THE REVOLUTIONARY GOVERNMENT OF ZANZIBAR
(RGoZ)

THE ZANZIBAR STRATEGY FOR GROWTH AND REDUCTION OF POVERTY: 2010-2015 (ZSGRP

MKUZA II

A successor to the Zanzibar Strategy for Growth and Reduction of Poverty 2007-2010
(ZSGRP)

October 2010

STATEMENT OF THE PRESIDENT OF ZANZIBAR AND THE CHAIRMAN OF THE REVOLUTIONARY COUNCIL HIS EXCELENCY AMANI ABEID KARUME

We are launching the second Strategy for Growth and the Reduction of Poverty as a sequence to the first strategy – MKUZA I, which lasted for three years (2007-2010). The launch of this second strategy, which will last for five years (2010-2015), concides with the remaining period of the implementation of the MDGs.

Beyond the broad aspirations of the Vision 2020 of transforming and modernizing Zanzibar's economy and eradicating poverty, MKUZA II is a tool that the Revolutionary Government of Zanzibar will deploy to realize the Millennium Development Goals, improve living standards and strengthen good governance.

Remarkable achievements have been made in the implementation of MKUZA I. Realizing that economic growth is necessary for social development, interventions that aimed at boosting economic growth paid off. The average real rate of economic growth was 6 percent in the last three years. It peaked 6.7 percent in 2009 against a target of between 8 and 10 percent in 2010. On revenue collection, the target for revenue yield[1] set in MKUZA I (18.5 percent of GDP) was achieved. This is a remarkable performance considering the economic turmoil that engulfed the world at the time due to global financial, fuel and food crisis.

The Government has always been mindful that, important as it is, economic growth is not the ultimate end. The broader goal was the improvement of peoples' lives through quality social services. Evaluation of MKUZA I implementation reveals significant achievements in the provision of public services including education, health and clean and safe water.

On education, more children now attend schools. The number of pre primary schools has increased from 235 in 2008 to 261 in 2009 and primary schools have increased from 277 in 2008 to 290 in 2009. Education to girls has also been given a deserving attention. As a result, gender parity has been achieved at primary and basic education levels. On tertiary education, the total number of enrolled students for the three universities increased from 2,847 students in 2008 to 3,155 in 2009.

As for the quality of education, the number of trained teachers increased from 9,422 in 2008 to 9,788 in 2009, while the number of untrained teachers is currently below a thousand (939). On pupil-teacher ratio, the government managed to bring it back down to 29 from 31 realized in 2007.

Having a healthy society was another key objective under MKUZA I. For years Zanzibar, like many countries in the tropics, was very much affected by malaria, which was the number one killer in Zanzibar. Exceptional achievement has been done in this area. Malaria prevalence has remained below one percent since 2007, down from over 40 percent before MKUZA I. Efforts continue in sustaining the achieved goals while measures to eradicate it completely are underway.

Interventions to contain HIV/AIDS have also paid off. In both islands, the Government has expanded HIV prevention testing, care and treatment services and monitoring of disease trends in risk-prone and general population. As a result, HIV/AIDS prevalence remained low at 0.6 percent throughout. Compared to most Sub-Saharan African countries, this is possibly the lowest rate. The period also witnessed improvement of health of our mothers and children. The Infant Mortality Rate has dropped from 61/1000 live-births in 2004/05, to 54/1000 in 2007/08, the Under-Five Mortality

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[1] The proportion of actual revenue collected to GDP

Rate dropped to 79 per 1,000 live-births in 2007/08, down from 101/1000 live-births in 2004/05. Also, the Maternal Mortality Rate decreased to 279 per 100,000 live births in 2009 from 473 deaths per 100,000 in 2006. . Zanzibar in recent years has made important progress in introducing and sustaining the delivery of key nutrition services for children. Vitamin A supplement and de-worming tablets are provided to the under-five children twice a year with over 90 percent coverage.

MKUZA I implementation also led to the expansion of access to clean and safe water to 80% of the population in urban and 60 percent in rural areas (by 2008/09).

A combined effect of all these achievements in social services is reflected in the improvement of longevity. Life expectancy at birth has increased from 53 years in 2003 to 60 in 2010.

Important results have been achieved as well in the infrastructure sectors. Seventy percent of major roads in Zanzibar are now tarmac or work is in progress to tarmac them. Being an island, Zanzibar needs reliable entry ports too. To this end, Malindi, the main port, has been reconstructed while the runway at the Zanzibar International Airport has been extended to accommodate larger wide-bodied airplanes. This has also been the case for energy. For the first time in Zanzibar's history, Pemba island has been connected to the national grid, through a submarine cable, providing a reliable source. We hope that this achievement will further open up the island for economic and social development. As for Unguja, the problem of lack of alternative source of energy has also been solved with the purchase and installation of 25MW stand-by generators. During the same period, the Island of Tumbatu too has been connected through a submarine cable and Wananchi there now enjoy electricity.

MKUZA I took cognizance of the role of good governance for socio-economic development. For similar reasons, it underpinned the need to forge and endure unity across the nation. With this regard, the government has devoted time and efforts to end political hostility between the rival parties. A historic consensus has been reached, known in Swahili as Maridhiano. This was later given legal backing through an endorsement by the House of Representatives of a private motion to that effect followed by a referendum through which an absolute majority of the voters endorsed the creation of a Government of National Unity after the October 2010 general election. On a different note, MKUZA I implementation went hand in hand with paying greater attention to the issues of peoples' participation in development planning and process, gender equality, freedom of the media, accountability, institutional transparency and promotion of human rights.

There were however some challenges in the implementation of MKUZA I. The first challenge was the changing rate of economic growth. The real annual GDP growth rate displayed considerable fluctuations, suggesting that the economy has remained dependent on many unstable factors such as weather and global economic performance. While data are still provisional for the reduction of income poverty, preliminary analysis show that income poverty declined marginally during the implementation of MKUZA I. It could be argued, of course, that these three years period of implementation of MKUZA I was too short to bring about meaningful outcomes in the reduction of income poverty. More time will be needed for the successes in socio-economic investments to translate into reduction of income poverty. Time lag between investment and outcome is inevitable. We need to be patient but remain on course.

Secondly, there was the challenge of maintaining price stability. In the period covered by MKUZA I, inflation oscillated on the higher side, mainly due to increase in global food and fuel prices. As for tourism, studies have shown that its linkage with the rest of the economy was very weak, contrary to the initial expectations. The poor linkages limited the potential multiplier effects in terms of employment and income creation. Finally, the MKUZA I implementation was adversely

affected by prolonged power outage periods, the first one month between May and June 2008 and then three months between December 2009 and March 2010. Obviously, the power blackout affected productivity across the country, hence fluctuations in the growth rate.

There were also challenges in the provision of quality social services. Despite the increase in the number of schools in both urban and rural areas, disparities in gender enrolment across districts are still visible, with the number of girls attaining higher education being lower compared to the total population of girls attending basic education. This implies a lower conversion rate. Health goals set by MKUZA I have been realized despite inadequate human resources and lack of synergies in the provision of health services.

MKUZA II draws lessons from its predecessor. Through a careful and meticulous review process, deliberate attempt has been made to address the challenges encountered during MKUZA I and to fill the necessary gaps. For instance, some targets have been replaced with more realistic and achievable ones. Moreover, number of goals in MKUZA II have been reduced to fourteen, down from twenty-two goals under MKUZA I.

As its predecessor, MKUZA II is a cluster-based strategy but sharper and more focused. Quantifiable goals, targets and interventions have been designed. Also, great importance has been given to the preparation of an efficient and accountable monitoring and evaluation system that will regularly inform stakeholders about the implementation status of the strategy. In this respect, in addition to the MKUZA Annual Implementation Reports, periodic assessment and monitoring of MKUZA II would also be reflected in the Zanzibar Human Development Report (ZHDR), which is going to be produced on a regular basis to enhance monitoring of MKUZA II.

Finally, my sincere appreciation goes to all those who have taken part in the process of MKUZA I review and the preparation of this new Strategy, MKUZA II, which is crucial for our country's development. My particular thanks, on behalf of all Zanzibaris, go to the Drafting Team, the MKUZA Secretariat, Consultants, Development Partners, Ministries, Departments, Agencies, Civil Society Organizations and the Private Sector who worked with passion and dedication in order to complete this strategy. Without their effort and commitment, this important milestone would have not been achieved.

Completion of the formulation process is but only one major step. We all need to move to the execution mode with higher enthusiasm and commitment. The success of the implementation of the strategy will depend on the hard work of different stakeholders and on the continuous coordination and cooperation between them. The government will take its leadership role with a view to ensuring that there is better implementation arrangements, efficient and effective resource allocation and more participation of all citizens.

All these factors, combined with the human skills and enthusiasm of every Zanzibari, will prove particularly effective in ensuring better lives for our people.

Thank you,

DR. AMANI ABEID KARUME
PRESIDENT OF ZANZIBAR AND
CHAIRMAN OF THE REVOLUTIONARY COUNCIL

ACT	Artemisin Combination Therapy
AfDB	African Development Bank
AG	Attorney General Chamber
AIDS	Acquired Immune deficiency Syndrome
AMP	Aid Management Platform
ANC	Antenatal Care
ANGOZA	Association of Non-Governmental Organizations
ART	Anti Retroviral Treatment
ASSP	Agricultural Sector Support Project
BAKIZA	Baraza la Kiswahili Zanzibar
BCC	Behaviour Change Communication
BEmOC	Basic Emergency Obstetric Care
BEST	Business Envelop Strengthening for Tanzania
BoT	Bank of Tanzania
CAADP	The Comprehensive Africa Agriculture Development Program
CAG	Controller and Auditor General
CBMIS	Community Based Management Information System
CBR	Crude Birth Rate
CCM	Chama Cha Mapinduzi
CEmOC	Comprehensive Emergency Obstetric Care
CHRAGG	Commission for Human Rights and Good Governance
CMO	Chief Minster's Office
CMSD	Central Medical Store Department
COSOZA	Copyright Society of Zanzibar
CRPD	Convention on the Rights of People with Disability
CRVS	Civil Registration and Vital Statistics
CSO	Civil Society Organization
CUF	Civic United Front
DACCOM	District AIDS Coordination Committee
DANIDA	Danish International Development Agency
DCs	District Commissioners
DP	Development Partner
DPP	Director of Public Prosecutions
EAC	East Africa Community
EEZ	Exclusive Economic Zone
EHCP	Extended Health Care Plans
EmOC	Emergency Obstetric Care
EU	European Union
FBO	Faith-Based Organization
FDA	Food and Drug Authority
FP	Family Planning
FSW	Female Sex Workers
GBS	General Budget Support
GBV	Gender Based Violence
GDP	Gross Domestic Product
GER	Gross Enrolment Ratio
HACP	Hazard Analysis and Critical Points
HBS	Household Budget Survey
HIV	Human Immunodeficiency Virus

HLI	Higher Learning Institution
HMT	Health Management Team
HoRs	House of Representatives
IBBSS	Integrated Behavioural and Biological surveillance Survey
ICT	Information and Communication technology
IDU	Intravenous/Injectable Drug Users
IEC	Information, Education and Communication
IFMS	Integrated Financial Management System
IMR	Infant Mortality Rate
IMTC	Inter Ministerial Technical Committee
JAST	Joint Assistance Strategy for Tanzania
KIST	Karume Institute of Science and Technology
KMKM	Anti Smuggling Unit –*"Kikosi Maalumu cha Kuzuia Magendo"*
LED	Local Economic Development
LGA	Local Government Authority
M&E	Monitoring and Evaluation
MACEMP	Marine and Coastal Environmental Management Project
MALE	Ministry of Agriculture, Livestock and Environment
MARPs	Most At Risk Populations
MCC	Millennium Challenge Cooperation
MCT	Ministry of Communication and Transport
MDA	Ministry, Department and Agency
MDG	Millennium Development Goals
MEEDS	Malaria Early Epidemic Detection System
MFI	Micro Finance Institutions
MIS	Management Information System
MKUKUTA	Mkakati wa Kukuza Uchumi na Kupunguza Umasikini Tanzania
MKUZA	Mkakati wa Kukuza Uchumi na Kupunguza Umasikini Zanzibar
MKUZA TC	MKUZA Technical Committee
MKUZA-AIR	MKUZA Annual Implementation Report
MLYWCD	Ministry of Labour, Youth, Women and Children Development
MMMP	MKUZA Monitoring Master Plan
MOCAGG	Ministry of State (President's Office) Constitutional Affairs and Good Governance
MOCT	Ministry of Communication and Transport
MOEVT	Ministry of Education and Vocational Training
MOFEA	Ministry of Finance and Economic Affairs
MOHSW	Ministry of Health and Social Welfare
MOICS	Ministry of Information, Culture and Sports
MORASD	Ministry of State (President Office) Regional Administration and Special Departments
MSMEs	Micro, Small and Medium Enterprises
MTC	Ministerial Technical Committee
MTEF	Medium Term Expenditure Framework
MTTI	Ministry of Tourism, Trade and Investment
MVC	Most Vulnerable Children
MWCEL	Ministry of Water, Construction, Energy and Land
NACTE	National Council for Technical Education
NBS	National Bureau of Statistics
NCD	Non Communicable Disease

NER	Net Enrolment Ratio
NGO	Non Governmental Organization
NSA	Non State Actor
OCAG	Office of Controller and Auditor General
OCGS	Office of Chief Government Statistician
OVC	Orphans and Vulnerable Children
PADEP	Participatory Agricultural Development and Empowerment Project
PEP	Post Emergence Prophylaxis
PER	Public Expenditure Review
PHC	Primary Heath Centre
PHCC	Primary Health Care Centre
PHCU	Primary Health Care Unit
PLHA	People Living with HIV/AIDS
PPP	Public Private Partnership
PSDA	Participatory Service Delivery Assessment
PWD	People with Disabilities
RCH	Reproductive and Child Health
RGOZ	Revolutionary Government of Zanzibar
RISE	Radio Instruction to Strengthen Education
SEZ	Special Economic Zone
SHACCOM	Shehia AIDS Coordination Committee
SME	Small and Medium Enterprise
STCDA	Stone Town Conservation and Development Authority
STI	Sexual Transmitted Infection
SUZA	State University of Zanzibar
TASAF	Tanzania Social Action Fund
TB	Tuberculosis
TDHS	Tanzania Demographic Health Survey
THMIS	Tanzania Health Management Information System
ToR	Terms of Reference
TRA	Tanzania Revenue Authority
TSED	Tanzania Socio Economic Database
TWG	Technical Working Group
TZS	Tanzanian Shillings
UCE	University College of Education
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
UNIDO	United Nations Industrial Development Organization
URT	The United Republic of Tanzania
USAID	United States Agency for International Development
USD	United States Dollar
UWZ	Zanzibar Women Association ("Umoja wa Wanawake wa Zanzibar")
VAT	Value Added Tax
WSSD	World Summit for Social Development
ZU	Zanzibar University
ZAC	Zanzibar AIDS Commission
ZACP	Zanzibar AIDS Control Programme
ZAFELA	Zanzibar Female Lawyers' Association
ZAMREC	Zanzibar Medical Research Ethics Committee
ZANEMA	Zanzibar Employers Association

ZAPHA+	Zanzibar Association of People Living with HIV and AIDS
ZATUC	Zanzibar Trade Union Congress
ZAWA	Zanzibar Water Authority
ZBAS	Zanzibar Budget Allocation System
ZBC	Zanzibar Business Council
ZEC	Zanzibar Electoral Commission
ZECO	Zanzibar Electricity Corporation
ZHDR	Zanzibar Human Development Report
ZIFA	Zanzibar Institute for Financial Administration
ZIPA	Zanzibar Investment Promotion Authority
ZLS	Zanzibar Law Society
ZLSC	Zanzibar Legal Service Centre
ZNCCIA	Zanzibar National Chamber of Commerce, Industries and Agriculture
ZPRP	Zanzibar Poverty Reduction Plan
ZRB	Zanzibar Revenue Board
ZSGRP	Zanzibar Strategy for Growth and Reduction of Poverty
ZSSF	Zanzibar Social Security Fund

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CHAPTER I: INTRODUCTION AND BACKGROUND

1.1   Introduction

Zanzibar's GDP at market price stands at TZS 878,403 Million and the per capita income is estimated to be USD 557 as of 2009. The annual GDP growth rate in 2009 was 6.7 per cent. Compared to developed countries, it is clear that Zanzibar is poor and has a relatively very small economy. The Household Budget Survey data of 2004/2005 shows that 49% of the population in Zanzibar had income that is below the basic needs poverty line. The preliminary analysis of the 2009/2010 Household Budget Survey data shows that the situation has only marginally improved[2], with the more significant achievement being registered in other areas of wellbeing such as education and health. As would be expected, the low per capita GDP is also broadly associated with low relative achievement in other dimensions of human welfare such as life expectancy, education and health. Global ranking of countries in terms of Human Development Index shows a correlation between a country's per capita income and the value of Human Development Index, with high income countries registering better human development than low income countries. Although this correlation is not perfect, it is clear that income is an important determinant of human development, and thus economic growth must be an important instrument of fostering sustainable human development. It is for this reason that the Revolutionary Government of Zanzibar has adopted the second Zanzibar Strategy for Growth and Reduction of Poverty (ZSGRP II), which would be known as MKUZA II from its Kiswahili acronym. This strategy addresses issues of growth and human development. This document presents this Strategy.

This chapter gives an introduction to the MKUZA II by highlighting the context and background of the Strategy, and explaining the consultative process through which this Strategy was formulated and adopted.

1.2   Background and Context

The Revolutionary Government of Zanzibar has consistently aspired to improve the welfare of people mainly through increasing income, eradicating diseases and fighting ignorance. Various strategies have been adopted over time to realize this aspiration. In 2000 the government adopted the Vision 2020 which broadly articulates the aspirations of Zanzibar that are to be achieved by the year 2020. The Vision aspires to improve the standard of living of the people of Zanzibar. Concurrently with- and inspired by- the Vision, the government has committed itself to the pursuance and the attainment of the Millennium Development Goals by the year 2015. All these are in line with the enduring aspirations of the Government of Zanzibar of improving the wellbeing of the people and fostering a sense of belonging and solidarity among the Zanzibaris.

The government has been using medium term national strategies as the instruments of guiding the implementation of the necessary actions for attaining the Vision and the Millennium Development Goals both of which fits well with the enduring dream of a prosperous and fair society in Zanzibar.

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[2] The data for the 2009/2010 Household Budget Survey was still being collected as this document was being prepared. The preliminary analysis cited here is for the initial three months data for June, July and August. Such a sub-sample cannot give a representative picture. Nevertheless, when the three months data for 2009 was compared to the analysis of data from corresponding three months of 2004 it appears that basic needs poverty line has declined marginally even thought extreme poverty has not declined. However, this analysis shows that there have been quite a number of other achievements in such areas as health, education and access to safe and clean water. Nevertheless, a more reliable picture would be garnered only after the whole sample of the 2009/2010 data is collected and fully analyzed.

It is in this context therefore that in 2002 the government adopted the Zanzibar Poverty Reduction Plan (ZPRP). This was a three- year medium term program that mainly focused on poverty reduction. The ZPRP involved a strategic selection of priority sectors deemed to have a more direct impact on poverty reduction. Hence these priority sectors received were allocated more resource relative to other sectors. The lifespan of the ZPRP ended in 2005 and was followed by the formulation and adoption of Zanzibar Strategy for Growth and Reduction of Poverty (ZSGRP) in 2007. The ZSGRP, which is more popularly known in its Kiswahili acronym as MKUZA I[3] of the 2009/2010 Household Budget Survey data shows that extreme poverty which is measured by using food poverty line, has not declined as envisaged in MKUZA.

