WDPA system in 2008. Through the UN List process, every 4 – 5 years, UNEP-WCMC requests national agencies to review current lists (including GIS) of protected areas for their country as well as to provide updated information. In addition to this process UNEP-WCMC works closely with national agencies, NGOs and protected areas experts (through the IUCN WCPA) around the world to review, update and acquire new protected areas data. Once at UNEP-WCMC the data is processed and validated through a number of spatial (GIS) and database tools, developed by UNEP-WCMC, to project and translate the data into the standard WDPA data structure to enable integration into the database. Once the data has been converted it is also compared to the existing information within the WDPA. Where discrepancies or gaps in the dataset exist UNEP-WCMC staff communicates with the data provider and external data reviewers to resolve any issue. Once the review process is complete the data is fully integrated into the published WDPA. The data is adjusted accordingly to account for transboundary protected areas (protected areas that transcend international boundaries) to ensure that the appropriate area / extent from the total area for that site is attributed to the country in which it is contained. Similar adjustments have been made where a protected area transcends both marine and terrestrial environments.

The data on proportion of terrestrial and marine areas protected is estimated for Tanzania. Area km² (Value) is the area designated in that year as listed in the World Database on Protected Areas and may be generated from spatial (GIS) boundary data as outlined in series Metadata sheet in Treatment of Missing Values. Includes areas for which year (Date of Establishment/designation) is unavailable.

Sites are nationally designated. Designated is defined as the authority correspond to national legislation or common practice (e.g. by means of an executive decrees or the alike) officially endorses a document of designation. There is no information on what specific national sources, if any, have been used.

Where is their MDG database (own or directly to UNs)

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 7.7 Proportion of species threatened with extinction

UN definition

The indicator *Changes in the Status of Species* indicates the change in threat status of species in their natural habitat, based on population in and range size and trends, as quantified by the categories of the IUCN Red List of Threatened Species (hereafter 'IUCN Red List'; <http://www.redlist.org>). The world's species are impacted by a number of threatening processes, including habitat destruction and degradation, overexploitation, invasive alien species, human disturbance, pollution, and climate change. This indicator measure overall changes in the extinction risk of sets of species as a result of these impacts and the extent to which they are being mitigated. The IUCN Red List Index (IUCN RLI) uses data from the IUCN Red List to show changes over time in the overall threat status (relative projected extinction risk) of representative sets of species. The IUCN Red List is widely recognised as the most authoritative and objective method of classifying the status of the species. It uses quantitative criteria based on population size, rate of decline, and area of distribution to assign species to the following categories of relative extinction risk: *Least Concern, Near Threatened, Vulnerable, Endangered, Critically Endangered, Extinct in the Wild, Extinct and Data Deficient* (IUCN 2001). It has been developed by the IUCN Species Survival Commission (IUCN SSC) and partners BirdLife International, The Zoological Society of London, Conservation International-Centre of Applied Biodiversity and NatureServe. The IUCN RLI is an index of the proportion of species expected to remain living (i.e. not extinct) in the near future in the absence of any conservation action. The 'near future' cannot be quantified exactly, because it depends on the generation time of each of the species contributing to the index, but in most cases the period can be in the range of 10-50 years for species with short generation length, and 10-100 years for species with long generation lengths. The IUCN RLI value can range from 1 (when all species are categorised as Least Concern) to 0 (when all species are categorised as extinct). An immediate value indicates how far the set of species has moved overall toward extinction. Thus, the IUCN RLI allows comparisons between sets of species in both their overall level of extinction risk (i.e. how threatened they are on average), and in the rate at which this changes over time. A downward trend in the IUCN RLI over time means that the expected rate of future species extinction is worsening (i.e. the rate of biodiversity loss is increasing). An upward trend means that the expected rate of extinction is abating (i.e. the rate of biodiversity loss is decreasing), and a horizontal line means that the expected rate of species extinction is remaining the same, although in each of these cases it does not mean that biodiversity loss has stopped. Hence, to show the target of significantly reducing the loss of biodiversity may have been met, and upward IUCN RLI trend is needed at the very least. An IUCN RLI value of 1.0 would show that biodiversity loss has been halted.

Obtaining International Data

UNEP's own description of its nature and purpose:

Environmental development is key to achieving overall sustainable development.

UNEP's work to promote environmental sustainability, the object of Millennium

Development Goal 7, underpins global efforts to achieve all of the Goals agreed by world leaders at the Millennium Summit. UNEP supports assessments of environmental conditions and trends including building the capacity of its many partners to generate the information necessary for sound environmental decision making to support sustainable development and the achievement of the Millennium Goals. UNEP's work encompasses:

- Assessing global, regional and national environmental conditions and trends.
- Developing international and national environmental instruments.
- Strengthening institutions for the wise management of the environment.
- Facilitating the transfer of knowledge and technology for sustainable development.
- Encouraging new partnerships and mind-sets within civil society and the private sector.

Red List assessments are made through an inclusive process, which is open to all interested parties and stakeholders, either through open workshops or open-access web-based discussion fora (e.g. <http://www.birdlifeforums.org>). Contributors include professional scientists, specialists and conservationists from a broad spectrum of institutions, including governments, museums, universities and local, national, regional and global non-governmental organisations. Assessments are given independent scientific review by the appropriate Red List Authority (an individual or organisation appointed by the IUCN SSC to review assessments for specific species or groups of species) to ensure standardisation and consistency in the interpretation of information and application of the criteria. A Biodiversity Assessments User's Working Group and the IUCN Red List Unit work to ensure consistent categorisation between species, groups and assessments. Finally, a Red List Standards and Petitions Working Group monitors the process and resolves challenges and disputes over Red List assessments.

All these data are stored and managed in the IUCN Red List database (IUCN's Species Information Service, SIS), and made freely available through the IUCN Red List website (<http://www.redlist.org>), which is updated annually.

There is no national data on Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 7C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation

Target 7C is to halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation, and consists of two indicators:

Indicator 7.8 Proportion of population using an improved drinking water source

Indicator 7.9 Proportion of population using an improved sanitation facility

Indicator 7.8 Proportion of population using an improved drinking water source

UN definition

The proportion of the population using an improved water source, total, urban, and rural, is the percentage of the population who use any of the following types of water supply for drinking: piped water into dwelling, plot or yard; public tap/standpipe; borehole/tube well; protected dug well; protected spring; rainwater collection and bottled water (if a secondary available source is also improved). It does not include unprotected well, unprotected spring, water provided by carts with small tanks/drums, tanker truck-provided water and bottled water (if secondary

source available is not an improved source) or surface water taken directly from rivers, ponds, streams, lakes, dams, or irrigated channels. Definitions and a detailed description of these facilities can be found at the web site of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation at www.wssinfo.org.