This ZSGRP differed from the ZPRP mainly on two counts. First, MKUZA I was an outcome-based and thus it clustered the strategies and interventions around linked goals and outcomes. This means that rather than starting by selecting the priority sectors, the strategy started first with the identification of the desired outcomes after which the kind of interventions necessary for achieving the outcomes were identified and formulated. The second difference between ZPRP and MKUZA I that the latter accorded more balanced weight between non-income poverty reduction efforts and efforts for reducing income poverty through attaining high and broad-economic growth.

The Strategy which this framework enunciates is a third generation of these poverty reduction strategies. It builds on MKUZA I and the other predecessor strategies and is equally informed by the Vision and the Millennium Development Goals. This Strategy is dubbed the Successor Zanzibar Strategy for Growth and Reduction of Poverty (ZSGRP II), or MKUZA II in its Kiswahili acronym. MKUZA II is a five years strategic plan and will cover the period from 2010 to 2015.

Like its predecessor, MKUZA II is an outcome-based strategy. MKUZA II aims at improving areas that were found to be lacking or inadequately covered in MKUZA I. In particular, this strategic framework emphasizes the need for effective implementation of its strategic interventions. . To this end, operational targets in MKUZA II are more sharply defined and to the extent possible they are also quantified to enhance objective monitoring and evaluation of its performance. Moreover, the goals of MKUZA II have been reduced to fourteen, down from twenty two goals under MKUZA I. In addition to the Annual Implementation Reports, periodic assessment and monitoring of MKUZA II would also be reflected in the Zanzibar Human Development Report (ZHDR), which is going to be produced on a regular basis to enhance monitoring of MKUZA II. The first ZHDR came out in 2009 but focused on MKUZA I.

Inevitably, the implementation of MKUZA II would take into account both the local and the external environment and that the management of local and external environment is a key strategic factor of MKUZA II. Natural environment offers both opportunities and constraints.

In terms of local environment for example, the geographical location of Zanzibar offers the best opportunity for harnessing tourism and international trade perhaps more than any other island territory in the Indian Ocean; hence MKUZA II will take full advantages of such positive natural attributes. On the other hand, past experience has shown that changing weather conditions had often undermined agricultural production and in particular made it difficult to produce enough food in all farming seasons MKUZA II contains strategic interventions to address this including strategies to promote irrigation farming building an effective early warning systems. Ensuring an enabling policy environment for promoting economic development is also a key strategy under MKUZA II. There has not been conducive and enabling policy environment to bolster vibrant private sector.

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[3] 'MKUZA I' is what has officially been reported or recorded somewhere else as just 'MKUZA'. In this document we have mostly used 'MKUZA I' to make its distinction from 'MKUZA II' clearer

External environments are of two types; those that are external to Zanzibar but are within the United Republic of Tanzania and those that are global. The system that governs the Tanzanian economy of which Zanzibar is an integral but autonomous constituent, such as the monetary and fiscal policy, is relatively external to Zanzibar in the sense that Zanzibar itself is not wholly responsible for its nature and operations. Improvement in the management of this dimension of external environment is addressed in MKUZA II.

The global environment is another external dimension that also has impact on the economy, and has positive and negative effects on Zanzibar. Global environment such as relationships with Development Partners (DPs), trade partners, competition in attracting foreign direct investment, world food, energy and financial crises of which Zanzibar has no control periodically all will affect Zanzibar and hence the effective implementation of MKUZA II.

1.3 Clusters and Broad Outcomes

MKUZA II has maintained the organisational structure of its predecessor, MKUZA I. There are three clusters. The first cluster is on Growth and Reduction of Income Poverty in which the broad outcome is the sustainable growth that is equitable and pro-poor. This broad outcome essentially deals with income, both in terms of the GDP growth, poverty reduction and inequality issues. The second cluster is on Wellbeing and Social Services in which the broad outcome is the improved wellbeing and equitable access to quality social services. The thrust of this outcome is on "non-income" human welfare in terms of access to and quality social services. This cluster deals with such issues as education, health, water and sanitation, settlement, environment, safety nets and social protection, nutrition, sports and culture. The third cluster is on Good Governance and National Unity which seeks to achieve the broad outcome of enhanced democratic institutions, rule of law and the national unity. This cluster deals with institutional issues that are essential for growth and reduction of poverty, and for the promotion of national unity and solidarity, and it is a testimony that MKUZA II recognizes that human wellbeing depends on parameters that go beyond income and social services.

Goals, targets, core cluster strategies and interventions under the three clusters are each and collectively linked up with the corresponding three broad outcomes. The goals operational targets, strategies and Strategic Intervention Packages under each cluster are shown in the matrix at the end of this document.

1.4 Review and Consultation Processes

Several reasons justify the review of MKUZA I and the formulation of MKUZA II. These are the need to:

(i) Set new targets for the period July 2010 to the end of MKUZA II in 2015,
(ii) draw lessons from the success and failure in attaining previous targets in MKUZA I (what worked and what did not work) and refine interventions accordingly;
(iii) Assess accomplishment of reforms, alignment of systems, processes and programs in light of MKUZA I implementation
(iv) Accommodate new and emerging challenges at both national and global levels and reposition MKUZA II strategies accordingly
(v) Address challenges facing LGAs and other challenges related to service delivery

When reviewing MKUZA I for the purpose of informing MKUZA II, the Government instituted an extensive consultation process with a wide range of stakeholders, based on three-building block

phases, The first or preparatory phase involved internal consultations by the MKUKUTA[4] Secretariat on issues of joint MKUZA and MKUKUTA review. The second phase involved assessment of performance of MKUZA I through analytical studies and consultation workshops that reviewed reports from analytical works with the main objective of identifying relevant issues for MKUZA II. Based on the first two building block phases, the third phase centred on the drafting process for MKUZA II.

Preparatory Phase

This phase involved internal consultations on issues for joint review (MKUZA and MKUKUTA) as well as the scope and nature of the review process. A team of senior officials and experts from Zanzibar and Mainland Tanzania was formed and jointly produced a concept note that formally initiated the review process. The concept note contained key issues and guidance to inform the process. The output of this phase a Review Guideline and consultation guideline document, which specified who, when, how, and on what to consult.

The Concept Note

MKUZA and MKUKUTA review concept note was jointly prepared by experts from both parts of the United Republic of Tanzania after several meetings of consultations. This concept note was discussed and agreed at various forums involving the two Ministries of Finance and Economic Affairs and the Development Partners (DPs).

The concept note:

   i.   Provided an overview of various efforts taken in the past towards eradication of poverty in Zanzibar and Tanzania in general.
  ii.   Provided, the justification and rationale for the review, purpose and objectives, the scope, principles of the review, management, timeframe and indicative milestones, key outputs, capacity and resources requirements and associated risks of the review.
 iii.   Initiated a structured dialogue and process on the issues pertaining to the review of MKUZA and MKUKUTA.
  iv.   Helped to chart the way forward in formulating MKUZA II and MKUKUTA II strategic frameworks

The Review Guide

The purpose of the Review Guide was to provide a systematic way of conducting the process of MKUZA I and MKUKUTA I reviews. Since the implementation of MKUZA I and MKUKUTA I involved all stakeholders in the society, the Review Guide also recommended a structured dialogue and process that engage a wider participation of stakeholders. This wider engagement of stakeholders was crucial for legitimizing the reviews of MKUZA and MKUKUTA as well as building consensus in the whole process.

The Guide informed stakeholders about the process and their respective stages and timing so as to give their views with respect to contents and key issues for review. It thus raised awareness and enhanced participation by key stakeholders in the review, revision and subsequent formulation process of MKUZA II and MKUKUTA II Strategic Frameworks. The Guide also outlined a

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[4] MKUKUTA is the Kiswahili acronym for the National Strategy for Growth and Reduction of Poverty (NSGRP), which is the Strategy for Tanzania Mainland under the Union Government.

systematic and harmonized review process as well as coordination of the review process and on how to finance the whole process of formulating MKUZA II and MKUKUTA II

The Review Guide outlined substantive issues for review, which were:

(i) Assessment of development impact;
(ii) Assessment of performance   of key policy/institutional reforms, capacity development, and specific outputs;
(iii) Analysis of the facilitating and inhibiting factors and identification of key constraints;
(iv) Review of budget allocation and its alignment to MKUZA I and MKUKUTA I priorities;
(v) Aid effectiveness and
(vi) Effectiveness of the monitoring and evaluation framework.

The Review Guide prioritized these issues based on whether or not the issue:

(i) Focuses on growth, reduction of poverty, and improving quality of services delivery and scaling up of good governance;
(ii) Addresses implementation effectiveness;
(iii)Addresses the required environment for future support by Development Partners'
(iv) has is supported by adequate data and information
(v) Information is available but needs to be synthesized; and
(vi) Implication of an issue at district/ regional and sectoral levels can be generalized at the nationwide level.

The draft guide was discussed by stakeholders at various levels including MKUZA Secretariat, MOFEA and the Development Partners. It was later presented, discussed and approved by the Inter Ministerial Technical Committee (IMTC) comprising the Principal Secretaries.

Assessment Phase

This phase covered consultations and analytical studies, including reviewing existing analytical works. For both MKUZA I and MKUKUTA I, a number of studies was commissioned covering the following key areas:

(i) Growth and distributional issues (pro-poor growth issues)
(ii) The need for a growth strategy (assessment of growth agenda)
(iii) Institutional factors in implementation
(iv) Effectiveness of M&E Framework and implementation
(v) Health Service coverage
(vi) Issues in Resource mobilisation

The focus of MKUZA and MKUKUTA review was to provide critical analysis and identify reasons for under- or non- achievement of some of the set targets. There are areas where achievements have been encouraging thus calling for consolidation and addressing the outstanding challenges. On the other hand there are areas where progress has been slow, and thus the need for scaling up interventions.

In discussing specific issues for the review of MKUZA I, and following initial discussions between MOFEA and Development Partners a consultative meeting that attracted directors of planning and policies of all ministries and representatives from the Non State Actors was organized to build consensus based on priorities.

Prior to undertaking the review studies, a consultant was assigned to prepare technical notes that would to provide a list of relevant issues for the review of MKUZA I. These issues were then used to prepare the Terms of Reference (ToR) for each study. The ToR for each study included the specification of the title of the study, the background information relevant to the study, objectives, the scope, methodology and contents of the expected outputs.

Following the preparation of the ToR, further consultations with the key Sector Ministries for the purpose of validating the studies, including their proposed methodologies. Procurement of qualified consultants with relevant expertise and capacity were then carried out through MOFEA tender board.

Specifically, during the review of ZSGRP (MKUZA I), commissioned studies included the following:

(i) Overall Analysis of Macroeconomic Framework and Assessment on Achievement of MKUZA Outcomes
(ii) Growth and Poverty Reduction in Zanzibar: Why such a Mismatch?
(iii)Growth Drivers and their Implications on Poverty Reduction
(iv)Investments in Agri-business and their Contribution to Growth and Poverty Reduction
(v) Assessment of the Availability of Health Services in terms of Accessibility and Quality of Health Care
(vi)MKUZA Financing and Strategic Allocation of Resources into Areas that Support Pro-poor Growth
(vii) The Extent to which Various Government Institutional Reforms and Process are aligned and Contribute to Implementation of MKUZA
(viii) Credibility and Reliability of the Macroeconomic Framework in Guiding Domestic Resource Mobilisation

Draft study reports were presented and discussed at stakeholders' workshop, which generated key inputs that went into the drafting of MKUZA II.
Drafting and consultation phase

Drafting of MKUZA II was led by the Deputy Principal Secretary (Economic Affairs) – MOFEA. The Drafting Team, which was composed of experts from the Government, Academia, and Non-state Actors (NSAs), undertook the drafting task by (i) synthesizing analytic reports and contents of studies and (ii) drafting the strategy. The Drafting Team was selected based on individual qualifications and capacity to analyze and write the strategy. However, almost all Government Ministries had their staff as member of the drafting team.

Before the drafting of MKUZA II started, an annotated outline of the strategy was developed and agreed upon. This informed the drafting team and formed the basis in the formulation of the new strategy. The outline allowed the process of drafting to progress well without necessarily waiting for completion of the assessment phase.

1.5 Lay out of the document

Apart from this chapter, the rest of the document is organized as follows. Chapter two reviews the current situation of growth and poverty reduction. Chapter three dwells on the framework of the strategy while chapter four presents the strategy itself. Implementation framework is discussed in chapter five while coordination, monitoring and evaluation are covered in chapter six. Chapter

seven is on resource mobilisation and financing. An annex that summarizes the strategy follows in terms of cluster matrices.

2. CHAPTER II: GROWTH AND REDUCTION OF POVERTY: STATUS, CHALLENGES AND LESSONS

2.1 Overview

This chapter presents the status of the economic performance and, challenge emanating from the implementation of MKUZA I and draws relevant and useful lessons for MKUZA II. This situational analysis covers the three clusters of MKUZA I, namely, Growth and Reduction of income Poverty, Social Services and Wellbeing and Good Governance and National Unity.

2.2 Performance Status of Cluster I: Growth and Reduction of Income Poverty

The broad objective of this Cluster was to achieve and sustain pro-poor growth. To this end three goals were spelt out, namely, the creation of an enabling environment for growth; the promotion of sustainable pro-poor and broad-based growth and; the reduction of income poverty and the attainment of overall food security. Each of these is discussed below.

2.2.1 Achieving and Sustaining Pro-poor growth

The prerequisite for sustained growth as indicated in MKUZA I is the creation of a stable macroeconomic environment. The creation of stable macroeconomic environment is achieved when there are effective monetary and fiscal policies to ensure low inflation, strong financial and debt management, low lending and saving rates, vibrant private sector and robust resource mobilisation. Assessment of the extent to which these issues have been tackled during the implementation of MKUZA I has been reported in the Annual MKUZA I Implementation Reports (MAIRs). The following is a brief summary of the performance and challenges of some of these issues.

Inflation and Public Debt

In order to reduce inflation, MKUZA I adopted two key interventions namely, pursuance of prudent fiscal and monetary policies and addressing supply constraints of food and other basic goods and services. However, inflation has been spiralling upwards as shown in Figure 2.1. It appears that food price is largely responsible for the rising inflation. Currently, food constitutes 57.4% of the basket used for construction of the Consumer Price Index. There was a sharp increase in food inflation from 16.1% to 24.3% between 2006 and 2007, a fact that might have been contributed by the decline in the domestic production of some food crops, and the then surging global food crisis.

Domestic production of food is still very much dependent on weather conditions and is limited by geographical factors. There are also a number of constraints in the agricultural sector, such as shortage of inputs, lack of effective extension services and so on that can be addressed by policy to boost production. Thus there is an opportunity for policy to contribute to an increase in food production and thus reduce inflationary pressure in Zanzibar.

The increasing food inflation had repercussions for efforts to reduce poverty because while the cost of living is pushed up, income did not increase concurrently. In fact the preliminary analysis[5] of the

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[5] As has been pointed out, this strategy was prepared while the exercise of collecting household budget survey data for the 2009/2010 was still on-going. The only complete household budget survey data that was available was for the year 2004/2005, which is obviously dated. A preliminary analysis for the initial three months of the 2009/2010 data and the corresponding months of the 2004/2005 data was commission which shows that poverty as measured by using basic needs poverty line has marginally declined but extreme poverty which uses food poverty line has not changed. It is

2009/2010 Household Budget Survey data shows that extreme poverty which is measured by using food poverty line, has not declined as envisaged in MKUZA..

*Figure **0.1**: Inflationary Dynamics: 2004 - 2008*
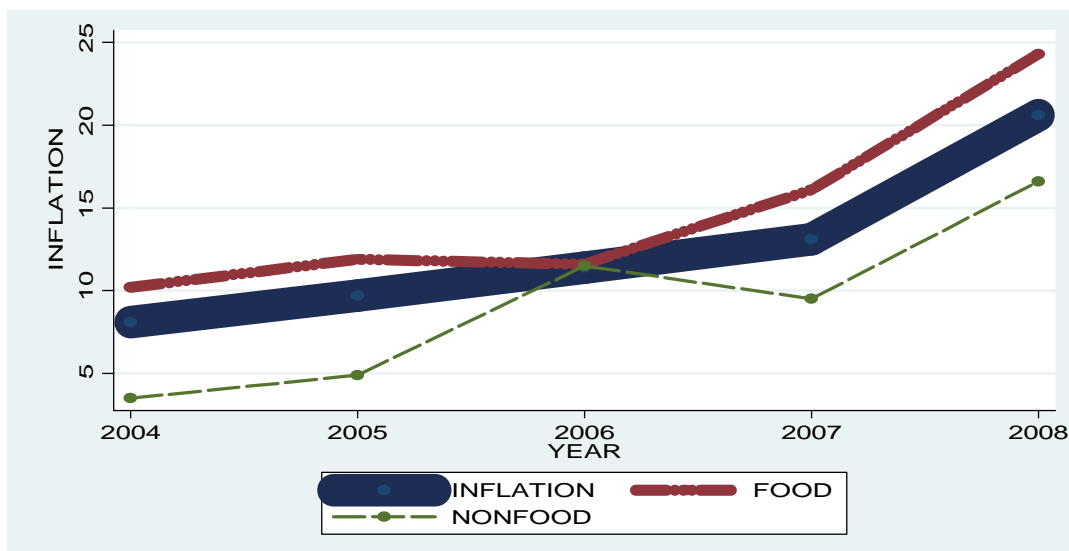
Source: data from the OGCS' Economic Survey 2008

Even though non-food inflation has generally remained below the headline inflation, a marked upward trend is also observed particularly after 2007. Spiralling food price eventually increased the cost of production in other sectors and thus reinforced the inflationary pressure. In addition energy prices, which substantially increased in 2008 following the world energy crisis, had a strong contribution on the overall inflation. Hence the target of creating stable macroeconomic environment for growth through low inflation was not attained.

The strategy for controlling inflation that was enunciated in MKUZA I did not take an explicit recognition of the fact that Zanzibar cannot conduct an independent monetary policy because such policy is under the purview of the Union institutions. MKUZA II takes cognizant of this fact and seeks to explore measures for ensuring that the interest of Zanzibar is taken into account in the formulation of the national monetary policy to the extent possible.

As indicated in the 2008/2009 MKUZA I Annual Implementation Report, the total debt stock has generally shown a declining trend over the recent years, declining from TZS 181.6 billion in June 2006 to TZS 138.3 billion in June 2009. There is a general indication of a declining trend in the debt to GDP ratio over time, which suggests a movement towards debt sustainability.

Revenue Collection

MKUZA I targeted to increase the percentage of revenue to the GDP from 13.8 percent in 2005 to 18.5 percent by 2010. By 2007/2008 the revenue to the GDP ratio had reached 18.2 percent, and this was largely contributed by increased revenue collections from VAT and income taxes. By 2009

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important to point out that such preliminary analysis can also be misleading because the sample used for analysis is not properly representative of the population. A representative sample is only available when the entire sample, which is collected over 12 months, is available for analysis.

the target of revenue collection set in MKUZA I was achieved, which is a remarkable performance, given the fact that the global economy was going through a financial crisis since September 2008.

Given the achievement in revenue collection, MKUZA II will aim to increase the current revenue to GDP ratio of 18.5 percent to 22 percent by 2015. To achieve this by 2015 the following measures will be undertaken.

  i.   Strengthening the institutional and technical capacity of the fiscal policy unit;
  ii. Strengthening revenue collection by implementing recommendations arising from studies;
  iii. Finalizing; the development of revenue forecasting model;
  iv. Reviewing and implementing ZRB and TRA corporate plans.
  v.   Enhancing effectiveness and efficiency on revenue collection through improved fiscal administration, non-tax revenue collection and submission.

Given the past trend in revenue collection the target of increasing revenue to GDP ratio to 22 percent is within reach by 2015.

2.2.2 Promotion of Sustainable Pro-poor and Broad-Based Growth

Under MKUZA I GDP was targeted to grow from 5.6 percent in 2005 to 10 percent in 2010. But even though Zanzibar enjoyed positive and healthy growth throughout the life span of MKUZA I, the targeted growth rate was not achieved.

Figure 0.2: Zanzibar's GDP between 2002 and 2008
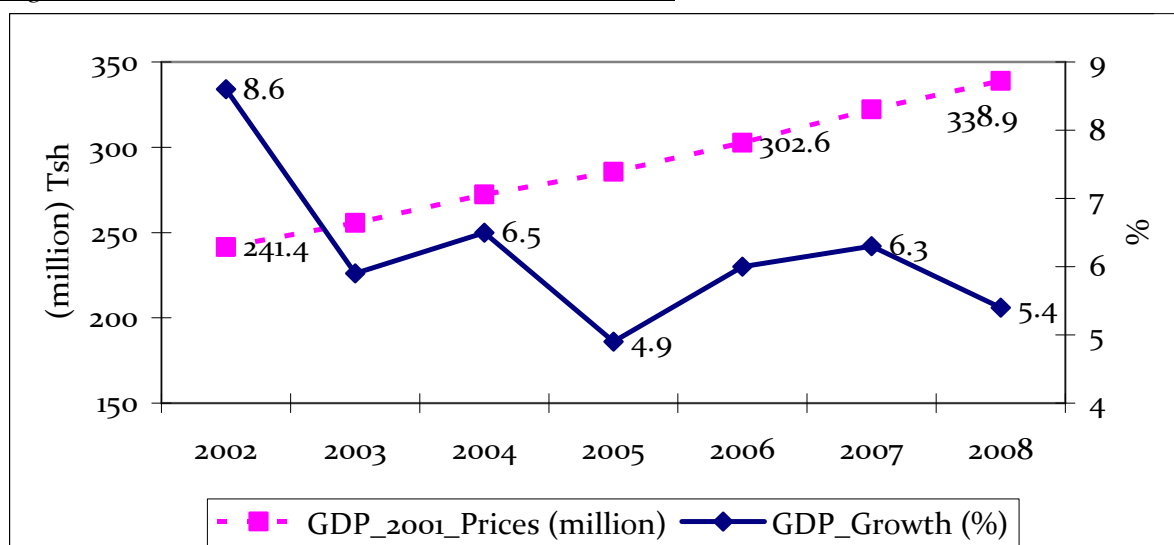
Source: Zanzibar Human Development Report 2009

Figure 2.2 shows that the real annual economic growth rate has mostly remained around 5 percent. In 2009 the real annual growth rate was about 6.3 percent much below the target of 10 percent by 2010.

Not only that but the real annual GDP growth rate displayed considerable fluctuations, suggesting that the economy has remained at the vagaries of many unstable factors such as weather, and global economic performance. The fluctuations in the real annual GDP growth rate tend to be more pronounced in some specific sectors, meaning that households employed in such sectors tend to be

more vulnerable to poverty. The standard Household Budget Survey cannot give a realistic picture of the extent of vulnerability to poverty; it requires a panel household survey data to do that. .

The Zanzibar's national accounts categorise the economy into three major sectors, namely (i) agriculture, hunting and fishing, (ii) Industry, and (iii) service sectors. The first category is composed of crops, livestock, forestry, and fishery sub-sectors. Over all, the industry sector has enjoyed higher growth than the agriculture and service sectors. However and according to the Integrated Labour Force Survey, the service sector accounts for the highest employment share at 39.1 percent, followed by the agricultural sector at 37.3 percent, while industry accounts only for 14.6 per cent of total employment. A growth that is intrinsically broad-based and pro-poor should have been driven mostly by the sectors that commands higher share of employment.

Table 0.1: Decomposition of GDP Growth into Sectoral Growth in Zanzibar (in percentage)

SECTOR/YEAR	2003	2004	2005	2006	2007	2008
Agriculture, forestry & fishing	4.2	2.8	2.8	18.7	-0.4	5.7
Industry	16.3	12.5	6.6	17.6	4.7	1.6
Services	4.3	6.7	5.3	-2.8	10.4	6.4
Adjustment to market prices	5.9	6.5	4.9	6.0	6.3	5.4

Source: data from OCGS Economic Survey 2008

Demographic Factors

Demographic dynamic processes namely fertility, mortality and migration lead to changes in the population characteristics, namely, size, growth rate, age-sex structure and population distribution. Available evidence indicates that population dynamics in Zanzibar affect economic performance, which in turn has major implications for poverty levels. Experience in some countries has shown that health gains and reductions in the birth rate have accompanied the demographic transition and gains in economic growth to produce a decline in the incidence of poverty. Elsewhere, however, persistent population growth not only constrains development opportunities but contribute to environmental degradation.

Zanzibar has a small but rapidly growing population (See Figure 2.3below). The annual population growth rate almost doubled increasing from 1.8 percent in 1967 to 3.1 percent in 2002. The growth rate for Unguja was higher (3.6%) than Pemba (2.2%). The population of Zanzibar is predominantly rural (68%) and youthful in character. Children under 15 years of age make up 44.3 percent of the total population, implying a high burden of youth age dependency which sets a limit on domestic savings and reduces the ability of women to participate in the labour force.

The high population growth rate currently at 3.1 percent can undermine the growth and poverty reduction efforts in Zanzibar. The population growth rate will affect the future size of population, its age structure, the age dependency burden, labour force supply, rural and urban distribution and densities - all of which have implications for development. The long-term effect of continuing high population growth in a weak economy could be damaging.

Figure 2.3: Population Size in Zanzibar: 1957-2020
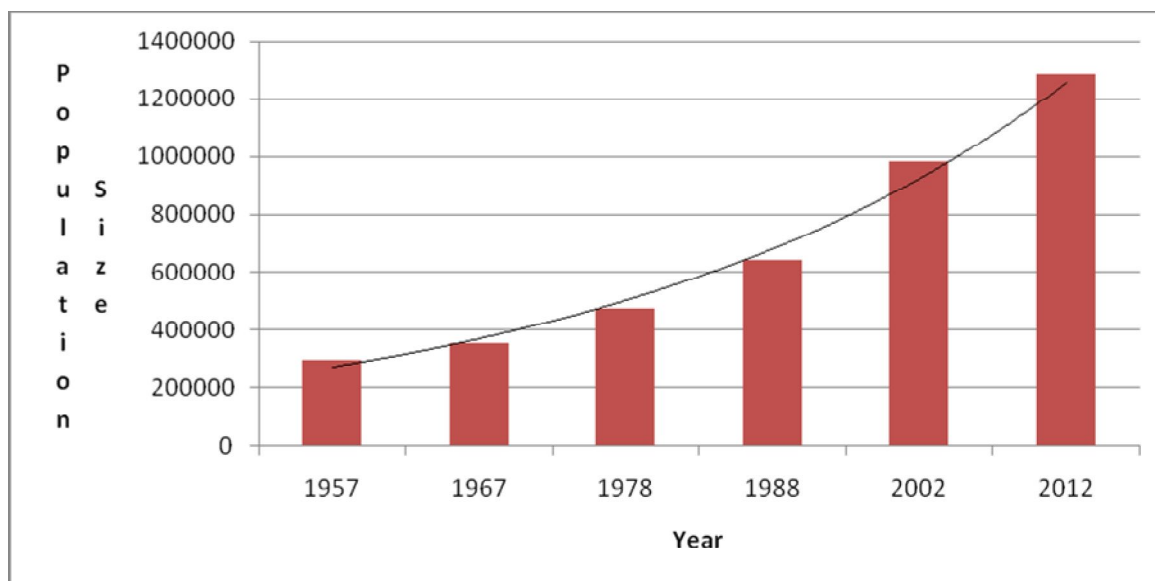
Source: Population Census 2002

In view of this, there is a need to harmonise population and economic growth through stabilising population growth rate at 2.8 percent per annum by the year 2015[6]. In order to achieve this it is important to: rate at 2.8 percent per annum by the year 2015[7]. In order to achieve this it is important to:

    i.   Implement the Zanzibar Population Policy (2008)
    ii.   Ensure access to productive resources (e.g. land, income and credit) by all men and women
    iii.   Promote participation of women in decision making and implementation at household level
    iv.   Encourage formation of sustainable family sizes.
    v.   Promote public awareness on the importance of quality population
    vi.   Support integration of population studies in tertiary education
    vii.   Ensure key sectors integrate population issues into their plans and programmes
    viii.   Improve collection, processing and dissemination of population data.

Employment and Tourism

One way of finding out whether growth is broad-based and pro-poor is to assess its implication to employment. A growth that generates mass employment tend to be broad based and quite likely pro-poor too. According to the Zanzibar Human Development Report of 2009 e employment elasticity of growth for Zanzibar for 2007 and 2008 showed that employment elasticity of growth is higher in the private sector than in the public sector; this means that efforts to revitalize the private sector would be good for employment generation. MKUZA II has a specific goal that targets the promotion of a vibrant private sector for broad-based and pro-poor economic growth.

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[6] The other option for this operational target could be either slowing population growth rate per annum from 3.1% to 2.8% by 2015 or sustaining population growth rate at 2.8% per annum by 2015. Please note that this is based on the MDG Target. The MDG target for least developing countries is 2.2% by 2015

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The 2009 Zanzibar Human Development Report further showed that tourism, which is one of the drivers of growth in Zanzibar, has not generated as much employment as would be required and there is a feeling among the local communities that it is people from outside Zanzibar that are benefiting from the employment opportunities generated in the tourism industry, leaving the local community to bear the full brunt of the environmental and cultural costs of tourism.

The report further shows that tourism has a very weak linkage with the rest of the economy, thus limiting potential multiplier effects in terms of employment and income creation. MKUZA II addresses this issue by strategising on improvement of the quality of the workforce in key growth sectors, including tourism. MKUZA II also strategizes on increasing the share of local horticulture products such as vegetables in the local tourism market to ensure the spread of the benefit to the largest section of the population through Multiplier effects.

Agriculture

Agriculture, which is the second largest employer and one of the identified drivers of growth, has not enjoyed robust growth partly due to its dependence on weather. Growth of the agricultural sector remains crucial for broad-based and pro-poor growth, given that it employs slightly more than one third of the population. Besides, studies elsewhere show that those employed in the primary agricultural production earn less than those employed in comparable occupations such as agribusiness. Thus, even with improved growth in the agricultural sectors, other measures to improve marketing, increase productivity and reduce the cost of production should be adopted and implemented simultaneously to ensure that such growth do indeed significantly benefit a large section of the population. MKUZA II addresses these issues through strategizing for expansion of irrigation farming, investment into infrastructure to support agriculture, extension of credits and improvement in the extension services.

Zanzibar's Agriculture sector is mainly dominated by small-scale subsistence farming, with low productivity of land, labour and other inputs. This is caused mainly by inadequate application of productivity enhancing factors such as poor crops, fisheries and livestock-related infrastructure; limited finance to obtain productivity-enhancing inputs; inadequate provision of agricultural support services; gender insensitive agricultural planning and; lack of appropriate technologies. All these together have forced the majority of farmers to produce only for subsistence. The agricultural related infrastructure is constrained by inadequate production, marketing and processing infrastructure for crops, fisheries, and livestock. Furthermore, there is low capacity amongst the relevant institutions both at national and district levels to implement the policies and programmes/plans that are designed to reduce poverty and food insecurity. . Some of the capacity constraints include inadequate technical expertise, low capacity for financial planning, inadequate management skills, insufficient financial resources and lack of adequate tools to manage and control the development process.

In the food crops sub-sector, it has been revealed that the production of most food crops is far below potential levels. Main factors contributing to this poor performance are: recurrent droughts, which have recently increased both in frequency and severity; low input use due to lack of improved planting materials such as. Seeds, inadequate use of fertilizers and pesticides; limited knowledge on application of improved production technology, weak support services (research, extension and credit); degradation of natural resources; low labour productivity; high post harvest losses and; limited adaptation of improved farming practices by smallholders. Given the seasonality in crop production and persistent climate change, investment in water harvesting techniques and expansion of land under irrigated farming would be the best option for ensuring stable and higher agricultural productivity. There is potential to increase both smallholder and large-scale irrigation farming.

Apart from low domestic production of food in Zanzibar, there is higher level of post-harvest losses due to poor handling, poor storage facilities and inadequate processing technology especially among the predominantly women farmers. The average waste for rice, cassava, vegetable (tomatoes) and fish is 13, 26, 42 and 25 percent per year respectively.

Although recent livestock production growth rates have shown overall positive trend, the livestock sub sector productivity per head has remained very low. This is attributed to, among others (a) inadequate provision of animal health and management services such as availability of quality and affordable animal feeds; (b) an outdated and weak regulatory framework; (c) a poor genetic livestock breeds (d) weak production and market linkages;   and (e) inadequate equipment and, number of qualified technical personnel, research facilities. Despite these constraints, Zanzibar has significant potential for commercialisation of the livestock sub-sector, driven by increasing demand in urban areas and the expanding tourism industry.

Recognising that fisheries are of great importance to the economy of Zanzibar, Government efforts have been directed to the conservation of marine and coastal environments. Largely as a result of these efforts, there have been significant increases in fish catch from 20,541 tons in 2001 to 23,582 tons in 2007.Despite this positive performance, marine resources in both territorial sea and Exclusive Economic Zone (EEZ) are still underutilized as most of fisheries activities are done in inshore waters, which are unsustainably over exploited. There is a great potential on the part of domestic fishers for off shore fishery expansion in Zanzibar.

Seaweed farming is another important activity for economic and social development in Zanzibar. Seaweed farming is supporting livelihoods of coastal population particularly women and has become one of the major foreign currency earning crop. In addition it helps to reduce degradation of marine environment and destruction of coral reef caused by dynamite fishing. However, further expansion of seaweed farming is limited by the international quota system marketing arrangements that have   restricted Zanzibar to annual supply of only 7,500 metric tons. Nevertheless the development of seaweed farming and its contribution to the livelihoods of those who engage in it could be effectively sustained through improving the quality of produce, provision of varieties with higher market potentials, promoting investments in secondary and tertiary processing of seaweed, and improving farmers' skills in farming and post-harvest handling techniques.

The production performance in the export crops sub-sector is largely constrained by limited value addition for traditional export commodities; non-traditional crops with potentials for exports such as fruits and spices and; perishable commodities (vegetables, livestock products and fish). Production seasonality and inadequate storage facilities render these commodities more vulnerable to large scale losses. The sub sector is also constrained by inadequate infrastructure, poor crop quality management, lack of experience in value addition and branding, inadequate creativity and weak entrepreneurial skills. Poor post- harvest and handling technology has contributed to the poor quality of agricultural products, making it difficult for smallholders to capitalize on the opportunities provided by the growing local and export markets.

Far-reaching changes in domestic and global markets (particularly in Asia and other emerging markets) are creating big opportunities for farmers and agribusiness entrepreneurs. The demand for high-value primary and processed products is rapidly increasing, driven by rising incomes, faster urbanisation and market segmentation, liberalised trade, foreign investment, and tourism. These developments are expanding both internal and external market opportunities, which are important for fostering agricultural and non-farm growth, greater employment opportunities and increasing rural incomes.   But these new market opportunities categorically demand stability of supply,

quality, timely deliveries, and economies of scale. These are the current key challenges facing Zanzibar agriculture.

Zanzibar farmers have inadequate information on domestic and global market opportunities available to them. Farmers, fishers and livestock keepers are largely disconnected from the local tourism industry for instance, and are not aware of the changing nature of the food industry opportunities and market segmentation. The uptake of new crops with high and increasing demand is also slow. This situation could be reversed by provision of better information on available market opportunities, more and better extension services and promoting farmer organisations that are better placed and equipped to take advantage of market opportunities. Also there exists opportunities for widening the scope and volume of Zanzibar's local commodities into the domestic and export markets as well as in exploiting untapped potentials for secondary and tertiary processing, promotion of non-traditional crops and strengthening effective inter and intra-sectoral linkages.

Zanzibar's increasing population, caused by high fertility rates and low uptake of reproductive health services, is placing formidable pressure on environmental resources, particularly large scale encroachment on forest areas for settlement, farming and tourism development, habitat degradation particularly in the coral rag forests, coral reefs and mangroves. In addition, widespread wildlife harvesting – both in the terrestrial and marine environments poses a threat to the endangered terrestrial and marine biodiversity.

Zanzibar's natural land resource base, sufficient underground water and good climatic conditions, if efficiently utilized, could lead to expansion and diversification of both crop and livestock production. These features are of utmost importance in the islands' ecosystems and in sustaining livelihoods. They protect, conserve and manage ecological resources, including flora and fauna, and in maintaining soil and water conservation.

 The coast and its resources are Zanzibar's most valuable assets if used appropriately, could help sustain the present and future generations. The rapid transformation of Zanzibar's coast as a result of tourism development remains one of the most worrying issues with respect to coastal zone management. Widespread development seen on Unguja's East Coast, in areas such as Kiwengwa, are changing the face of Zanzibar. Pemba Island is largely still in good shape, but is poses a critical challenge   to the implementation of the Zanzibar's Tourism Zoning Plan, whose one of its objective is to limit tourism development to few areas.

The maintenance of mangrove stands is important, not only for protection against coastal erosion, but also forms crucial breeding grounds for fish, crustaceans and molluscs. Mangroves provide a valuable ecosystem function that extends to coral reefs and overall fisheries environment. If coastal erosion and coral reef damages remain unchecked, it will eventually affect tourism, fisheries and Zanzibar's biodiversity.

Trade

In recognition of the geographical advantage that favours Zanzibar as a regional trade centre, trade has been identified as one of the three drives of growth (others being tourism and agriculture), However, over the recent years Zanzibar has been running large current account deficit emanating from rapid growth of the import bill relative to growth of export receipts. Zanzibar export performance has shown some improvement in recent years; the export value has increased from US$ 15.9 million in 2006 to US$ 16 million in 2008. Despite this steady and respectable growth, the export sector has performed below expectations as the full potential of the country's capacity to

export is yet to be exploited. Recently Zanzibar has developed its Export Development Strategy whose vision is to transform Zanzibar into a vibrant export-led economy that substantially contributes to economic growth and social wellbeing. The life span of the strategy is five years beginning January 2009.

Zanzibar's exporters are particularly weak in their knowledge of international markets, branding and packaging. This is compounded by poor provision of services such as market and trade information and training to build capacity in branding and packaging by the trade supporting institutions. Hence there is need for a sustained capacity building process for the sector organisations and improvement of exporter's market skills. This capacity building process should focus on all aspects of exporting, including export procedures, international market requirements, branding, shipping etc. To penetrate foreign markets the Export Development Strategy must be effectively implemented, with active participation of both men and women in international and local trade fairs; in this regard, there is need to establish a Zanzibar trade fair facility,

Table 0.2: Zanzibar's Current Account, US$ million, 2004-2008

Item	Year Ending June					Annual
	2004	2005	2006	2007	2008p	% Change
Goods Account (net)	**-51.3**	**-71.6**	**-67.0**	**-65.1**	**-77.8**	19.6
Exports	13.1	7.2	11.8	15.9	16.0	0.8
Imports (fob)	64.3	78.9	78.8	81.0	93.8	15.9
Services Account (net)	**11.1**	**20.8**	**19.9**	**41.6**	**34.1**	(17.9)
Receipts	39.4	58.9	81.2	92.2	75.9	(17.7)
Payments	28.4	38.1	61.3	50.7	41.8	(17.6)
Goods and Services (net)	**-40.2**	**-50.8**	**-47.1**	**-23.5**	**-43.7**	85.9
Exports of Goods and Services	52.5	66.1	93.0	108.1	91.9	(15.0)
Imports of Goods and Services	92.7	117.0	140.1	131.6	135.6	3.0
Income Account (net)	**-0.10**	**0.17**	**0.36**	**0.21**	**-1.02**	(579.7)
Receipts	0.00	0.19	0.36	0.30	0.17	(42.5)
Payments	0.10	0.02	0.00	0.08	1.19	1,300.2
Current Transfers (net)	**14.2**	**11.2**	**50.2**	**56.4**	**53.7**	(4.8)
Inflows	14.2	11.2	50.2	56.4	53.7	(4.8)
Outflows	0.0	0.0	0.0	0.0	0.0	
Current Account Balance	**-26.1**	**-39.4**	**3.4**	**33.1**	**8.9**	**(73.0)**

Source: Bank of Tanzania, Zanzibar Branch.