Obtaining International Data

Primary data sources used for international monitoring include nationally representative household surveys, including Multiple Indicator Cluster Surveys (MICS), Demographic Health Surveys (DHS), World Health Surveys (WHS), Living Standards and Measurement Surveys (LSMS), Core Welfare Indicator Questionnaires (CWIQ), (Pan Arab Project for Family Health Surveys (PAPFAM), and population censuses. Most of the survey data can be downloaded from the organizations that supported these surveys through the Internet. Census data are often obtained directly from National Statistics Offices. The use of drinking water sources and sanitation facilities is part of the wealth-index used by household surveys to divide the population into wealth quintiles. As a result, most nationally representative household surveys include information about water and sanitation. To seek out these national data sources that might otherwise be overlooked, UNICEF conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING). CRING gathers recent information for all indicators regularly reported on by UNICEF, including the water supply and sanitation indicators. Surveys found through CRING include Household Budget Surveys, Reproductive Health Surveys, Labour Force Surveys, and Welfare Monitoring Surveys, etc. The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) is charged with international monitoring of the MDG drinking water and sanitation target. When the JMP receives new survey or census data, its staff assesses the validity of the data by review, using a set of objective criteria. New survey data are entered into the JMP database only when the accompanying survey documentation is available to JMP. Provider-based (reported) data are only used when there are no survey or census data available for a country for the period going back to 1980. The survey questions and response categories pertaining to access to drinking water are fully harmonized between MICS and DHS – which make up over 70 percent of all survey data in the JMP database. The same standard questions are being promoted for inclusion into other survey instruments and can be found at www.wssinfo.org.

The UN data on proportion of population using an improved drinking water source is estimated. There is no information on what method was used or what national data, if any, has been used for the estimation.

The World Bank data are from the 2009 World Development Indicators (WDI) database.

National sources

NBS data

- 2007: Household Budget Survey (HBS) 2007, table 3.6, page 14, Mainland Tanzania (national, urban/rural, urban excludes Dar es Salaam).
- 2004: Demography and Health Survey (DHS) 2004-05, table 2.7, page 22 and page 381 (national, urban/rural – Mainland Tanzania).
- 2002: Population and Housing Census (PHC) 2002, table 11.19, page 184 (national, urban/rural).
- 2001: Household Budget Survey (HBS) 2007, table 3.6, page 14, Mainland Tanzania. Household Budget Survey 2000/01, table 4.19, page 48 (Mainland Tanzania, urban/ rural).
- 1992: Household Budget Survey (HBS) 2007, table 3.6, page 14 (Mainland Tanzania, urban/rural).

Administrative sources

- 2003: Poverty and Human Development Reports (PHDR) 2005, Table 12, page 45.

Indicator 7.9 Proportion of population using an improved sanitation facility

UN definition

The proportion of people using an improved sanitation facility, total, urban, rural, is the percentage of the population with access to facilities that hygienically separate human excreta from human waste. Improved facilities include flush/pour flush toilets or latrines connected to a sewer, -septic tank, or -pit, ventilated improved pit latrines, pit latrines with a slab or platform of any material which covers the pit entirely, except for the drop hole and composting toilets/latrines. Unimproved facilities include public or shared facilities of an otherwise accepted type, flush/pour flush toilets or latrines which discharge directly into an open sewage or ditch, pit latrines without a slab, bucket latrines, hanging toilets or latrines which directly discharge in water bodies or in the open and the practice of open defecation in the bush, field or bodies of water. Definitions and a detailed description of these facilities can be found at the web site of the WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation at www.wssinfo.org.

Obtaining International Data

Primary data sources used for international monitoring include nationally representative household surveys, including Multiple Indicator Cluster Surveys (MICS), Demographic Health Surveys (DHS), World Health Surveys (WHS), Living Standards and Measurement Surveys (LSMS), Core Welfare Indicator Questionnaires (CWIQ), (Pan Arab Project for Family Health Surveys (PAPFAM), and population censuses. Most of the survey data can be downloaded from the organizations that supported these surveys through the Internet. Census data are often obtained directly from National Statistics Offices. The use of drinking water sources and sanitation facilities is part of the wealth-index used by household surveys to divide the population into wealth quintiles. As a result, most nationally representative household surveys include information about water and sanitation. To seek out these national data sources that might otherwise be overlooked, UNICEF conducts an annual exercise called the Country Reports on Indicators for the Goals (CRING). CRING gathers recent information for all indicators regularly reported on by UNICEF, including the water supply and sanitation indicators. Surveys found through CRING include Household Budget Surveys, Reproductive Health Surveys, Labour Force Surveys, and Welfare Monitoring Surveys, etc. The WHO/UNICEF Joint Monitoring Programme for Water Supply and Sanitation (JMP) is charged with international monitoring of the MDG drinking water and sanitation target. When the JMP receives new survey or census data, its staff assesses the validity of the data by review, using a set of objective criteria. New survey data are entered into the JMP database only when the accompanying survey documentation is available to JMP. Provider-based (reported) data are only used when there are no survey or census data available for a country for the period going back to 1980. The survey questions and response categories pertaining to access to drinking water are fully harmonized between MICS and DHS – which make up over 70 percent of all survey data in the JMP database. The same standard questions are being promoted for inclusion into other survey instruments and can be found at www.wssinfo.org.

The UN data on proportion of population using an improved drinking water source is estimated. There is no information on what method was used or what national data, if any, has been used for the estimation.

The World Bank data are from the 2009 World Development Indicators (WDI) database.

National sources

NBS data

2004: Demography and Health Survey (DHS) 2004-05, table 2.7, page 22 (national, urban/rural). Demography and Health Survey 2004-05, page 381.

Administrative sources

There is no data on this indicator from administrative sources.

Sources available on internet

www.nbs.go.tz: Demography and Health Survey (DHS) 2004-05

Target 7D: BY 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers

Target 7D is by 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers. The target consists of only one indicator, proportion of urban population living in slums.

Indicator 7.10 Proportion of urban population living in slums

UN definition

The proportion of urban population living in slums is the proportion of urban population living in slum households. A slum household is defined as a group of individuals living under the same roof lacking *one or more* of the following conditions:

- Access to improved water
- Access to improved sanitation
- Sufficient living area
- Durability of housing
- Security of tenure

However, since information on secure tenure is not available in most countries, only the first four indicators are used to define slum household, and then to estimate the proportion of urban population living in slums.

UN-HABITAT's strategic vision is anchored in a four-pillar strategy aimed at attaining the goal of Cities without Slums. This strategy consists of advocacy of global norms, analysis of information, field-testing of solutions and financing. These fall under the four core functions assigned to the agency by world governments - monitoring and research, policy development, capacity building and financing for housing and urban development.

Access to improved water:

Improved drinking water technologies are more likely to provide safe drinking water than those characterized as unimproved. A household is considered to have access to an improved water supply if it uses improved drinking water sources or delivery points (listed below).

Improved drinking water sources include:

- piped water into dwelling, plot or yard
- public tap/standpipe; tube well/borehole
- protected dug well; protected spring; and rainwater collection.