In addressing these issues there are a number of supportive actions that must be taken. These include the need to build a strong Public Private Partnerships (PPP) and expand credit facilities for exporters. There are few financial institutions, other than the People's Bank of Zanzibar, offering acceptable credit facilities. Most Commercial banks in Zanzibar are basically branches of banks located in Dar es Salaam where applications for credit are processed. The Ministry of Commerce and Trade (MCT), the Bank of Tanzania the MOFEA and other support organisations need to assess this situation and then develop and introduce an effective and efficient export credit guarantee scheme that should reflected in the final second generation financial sector reforms, which are being formulated.

The Revolutionary Government of Zanzibar (RGoZ) has plans to take advantage of Zanzibar's strategic geographical location, including the existing opportunity to accommodate ocean going

vessels, to transform the whole of Zanzibar into a Special Economic Zone (SEZ) within the East African Community. This plan is in tandem with the Zanzibar's Growth Strategy and will be implemented under MKUZA II. This strategic action will promote rapid economic growth by using fiscal and regulatory regime to attract large volumes of trade, foreign investment and technology.

The implementation of the proposed SEZ for Zanzibar will call for major legal, institutional and fiscal set ups reforms. It will also have far reaching consequences and hence there will be need for a study to undertake a careful analysis of the concept and formulation of roadmap to guide successful implementation of SEZ. The study should also propose the best approach to sell this idea to the EAC such in order to get the Community's endorsement and support.

Manufacturing Sector/SMES

The manufacturing sector in Zanzibar is dominated by the SMEs. Given the vast demand for manufactured goods, manufacturing has the potential for being a key driver of growth. According to OCGS statistics, total manufactured exports in the year ending June 2008 were US$ 3.9 million, accounting for around a quarter of total exports. Manufacturing, however, has tended to under-perform and currently accounts for only 4 percent of GDP (within the industry classification), down from 5.9 percent of GDP in 2003. The vast majority of Zanzibar's manufactured exports were in textiles and garments. Other important manufactured exports are wood products, coconut oil, arts and handicrafts, spices as well as products from agro processing.

The development of the manufacturing sector requires interventions to promote investments in productive capacity, empowering of private sector specifically SMEs, access to credit and reasonable cost of utilities. Currently Zanzibar's manufacturing firms face major challenges in gaining access to financial resources needed to invest in new, higher quality productive capacity.

Key constraints to the development of the sector

Zanzibar's manufacturing sector is facing constraints in four main areas:

(a) <u>Weak manufacturing/industrial entrepreneurship base</u>
Limited business start-ups and high risk-aversion among existing firms, coupled with a generally poor investment climate tend to result in underperformance.

(b) <u>Unreliable supply and high cost of utilities</u>
Unreliable supply of key utilities and their high costs limits investments in manufacturing. Interruptions in the supply of electricity and water constrain production especially for time-sensitive manufacturing industries. Similarly the poor states of telecommunications infrastructure make it difficult for firms to reach importers and suppliers outside the islands.

(c) <u>Poor quality goods and packaging</u>
Export markets are increasingly demanding higher standards of goods imported, both for health reasons (sanitary and phyto-sanitary requirements) and due to consumer tastes. Manufacturers that cannot meet minimum standards will not be able to export. Similarly

packaging plays an increasingly important role in accessing export markets. Currently Zanzibar firms are weak in these two important areas.

(d) <u>Low supply capacity</u>
The small size of the local market, together with a low starting base means that manufacturers in Zanzibar are often unable to produce a critical mass of goods and gain from economies of scale. As such, firms remain stuck in a cycle of high-cost, low-volume production. They also operate under cumbersome, expensive and time consuming licensing procedures.

Through MKUZA II (2010-2015), the Government will work together with UNIDO and other Development partners to provide adequate capacity of implementing the existing SME Development Policy. Special efforts will be directed towards encouraging Small and Medium Enterprises to venture into the food processing industry; sustaining value chain program, and training SMEs and informal sector in general in documentation and trade procedures. Product quality will be improved through introducing proper and efficient quality assurance and standardization measures, particularly among SMEs. Other measure will include establishment of quality control institution; strengthening the capacity of consumer protection bureau; providing support to improve products design and quality and; improving the programme for quality management, environment and consumer protection, all of which are planned for the period 2010-2012. These measures will invariably contribute towards increasing Zanzibar's industrial competitiveness and hence exports.

The private sector

Recognising that the private sector is an engine for growth, the government has continued to support the sector through implementing g a wide range of institutional and policy reforms. These include:

- The establishment of the Zanzibar Business Council in order to promote Public Private Partnership,

    - The Council provides the main forum for public – private sector consultations on strategic issues of economic growth and development.

- The formulation of the BEST program intended to create a conducive environment for Private sector development; accordingly, some laws and regulations have been reviewed and revised. .

However more strategies under MKUZA II are needed to further improve the business environment for more investment by the private sector.

Major challenges faced by the private sector include multiple taxation, cumbersome licensing procedures, poor infrastructure, corruption, access and cost of finance, access to land, business and

labour regulations. The core sector strategy for promoting a conducive environment for private sector development with focus to SMEs will be:

(a) Formulating better regulations

Currently there are many laws, by-laws, regulations and administrative procedures that create an unfavourable business environment in Zanzibar. Hence the objective would be to reduce unnecessary regulations and ensure better enforcement of such regulations. This would require elimination of lengthy procedures in business licensing and simplifications of import and export procedures and regulations, all of which should lead to reduction in transaction costs.

(b) Improving quality and efficiency in commercial Dispute Resolution

 The objective would be to improve the speed of processing and quality of commercial disputes.

(c) Strengthening the Zanzibar Investment Centre (ZIPA)

The main functions of Investment Promotion Agency in Zanzibar are to assist actual and potential investors to overcome systematic inefficiencies in the prevailing business environment; administer the various tax incentives offered to investors and promote Zanzibar as a preferred investment destination. But ZIPA needs additional capacity if it has to execute its functions effectively. The objective of building the capacity of ZIPA is to:

- Identify constraints on both domestic and foreign investments in Zanzibar,
- Develop corporate plan and investment strategy aimed at streamlining investment processing procedures, and
- Strengthen incentive packages for attracting more investors in various sectors.

(d) Infrastructure

Infrastructure constitutes transport infrastructure, namely, roads, airports and sea port; communication infrastructure which includes ICT infrastructure and telecommunications infrastructure and; energy infrastructure incorporating the electric and other energy related facilities.

(i) Transport infrastructure

Recently, the RGoZ has approved the implementation of Zanzibar Transport Master Plan (ZTMP), which provides strategies to implement transport policy and to replace older, outdated transport plans, particularly the 1982 Town and Road Infrastructure plans. ZTMP provides responses to current and projected needs for road, airport and maritime transport. ZTMP recommends:

- Improvements of transport regulations and safety methods;
- Policy development;
- Improve public transport, parking,
- Promotion of private sector investments and provision of services; and
- Improvement of Government institutional framework, for implementing the Plan.

However, the Zanzibar Transport Master plan puts emphasis on   immediate reconstruction and rehabilitation of roads leading to Zanzibar town since the existing roads do not meet the increasing road traffic demand. The increasing road traffic has in turn   increased road accident rate.

(ii) Maritime Transport

 In the long run Malindi port will not be able to cope with the cargo movements emanating from the current expansion of Tourism and trade activities in Zanzibar, The economic future of Zanzibar requires the rapid development of a new port capable of providing efficient long-term cargo services for Zanzibar and East Africa at large. The proposed container HUB port will be built at Maruhubi area. The scale of work, needed to that can serve not only Zanzibar but the East and Central Africa market, the size of investment required, the timeframe for completion of the task and quality of management, all call for the Government to   team up with a strategic Private Port Operator (under PPP framework). Moreover, the ports in Pemba should also be modernised to serve Pemba as one of international port of entry.

iii) Air Transport

Recently Even though the run way at Zanzibar international airport has been rehabilitated and extended to meet the international standards, such expansion is inadequate.,   The airport still requires substantial and urgent upgrading of facilities for both aircraft and passengers if it is to double throughput to 1.1 million passengers by 2015 before it grows again to accommodate approximately 2 million passengers by 2025. New facilities needed include a new passenger terminal; new taxiways and additional aircraft parking apron; improved car parking and bus facilities, as well as new navigation and security equipment.

(iv) Road Transport

Zanzibar road network has about 1,150 km of which 427 km are paved roads and the remaining is either gravel or earth roads. The transport Master plan indicates that most of Economic roads in Zanzibar are either on construction or have completed. Current efforts target the upgrading and construction of the remaining road network (723 km) to bitumen standards. It also targets continuous maintenance works of paved and unpaved roads. Plans in road sector for the period 2009-2015 include:

- Road Maintenance
- Improvement of Integrated Urban Roads (town entry roads)
- Basic access roads improvement
- Institutional reform and Capacity Building

Public Transport

Upgrading Improvement in public transport will include building new bus terminals, gradual introduction of dedicated bus lanes, separated bus stops and improved bus/*'dala dala'* services by developing new routes and improve safety conditions.

Basic Access Roads

Access to many villages is difficult and 'basic access' must be restored improving rural roads to ensure minimum level access.

Urban Access and Drainage

Many secondary roads included in the 1982 Town Plan have not been constructed much as they are urgently required to serve large numbers of disadvantaged urban residents. Along with construction of these roads, road storm drainage will be improved. Then there is the problem of unplanned settlements in Zanzibar town, which need to be contained urgently to avoid huge housing and property compensations in future, roads construction.

Accident Reduction

Road accidents in town area specifically, are excessively high level. Priority for construction of bus, pedestrian and bicycle lanes will save lives and provide additional capacity on existing roads. Additional traffic free areas and motor-bike bans will improve safety in Stone Town area.

Local Contractors

There is inadequate number and qualified local contractors to efficiently undertake road maintenance and eventually contracted to construct new roads. Hence a programme to develop capable Zanzibar road works contractors is urgently needed. Retrenched workers from the existing MoCT Department of Roads employees will be trained and assisted in forming these road works contractors.

(v) Communication infrastructure

While the Communication sector is governed under the laws of the of the United Republic of Tanzania, the development of communication infrastructure is the responsibility of Zanzibar The Zanzibar Government is implementing communications infrastructure projects to make use of cheaper, reliable and very effective communications access in Zanzibar. Timely implementation of these projects would increasingly contribute to Zanzibar's economic development, particularly in the tourist industry. For Zanzibar to reach that stage the following projects need urgent implementation:

(a)   Submarine cable to connect Unguja with Dar es Salaam.
(b)   Construction of ICT infrastructure backbone within Zanzibar (Unguja and Pemba).

(vi) Energy infrastructure

Energy sector comprises of electricity, fossil fuels, biomass, new and renewable energy. Zanzibar electric power is fully dependent on a single sub-marine electric cable connecting Zanzibar with Mainland Tanzania on the part of Unguja Island. This cable, with a specified life span of 30 years, has been in operation since 1980. The cable has a load capacity of 45 MW which is just within the current consumption level of 44 MW but far below the projected growth of demand, expected to require 50 MW extra supplies.

Right now Zanzibar has no back-up power supply to cater for outage which may occur from Mainland Tanzania. The Government of Zanzibar seriously urges the Millennium Challenge Corporation (MCC) to accelerate the implementation of the agreed new Electric submarine cable project with a capacity of about 100 MW Apart from this project, affordable alternative sources of energy such as solar, wind, wave, tidal and gas should also be pursued.

2.2.3 The Reduction of Income Poverty

In order to assess achievements in the efforts to reduce Income Poverty, MKUZA I identified two targets. First is the reduction of the percentage of people below the basic needs poverty from 49 percent in 2005 to 25 percent by 2010. Second is the reduction of the percentage of people below the food poverty line from 13 percent in 2005 to 10 percent by 2010. Unfortunately the assessment of these targets could not be done because at the time of MKUZA I review there was no adequate data that can allow robust assessment of the performance of MKUZA I, so needed to inform MKUZA II; the baseline data for MKUZA I came from the 2004/2005 Household Budget Survey but similar data was not available at the time of preparing this document. The latest Household Budget Survey was completed in May 2010, but data from this survey would not be available for analysis before September 2010. Instead, two strategies have been employed to attempt to assess achievements in reduction of poverty during the life span of MKUZA I. The first strategy, which was also employed in the preparation of the 2009 Zanzibar Human Development Report, relies on informed projections of poverty given the dynamics of the GDP. This method makes assumptions on the dynamics of income inequality and the relationship between poverty and national income.

The second strategy involves analysis of a smaller sample of data from the current HBS and then compare poverty estimated from this sub-sample to poverty rate from a sub-sample of the 2004/2005 HBS The assumption here is that any change in income poverty rates in between the two HBS's would give a reasonable reflection of the change of income poverty for the whole of Zanzibar. However both strategies have serious shortcomings emanating from the assumptions made and therefore should be interpreted with caution.

Projection of Poverty Rates

The first scenario upon which poverty rate is projected is based on an assumption that inequality did not change from 2004/05 to 2009, meaning that distribution of growth was neutral. Figure 2.4 shows these projections in which the Head Count Ratio declines from 49 percent to 40 percent and Poverty Gap ratio declining from 13.1 to 9.7.

Figure 0.4: Projected Poverty Rate given the GDP and unchanging Inequality
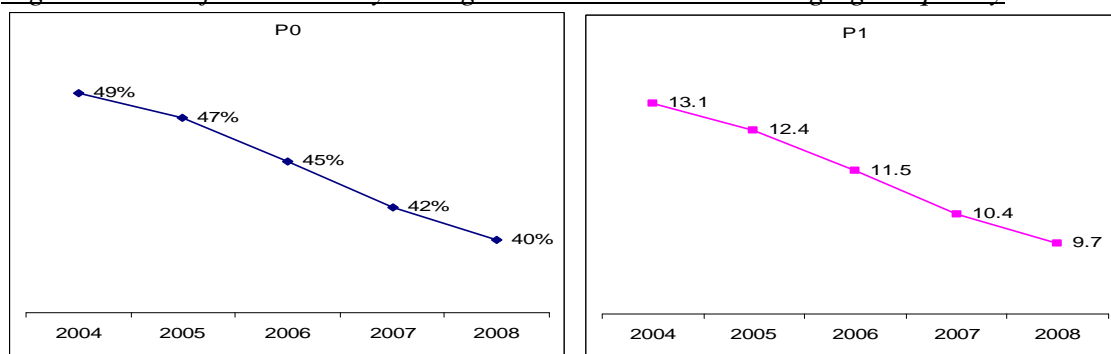
Source: Zanzibar Human Development Report, 2009.

Based on this scenario, poverty did not decline to the level targeted by MKUZA I, from the Head Count Ratio of 49 percent in 2005 to 25 percent in 2010. Note that MKUZA I did not use Poverty Gap as a target. This is a rather optimistic scenario because in a poor country, economic growth tends to be accompanied with some increase in inequality.

Figure 2.5 presents projections of poverty rate based on the GDP growth in which inequality measured in terms of the *gini* coefficient has increased by 5 percent and by 10 percent An increase in the inequality by 5 percent generates a decline in poverty rate that is not different from one based on unchanging inequality. However, if inequality increases by 10 percent, poverty declines only very marginally. Thus, if this projection tracks the actual development accurately, one would expect MKUZA I target of the reduction of income poverty to have been attained only if there was a massive decline in inequality, which seems to be rather unlikely. It is more likely that this target has been missed, perhaps because it was overly optimistic, in that it envisaged a decline in poverty by almost 50 percent within a period of five years, a feat that is almost impossible to achieve.

Figure 0.5: Projected Poverty Rate given the GDP and Increasing Inequality
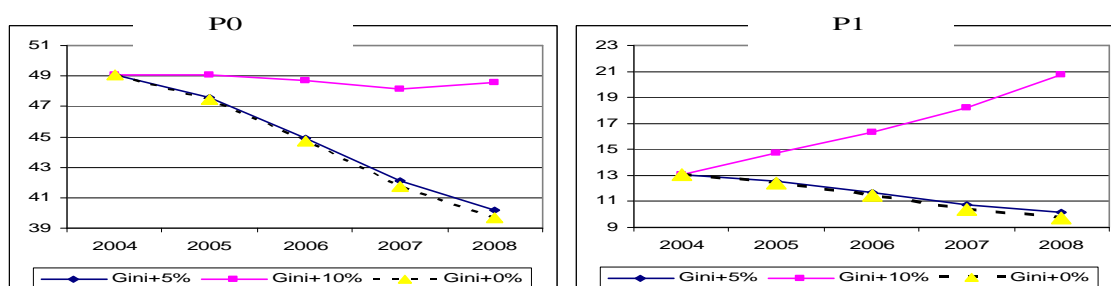
Source: Zanzibar Human Development Report 2009.

Poverty Trend from Un-representative Sub-Samples

Another approach of assessing the status and the dynamics of poverty is to use the sub-sample of household budget survey data for the months of June, July and August of 2004 and compare the poverty rate calculated from this sub-sample to the poverty rates calculated from the sub-sample of the household budget data collected in the corresponding months of June, July and August of 2009. Such exercise has been done by the Office of the Chief Government Statistician of Zanzibar in a bid to seek information to be used in the preparation of MKUZA II. As pointed out earlier, this approach has a serious weakness and is being used here because of the pressing need to determine

the current poverty situation with an understanding that these un-representative samples give only very rough and imprecise indicators of poverty situation.

Using the sub-sample of un-representative data the percentage of people living below the basic needs poverty line has marginally declined from 43.7 in the three months of June, July and August in 2004 to 38 in the corresponding months of 2009. Using the more appropriate poverty index, namely the square of poverty gap index, poverty is found to have declined even more significantly from 4.2 to 2.41 over this period. Further, it is found that poverty has declined in the rural areas while there is a slight increase in poverty in the urban areas, signifying that poverty is increasingly becoming "urbanized". The data further shows that Pemba suffers more poverty than Unguja, but the gap is narrowing. When food poverty line is used together with the appropriate index of poverty gap squared, it is found that extreme poverty has not declined over the period. This indicates that the continuing increase in the prices of food staff is making those who are very poor fail to escape poverty and it is probably the reason that poverty is becoming more of the urban phenomenon - urban population depends on the markets for food while rural household grow at least some of the food they consume.

The Trend of Poverty 2005 to 2010: A verdict

The above analyses shows that the target of reducing the percentage of the poor by about 50 percent between 2005 and 2010 was too ambitious as it is not easy to reduce income poverty by half within five years especially when GDP growth average target of 10 percent by 2010 was itself not attained. There are two main channels through which income poverty could be reduced at the household level; the first one is through an increase in household income,   through increasing employment opportunities in well paying jobs; through increasing productivity particularly in the agricultural sector and; through the expansion of income generating opportunities in general. The second channel for reducing income poverty is through the reduction in the cost of living. The last household budget survey for Zanzibar shows that food still occupies more than 50 percent of the value of goods consumed by households per month. Domestic food production has not increased sufficiently to arrest the galloping food inflation which is further fuelled by the increasing prices of imported food. Measures that would reduce the cost of food would go a long way to reducing income poverty.