Unimproved drinking water sources include:

- unprotected dug well
- unprotected spring; cart with small tank/drum
- bottled water
- tanker-truck
- surface water (river, dam, lake, pond, stream, canal, irrigation channels)

Access to improved sanitation:

Improved sanitation facilities are more likely to prevent human contact with human excreta than unimproved facilities. A household is considered to have access to improved sanitation if it uses improved sanitation facilities (listed below).

Improved sanitation facilities include:

- flush or pour-flush to piped sewer system, septic tank or pit latrine
- ventilated improved pit latrine; pit latrine with slab
- composting toilet

Unimproved sanitation facilities include:

- flush or pour–flush to elsewhere
 - pit latrine without slab or open pit
 - bucket
 - hanging toilet or hanging latrine
- no facilities or bush or field.

Durability of housing:

A house is considered “durable” if it is built on a non-hazardous location and has a structure permanent and adequate enough to protect its inhabitants from the extremes of climatic conditions, such as rain, heat, cold and humidity.

Sufficient living area:

A house is considered to provide a sufficient living area for the household members if not more than three people share the same habitable (minimum of four square meters) room.

Secure tenure:

Secure tenure is the right of all individuals and groups to effective protection by the State against arbitrary unlawful evictions. People have secure tenure when there is evidence of documentation that can be used as proof of secure tenure status or when there is either de facto or perceived protection against forced evictions.

1. According to the situation in a specific city this definition may be locally adapted. For example, in Rio de Janeiro living area is insufficient for both the middle classes and the slum population and is not a good discriminator. It could either be omitted, or it could be formulated as two or more of the conditions such as overcrowding and durability of housing.
2. Bottled water is considered improved only when the household uses water from an improved source for cooking and personal hygiene
3. Only facilities, which are not shared or are not public are considered improved.
4. Excreta are flushed to the street, yard or plot, open sewer, a ditch, a drainage way or other location.

Obtaining International Data

Household survey data is preferred when available, such as the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) as well as other household data (surveys or censuses), are the preferred sources of data. When household survey data are available, the response categories for questions on access to water, access to sanitation, overcrowding, quality of dwelling and security of tenure are reviewed. Where possible, the response categories are grouped or interpreted according to Expert Group Meeting (EGM) definitions of slum dwellers (e.g., not all surveys or censuses use the same categories to define access to water and sanitation in the same way). Households that lack either of the above conditions are tallied ensuring that, a household lacking more than one condition is only counted once. Proportion of population living in these households is then estimated. Estimated data for this indicator are obtained via the following process. Initially, a country Desk review of primary (published or electronic) sources is conducted. Data can then be obtained either from the country or from official international database publication such as Demographic and Health Survey-DHS (<http://www.measuredhs.com>) or Multiple Indicators Clusters Survey – MICS (<http://www.childinfo.org>) or Integrated Public Use Micro data Series – IPUS (<http://www.ipums.org>), or national official database, or via CDs. Over 350 surveys and censuses have been obtained and used in the estimation of slum dwellers. When household survey data were available the response categories for questions on access to water, access to sanitation, overcrowding, quality of housing and security of tenure are reviewed. In some instances it is possible to cross reference with alternative estimates or sources, or consult other countries with similar characteristics. Many countries in Africa and Asia have done DHS surveys more than once. When these data are available both data files are accessed as a confirmatory measure.

The data on proportion of urban population living in slums is estimated. The national data used as a basis for the estimates are the DHS 1992, 1996 and 1999. For the 2005 data, trend analysis was also used to estimate the percentage of slum. The decrease in the percentage of slum dwellers is mostly due to a change in the definition of adequate sanitation. In 2005, only a proportion of households using pit latrines were considered slum households, whereas in 1990 and 2001 all households using pit latrines were counted as slum households.

Where is their MDG database (own or directly to UNs)

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

1.9. Goal 8: Develop a global partnership for development

The eight millennium development goal is to develop a global partnership for development, and consists of six targets:

8A: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

8B: Address the special needs of the least developed countries

8C: Address the special needs of landlocked developing countries and small island developing states (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)

8D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long run

8E: In cooperation with Pharmaceutical companies, provide access to affordable essential drugs in developing countries

8F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communication

The goal has 16 indicators, and several of those indicators measures the western world's commitment to the MDGs. The actual connection between targets and indicators varies under this goal, we have tried to put the indicators under the targets thematically connected them.

Target 8A: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system

Target 8A is to develop further an open, rule-based, predictable, non-discriminatory trading and financial system, and consists of one indicator, net ODA (official development assistance), total and to the least developed countries, as percentage of OECD/DAC donors' gross national income.

Indicator 8.1 Net ODA

(official development assistance), total and to the least developed countries, as percentage of OECD/DAC donors' gross national income

UN definition

Net official development assistance (ODA) comprises grants or loans to developing countries and territories on the Organization for Economic Cooperation and Development/Development Assistance Committee (OECD/DAC) list of aid recipients that are undertaken by the official sector with promotion of economic development and welfare as the main objective and at concessional financial terms. Technical cooperation is included. Grants, loans and credits for military purposes are excluded. Also excluded are aid to more advanced developing and transition countries as determined by the DAC. Donors' gross national income (GNI) at market prices is the sum of gross primary incomes receivable by resident institution units and sectors. GNI at market prices was called gross domestic product (GDP) in the 1953 System of National Accounts. In contrast to the gross domestic product (GDP), GNI is a concept of income (primary income) rather than value added. GNI

is equal to GDP (which at market prices represent the final result of the production activity of resident producer units) less taxes (less subsidies) on products and imports, compensation of employees and property income payable to the rest of the world plus the corresponding items receivable from the rest of the world. The list of least developed countries (LDCs) has been agreed by the General Assembly, on the recommendation of the Committee for Development Policy, Economic and Social Council. It includes the following 50 countries, classified by region:

Africa: Angola, Benin, Burkina Faso, Burundi, Cape Verde, The Central African Republic, Chad, Comoros, The Democratic Republic of Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, The Gambia, Guinea, Guinea-Bissau, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Niger, Rwanda, Saõ Tomé and Príncipe, Senegal, Sierra Leone, Somalia, The Sudan, Togo, Uganda, The United Republic of Tanzania and Zambia.

Asia and the Pacific: Afghanistan, Bangladesh, Bhutan, Cambodia, Kiribati, the Lao People's Democratic Republic, Maldives, Myanmar, Nepal, Samoa, Solomon Islands, Timor Leste, Tuvalu, Vanuatu and Yemen.

Latin America and the Caribbean: Haiti

Division of indicator

This indicator has four sub indicators:

- Net ODA, as percentage of OECD/DAC donors GNI
- Net ODA, to LDCs as percentage of OECD/DAC donors GNI
- Net ODA, million US\$
- Net ODA to LCDs, million of US\$

Obtaining International Data

All data on ODA are collected by the OECD/DAC Secretariat from its 23 members, then checked and aggregated by the OECD/DAC Secretariat. The DAC Secretariat collects two sets of data:

1. *DAC Questionnaire*. A set of eight statistical tables completed annually in the fall by DAC members, who report the amount and destination of their official and private flows made in the previous year. Detailed information is collected regarding the destination, form, terms, sector and tying status of official flows. A simplified form of the questionnaire is completed by multilateral agencies. Non-DAC donors also report on a voluntary basis on an abridged questionnaire. There is also a one-page "Advance Questionnaire on Main DAC Aggregates" completed by DAC members each April to give preliminary data on their ODA flows made in the previous year. See www.oecd.org/dac/stats/dac/guide for details.

2. *Creditor Reporting System (CRS)*. A system for reporting individual official transactions (both ODA and other official flows) relevant to development. Reports are received directly from participating official agencies, including bilateral and multilateral aid agencies, development lending institutions, and export credit agencies. Follow up reports on the disbursement and repayment status of loans allow the Secretariat to calculate the debt burden of developing countries. See www.oecd.org/dac/stats/dac/guide for details.

The DAC Working Party on Statistics reviews the operation of the data collection system in annual formal meetings, and in informal meetings. The OECD/DAC Secretariat checks the data and their compliance with the methodology. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues.

There is no data available for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 8B: Address the special needs of the least developed countries

Target 8B is addressing the special needs of the least developed countries, and consists of six indicators:

Indicator 8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)

Indicator 8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied

Indicator 8.6 Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty

Indicator 8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries

Indicator 8.8 Agricultural support estimates for OECD countries as a percentage of their gross domestic product

Indicator 8.9 Proportion of ODA provided to help build trade capacity

Indicator 8.2 Proportion of total bilateral, sector-allocable ODA of OECD/DAC donors to basic social services (basic education, primary health care, nutrition, safe water and sanitation)

UN definition

Official development assistance comprises grants or loans to developing countries and territories on the OECD Development Assistance Committee (DAC) list of aid recipients that are undertaken by the official sector with promotion of economic development and welfare as the main objective and at concessional financial terms. Technical cooperation is included. Grants, loans and credit for military purposes are excluded. Also excluded are aid to more advanced developing and transitional countries as determined by the DAC. Basic education comprises primary education, basic life skills for youth and early childhood education. Primary health care includes basic health care, basic health infrastructure, basic nutrition, infectious disease control, health education and health personnel development. Population programmes/policies and reproductive health includes population policy and administrative management, reproductive health care, family planning, sexually transmitted diseases (STD) control including HIV/AIDS and personnel development (population and reproductive health). Basic social services (BSS) also include basic drinking water supply and basic sanitation, and multi-sector aid for BSS: Bilateral official development assistance is from one country to another.

Division of indicator

The indicator has two sub indicators:

- ODA to basic social services as percentage of sector-allocable ODA
- ODA to basic social services, million US\$

Obtaining International Data

All data on ODA are collected by the OECD/DAC Secretariat from its 23 members, then checked and aggregated by the OECD/DAC Secretariat. The DAC Secretariat collects two sets of data:

1. *DAC Questionnaire*. A set of eight statistical tables completed annually in the Fall by DAC members, who report the amount and destination of their official and private flows made in the previous year. Detailed information is collected regarding the destination, form, terms, sector and tying status of official flows. A simplified form of the questionnaire is completed by multilateral agencies. Non-DAC donors also report on a voluntary basis on an abridged questionnaire. There is also a one-page "Advance Questionnaire on Main DAC Aggregates" completed by DAC members each April to give preliminary data on their ODA flows made in the previous year. See www.oecd.org/dac/stats/dac/guide for details.

2. *Creditor Reporting System (CRS)*. A system for reporting individual official transactions (both ODA and other official flows) relevant to development. Reports are received directly from participating official agencies, including bilateral and multilateral aid agencies, development lending institutions, and export credit agencies. Follow up reports on the disbursement and repayment status of loans allow the Secretariat to calculate the debt burden of developing countries. See www.oecd.org/dac/stats/dac/guide for details.

The DAC Working Party on Statistics reviews the operation of the data collection system in annual formal meetings, and in informal meetings. The OECD/DAC Secretariat checks the data and their compliance with the methodology. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues. Existing documentation: <http://mdgs.un.org/unsd/mdg/Metadata.aspx>

There is no data available for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 8.3 Proportion of bilateral official development assistance of OECD/DAC donors that is untied

UN definition

Official development assistance (ODA) comprises grants or loans to developing countries and territories on the OECD Development Assistance Committee list of aid recipients that are undertaken by the official sector with promotion of economic development and welfare as the main objective and at concessional financial terms. Technical cooperation is included. Grants, loans and credits for military purposes are excluded. Also excluded are aid to more advanced developing and transition countries as determined by the DAC. Untied bilateral official development assistance is assistance from country to country for which the associated goods and services may be fully and freely procured in substantially all countries.

Division of indicator

The indicator has two sub indicators:

- ODA that is untied, percentage
- ODA that is untied, million US\$

Obtaining International Data

All data on ODA are collected by the OECD/DAC Secretariat from its 23 members, then checked and aggregated by the OECD/DAC Secretariat. The DAC Secretariat collects two sets of data:

1. *DAC Questionnaire*. A set of eight statistical tables completed annually in the Fall by DAC members, who report the amount and destination of their official and private flows made in the previous year. Detailed information is collected regarding the destination, form, terms, sector and tying status of official flows. A simplified form of the questionnaire is completed by multilateral agencies. Non-DAC donors also report on a voluntary basis on an abridged questionnaire. There is also a one-page "Advance Questionnaire on Main DAC Aggregates" completed by DAC members each April to give preliminary data on their ODA flows made in the previous year. See www.oecd.org/dac/stats/dac/guide for details.

2. *Creditor Reporting System (CRS)*. A system for reporting individual official transactions (both ODA and other official flows) relevant to development. Reports are received directly from participating official agencies, including bilateral and multilateral aid agencies, development lending institutions, and export credit agencies. Follow up reports on the disbursement and repayment status of loans

allow the Secretariat to calculate the debt burden of developing countries. See www.oecd.org/dac/stats/dac/guide for details.

The DAC Working Party on Statistics reviews the operation of the data collection system in annual formal meetings, and in informal meetings. The OECD/DAC Secretariat checks the data and their compliance with the methodology. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues

There is no data available for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 8C: Address the special needs of landlocked developing countries and small island developing states (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly)

Target 8C is addressing the special needs of landlocked developing countries and small island developing states (through the Programme of Action for the Sustainable Development of Small Island Developing States and the outcome of the twenty-second special session of the General Assembly). The target has two indicators:

Indicator 8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes

Indicator 8.5 ODA received in small island developing states as a proportion of their gross national incomes

Indicator 8.4 ODA received in landlocked developing countries as a proportion of their gross national incomes

UN definition

Official development assistance (ODA) comprises grants or loans to developing countries and territories on the OECD Development Assistance Committee list of aid recipients that are undertaken by the official sector with promotion of economic development and welfare as the main objective and at concessional financial terms. Technical cooperation is included. Grants, loans and credits for military purposes are excluded. Also excluded are aid to more advanced developing and transition countries as determined by the DAC. Donors' gross national income (GNI) at market prices is the sum of gross primary incomes receivable by resident institution units and sectors. GNI at market prices was called gross domestic product (GDP) in the 1953 System of National Accounts. In contrast to the gross domestic product (GDP), GNI is a concept of income (primary income) rather than value added. GNI is equal to GDP (which at market prices represent the final result of the production activity of resident producer units) less taxes (less subsidies) on products and imports, compensation of employees and property income payable to the rest of the world plus the corresponding items receivable from the rest of the world. The landlocked developing countries are, by region:

Africa: Botswana, Burkina Faso, Burundi, The Central African Republic, Chad, Ethiopia, Lesotho, Malawi, Mali, Niger, Rwanda, Swaziland, Uganda, Zambia and Zimbabwe.