Because poverty is multidimensional, income alone cannot serve as an adequate measure for assessing poverty reduction interventions. Improved access to education, water and health services and reduction in maternal, child mortality and morbidity, increase in life expectancy and an expansion of democratic space are some of the other dimensions of welfare that are important. As would be shown below, there have been achievements in reducing poverty using non-income dimensions during MKUZA I. In the long run these achievements will most likely boost   incomes of the poor.

2.2.4 Major Lessons from Cluster I of MKUZA I

Zanzibar has enjoyed a healthy and positive economic growth during the implementation of MKUZA I, but the targeted growth rate of 10 percent has not been attained. Moreover, annual economic growth rate shows significant fluctuations, indicating that the growth of the economy is not sustainable and remains at the mercy of weather and external factors such as the global energy, food and financial crises. Irrigation schemes would contribute to the reduction in the dependency of the economy on natural factors.

For the growth to be broad-based and pro-poor, economic sectors that provide mass employment should experience robust growth. In the case of Zanzibar this means that agriculture must grow robustly for the GDP growth to be broad-based and pro-poor. So far the agricultural sector has not achieved as robust growth as would have been required. Further, tourism, which has been identified as one of the drivers of growth needs further promotion   and well linked to the rest of the economy. Human resources capacity in the tourist industry needs to be developed, both in numbers and quality, to ensure that more Zanzibaris take up employment within the sector.

Inflation has continued to loom large mainly because of the increase in food prices prompted both by the weather-driven fluctuations in the domestic food supply and increased prices of imported food. Strategies to reduce or at least contain food prices are needed in order to control inflation headline inflation; one such strategy is reduction of income poverty through   measures to increase domestic food supply, which in turn would lead to arresting food inflation the biggest component of headline inflation.

Zanzibar has significantly improved revenue collection and is within the MKUZA I target of attaining the 18.5 percent of the GDP. Income poverty seems to have declined marginally between 2005 and 2010.

2.3 Status of cluster II: Social Services and Well Being

 This section reviews the status of performance, challenges and lessons learnt in the course of implementing cluster II of MKUZA.

2.3.1 Ensure equitable access to demand driven quality education which is gender responsive

Cluster II of MKUZA had 8 goals. One of the goals was to ensure an equitable access to demand driven quality education which is gender responsive. Operational targets and Strategic Intervention Packages were categorized into several groups, namely early childhood care and development, primary education, secondary education, and tertiary education. Other categories included science and technology, non-formal education and vocational training.

Early Childhood Care and Development

The number of pre primary schools has increased from 235 in 2008 (26 schools publicly owned and 209 privately owned), to 261 in 2009, (32 of them are government owned). Despite increase in number of schools, number of pupils enrolled has decreased from a total of 21,696 pupils (4035 pupils in government schools and 17,661 in private schools) in 2008 to 21,218 pupils (4476 in Public and 16,742 in private) in 2009. The Gross Enrolment Rate (GER) dropped from 20.9 percent in 2008 to 17.8 percent in 2009.

However, irrespective of the drop in GER an additional 3,044 pupils were enrolled in pre primary education through a pre primary education improvement project known as *Radio Instruction to Strengthen Education* (*RISE*) especially north 'A' District in Unguja and Micheweni District in Pemba. Monitoring and follow up on the quality of pre-school education has not been regularly Done.

Primary Education

The number of primary schools has increased from 277 in 2008 (232 schools were government and 45 private schools), to 290 in 2009, (232 schools were government and 58 private schools).In 2008 these schools enrolled about 216,731 pupils, out of whom 207,708 pupils were in government schools (with 103,611 boys and the remaining girls); and about 9,023 pupils in private schools (with 4,513 boys and the remaining were girls). The GER was equivalent to 104.4 percent. In 2009 the number of pupils in primary school reached 220,819. The GER was equivalent to 106.8 percent. The net enrolment ratio (NER) increased from 75.7 percent in 2006 to 81.4 percent in 2010. In addition, the *RISE* project also supported 3,067 pupils in lower primary standard I – II, in North 'A' District in Unguja and Micheweni District in Pemba.

Secondary Education

In 2007/2008 the number of students enrolled at secondary level 85,451 (81,074 in public schools and 4,377 in private schools); among them 41,059, or 48.1%, were females. In 2008/2009 the number of students was 82,796 (with 43,157 being females and 39,639 males.

In 2008, about 18,236 students joined Form III and Form IV, 50.3 percent of which were girls. In 2009 the rate of female's students joining Form III and Form IV increased to 54.5 percent. The proportion of passed students in O level national examination was 53.9 percent. Students who joined Form V and Form VI in 2008 were 4,398, out of whom 2,039 or 46.4 percent were girls.

In 2008 the number of students enrolled at the basic education level was 62,781 (males were 29,931 and 32,850 females), and the GER was 74.3 percent. In the following year the number of students enrolled increased to 51,139 and the GER was at 89.3 percent of all children aged 14 and who were supposed to be in school. Gender parity has been achieved at primary and basic education levels, and the gap in enrolment has been narrowed down, whereas in some cases boys' enrolment falls behind that of girls.

Inclusive Education

There has been a steady annual increase in the number of schools that are providing inclusive education, from 46 schools in 2007 to 86 schools by 2009. Similarly, the number of pupils enrolled has increased from 3,509 in 2007 to 3,883 in 2009.

Science Information and Communication Technology

The RGoZ attaches high priority to teaching science, mathematics, and the use of information communication technology as an avenue for improving human capital resources and creation of job opportunities. Measures undertaken to encourage students to take science and mathematics include: in-service training of teachers through Teacher Advancement Programme (upgraded teacher's content knowledge, teaching methodology and English). In this regard 76 lower secondary teachers graduated in Advanced Secondary Teacher Certificate (ASTC); 90,000 secondary school text books for science and mathematics, laboratory equipment and chemicals have been provided and; in collaboration with FAWE, MoEVT in 2007/08, conducted science camps for 450 students and 89 teachers in 2007/08. Other achievements in this period included: promoted use of ICT for education through teacher training institutions as well as schools; supply of computers and connected to the internet at teacher centres; computer training to staff at teacher centres and to some school teachers; and provision, of 10 computer units (2 per school per region) for teaching and

learning purposes. Nonetheless, the utilization of the internet facilities for education purpose is still at a formative stage.

Non Formal Education

Non-formal education is comprised of Alternative Learning, Literacy Programme, Continuing Education, Skills Learning and Women Programme. Alternative Education is primarily focused on the 12-14 and 15-19 age groups. Whereas, in the 12-14 age group the aim is to mainstream them into primary education, for the 15-19 age group, the aim is provision of skills such as cookery, tailoring, carpentry, computer training in addition to primary education. The new Rahaleo Alternative Learning Centre, inaugurated in late 2006, is an attractive choice for learners who have either dropped out from primary school or never enrolled at any primary school. By In 2008/09, there were 6,840 (5,701 females and 1,139 males) adult learners. The centre offers primary education on a three-year condensed curriculum. Certificates are awarded after passing the primary school examination.

Vocational Training

Vocational Education and Training Policy focuses on providing vocational training to those who completed basic education and school dropouts. Since 2009, the Government operates two new VET Skills Development Centres, one in Unguja (Mkokotoni) and another in Pemba (Vitongoji).

Tertiary Education

Tertiary education in Zanzibar is currently provided by both the Government and private institutions; currently Zanzibar has the State University of Zanzibar (SUZA), the Zanzibar University (ZU) and the University College of Education - Zanzibar (UCEZ). In addition, in 2009 the Karume Technical College was promoted to constitute the Karume Institute of Science and Technology (KIST).

Between 2008/09 and 2009/10 the number of students and graduates in the three universities has increased. For instance, in 2008/09 SUZA enrolled a total of 570 students (348 males and 222 females), and it grew to 703 students (428 males and 275 females) in 2009/10. In 2008/09 the College of Education, enrolled 626 students (409 males and 217 females), which increased to 725 students (456 males and 269 females) in 2009/10. Lastly, the Zanzibar University, enrolled 1,714 students (1,017 males and 697 females) in 2008/09, and increased slightly to 1,727 students (983 males and 744 females) in 2009/10. Total number of enrolled students for the three universities was 2,847 students in 2008. However, in 2009 the number increased to 3,155 students, an increase of 11 percent.

Quality of Education

The quality of education is related to the kind of knowledge, skills, capacities and value that the education system offers and the extent to which these skills are useful to individuals and the community at large. To achieve the desired quality of education there is need for regular reviews of the curriculum, examination, learning materials, pedagogical skills, language of instruction, and the learning environment. In Zanzibar the key determinants of quality, among others, are the proportion of students who passed Form II Basic Examination as well as Form IV and VI National Examinations and the proportion between trained and untrained teachers.

In 2008, number of students examined for this level was 14,603 (7,411female and 7,185 male) and 7,439 (3,748 female and 3,691male) passed, this was equivalent to 50.9 percent of all students (50.5% female and male 51.4%). In the following year 29,852 (16,594 female and 13,258 male) sat for Form II examination of whom 16,082 (9,043 female and 7,039 male) passed; this constituted 53.9 percent of all students (54.5% female and male 53.1%).

At 'O' level, a total of 7,755 students from public schools sat for Form IV exam in 2008, out of whom 5,811(74.9 %) passed their examinations. From private schools 690 students were examined and 609 (88.3%) passed. However, the overall transition rate to "A" level was only 23.3 percent.

At 'A' level the number of students who sat for the Form VI examination in 2008 was 1,432 (601female and 831 male) and 1,185 (496 female and 689 male) passed; this was equivalent to 82.8 percent of all students (82.5% female and male 82.9%). In the following year the number of students who sat for FVI National Examination was 1,959 (874 female and 1085 male) of whom 1,659 (743 female and 916 male) passed; this constituted 84.7 percent of all students (85.0% female and male 84.4%).

Government efforts were also directed towards increasing the number and quality of teachers. As a result the number of teachers has increased from 10,485 in 2008 to 10,727in 2009. The number of trained teachers also increased from 9,422 in 2008 to 9,788 while the number of untrained teachers is currently below 1000 (939). This shows that the overall sector has adequate number of trained teachers; however there is a shortage of teachers in some subjects particularly in science and mathematics, as well as shortage of graduate teachers for secondary Schools.

Challenges

Even though the number of school has increased in both urban and rural areas, equitable access to education has yet to be achieved. Disparities in enrolment across districts are still wide and the number of children with barrier to learning and development enrolled at basic education levels is very low. The number of students, particularly girls, attaining higher education is lower compared to the total population of girls attending basic education. This is due to a number of factors: low access to higher education, early marriages, dropouts, harassment, and an inadequate gender sensitive policy environment.

Provision of quality education at all levels is another challenge that needs to be seriously addressed. Actions needed include further improving the quality of teachers, improving the teaching environment and increase availability of and accessibility to textbooks and other necessary educational materials.

In spite of the Government's efforts to resolve problems in the education sector, challenges remain; these include:

  i.   Financial constraints;
  ii.   Inadequate library services;
  iii. Shortage of laboratory space and, equipments, chemicals and text;
  iv.   Shortage of qualified Sciences and Mathematics Teachers at all levels, especially in the rural areas;
  v.   ICT related constraints;
  vi.   Poor coordination among literacy programme implementers;
  vii. High proportion of illiterate women;

viii.   increasing number of semi-literate out-of-school youth;
 ix.   Reluctance by some parents to enrol children with barrier to learning and development;
  x.   Non-conducive school environment for children with barrier to learning and development;

- Poor interaction between teachers and children with barrier to learning and development that discourages positive learning process;
- Shortage of specialized teachers for children with barrier to learning and development;
- Shortage of school furniture and learning material for children with barrier to learning and development;
- Overcrowding of class rooms; and
- Skewed distribution of pre-schools between districts.

2.3.2   Improved health status

MKUZA I strategized on improving health status   including infant and child care and maternal and reproductive health. In addition, MKUZA I had strategized on reducing and where possible eliminating   communicable and non-communicable diseases, as well as issues of human resource management in the health sector.

Health achievements from MKUZA I

This section outlines health sector achievements by programmes, units, departments and health facilities emanating from the implementation of   MKUZA I (2007-2010). The discussion on the current situation and trends in the disease burden provides an understanding of the critical issues facing the sector. Relevant prevention and control measures and health care service delivered   are described and so are critical programme areas relating to the achievements of MDGs. The section also presents achievements made in generally recognised building blocks areas of a health system.

Burden of Disease

There have been epidemiological transition in morbidity and mortality in Zanzibar during 2006 - 2008. According to the Health Management Information System (HMIS) Bulletin 2006, admissions to hospitals due to malaria, which was the leading cause of morbidity and mortality, have recently declined.   While malaria infection has been contained, the situation with hypertension has worsened; during the same period the contribution of hypertension to hospital admissions rose from 3.6 percent in 2006 to 8.9 percent in 2009 (HMIS Bulletins 2006 and 2009). These trends are illustrated on Figure 2.6 below.

Figure 2.1: Trends in Causes of Admissions to Hospitals in Zanzibar 2006-2009
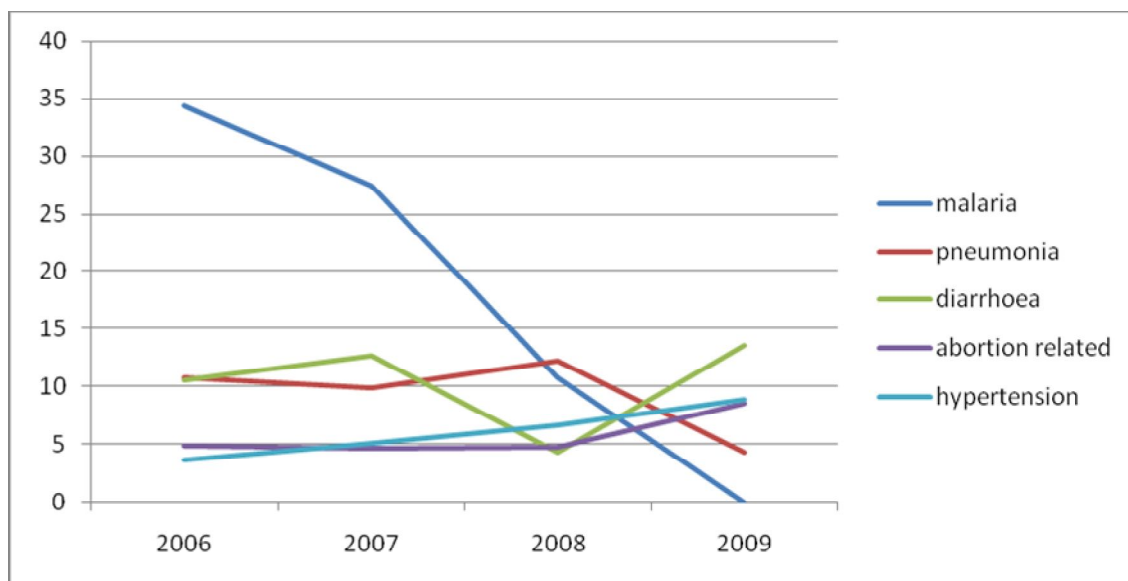
Source: (HMIS Bulletins 2006-2009)

Although hospital admission reports clearly show that there has been a transition from communicable to non communicable diseases, an analysis of the top ten reasons given by patients who attended a health facility in 2009 indicates that communicable diseases still account for over half of all causes of ill health reported by the health facilities. This is illustrated in Figure 2.7.

Figure 2.2: Reasons for Patients Attending Public Health Facilities in 2009
        (HMIS Bulletin 2009)
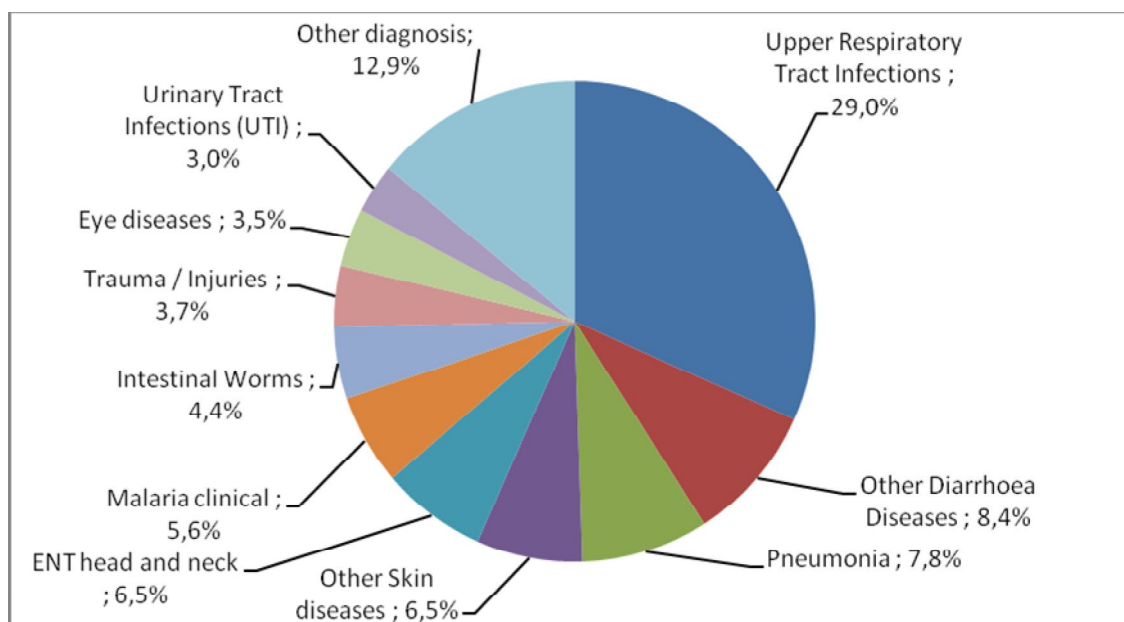
Source: (HMIS Bulletins 2009)

Communicable Diseases

Pneumonia, upper respiratory tract infections and diarrhoeal diseases constituted the highest burden of new cases reported by a public health facility, as illustrated in figure 2.7 (HMIS Bulletin 2009). In 2009, these three diseases accounted for 45 percent of new cases of communicable diseases in Zanzibar. Pneumonia is also responsible for the highest cause of mortality, being responsible for 11 percent of deaths, followed by septacaemia and diarrhoeal diseases.

Timely referral to health facility, adequate drugs and supplies, and proper treatment are all essential for reducing the mortality and complications of diseases, leading to longer term morbidity and mortality. While malaria prevalence has remained below one percent since 2007 its incidence is estimated to be three percent and continues to burden health system. The current achievement of dramatic reductions in malaria cases is a result of intensive implementation of combined interventions i.e. proper case management through the use of Artemisin, Combination Therapy (ACT), intermittent presumptive therapy and the re-introduction of insecticides for malaria control through indoor residual spraying (IRS) and insecticide treated bed nets. When ACT was introduced in 2003, Zanzibar became the first country in Africa to introduce a wide scale intervention. This is supported by malaria diagnosis whereby around 76 percent of health facilities use microscopes and 24 percent use Rapid Diagnostic Test Kits. Quality control of malaria microscopy to validate malaria laboratory results is done by both public and private health facilities. In door Residual Spray started in 2006 covering all districts of Zanzibar. So far five rounds of IRS have been implemented and have covered 90 percent of targeted structures.