Asia and the Pacific: Afghanistan, Azerbaijan, Bhutan, Kazakhstan, Kyrgyzstan, The Lao People's Democratic Republic, Mongolia, Nepal, Tajikistan, Turkmenistan and Uzbekistan.

Europe: The Former Yugoslav Republic of Macedonia and the Republic of Moldova (expected from 2003).

Latin America and the Caribbean: Bolivia and Paraguay.

Division of indicator

The indicator is divided into two sub indicators:

- ODA received in landlocked developing countries as percentage of their GNI
- ODA received in landlocked developing countries, million US\$

Obtaining International Data

All data on ODA are collected by the OECD/DAC Secretariat from its 23 members, then checked and aggregated by the OECD/DAC Secretariat. The DAC Secretariat collects two sets of data:

1. *DAC Questionnaire*. A set of eight statistical tables completed annually in the Fall by DAC members, who report the amount and destination of their official and private flows made in the previous year. Detailed information is collected regarding the destination, form, terms, sector and tying status of official flows. A simplified form of the questionnaire is completed by multilateral agencies. Non-DAC donors also report on a voluntary basis on an abridged questionnaire. There is also a one-page "Advance Questionnaire on Main DAC Aggregates" completed by DAC members each April to give preliminary data on their ODA flows made in the previous year. See www.oecd.org/dac/stats/dac/guide for details.

2. *Creditor Reporting System (CRS)*. A system for reporting individual official transactions (both ODA and other official flows) relevant to development. Reports are received directly from participating official agencies, including bilateral and multilateral aid agencies, development lending institutions, and export credit agencies. Follow up reports on the disbursement and repayment status of loans allow the Secretariat to calculate the debt burden of developing countries. See www.oecd.org/dac/stats/dac/guide for details.

The DAC Working Party on Statistics reviews the operation of the data collection system in annual formal meetings, and in informal meetings. The OECD/DAC Secretariat checks the data and their compliance with the methodology. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues

This indicator is not relevant for Tanzania.

Indicator 8.5 ODA received in small island developing states as a proportion of their gross national incomes

UN definition

Official development assistance (ODA) comprises grants or loans to developing countries and territories on the OECD Development Assistance Committee list of aid recipients that are undertaken by the official sector with promotion of economic development and welfare as the main objective and at concessional financial terms. Technical cooperation is included. Grants, loans and credits for military purposes are excluded. Also excluded are aid to more advanced developing and transition countries as determined by the DAC. Donors' gross national income (GNI) at market prices is the sum of gross primary incomes receivable by resident institution units and sectors. GNI at market prices was called gross domestic product (GDP) in the 1953 System of National Accounts. In contrast to the gross domestic product (GDP), GNI is a concept of income (primary income) rather than value added. GNI is equal to GDP (which at market prices represent the final result of the production activity of resident producer units) less taxes (less subsidies) on products and imports, compensation of employees and property income payable to the rest of the world plus the corresponding items receivable from the rest of the world. The small island developing states (SIDS) are by region:

Africa: Cape Verde, Comoros, Guinea-Bissau, Mauritius, Saõ Tomé and Príncipe, and Seychelles.

Asia and the Pacific: Bahrain, Cook Islands, Fiji, Kiribati, Maldives, Marshall Islands, Micronesia (Federate States of), Nauru, Niue, Palau, Papua New Guinea, Samoa, Singapore, Solomon Islands, Timor Leste, Tonga, Tuvalu and Vanuatu.

Europe: Cyprus and Malta.

Latin America and the Caribbean: Antigua and Barbuda, Aruba, the Bahamas, Barbados, Belize, Cuba, Dominica, the Dominican Republic,

Grenada, Guyana, Haiti, Jamaica, Netherlands Antilles, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, Trinidad and Tobago, and the US Virgin Islands.

Division of indicator

The indicator is divided into two sub indicators:

- ODA received in small island states as a proportion of their gross national incomes
- ODA received in small island states, million US\$

Obtaining International Data

All data on ODA are collected by the OECD/DAC Secretariat from its 23 members, then checked and aggregated by the OECD/DAC Secretariat. The DAC Secretariat collects two sets of data:

1. *DAC Questionnaire*. A set of eight statistical tables completed annually in the Fall by DAC members, who report the amount and destination of their official and private flows made in the previous year. Detailed information is collected regarding the destination, form, terms, sector and tying status of official flows. A simplified form of the questionnaire is completed by multilateral agencies. Non-DAC donors also report on a voluntary basis on an abridged questionnaire. There is also a one-page "Advance Questionnaire on Main DAC Aggregates" completed by DAC members each April to give preliminary data on their ODA flows made in the previous year. See www.oecd.org/dac/stats/dac/guide for details.

2. *Creditor Reporting System (CRS)*. A system for reporting individual official transactions (both ODA and other official flows) relevant to development. Reports are received directly from participating official agencies, including bilateral and multilateral aid agencies, development lending institutions, and export credit agencies. Follow up reports on the disbursement and repayment status of loans allow the Secretariat to calculate the debt burden of developing countries. See www.oecd.org/dac/stats/dac/guide for details.

The DAC Working Party on Statistics reviews the operation of the data collection system in annual formal meetings, and in informal meetings. The OECD/DAC Secretariat checks the data and their compliance with the methodology. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues.

This indicator is not relevant for Tanzania.

Indicator 8.6 Proportion of total developed country imports (by value and excluding arms) from developing countries and least developed countries, admitted free of duty

UN definition

This indicator is one of two trade/market access indicators (8.6 and 8.7) that has been defined to reflect target 8.A (Develop further an open, rule-based, predictable, non-discriminatory trading and financial system) and 8.B (Address the special needs of the least developed countries) of Goal 8 (Develop a global partnership for development). More specifically, indicator 8.6 is the proportion of duty free imports (excluding arms) into developed countries from developing countries and least developed countries. For the purpose of calculating indicator 8.6, Japan in Asia, Canada and the United States in North America, Australia and New Zealand in Oceania and Iceland, Norway, Switzerland and the EU (25 countries included since 2004) in Europe are considered "developed" regions and areas, following the common accepted practice used for MDG indicators. Developing countries are those not listed as developed or transition countries. The list of least developed countries (LDCs) has been agreed by the General Assembly, on the recommendation of the Committee for Development Policy, Economic and Social Council. It includes the following 50 countries, classified by region:

Africa: Angola, Benin, Burkina Faso, Burundi, Cape Verde, The Central African Republic, Chad, Comoros, The Democratic Republic of Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, The Gambia, Guinea,

Guinea-Bissau, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Niger, Rwanda, Saõ Tomé and Príncipe, Senegal, Sierra Leone, Somalia, The Sudan, Togo, Uganda, The United Republic of Tanzania and Zambia.

Asia and the Pacific: Afghanistan, Bangladesh, Bhutan, Cambodia, Kiribati, the Lao People's Democratic Republic, Maldives, Myanmar, Nepal, Samoa, Solomon Islands, Timor Leste, Tuvalu, Vanuatu and Yemen.

Latin America and the Caribbean: Haiti

Agricultural, clothing and textile groups follow the definition in WTO agreements based on the Harmonized System 1992, transposed to current versions by WHO secretariat. Agricultural products corresponds to Harmonized System 1992, chapters 01 to 24 less fish and fish products (chapter 03). Imports and imported value of goods (merchandise) are goods that add to the stock of material resources of the country by entering its economic territory. Goods simply being transported through a country (goods in transit) or temporarily admitted (except from goods for inward processing) are not included. In many cases, a country's economic territory largely coincides with its customs territory, which is the territory in which the law of a country apply inn full.

Division of indicator

The indicator is divided into two sub indicators:

- Developed country imports from developing countries, admitted free of duty, percentage
- Developed country imports from the LDCs, admitted free of duty, percentage

Obtaining International Data

Tariff Schedules and corresponding imports at the tariff line level in the IDB are received directly from WTO Members (Governments). They are processed in a common database format by the WTO Secretariat and disseminated to the WTO Members concerned. If no objections are raised, they are also disseminated to all WTO Members and international organizations via a dedicated website. Data on tariffs, imports, and preferential schemes from ITC and UNCTAD are also taken from official sources and are subject to substantial verification procedures. Existing documentation:

<http://www.mdg-trade.org/Metadata.aspx>, <http://www.mdg-trade.org/Methodology39.aspx>

There is no data in the UN MDG database on this indicator for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 8.7 Average tariffs imposed by developed countries on agricultural products and textiles and clothing from developing countries

UN definition

This indicator is one of two trade/market access indicators (8.6 and 8.7) that has been defined to reflect target 8.A (Develop further an open, rule-based, predictable, non-discriminatory trading and financial system) and 8.B (Address the special needs of the least developed countries) of Goal 8 (Develop a global partnership for development). More specifically, indicator 8.7 is the average tariffs imposed by developed countries on subsets of selected items (agricultural products, textiles and clothing exports) that are deemed to be of interest to developing countries. Japan in Asia, Canada and the United States in North America, Australia and New Zealand in Oceania and EU are considered "developed" regions and areas, following the common accepted practice used for MDG indicators. Developing countries are

those not listed as developed or transition countries. The list of least developed countries (LDCs) has been agreed by the General Assembly, on the recommendation of the Committee for Development Policy, Economic and Social Council. It includes the following 50 countries, classified by region:

Africa: Angola, Benin, Burkina Faso, Burundi, Cape Verde, The Central African Republic, Chad, Comoros, The Democratic Republic of Congo, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, The Gambia, Guinea, Guinea-Bissau, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Niger, Rwanda, Saõ Tomé and Príncipe, Senegal, Sierra Leone, Somalia, The Sudan, Togo, Uganda, The United Republic of Tanzania and Zambia.

Asia and the Pacific: Afghanistan, Bangladesh, Bhutan, Cambodia, Kiribati, the Lao People's Democratic Republic, Maldives, Myanmar, Nepal, Samoa, Solomon Islands, Timor Leste, Tuvalu, Vanuatu and Yemen.

Latin America and the Caribbean: Haiti

Agricultural, clothing and textile groups follow the definition in WTO agreements based on the Harmonized System 1992, transposed to current versions by WHO secretariat. Agricultural products corresponds to Harmonized System 1992, chapters 01 to 24 less fish and fish products (chapter 03); in addition to parts of chapters 29, 33, 35, 38, 41, 43, 50 to 53. Textile is mainly covered in chapters 50 to 60. The bulk of clothing products are found in chapter 61 – 63. Average tariffs are the simple average of all applied ad valorem tariffs (tariffs based on the value of import) applicable to the bilateral imports of developed countries. Agricultural products comprise plant and animal products, including tree crops but excluding timber and fish products. Clothing and textile include natural and synthetic fibres and fabrics and articles of clothing made from them.

Division of indicator

The indicator is divided into three sub indicators

- Average tariffs imposed by developed countries on agricultural products from developing countries
- Average tariffs imposed by developed countries on textiles from developing countries
- Average tariffs imposed by developed countries on clothing from developing countries

Obtaining International Data

The main source of data is the WTO Integrated Data Base (IDB), complemented by information from the International Trade Center (ITC) and United Nations Conference on Trade and Development (UNCTAD). Tariff Schedules and corresponding imports at the tariff line level in the IDB are received directly from WTO Members (Governments). They are processed in a common database format by the WTO Secretariat and disseminated to the WTO Members concerned. If no objections are raised, they are also disseminated to all WTO Members and international organizations via a dedicated website. Data on tariffs, imports, and preferential schemes from ITC and UNCTAD are also taken from official sources and are subject to substantial verification procedures. When national tariffs are based on specific rates that are not expressed in ad valorem form, they are converted in ad valorem equivalents to allow for international comparability. There is no data in the UN MDG database on this indicator for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 8.8 Agricultural support estimates for OECD countries as a percentage of their gross domestic product

UN definition

Agricultural support is the annual monetary value of all gross transfers from taxpayers and consumers, both domestic and foreign (in the form of subsidies arising from policy measures that support agriculture), net of the associated budgetary receipts, regardless of their objectives and impacts on farm production and income, or consumption of farm products. For agricultural products, the total support estimates (TSE) represents the overall taxpayer and consumer costs of agricultural policies. When expressed as a percentage of GDP, the total support estimate is an indicator of the cost to the economy as a whole. Agricultural products comprise plant and animal products, including tree crops but excluding timber and fish products. Clothing and textiles include natural fibers and fabrics and article of clothing made from them. Gross domestic product (GDP) is the sum of the gross value added by all resident producers in the economy plus any product taxes (less subsidies) not included in the valuation of the output. Value added is the net output of an industry after adding up all outputs and subtracting intermediate outputs.