Malaria surveillance to monitor disease trends-morbidity and mortality is done in seven admission hospitals. Malaria Early Epidemic Detection System (MEEDS) was introduced in 2008 using an advanced technology of malaria reporting in a weekly basis via SMS. Currently, MEEDS has been expanded in both isles, from 52 health facilities in 2008 to 69 health facilities currently; the expansion is based on the selected criteria to detect an expected increase of malaria cases.

The number of newly diagnosed Tuberculosis (TB) patients increased from 407 in 2008 to 426 in 2009, of which 387 were new notified cases. A total of 39 cases were recorded as re-treatment patients, among them 25 (64 %) were relapse and 14 (36 %) were failure and return after default.

TB/HIV collaborative activities registered 426 TB patients in 2009, implying 100 percent enrolment. Out of the 426 TB patients 382 (90.1%) were screened for HIV and the results revealed that 92 (21%) were positive. All of the 92 positive cases were transferred to care and treatment centre (CTC), where 24 were eligible for Antiretroviral (ARVs) treatment and 79 started Cotrimoxazole Prophylactic Treatment (CPT).

Leprosy prevails in all districts and affecting all age groups. A total of 78 leprosy cases were reported out of whom 71 (91%) were diagnosed as new cases in 2009. Among the newly identified cases, 50 (70.4%) were Multibacillary (MB), 21 (29.6%) were Paucibacillary (PB). Out of 71 new cases 47 were males and 24 females whereby 17 patients (24%) were below 15 years of age. Fourteen Leprosy cases (17.9% of all new cases) were notified with disability grade II.

In both islands, the Government has expanded prevention testing, care and treatment services and monitoring disease trends in risk-prone and general populations through production and distribution of HIV prevention, IEC/ BCC materials and PEP. Monitoring HIV infection among the most at risk populations (MARPs) started in 2005. The first MARPs assessment in 2005 (on SU/IDU) used a snowball technique to determine sexual and drug related risk behaviour; the assessment revealed significant risk behaviours among this sub-population. However, monitoring of HIV infection has remained limited by capacity to design and monitor risk behaviours and infection patterns among MARPs.

Available evidence on MARPs in Zanzibar shows high levels of HIV among all three risk sub-groups in comparison to the general population of Zanzibar. HIV prevalence was 16 percent among the injection drug users (IDUs) 12.3 percent among men who have Sex with other men (MSM) and 10.8 percent among Female Sex Workers (FSWs). While MARPs are characterized by unique risk behaviours, the IDUs, FSW and MSM groups are not mutually exclusive and there is considerable overlap in transmission risks. Among MSM, 13.9 percent reported injecting drugs in the previous three months and 77.5 percent reported being paid for sex in the last year. Although only 2.8 % of female sex workers (FSWs) reported injection drug use, a larger proportion (10.9-17.6%) suspected their sex partners of using injection drugs.

The cross-over (bridging) potential to the general population has been documented in MARPs through the Integrated Behavioural and Biological surveillance Survey (IBBSS: 2007). The survey revealed the following: about 71.2 percent of MSM reported having female sex partners in the previous year; 48.9 percent FSWs reported having a steady non-paying partner; and slightly more than half (52.8%) of IDUs reported being sexually active in the previous month. In addition, there is risk cross-over behaviour among the MARPs population in Zanzibar; these entail both drug and sexual risk behaviours. Transactional sex and clients of sex workers is also common among all MARPs sub-populations. Unequivocally, all MARPs have high STI infections compared to the general population And Stigma and physical abuse is widely experienced among MARPs.

Among the most common human diseases in Zanzibar , four of them, namely, Lymphatic filariasis, Urinary Schistosomiasis (*Schistoma haematobium*), Soil-transmitted helminthiasis (STH) and Trachoma, have not received adequate attention from the Government and society at large.. In recognition of the increasing health problems from such Neglected Tropical Diseases (NTD) in 2008 the Ministry of Health and Social welfare established the Neglected Tropical Diseases Control Programme and developed a three- year strategic plan for the control and elimination of NTDs. Strategies implemented during 2006-2009 focused on reducing the number of new cases of these diseases; the strategies included mass drug administration and community sensitization. As a result, the proportion of people suffering from acute Filariasis fell to less than one percent and the proportion of school children suffering from schistosomiasis/bilharzias declined to less than 50 percent.

Non- Communicable Diseases (NCDs)

Available information shows that non-communicable diseases and injuries contribute more than half of all new cases reported at hospitals and more than half of all hospital admissions. Dental cases, injuries, hypertension and diabetes contribute the highest number of non-communicable death problems reported at hospitals. District level data indicates that new cases of hypertension reported to health facilities have fallen by 25 percent over the past two years. Pemba and Unguja have reported similar incidence rates of NCDs except for epilepsy (Pemba 68%) and substance abuse (Pemba 10%). Injuries are a major cause of morbidity in Zanzibar accounting for over 35,000 new cases reported at primary care facilities. Information on the causes and types of injuries is not available at National level. Road Traffic Accidents (RTAs) is also recognized by MOHSW as a serious public health problem. RTAs cases are routinely reported in all health facilities in Zanzibar. Compared to 2008, the total number of cases reported in 2009 has been reduced from 3,371 to 2,940. Among the reported cases 1,889 are from Unguja districts and 1051 from Pemba. Urban district ranks the highest with 778 cases, followed by North "A" district with 468 cases.

Over 25,000 patients were reported at primary care facilities for dental diseases. In recognition of this demand for dental services the proposed 34 PHCU+ will include dental equipment and trained staff. Dental Assistants are currently trained at the College of Health Sciences. Evidence from

Mnazi Mmoja hospital diabetic clinic shows that there are over 2000 Type II diabetic patients registered at the clinic, the majority of who are over 45 years with more female than male patients. Obesity and hypertension problems recorded in the diabetic clinic are steadily increasing. The use of insulin even for treating Type II diabetes is increasing.

About four in every thousand population of Zanzibar have a severe mental disability while five in every thousand suffer from the chronic condition of epilepsy. In the same study at Mnazi Mmoja diabetic clinic, two percent of the population were reported as suffering from depression (Abdulwakil et al1998). Current data on mental disability is not available. Apparently availability of care and treatment of these conditions are limited partly due to culturally instilled fear and superstition about the mentally impaired. Community-based outreach services to support the mentally sick persons and their careers are constrained by limited qualified human resources. The Government of Zanzibar has formulated a mental health plan and legislation. The plan has been integrated within the overall health sector reform plan.

Health Promotion and Disease Prevention and Control

The Zanzibar Integrated Disease Surveillance was launched during MKUZA I. Global epidemics, including SARS, Avian Influenza, Hemorrhagic Fever, have helped raise awareness on the need for Zanzibar to formulate epidemic preparedness strategies; this formulation of a strategy for prevention and control of selected global epidemics is currently underway. So far there have been no reported cases of SARS, Avian or Swine Flu in Zanzibar.

Diarrhoeal disease is one of the highest causes of morbidity in Zanzibar and accounts for 5.8 percent of all deaths in public hospitals are being conducted. In an attempt to reduce the occurrence of diarrhoea and vector-borne diseases, the government is reviewing public health laws and interventions in preventive, surveillance and control. The Environmental Health unit, in collaboration with District Health Management Teams, have implemented sanitation and hygiene educational awareness for leaders in the Central and South districts and 65 communities in Unguja as well as in Wete and Chake Chake districts and 100 communities in Pemba

Service Delivery

The health sector in Zanzibar is characterized by four levels of delivery infrastructure for the provision of health care services. These are 133 Primary Health Care Units, 3 Primary Health Care Centres (PHCC,) and District Hospitals, all located in Pemba and one referral hospital located in Unguja. District hospitals, mainly with 80 to 120 beds, provide second-line referral services, including basic surgery. A total of 34 centres have been identified as potential Primary Health Care Unit Plus (PHCU+) and expected to provide additional health services such as maternal, dental, and laboratory service. In addition to providing outpatient care, the PHCC or *Cottage Hospitals* also provide in-patient care, with the capacity of 30 beds right now, and selected laboratory and X-ray diagnostic procedures; these health facilities possess adequate staff profile. At the community level community health volunteers attached to the health facilities as well as vertical, disease-specific programmes, provide a range of services that predominantly promote health knowledge & prevention and palliative care at the village and household levels. All households in Zanzibar are located within 10 km of a heath care facility and 95 percent of them are located within a five kilometers walking distance. The Essential Health Care Package, developed during MKUZA I, has identified the basic health services to be available at each level of the health system.

Private sector providers of health services consist of those who provide for profit and those who do so for non-profit; the latter group is mainly composed of faith-based institutions. The Ministry of Health has appointed a trained resource person to coordinate the public and the private providers of health services and this coordinator is guided by the Terms of reference that focus on building synergies between and among these institutions.

Traditional medical practices have been a part and parcel of the cultural heritage in Zanzibar, enriched by the influx of other traditional healing practices from other parts of the world. Islamic medical practices from the Middle East, acupuncture, herbal remedies and other traditional practices from China, Unani, and Ayurvedic and Homeopathic systems of treatment from India all compliment the contributions from herbal practitioners from the immediate surroundings.

Urban and rural dwellers alike make full use of conventional or allopathic as well as traditional medical practices for almost every ill health condition. In recognition of this generally acceptable health seeking behaviour the MOHSW has established the Zanzibar Traditional and Alternative Medicines Council. This council has been given its legitimacy by the Zanzibar Traditional and Alternatives Medicines Policy and Act 8/08 to curb and regulate the ever increasing number of traditional medical practitioners, herbalists, sorcerers and shamens.

Reproductive and Child Health

According to the 2004/05 Tanzania Demographic and Health Survey (TDHS) the crude birth rate (CBR) in Zanzibar was 38.1 births per 1,000 people. The total fertility rate (TFR) has declined from 5.3 children per woman in 2004 (TDHS 2004/5) to 4.9 children per woman in 2007 (THMIS 2007/8). Life expectancy at birth has increased from 53 years in 2003, to 60 years in 2010[8]. Zanzibar has shown successful achievement in regards to MKUZA I goals on reducing infant and under-five mortality rates; whereas the IMR has dropped from 61/1000 live-births in 2004/05, to 54/1000 in 2007/08, the under-five mortality rate dropped to 79 per 1,000 live-births in 2007/08[9] down from 101/1000 live-births in 2004/05. Validated information on population based maternal mortality rate is not available. However, institutional records on registered maternal mortality rate (proxy indicator) show that maternal mortality rate is at 279 per 100,000 live births (2009), a decrease from 473 deaths per 100,000 in 2006. Data collected from health facilities suggest that maternal deaths in hospitals are declining (see Figure 2.8 below).

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[8] National Projections, Vol. 12, December 2006
[9] NBS, THMIS 2007/2008

Figure 2.3: Maternal Deaths in Health Facilities in Zanzibar, 2006-2009 (HMIS Bulletin 2009)

Institution MMR
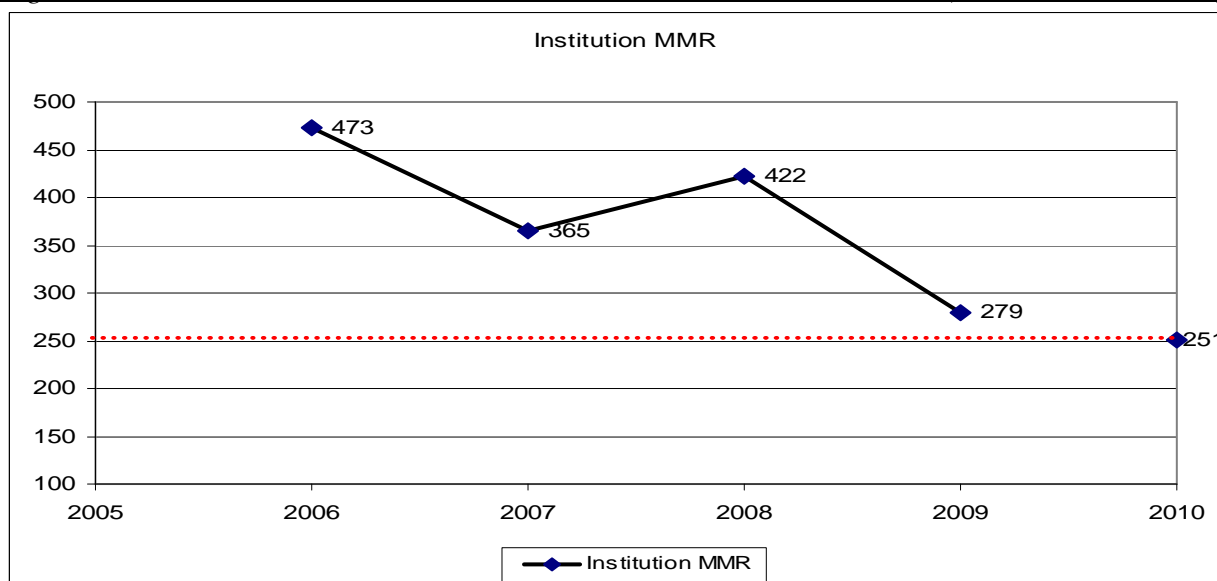
NB: Red dotted line indicates the MDG target for Zanzibar for 2010.

During the implementation of MKUZA I various strategic interventions were made by the government to reduce maternal deaths in the Isles. The MOHSW developed a Roadmap Strategic Plan to Accelerate the Reduction of Maternal, Newborn and Child Mortality. The roadmap, which was launched in early 2009, provided guidance on needed   interventions by public and non-public stakeholders to strengthen maternal, newborn and child health services   Efforts to operationalise the roadmap at the district level are ongoing.

The UN minimum standard on availability of Emergency Obstetric Care (EmOC) services is one Comprehensive Emergency Obstetric Care (CEmOC) facility and four Basic Emergency Obstetric Care (BEmOC) per 500,000 people. Zanzibar has surpassed the UN minimum requirement by having 6 CEmOC facilities two of which are private and five basic EmOC facilities. However there is an uneven distribution of CEmOC facilities between Unguja and Pemba; all the four CEmOC facilities are located in Urban district. Some districts, particularly North B and West districts have insufficient BEmOC facilities. Case fatality rate, which measures the proportion of women have been admitted to EmOC facility and then die from obstetric complication, is an indicator of quality of EmOC services. The overall obstetric case fatality rate in Zanzibar stands at 2.4 percent, which is rather high compared to the maximum generally acceptable level of less than one percent.

Post natal care is critical during the first two days after deliveries as most maternal and neonatal deaths occur around this period. Yet the coverage of post natal care remains low; only 6 percent of women attend postnatal care within two days after delivery and 7 percent within the first week after delivery (TDHS 2004/5).

Available evidence suggests   that access to voluntary adherence to reproductive health can reduce maternal deaths by 25 – 40 percent and child deaths by as much as 20 percent. Despite this evidence, and according to 2004/05 TDHS, the uptake of reproductive health, particularly family planning has remained very low at 9 percent for modern methods and 15 percent for all methods and a high proportion (31%) of un- met needs for family planning. The major challenges facing provision of family planning services are erratic supply of family planning commodities and limited range of choices, inadequate funding for contraceptives, and negative attitude of providers towards FP. The situation is aggravated by limited spouse communication, inadequate male involvement and social cultural values including religious barriers.

Teenage pregnancy could lead to negative demographic and social consequences. Many girls marry early or are sexually active before marriage. This exposes them to unplanned pregnancies, unsafe abortions, HIV and AIDS and risks associated with early pregnancy and child birth. Teenage pregnancy also limits women's opportunity for better education, jobs and ability to participate meaningfully in social and economic development.

The percentage of young women aged 15 – 19 who have begun child bearing has slightly decreased from 9 percent in 2004 (TDHS 2004/5) to 7.6 percent in 2007(THMIS 2007/8).   It has been reported that 22 percent of young women and 12.6 percent of young men aged 18 - 24   had sexual intercourse before the age of 18. In order to reverse this situation there is need to increase the availability of life skills and Sexual and Reproductive Health (SRH) information and services to young people.

The Road Map to Accelerate Reduction of Maternal, infant and Child Deaths was launched in 2009   and operationalised by disseminating it among stakeholders, key ministries, Health Management Teams (HMT) on both islands and community leaders in 3 districts. Furthermore, family planning activities focusing on advocacy, availability of and accessibility to long-acting family planning methods, such as Intrauterine Contraceptive Device (IUCD), implants, and vasectomy, have increased in new family planning clients.

During MKUZA I, a number of strategic interventions were implemented in order to improve maternal health. Improvements of physical infrastructure such as roads, expanded accommodation for critical health staff and provision of essential equipment and supplies, all have contributed to increased accessibility to reproductive health services. Along with those improvements, 80 newly trained midwives have been deployed while existing staff have received reproductive health refresher training courses. The number of health facilities providing delivery services as a result of these interventions has increased from 10 to 25 on the two islands. Blood transfusion services in all health facilities that undertake surgery and provide maternal/delivery services have been improved. At the same time maternal death audits have been introduced to provide needed information for strategising efforts that would further reduce maternal deaths.

Child Health Care Initiatives

The proportion of children who have completed their immunization schedule before their first birthday has dramatically increased from 65.6 percent in 2006 to 89.1 percent in 2008. According to the HMIS Bulletin of 2009 Zanzibar immunization programmes provide protection from six highly infectious diseases to over 92% of children below age one Vitamin A supplementation, one of the most cost effective health strategies, is provided to 78 percent of children aged 9 months, as per the roadmap.

Premature birth accounts for 4 percent all deaths in hospitals in Zanzibar. A recent initiative ('kangaroo care') to provide high quality and sustainable care for underweight and premature babies has been introduced.

Integrated Management of Childhood Illnesses (IMCI) is recognised as a cost effective, comprehensive diagnosis and appropriate treatment to children aged below 5 years living in resource poor settings. The MOHSW has adopted and revised the IMCI guideline to focus on management of neonatal infection, HIV/AIDS as well as new approach to malaria diagnosis and management of fever. Its implementation in all ten districts has started with orientation of tools, field testing and utilization in special circumstances.

Human Resource for Health:

Ensuring equitable access to health services and promotion of preventative and curative services requires an adequate and appropriate planning for developing health work force; this implies more and better training, deployment and management and retention of health workforce. Achievements during MKUZA I in each of these aspects are further discussed below

Training

The College of Health Sciences became formally recognized by NACTE as a training centre for health professionals. The college has produced skilled health professional staff including midwives, and has provided upgraded training to health staff from both Pemba and Unguja. In addition, the MoHSW has introduced two new cadres namely, pharmaceutical technicians and dental therapists, a move designed to expand the provision of services at PHCUs. A community-based medical school has been opened. Further opportunities for continuing medical education became available with the introduction of e-learning through the e-luminate project. In-service training courses have been conducted to enhance the skills of staff already deployed in the health system. Linkages with foreign-based training institutions such as with the University of Matanzas of Cuba and the University of Copenhagen in Denmark have been established.

Management and Deployment

The development and implementation of the Essential Health Care Package (EHCP), which defined the requirements for human resources needed for primary health care services at different levels, has become a useful management tool. During the period 2005-9 new staffs were deployed in all health facilities. A team of 22 Cuban doctors and 21Chinese doctors provide both training and provision of specialist services. Human Resources Division within the MOHSW has been established and the establishment of the Human Resources Information System (HRIS) has provided the opportunity for its staff   to undertake evidenced-based planning and management. The development of a training master plan, training of 60 staff in electronic searches and leadership courses for senior managers has further strengthened planning capabilities. Renovation of the central level Ministry building has improved the working environment. Strategies for staff retention have been designed and implemented; these include the construction of staff houses and internet connections at the district level, which has made it easy to manage human resources v via email and websites. The development of the Community Health Strategy has created the opportunity for better coordination of the volunteer health workforce. Health promotional messages and early referral to health facilities as provided by these volunteers, has facilitated the implementation of the EHCP and complements the formal health workforce.