Division of indicator

The indicator is divided into two sub indicators:

- Agricultural support estimates for OECD countries as a percentage of their GDP
- Agricultural support estimates for OECD countries, million US\$

Obtaining International Data

There is no data in the UN MDG database on this indicator for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 8.9 Proportion of ODA provided to help build trade capacity

UN definition

Official development assistance comprises grants or loans to developing countries and territories on the OECD Development Assistance Committee (DAC) list of aid recipients that are undertaken by the official sector with promotion of economic development and welfare as the main objective and at concessional financial terms. Technical cooperation is included. Grants, loans and credit for military purposes are excluded. Also excluded are aid to more advanced developing and transitional countries as determined by the DAC. Activities to help build trade capacity enhance the ability of the recipient country:

- To formulate and implement a trade development strategy and create an enabling environment for increasing the volume and value-added of exports, diversifying export products and markets and increasing foreign investment to generate jobs and trade.
- To stimulate trade by domestic firms and encourage investment in trade-oriented industries.
- To participate in the benefit from the institutions, negotiations and processes that shape national trade policy and the rules and practices of international commerce. Those activities are further classified by the First Joint WTO/OECD Report on Trade-Related Technical Assistance and Capacity Building (2002) under two main categories: Trade policies and regulations (divided into nineteen subcategories) and trade development (divided into six subcategories).
- Donors differ in defining what constitute a single “activity”. Some donors split individual activities into components in order to obtain detailed data on aid allocation to each subcategory. Other classifies the whole activity under the most relevant subcategory. For some donors, the number of records in the database is larger than the number of actual activities.

- In the Joint Report by the World Trade Organization and the Organization for Economic Co-operation and Development, the data are based on the actual number of activities.

Obtaining International Data

All data on ODA are collected by the OECD/DAC Secretariat from its 23 members, then checked and aggregated by the OECD/DAC Secretariat. The DAC Secretariat collects two sets of data:

1. *DAC Questionnaire*. A set of eight statistical tables completed annually in the fall by DAC members, who report the amount and destination of their official and private flows made in the previous year. Detailed information is collected regarding the destination, form, terms, sector and tying status of official flows. A simplified form of the questionnaire is completed by multilateral agencies. Non-DAC donors also report on a voluntary basis on an abridged questionnaire. There is also a one-page "Advance Questionnaire on Main DAC Aggregates" completed by DAC members each April to give preliminary data on their ODA flows made in the previous year. See www.oecd.org/dac/stats/dac/guide for details.

2. *Creditor Reporting System (CRS)*. A system for reporting individual official transactions (both ODA and other official flows) relevant to development. Reports are received directly from participating official agencies, including bilateral and multilateral aid agencies, development lending institutions, and export credit agencies. Follow up reports on the disbursement and repayment status of loans allow the Secretariat to calculate the debt burden of developing countries. See www.oecd.org/dac/stats/dac/guide for details.

The DAC Working Party on Statistics reviews the operation of the data collection system in annual formal meetings, and in informal meetings. The OECD/DAC Secretariat checks the data and their compliance with the methodology. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues. The data on ODA to build trade capacity are collected through the joint WTO/OECD Trade Capacity Building Database (TCBDB) (<http://tcbdb.wto.org>). 26 bilateral donors and 19 multilateral agencies reported to the TCBDB since its creation in 2001. Data are collected and then checked and aggregated by the OECD/DAC and WTO Secretariats. Bilateral work with reporters is undertaken as necessary in order to resolve reporting issues. Existing documentation: http://www.oecd.org/department/0,3355,en_2649_34585_1_1_1_1_1,00.html

There is no data in the UN MDG database on this indicator for Tanzania.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 8D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long run

Target 8D is to deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long run. It consists of three indicators:

Indicator 8.10 Total number of countries that have reached their HIPC decisions points

Indicator 8.11 Debt relief committed under HIPC and MDRI initiative

Indicator 8.12 Debt service as a percentage of exports of goods and services

Indicator 8.10 Total number of countries that have reached their HIPC decisions points

UN definition

Heavily indebted poor countries reach HIPC decision point if they have a track record of macroeconomic stability, have prepared an Interim Poverty Reduction Strategy through a participatory process, and have cleared or reached an agreement on a process to clear the outstanding arrears to multinational creditors. The amount of debt relief necessary to bring countries' debt indicators to HIPC thresholds is calculated, and countries begin to receive debt relief. Heavily indebted poor countries reach HIPC completion point if they maintain macroeconomic stability under a Poverty Reduction and Growth Facility (PRGF) supported program, carry out key structural and social reforms agreed on at the decision point, and satisfactorily implement a Poverty Reduction Strategy for one year. The country then receives the bulk of debt relief under the HIPC initiative without any further policy conditions.

Obtaining International Data

Staff of International Development Agency (IDA) and the International Monetary Fund (IMF) makes an assessment of each country's eligibility for assistance under the Enhanced HIPC Initiative and submits a document for the approval of the Executive Boards of the IMF and IDA. When the Board approves the assessment document, the country is deemed to have reached decision point. Staff of IDA and the IMF assesses country's performance and progress in meeting the requirements for reaching the completion points under the Enhanced HIPC initiative, as set out in the decision point document, and submits an assessment report to the Executive Board of the IDA and IMF. Once the Board approves the completion point document, the country is deemed to have reached completion point1.

All documents related to countries' decision and completion points can be accessed at: <http://go.worldbank.org/9W8I0X55A0> and <http://go.worldbank.org/T0OFS29N10>. Tanzania is covered in the documentation on this internet page. But the indicator is not relevant on country level.

National sources

NBS data

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 8.11 Debt relief committed under HIPC and MDRI initiative

UN definition

Initiative when a country reaches its decision point. It is calculated as the amount needed to bring the net present value (NPV) of the country's debt level to the threshold established by the HIPC initiative (150 percent of exports or in certain cases 250 percent of fiscal revenues). Heavily indebted poor countries reach HIPC decision point if they have a track record of macroeconomic stability, have prepared an Interim Poverty Reduction Strategy through a participatory process, and have cleared or reached an agreement on a process to clear the outstanding arrears to multinational creditors. The amount of debt relief necessary to bring countries' debt indicators to HIPC thresholds is calculated, and countries begin to receive debt relief.

Division of indicator

The indicator has two sub indicators:

- Debt relief committed under HIPC initiative, cumulative million US\$ in end-2006 NPV terms
- Debt relief committed under MDRI initiative, cumulative million US\$ in end-2006 NPV terms

Obtaining International Data

For each "pre-decision-point" country, World Bank and IMF staffs conduct a mission to undertake a DSA before HIPC debt relief is provided. A key part of the mission is loan-by-loan debt data reconciliation between creditor and debtor loan statements. Once the loan-by-loan debt database has been reconciled they proceed with the calculation of HIPC debt relief and subsequent DSA.

The data on debt relief committed under HIPC and MDRI initiative is global monitoring data. There is no data for Tanzania.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Indicator 8.12 Debt service as a percentage of exports of goods and services

UN definition

Debt service is the sum of principle repayments and interests payments made to non-residents in foreign currency, goods and services. This series differs from the standard debt to export ratio. It covers only long-term public and publicly guaranteed debt and repayments (repurchases and charges) to the International Monetary Fund (IMF). Long-term refers to debt that has an original or extended maturity of more than one year. IMF repurchases are total repayments of outstanding drawings from the general resources account during the year specified, excluding repayments due in the reserve tranche. Exports of goods, services and income are the sum of goods (merchandise) export, exports of (nonfactor) services and income (factor) receipt and do not include workers' remittances.

Obtaining International Data

Where formal registration of foreign borrowing is not mandatory, compilers must rely on balance of payments data and financial surveys. A majority of the countries are fully current in their reporting under the DRS and the reported data give an adequate and fair representation of the countries' total public debt. In some cases, when debtor reports are not available or incomplete, World Bank staff makes estimates based on previously reported data, creditor reports, and other sources. Every effort has been made to ensure the accuracy and completeness of the debt statistics. Nevertheless, quality and coverage vary among debtors and may also vary for the same debtor from year to year.

Loan-by-loan information on external debt is reported to the World Bank's Debt Reporting System by the country authorities (ministry of finance or central bank). All data related to public and publicly guaranteed debt are provided on a loan-by-loan basis by debtors except for lending by some multilateral agencies, in which case data are taken from the creditors' records. These creditors include the African Development Bank, the Asian Development Bank, the Inter-American Development Bank, and the International Bank for Reconstruction and Development (IBRD) and the International Development Association (IDA). Reports contain annual stocks and flows information as well as terms and conditions of individual loans contracted.

The data on debt service as a percentage of exports of goods and services is country adjusted data. There is no information on what the basis for the country adjustments are. As of 1998 Tanzania reached completion point under the original HIPC initiative.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 8E: In cooperation with Pharmaceutical companies, provide access to affordable essential drugs in developing countries

Target 8E is to, in cooperation with Pharmaceutical companies, provide access to affordable essential drugs in developing countries. The target consists only of indicator 8.13 Proportion of population with access to affordable essential drugs on a sustainable basis.

Indicator 8.13 Proportion of population with access to affordable essential drugs on a sustainable basis

UN definition

The *proportion of population with access to affordable essential drugs on a sustainable basis* is the percentage of the population that has access to a minimum of 20 most essential drugs. *Access* is defined as having drugs continuously available and affordable at public or private health facilities or drug outlets that are within one hour's walk of the population. *Essential drugs* are drugs that satisfy the health care needs of the majority of the population. The World Health Organization has developed the Model List of Essential Drugs, which is regularly updated through widespread consultations with member States and other partners. Progress in access to essential medicines is thus the result of combined effort by governments, strategic partners such as United Nations agencies, public-private partnerships, non-governmental organizations and professional associations (WHO Expert Committee on Essential Drugs, November 1999).

Obtaining International Data

Surveys on access to drugs and prices. Existing documentation:
http://www.who.int/medicines/areas/access/OMS_Medicine_prices.pdf

No data available for Tanzania.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.

Target 8F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communication

Target 8F is to, in cooperation with the private sector, make available the benefits of new technologies, especially information and communication. The target consists of three indicators:

Indicator 8.14 Telephone lines per 100 population

Indicator 8.15 Cellular subscribers per 100 population

Indicator 8.16 Internet users per 100 population

Indicator 8.14 Telephone lines per 100 population

UN definition

A fixed telephone line connects the subscriber's terminal equipment to the public switched network and has a dedicated port in the telephone exchange equipment. This term is synonymous with the term main station or Direct Exchange Line (DEL) that is commonly used in telecommunication documents. It may not be the same as an access line or a subscriber. The number of ISDN channels should be included. Fixed wireless subscribers should also be included. If they are not included, this is specified in a note.

Division of indicator

The indicator is divided into two sub indicators:

- Telephone lines per 100 population
- Telephone lines

Obtaining International Data

The ITU's Market Information and Statistics (STAT) Unit collects its Telecommunication/ICT data directly from governments by means of an annual questionnaire that is sent to the government agency in charge of telecommunications/ICT

There is data for Tanzania in the UN MDG data base, but no country specific information on how these data are obtained.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

2009: Tanzania in Figures (TZF) 2009, page 31.

2008: Tanzania in Figures (TZF) 2009, page 31.

2007: Tanzania in Figures (TZF) 2009, page 31.

2006: Tanzania in Figures (TZF) 2009, page 31.

2005: Tanzania in Figures (TZF) 2009, page 31.

2004: Tanzania in Figures (TZF) 2009, page 31.

2003: Tanzania in Figures (TZF) 2009, page 31.

2002: Tanzania in Figures (TZF) 2009, page 31.

The number has been calculated using telephone lines and population projection numbers except for 2002 which was the census figure, by taking telephone line divide by per 100 population projection

Sources available on internet

www.nbs.go.tz: Tanzania In Figures 2009

*Indicator 8.15 Cellular
subscribers per 100
population*

UN definition

A mobile cellular subscriber refers to the use of portable telephones subscribing to a public mobile telephone service and provides access to the Public Switched Telephone Network (PSTN) using cellular technology. It includes postpaid and prepaid subscribers and includes analogue and digital cellular systems. This should also include subscribers to ITM-2000 (Third Generation, 3G). Subscribers to public mobile data services or radio paging services not included.

Division of indicator

The indicator is divided into two sub indicators:

- Telephone lines per 100 population
- Telephone lines

Obtaining International Data

The ITU's Market Information and Statistics (STAT) Unit collects its Telecommunication/ICT data directly from governments by means of an annual questionnaire that is sent to the government agency in charge of telecommunications/ICT

There is data for Tanzania in the UN MDG data base, but no country specific information on how these data are obtained.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

2009: Tanzania in Figures (TZF) 2009, page 31.

2008: Tanzania in Figures (TZF) 2009, page 31.

2007: Tanzania in Figures (TZF) 2009, page 31.

2006: Tanzania in Figures (TZF) 2009, page 31.

2005: Tanzania in Figures (TZF) 2009, page 31.

2004: Tanzania in Figures (TZF) 2009, page 31.

2003: Tanzania in Figures (TZF) 2009, page 31.

2002: Tanzania in Figures (TZF) 2009, page 31.

The number has been calculated using cellular subscribers and population projection numbers except for 2002 which was the census figure, by taking cellular subscribers divide by per 100 population projection.

Sources available on internet

www.nbs.go.tz: Tanzania In Figures 2009

Indicator 8.16 Internet users
per 100 population

UN definition

The internet is a linked global network of computers in which the users at one computer, if they have permission, can get information from other computers in the network.

Division of indicator

The indicator is divided into two sub indicators:

- Internet users per 100 population
- Internet users
- Personal computers per 100 population
- Personal computers

Obtaining International Data

The ITU's Market Information and Statistics (STAT) Unit collects its Telecommunication/ICT data directly from governments by means of an annual questionnaire that is sent to the government agency in charge of telecommunications/ICT

There is data for Tanzania in the UN MDG data base, but no country specific information on how these data are obtained.

National sources*NBS data*

There is no data on this indicator from survey and census.

Administrative sources

There is no data on this indicator from administrative sources.