Health Management Information System

The Ministry of Health and Social Welfare (MOHSW) is developing the Health Management Information System (HMIS) that would provide quality information about the health status of Zanzibar population. More specifically, the Ministry aims at providing complete, timely and reliable health information for effective planning and decision making. In collaboration with the Office of the Chief Government Statistician (OCGS) and the General Registrar Office (RGO), the Ministry of health, through its HMIS unit, had undertaken baseline assessment that focused on the six components (resources, indicators, data sources, data management, HIS data quality and dissemination and use of information) of the Health Information System (HIS)   as outlined in the HMIS framework.

Health Financing

The health sector is financed by the RGOZ, DPs and cost sharing through fees and charges paid by health service users. The share of the government budget devoted to the health sector over the financial years 2006 – 2009 has been fluctuating but averaged 9.13 percent. Total funds spent in the financial years of 2007, 2008 and 2009 amounted to TSh 4,978 million, 5,112 million and 4,987 million respectively (all amounts have been adjusted for inflation and expressed in 2003 price levels). Expenditure data for the year 2010 is not yet available, but TSh 5,551 million was budgeted. Total contribution by DPs for the financial years 2007 – 2009 were TSh 12,952 million, 13,398 million and 18,902 million respectively.

The health funding envelop also consists of contributions by recipients of health services. During 2007, 2008 and 2009, cost sharing provided TSh 162 million, 168m and 247m respectively; this is an increasing trend. However, much as there are guidelines for implementing cost sharing in the sector, the practice is not formally recognised; as a result, the practice differs across facilities and hence not equitable.

A major recent development in health financing is the establishment of a basket fund and managed by the Ministry for the financing of primary health care. This basket fund receives contributions from both the Government and Development Partners and the funds are disbursed to primary health care facilities according to a set formula.

Equipment maintenance

Poor maintenance of health equipment affects smooth delivery of health services in all public health facilities. A recent health facility census has identified   weaknesses in delivery of quality health services, which needs to be overcome.

Commodities and supplies

The Central Medical Stores Department (CMSD) orders most of its drugs instead of procuring. In the case of essential medicines, there is only one supplier, namely, the Medical Stores Department (MSD) in Dar es Salaam. This monopoly situation does not guarantee competitive prices or procurement of quality medicine.

Innovations and research

Health innovation and applied research are essential in generating a sound scientific base for making developmental decisions in the health sector. Research projects are also conducted in the Public Health Laboratory located in Pemba; the laboratory has established affiliations t with internationally acclaimed universities. The Zanzibar Medical Research Ethical Committee, comprising of health and non health members, reviews research proposals for all health and non health related subjects and approves those that qualify. Even though the committee is well equipped logistically and fairly well trained to perform its duties, it lacks a clear organizational structure with adequate permanent staff; this has made it difficult for the committee to function properly. Indeed a National Research Institute is required to provide continuous guidance on all research matters.

Challenges

Further progress towards the realization of health goals and objectives under MKUZA I has been compromised by a number of factors, including inadequate Human Resources, lack of synergies and collaboration in the provision of health services, as well as shortage of drugs, supplies and equipment. Programmes attracting funding from global disease specific programmes distort the distribution of resources, including human resources. The sustainability of the health sector service provision remains a key concern of the RGoZ and people at large.

Data on Non-Communicable Disease is available in ad hoc reports and in routine Health Management Information Systems. District level data over the past five years districts have been providing trend data on health status. However, there are some data gaps, including inaccuracy of data, that limit a systematic and comprehensive monitoring of Non-Communicable Diseases (NCDs) An increase in the non communicable diseases such as diabetes and cardio-vascular related health problems has yet to be addressed through provision of knowledge and awareness creation that are critical for influencing behavioural changes away from life styles that are known to contribute to NCDs.

Inadequate human resources, low productivity and low capacity in terms of skills and knowledge are major constraints to improving the health sector. A recent assessment has shown gaps in staffing of all cadres; leave alone the problem of retaining them. Regular supply of drugs and supplies, fully functioning equipment and a referral system are crucial for proper functioning of the health workers; the health sector has experienced challenges in meeting these basic requirements.

Another challenge is related to prevailing community beliefs and practices. Stigma against the mentally ill and HIV infected individuals is bottleneck to providing services to those in need. Cultural norms related to pregnancy and childbirth, including reproductive health adds to the challenges in providing comprehensive reproductive health care services. Changes in lifestyle that include less physical activity and inappropriate eating and drinking habits expose people to diseases such as hypertension and diabetes.

2.3.3   Increased access to clean, safe and affordable water

Water is a basic natural resource, which sustains life and provides for various social and economic needs. Everyone has the right to sufficient, safe, acceptable, physically accessible and affordable water for personal and domestic use. Unfortunately, its sustainability is being threatened by increased human activities in and around water catchments areas. MDG requires all countries to halve proportion of people without sustainable access to safe drinking water and basic sanitation by the year 2015.

Water Supply Sources

Zanzibar is endowed with plenty of water resources, which include groundwater, surface water, rain water, sea water, etc. Although there is a considerable potential for surface water, groundwater is the primary source of water in Zanzibar. Based on the hydrologic cycle, the macroscopic water balance revealed that the Zanzibar Island (Unguja) has an annual ground water potential of 307mm^3 and 70mm^3 of surface water. Pemba on the other hand has about 43mm^3 of ground water and about 717Mm^3 of surface water. The ground water quality in both Unguja and Pemba is very good. Although there are differing levels of chemical contents from place to place due to varying aquifer

chemical contents, the overall assessment has demonstrated that ground water quality complies with international and regional standards.

The water demands and the acceptable yields of different groundwater development zones were estimated in 1994 when the Zanzibar Water Resources Development Project was being implemented (Halcrow 1994). Tables 2.4 and 2.5 show the estimated acceptable yields for various water resource zones in Unguja and Pemba Islands (in mm^3/a –).

Table 2.1: The estimated acceptable yields for various water resource zones in Unguja Island (in mm^3/a – Halcrow, 1994)

Water resources Zone	Annual rainfall	Annual recharge	Groundwater flows to the sea	Annual acceptable yield
1	122.6	23.99	9.49	14.5
2	251.8	68.53	35.04	33.49
3	289.9	72.40	38.33	34.07
4	285.1	59.64	35.59	24.05
5	134.2	19.13	11.68	7.45
6	178.1	35.27	18.25	17.02
7	391.9	130.00	38.33	91.67
8	174.4	36.75	12.78	23.97
9	616.6	143.00	82.13	60.88
Total	**2444.6**	**564.73**	**281.62**	**292.60**

Source: Halcrow, 1994

The two tables show that the total annual acceptable yield of the ground water resource zones for Unguja was about $293mm^3/a$. The acceptable yield is about 50 percent of the total recharge. As for Pemba the estimated acceptable yields for various water resource zones was 46 millions m^3/a, which was about 38 percent of the annual recharge. This demonstrates that in both islands, current situation of ground water reserves is favourable but every care needs to be taken to ensure that the existing favourable situation does not deteriorate.

Table 2.2: The Estimated acceptable yields for various water resource zones in Pemba Island (in mm^3/a –
Halcrow, 1994)

Water resources Zone	Annual rainfall	Annual recharge	Groundwater flows to the sea	Annual acceptable yield
1	353.3	27.3	18.98	8.32
2	458.5	36.56	19.16	14.40
3	290.5	21.76	13.69	8.07
4	222.1	18.47	8.21	10.26
5	200.7	16.56	14.24	2.32
Total	**1525.1**	**120.64**	**74.28**	**46.37**

Source: Halcrow, 1994

Water supply versus demand

Based on the projected 2002 National Households and Population Census results the average population growth rate of Zanzibar is 3.1 percent, using this population growth rate the population of Zanzibar was estimated to grow to 1,079,529 in 2005 and 1,301,852 in 2009.

Table 2.3: Commercial Users of Water in Private Sector, 2004 – 2008

Region	2004	2005	2006	2007	2008
Kaskazini Unguja	5	20	22	149	158
Kusini Unguja	5	20	22	149	153
Mjini Magharibi	41	91	85	58	976
Kaskazini Pemba	40	49	26	27	27
Kusini Pemba	47	53	34	31	33
Total	**139**	**240**	**203**	**319**	**1347**

Source: OCGS – Zanzibar, Socio - Economic Survey- 2008

The average daily water supply and demand[10] in litres for each region can tentatively be calculated as shown in tables 8 - 10 for the years 2005, 2008 and 2009/10 respectively and the estimated annual water demand in million cubic metres (mm^3/a) for different categories for the year 2015 by Table 2.9. To a large extent water supply in Zanzibar has been short of the existing demand (See Tables 2.7 and 2.8). This is particularly so in North Pemba and South Pemba where water deficit has persisted throughout the period 2005 – 2009.

Table 2.4: Water demand per region for the years 2005 - 2009

Sn	Region	Demand (l/d)				
		Demand (2005)	Demand (2006)	Demand (2007)	Demand (2008)	Demand (2009)
1	Urban/West	41,973,585	43,107,120	44,250,210	45,399,345	46,553,648
2	North Unguja	12,102,725	12,471,950	12,860,000	13,263,275	13,684,550
3	South Unguja	7,977,850	8,147,125	8,317,000	8,493,625	8,671,525
4	North Pemba	17,283,415	23,202,062	24,143,395	25,128,057	23,000,735
5	South Pemba	18,383,766	22,270,873	23,250,173	24,277,199	28,396,918
	TOTAL	**97,721,340**	**109,199,130**	**112,820,778**	**116,561,501**	**120,307,375**

Source: ZAWA Administrative Report - 2009

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10 Given the consumption of Domestic Urban as 100 l/cd (Urban Master Plan), Domestic rural = 50 l/cd (Rural Master Plan), Hotels = 200 l/bd (based on the country's recommendation of 70 litres/bed/day for a low class hotel to 400 litres/bed/day for a high class hotel), Commercial = 1,500 l/Inst/d (ZAWA estimates), Public use which include schools, hospitals, industries, mosques, cinemas, etc. = 25% of domestic (Rural Master Plan) and Agricultural = 25% of domestic (Rural Master Plan) as well as the water production figures be based on capacities of installed pumps and unaccounted for water of about averages of 35% (ZAWA estimates).

Table 2.5: Water production per region for the years 2005 - 2009

Sn	Region	Production (l/d)				
		Production (2005)	Production (2006)	Production (2007)	Production (2008)	Production (2009)
1	Urban/West	38,064,000	47,184,000	46,175,270	49,320,000	50,865,000
2	North Unguja	9,456,000	11,040,000	15,532,870	17,323,000	18,759,000
3	South Unguja	9,484,000	8,964,000	9,682,000	11,688,000	11,688,000
4	North Pemba	12,120,000	12,120,000	12,120,000	12,120,000	17,064,000
5	South Pemba	14,568,000	14,568,000	14,568,000	14,568,000	20,988,000
	TOTAL	**83,692,000**	**93,876,000**	**98,078,140**	**105,019,000**	**119,364,000**

Source: ZAWA Administrative Report - 2009

Table 2.6: The estimated water demand in the year 2015 (mm^3/a)

Sector	Unguja	Pemba
Urban Water Supply	14.9	4.8
Rural Water Supply	10.4	6.0
Irrigation (agriculture)	22.3	n/a
Tourism	0.8	0.1
Industry	8.8	n/a
Total	**57.2**	**10.9**

Source: Halcrow 1994

Tables above show that water demand and production has increased from 97,721,340 I/d and 83,692,000 I/d in 2005 to 120,307,375 I/d and 119,364,000 I/d in 2009 respectively

Water Development Initiatives

In Zanzibar ongoing water development initiatives are geared towards ensuring adequate, affordable, economically accessible and sustained water supplies to all people and sectors; this is done through use of viable water resources management technologies for continuous socio-economic growth and development. The New National Water Policy and subsequent reviews and reforms of existing water laws and institutional framework are aimed at contributing to the achievements of the objectives of Zanzibar Development Vision 2020. In this regard there have been deliberate measures by the RGoZ to seek internal and external resources in order to maintain and ensure water availability. In view of the above the following operational targets were set in MKUZA I to accomplish Goal 3:

    (a) Increased access to clean, safe and sustainable water supply in urban areas from 75 percent in 2004/05 to 90 percent, by 2010.
    (b) Increased access to clean, safe and sustainable water supply in rural areas from 51 percent in 2004/05 to 65 percent, by 2010.

In terms of service coverage, water in Zanzibar is used in accordance with the following order of preferences:

i. Domestic supply,
ii. Agriculture and Livestock uses;
iii. Development of tourism and recreational activities;
iv. Industrial use; and
v. Other uses, such as, commercial, institutional, etc. not to mention indiscriminate use of freshwater for washing cars, for gardening, etc. which in fact needs to be avoided.

Achievements

Water sector reports show that up to 2008/09, service coverage in urban and rural areas was approximately 80 percent and 60 percent respectively. According to Zanzibar Water policy people are considered to have been covered by the service if they can at least fetch water within a distance of 250 meters from their premises in the rural areas and 150 meters from their premises in the case of urban areas. The Zanzibar Water Authority (ZAWA) recommends a minimum of 65 litres of clean and safe water a day for every citizen while special consideration should be given to those who are too poor to pay. Zanzibar Socio - Economic Survey (2008) disaggregates this coverage by regions, as shown in Table 2.3 below. By 2008 the highest service coverage was achieved in Kaskazini Unguja (96.5%) and the lowest in Kaskazini Pemba (68.7).

Table 2.7: Households with Access to Safe and Clean Water by Region, 2003-2008 (%)

Region	2003	2004	2005	2006	2007	2008
Kaskazini Unguja	11.0	75.0	71.0	96.5	96.5	96.5
Kusini Unguja	29.0	70.0	78.0	90.3	90.3	90.3
Mjini Magharibi	60.0	75.0	75.0	95.7	95.7	95.7
Kaskazini Pemba	72.0	75.0	80.0	68.7	68.7	68.7
Kusini Pemba	72.0	75.0	80.0	72.5	72.5	72.5

Source: OCGS – Zanzibar, Socio - Economic Survey- 2008

The government has initiated programs to minimize the outbreaks of water-borne diseases by supporting water supply in schools and surrounding communities through a variety of technologies including hand-dug and machine-drilled wells fitted with hand pumps, construction of water storage facilities (tanks) which are connected to pipe water supplies and construction of hand wash basins in schools. The government is also implementing Participatory Hygiene and Sanitation Transformation (PHAST) project to promote sound hygiene and sanitation practices through the design and implementation of community sensitization programmes.

Sector Reforms

Since 1990s, there have been concerted efforts to reform the water institutions such that they carry out their obligations to the public more effectively. To this effect, the Zanzibar Water Authority (ZAWA) was established in 2006 and given clear mandate and working Policies, Laws and Regulations. The main mandate of ZAWA is to enhance equity of access, clean water to households in rural and urban areas in a cost effective manner. Its other roles include water resource and sewerage management.

2.3.4 Improved sanitation and sustainable environment

Under MKUZA I, operational target for sanitation included availing all schools with adequate sanitary facilities, increasing proportion of households with access to basic sanitary facilities, increased provision and management of sewerage facilities and develop and implement Zanzibar Waste Management Master Plan.

Achievements

Zanzibar Urban Sanitation and Sewerage services

About 73.4 percent of the households use pit latrine and 22.4 percent use flush toilet incorporated with septic tank and soak away. The present sewerage system in new towns consist of combine open drains with a total length of 4,880 meters, closed sewer pipe with total length of 12,690 meters and combine close drains of total length of 7,360 meters, with the diameter sizes ranges from 150mm – 600mm.

During 2005-2008 the RGoZ, has implemented the sanitation and drainage programme Phase II with overall objective to contribute to the improvement of public health (as per Zanzibar Vision 2020) by enhancing sanitation and cleanliness. The programme undertook the rehabilitation of 8,400m sewer line, construction of 6,000m of new sewer line in new towns, rehabilitation of existing closed storm water drains with the length of 7,400m, construction of 11,600m of new reinforced concrete and 11,000m of new open stone pitched channel. Also the programme supplied equipments, transport and storage facilities (such as skip loaders, skips, concrete skip slabs and containers, dust bins and push carts), all needed to improve waste collection procedures. Similarly, the capacity of the municipal wastes disposal at the Jumbi municipal dumping site has improved from 30 percent to 45 percent made possible by the availability of six additional solid wastes municipal trucks.

Challenges

Overall there is no centralized sewerage system in Zanzibar. There is a combined sanitary network system in Old Stone Town with the total length of 25.315 km which receive the sewage effluents from at least 1,150 septic tanks of various premises. The collected effluents from the households via septic tanks are discharged along the coastal line through 27 sea outfalls; this imposes heavy burden on the marine ecosystem and compromises public health in the surrounding communities. In new areas of Unguja town, however, there is no sanitary sewer system.

The existing garbage dumping sites at Jumbi is now surrounded by residential areas, thus causing public health concerns by nearby communities. The dumping site has limited drainage system capacity leading to floods during the rainy season and highly polluting pit latrines causing them to overflow; these results into waste water spillage that spreads over and cause outbreak of major epidemic diseases like diarrhoea cholera.

Some industrial wastes are discharged into the sea through open ditches or drained into the ground through soakage pits. In the old stone town solid waste collection is limited by inadequate number of handcarts, collection dustbins and solid wastes skip. In new town areas, lack of trucks for garbage collection and limited collection points have contributed to open space dumping, which has become a fairly common practice. The Capacity of the Municipal Council to collect solid waste is only 30-45 percent of the generated total wastes estimated at about 150 tonnes per day.

In Pemba there is limited drainage and sanitary network systems. The existing network, built over 40 years ago, is inadequate to cope with the increasing sewerage produced from expanding development activities and population increase. As a result the system is frequently blocked and damaged and occasionally there are wastes water spillages along streets. There are few sea outfalls that are damaged and discharge directly into beaches, and produce unpleasant and nuisance condition. Majority of the existing households use the onsite disposal facilities like traditional pit latrine and with limited number of septic tank and soak way. Also solid wastes collection and disposal in Pemba seem to be a big problem and wastes disposed on open spaces with no proper dumping site due to lack of adequate vehicles to transport the garbage and proper handling of collected garbage.

In general, the emerging serious problem is refuse generation by hotels in large quantities of both biodegradable and non biodegradable (plastic) without sanitary means for collection and disposal. Only few hotels have installed and use incinerators to burn wastes, the rest dispose into the sea or else burry, burn or dispose haphazardly in bushes and open spaces.

Other challenges and constraints include:

    i. Low service coverage;
    ii. Fulfilling national and international commitments (vision 2020, ZPRP, MDGs, WSSD targets, etc);
    iii. Absence of sanitation policy;
    iv. Most of the regulations, rules and bye-laws available are out dated and therefore need to be reviewed in order to suit the requirements of the moment e.g. sewerage regulations, etc;
    v. Putting in place institutional arrangement for the sanitation sector that reflects the changed role of the Ministry;
    vi. People are not willing to pay for sewerage services due to inadequate community participation, ownership and empowerment for the Environmental Services
    vii. Low creation of public awareness and low sanitation education; Inadequate financial capacity to expand services,
    viii. Slow implementation of local government policy; Local government reform programme remains incomplete;
    ix. High rate of urbanization;
    x. Unrealistic tariffs, poor billing and low revenue collection due to weak database;
    xi. Shortage of qualified and experienced personnel;
    xii. Lack of working tools and facilities;
    xiii. Inadequate Human Resource Capacity at all levels and;
    xiv. Low private sector involvement; and High costs of pit latrine design.

There is a need to review the tariff rates by increasing them, (at to a level that takes into account inflation) in order to generate more revenues badly to cover operational and maintenance costs. The provision of regular waste water and solid waste disposal service is essential to establish a safe environment for the residents and ensure sustainable services require the effective restructuring of the existing organization.

2.3.5 Improved food and nutrition security among the poorest, pregnant women, children and the most vulnerable groups

Malnutrition is a big problem in Zanzibar (see table 2.10 below). MKUZA I had identified strategies to reduce malnutrition including stunting and anaemia among children and women.

Table 2.8: Malnutrition in Under-five children in 2007 and. 2008(%)

Zone	Total Malnutrition		Severe Malnutrition	
	2007	2008	2007	2008
Pemba	6.8	7.0	0.4	0.5
Unguja	8.0	7.6	0.4	0.4
Zanzibar	7.2	7.4	0.4	0.5

Source: Health Bulletin, 2008

Achievement

Zanzibar has made important progress in introducing and sustaining the delivery of key nutrition services for children and women. Vitamin A supplement and de-worming tablets are provided to the under-five children twice a year with over 90 percent coverage. Health workers have been trained on monitoring child growth and actions to scale up the provision of essential nutrition services taken. The private sector, with the support of the government and guided by laws and a regulatory framework, is now iodating salt.

Challenges

In spite of the registered achievements, there are some gaps in the provision of several nutrition services. For example, less than 10 percent of women took iron supplement for at least three months during the pregnancy and only 13 percent received vitamin A capsules after the delivery. Inadequate and unsafe water and poor hygiene, all increase the risk of diarrhoea illnesses that deplete children of vital nutrients. Inequities in nutritional status continues to persist, with children from the very poor households being three times as likely to be chronically malnourished as those from better off households.

Malnutrition is estimated to be an underlying cause of 50% of under-five mortality. Almost 4 out of every 10 children aged 0 to 59 months are chronically undernourished and about 1 out of every 5 children weighs too little. Under-five children are still stunted, burden of worm-infestations and micronutrient deficiencies. Only 41 percent of children are exclusively breast fed until 6month. The proportion of low birth weight and anaemia in pregnancy is also high.

Food safety and food quality control is an area that needs to be strengthened; there is no relevant food safety policy and/or adequate legislation to cover food safety and quality. Low compliance with Good Manufacturing Practices (GMP) is a challenge. Trained inspectors to enforce adherence to the hazard analysis and critical points (HACP) system are insufficient. Poor food handling practices are widespread, contributing to diarrhoea diseases.

2.3.6   Improve safety nets and social protection for poor and vulnerable groups

MKUZA I sought to expand welfare support to the most vulnerable groups and to exploit opportunities of Zakat, Infaaq and Waqf in caring for the needy and the destitute. The strategy also involved the strengthening of families and communities to effectively support the most vulnerable and to encourage insurance schemes. The problem of delayed payment of gratuity for retirees and the small coverage of social security schemes were also addressed.

Achievements

There are various disadvantaged and vulnerable groups in the society, each with their own special needs: orphans and vulnerable children (OVC), drug and substance abusers, survivors of rape and other forms of gender based violence, the disabled, the elderly without reliable caretakers, survivors of other forms of human rights violation and those generally suffering from various forms of poverty. Access of these groups to basic social services including welfare support is an absolute necessity. These disadvantaged and vulnerable groups are currently targeted by different government departments. However, improvements are needed because social welfare services are largely confined to urban areas; leaving rural populations deprived of such services.

The Government in collaboration with different partners paid great attention to the problems of disadvantaged groups, including orphans, elderly, disabled etc. Orphans and most vulnerable children (MVC) received care and support, Community development projects aimed at supporting the MVC were prepared and almost 50% were approved for loans or grants. A tracking system to record information on vulnerable children, service providers and service provision was initiated. The homes for the elderly at Sebleni and Welezo received support for 128 elderly citizens. However, major renovations of homes in Gombani, Limbani and Sebleni are still needed. In addition, a situational analysis on people living with HIV/AIDS (PLHAs) was conducted from which a strategic plan for support was developed.

With support from various partners, the following interventions from the Strategic Plan on Substance Abuse and Mainstreaming HIV and AIDS (2007-2011) were achieved:

i. Drop-in centre for substance abusers was established with counselling and VCT services,
ii. Provision of education and advocacy to community leaders who played a role in the prevention of drug use and HIV risks among users,
iii. Drug Control Act (2003) was reviewed by the drug control secretariat and submitted to RGoZ for adoption and
iv. Networking with other African substance abuse programs (i.e. MEWA in Kenya) established.
v. The Ministry of Health and Social Welfare has reviewed and enacted various health laws to govern the provision of public health services.
vi. Medical Research Ethics Committee (ZAMREC) has been established to oversee ethics in medical and related researches in the country and;
vii. Social welfare policy and statute has been developed to safeguard the rights of children.

Challenges

A number of challenges with respect to the vulnerable groups have been identified and they include:

i. Absence of a clear policy for older people,
ii. Weak coordination of multiple community strategies implemented by various national health programs and multiple activities undertaken by various actors.
iii. High level prevalence of chronic illness among older people in Zanzibar is unquestionable. More than 50 % of those tested were found with high blood pressure, which increases the risk of cardiovascular disease such as stroke. Those who survive strokes may become chronically disabled.
iv. Poor nutrition leading to obesity or to underweight is also becoming a serious problem.

v.   There is a link between ageing and disability. About 16 % of people living with a disability in Zanzibar are over 60,

vi.   Women are twice likely to ne malnourished as men, as gender roles mean that older women are more likely to have additional responsibilities of caring for other household members.

vii.   Eye disease is common in old age. Incidences of cataract blindness are reportedly rising exponentially with ageing.

viii.   Accessibility to services is inequitable, which leads to uneven distribution of health and social related facilities for older people.

ix.   Health costs are unaffordable to older people, Government policy emphasized that older people should be exempted from paying user fees but this policy has not been effectively implemented;

2.3.7   Adequate and sustainable human settlement provided

MKUZA I also addressed the issue of human settlement. Access to adequate and affordable habitat is essential to a person's physical, psychological, social and economic well-being and is a fundamental part of National and International human right. Despite this the percentage of people who do not have access to decent shelter is very high and if appropriate action is not taken, this percentage will increase dramatically in the near future.

The development objective toward human settlement is to facilitate people to obtain affordable and decent shelter and improved dwellings and neighbourhoods. The strategic interventions for achieving this objective included:

i.   Rationalization of responsibilities among actors in human settlement development;

ii.   The control of rural-urban migration through establishment of adequate and planned rural settlements.

Provision of basic services and sustainable development based on the principles of good governance

Achievements

The RGoZ has developed a policy on housing and urban development.

i.   The policy aims at addressing challenges and shortcomings in human settlement, and also aims at providing guidance on provision of better, affordable and sustainable settlements to communities.

ii.   The land use plans for local and national level are under review.

iii.   The government has also developed comprehensive action plan for involving the Private sector, Non Governmental Organizations and Communities in providing human settlements.

iv.   Measures have also been taken to improve institutional coordination.

v.   The government has also conducted education campaigns on the use of sanitary facilities to ensure environmental cleanness and sustainability.

vi.   The government has established a credit facility in order to promote the construction of decent and affordable housing and sustainable human settlement the government has established a credit facility

vii.   The government also continued with the construction of major housing projects, rehabilitation and construction of government houses and also continued to provide oversight to ensure fair play in housing for social and economic operations.

These interventions have led to increased number of decent shelter and improved management of urban and rural settlements.

Challenges

The human settlement planning and development in Zanzibar is facing a number of challenges, among them are the following:

(a) ***Growth of Informal (unplanned) Settlements:*** The unplanned settlements in both urban and rural Zanzibar is due to a number of factors, including:

    (i) The inadequacy of shelter delivery system and low capacity (in terms of human and financial resources) of the institutions responsible to deliver planned/serviced plots has led to the extensive development of informal settlements.

    (ii) An alarming situation is the rate of which these settlements are growing (especially on high value agricultural land) and the high population density.

    (iii) Physical and social infrastructure (basic services) such as storm water drains, safe water supply, roads, waste disposal, schools, health centres etc. in these settlements are either missing or is in very poor condition.

    (iv) Some common characteristics in these settlements include overcrowding, high housing density as well as inhabitants, lack of security of tenure, diminishing public open spaces, poor environment characterized by poor sanitation and uncollected domestic waste.

(b) ***Institutions:***
The institutions responsible for human settlement also face a number of challenges, including:

    (i) Weak institutional linkages and coordination and limited administrative and technical capacity to enforce the various statutes,
    (ii) limited number of trained professionals in land use planning and technical and managerial responsibilities, this has limited delivery of building plots by the public sector and ad-hoc building plots for residential buildings

(c) ***Rate of Development:***
The growth of the informal settlements in urban and peri-urban areas is due to the Government inability to cope with demand for serviced plots. Furthermore, there is low capacity for the delivery of surveyed residential plots in urban and rural areas.

(d) ***Increasing poverty and Unemployment:***
Evidence of growing poverty and unemployment is manifested in the failure to meet basic needs in housing and related facilities. The recent growth and intensification of the tourism industry in rural areas has pushed rural population into urban areas leading to expansion of unplanned areas (informal settlements), that lack basic services.

2.3.8 Promote and preserve historical, cultural, national heritage and sports for social and economic development

A number of interventions related to culture and sports were spelt out in MKUZA I. They include the following:

(i)   Formulated and operationalised policies, strategies and legal framework for culture and sports by 2010
(ii)   Promoted and preserved culture and historical sites by 2010
(iii)   Improved sports gears, facilities and training by 2010
(iv)   Participated effectively in regional and international tournaments by 2010
(v)   Promoted Kiswahili language at local and international level by 2010

In addition, MKUZA I set a goal on the promotion and the preservation of historical, cultural and national heritage and the promotion of sports.

Achievements

The preservation of historic values started with enactment of Antiquity law thus replacing the colonial "Monument Decree" of 1927. Since early 1980s additional lists of other monuments have been gazetted, demarcated and bordering of monuments have been clarified. The exercise of acquisition of title deeds has also been accelerated.

The endeavour of promoting and preserving historical, cultural and natural heritage of Zanzibar has two poles; one is under Antiquity field and the other is under Stone Town field. On the Antiquity side, under the Marine and Coastal Environmental Management Project (MACEMP), the study on cultural inventory has been done as well as the study on indigenous knowledge on preservation of historic and cultural heritage. This has also involved creating public awareness of the importance of preserving historical, cultural and natural heritage and the restoration work to some of the historical sites.

The most important accomplishment in the MACEMP is the preparation of the Heritage Master Plan as well as the restoration of three main buildings namely, the House of Wonders; Peace Memorial Museum and Mtoni Palace Ruins. This effort has gone hand in hand with building capacity of staff, particularly on management of cultural heritage,

The Government, through the Stone Town Conservation and Development Authority (STCDA) is reviewing its policy and legal framework with the objective of restoring, conserving and exploiting historic heritages as well as implementing projects of developing and giving the Town the total magnitude of its identity and its beauty. There have also been efforts to conserve the rich historic features of the Town, which have been recognised as one of the most attractive sites for tourists and the pride of its inhabitants.

Several measures have been accomplished in this endeavour; they include:

(i)   Review of the Stone Town Act of 1994;
(ii)   Preparation of the Heritage Management Plan for the Stone Town;
(iii)   Capacity building and;
(iv)   Enhancement of local and international coordination in the preservation of the historic and cultural heritage sites.

The new Act will not only give the STCDA more autonomy but also extra means of financial resources for the conservation, restoration and developmental work. Since Stone Town is a living city, the new law did not forget the role of stone town residents and other stakeholders. All of these have the right and responsibility in the management of the Town.

Heritage Board and Stakeholder Forum are the tools to be used by actors to express their ideas and concern on the development, conservation and management of the Town. Parallel to the process of revising the 1994 Act, STCDA was preparing a Heritage Management plan with a focus on facilitating, promoting and harmonizing the development activities of the Town.

On institution reform, a new organizational set up has been proposed and sanctioned to respond to the growing needs of the Town. The framework under this reform is to promote the utilisation of knowledge along with the experience in the field of conservation and heritage. In this regard, a "Documentation Centre" has been established to serve as a "Research and Coordination Division". The conservation section was graduated to "Conservation and Planning Division".

On staff development, the STCDA has provided training to its entire staff; the training was in all fields relevant to the Authority's functions and targeted appropriate staff qualification levels.

Zanzibar is now the head-quarters of the East Africa Secretariat of the World Heritage City, which includes Lamu (Kenya), and Mozambique Island (Mozambique); STCDA is coordinating this activity. The Authority has strengthened its cooperation with Antiquity department of Dar-Es-Salaam. Following the visit of the President of Zanzibar to Cuba, STCDA has also established good link to the Old Town of Havana which is also the World Heritage Site. The rehabilitation of Forodhani Park was completed in 2009 and has promoted aesthetic, trade, and tourism in the Stone Town.

 Challenges

The cultural, historical and heritage resources have not been fully utilized as they are poorly preserved and in some cases not fully promoted mainly due to meagre allocation financial resources and acute shortage of skilled experts in the fields of preservation and marketing.

Given the situation in the Stone Town, three different types of challenges have been identified; these are Legal, technical and socio-cultural.

Technical challenges originate from two sources. The first source of challenges comes from contractors, inhabitants, and developers who do not want to adhere to the conservation guidelines and principals. The experience has shown that many actors of Stone Town do not want to abide by the legal procedures. Under the 1994 Act, the STCDA does not have much power to control many acts of destruction and vandalism.

The lack of technical know-how is the second source of technical challenges. Through its capacity building program STCDA envisage addressing this challenge by promoting good image of public service office.

Both the government and the STCDA recognise the potential contribution of Stone Town to Zanzibar's economic and social development. Stone Town is not only the heritage but also the catalyst for economic development. Zanzibar tourist industry is promoted by the image of the Stone Town. In fact promoting and preserving historical, cultural and Heritage of this Town are in a way improving the tourist industry. This simple logic can be reinforced by tourist statistics which show

that 30% of lodging capacity of the tourist industry is in the Stone Town and that 90% of the visitors to Zanzibar are visiting the Stone Town

The nature of Stone Town has changed since 1964; individual property has been turned to be public property. The public property was in turn converted to a national heritage before it was categorised as a World heritage. Unfortunately, not many people have realised that the Stone town has no single today, and that it belongs to all Zanzibaris and the world at large. Hence the STCDA cannot and should not take all responsibilities for and challenges for the sustainability of the Old Town; Collective efforts are required to meet the challenges of sustaining the heritage aspects of the Stone town.

For the way forward, two steps are crucial: first there is need to create a coherent network and related coordination of actors in order to ensure effective management of the Town; second is to make sure that the economic benefits created by the Town contribute to the development and sustainability of Stone Town. STCDA has proposed two initiatives that are needed in order to the realization the first step; one, which was within the mandate of the STCDA, was to reform institutions within the STCDA by creating Stakeholders' Forum and forming the Stone Town Heritage Board. The second initiative was to appeal to all actors to take the responsibility of mobilising the energy and resources in order to transform and make Stone Town a major contributor to its own development and that of Zanzibar at large; to effect this, the STCDA has proposed the idea of creating "Heritage Fund" that should receive contributions from all public and private actors who t directly or indirectly benefit from the Stone Town image. Such efforts could expand economic activities and create more jobs and hence help reduce poverty.

2.4 Status on cluster III: Good Governance and National Unity

This sub-section reviews the achievement and challenges faced during the implementation of MKUZA I with respect to governance and national unity along the lines of the goals set in the MKUZA I.

2.4.1 Promotion of participatory democratic governance

The government has decided to promote good governance and build partnership with other stakeholders in implementing development activities and in service delivery. To this effect Zanzibaris of all walks have been increasingly involved in policy making, planning processes, implementation and monitoring and evaluation of development and service delivery efforts. However, this important move by the government lacks a coherent framework to guide it.

One of the main pillars of good governance is promotion of broad-based and all inclusive participation in the development process. To effectively and efficiently achieve broad-based participation is to create and strengthen local governments that are responsive to local communities.

Promoting Decentralization through Devolution, Participation and Inclusiveness:

For good governments to be achieved, grass root participation that emanates from an effective and efficient local government system is crucial. Even though decentralization in Zanzibar is supported and protected by legislation, local governments are nevertheless weak and hence unable to achieve the purpose for which they were established. This is mainly explained by the fact that decentralisation by devolution has not been fully implemented. As a result, local communities are hardly involved in planning, implementation, and monitoring and evaluation of development programmes in their communities; in only a few projects and programmes such as TASAF,

Agricultural Sector Support Progamme (ASSP) and Participatory Agricultural Development and Empowerment Project (PADEP) have rural communities been substantially involved in all processes. Community participation in budget formulation, implementation, monitoring and evaluation as well as participation in implementation of MKUZA I related activities is still inadequate. Regions have been only involved in the preparation of Medium Term Expenditure Framework (MTEF) during the outgoing MKUZA. This has limited promotion of people's effective participation especially at the grass root level.

Under the current local government setting, most of the resources allocated to regions, end up covering workers remuneration and administrative overhead costs, leaving pro poor interventions with very limited financial resources.

Instituting well functioning Local Government Authorities with clear mandate to facilitate broad-based growth and improve service delivery to all communities is one of the vital challenges that MKUZA II should address. Hence decentralisation by devolution is absolutely vital.

Community participation in Natural Resource Management

The poor depend very much on natural resources for their livelihoods. Poor performance in the agricultural sector usually intensifies the exploitation of natural resources for firewood and charcoal etc, which in turn increases the destruction of environment.

In an attempt to promote sustainable utilisation of natural resources the government is encouraging and facilitating community participation in natural resource management. Communities have been empowered to set up their natural resources management committees.

The Ministry responsible for environment has continued to encourage communities to plant trees in open areas and adopt the use of alternative sources of energy like solar, gas and electricity. Measures to create awareness and educating communities on the importance of environmental conservation have been taken. In order to reduce pressure on the unplanned use of natural resources the government has introduced and promoting alternative income generation activities such as ecotourism, beekeeping and crafting. Coastal communities have been educated on conservation of marine resources and associated environment, while the fisher folks have been provided with fishing gears and fishing skills.

Unlike other resources, natural resources are characterised by unclear property rights, multiple claims and functions, lack of market prices, remote location and difficult accessibility often with weak institutions; all these give rise to management challenges including the possibility for monopoly formation at the expense of the poor; In order to for the poor to benefit from natural resources, they need to be meaningfully participate in the governance of natural resources.

Promotion of gender equality and empowerment of special groups

A number of measures have been taken to promote gender equality; the measures include: women empowerment, promoting and protecting women's' human rights, formulation of relevant policies and plans, including Gender policy and Gender Action Plan to guide gender mainstreaming strategy. A number of gender related studies have been done to inform decision making and evidence-based advocacy. Capacity of implementers from government and non governmental institutions has been built to enable them perform gender analysis, planning and budgeting for their respective institutions.

Despite those measures, various challenges that have been documented, including the low level of mainstreaming gender issues in policies, plans, programs and laws; women constitute a larger percentage (51%) of the entire Zanzibar population. Low participation of women in development is a result of many factors including; general negative attitude portrayed by most men, traditional practices and perceptions about women, low level of education and lack of specific guidelines for promoting gender aspects in the public sector and, limited empowerment of women in both rural and urban areas. Limited research, sex disaggregated data and gender analysis has denied opportunities for various institutions to make informed decisions towards gender equity, equality and women empowerment.

In 2009 the United Republic of Tanzania ratified The UN Convention on the Rights of People with Disability (CRPD). In addition, there have been various advocacy forums on issues of disability persons. Also the Revolutionary Government of Zanzibar has established The National Disabled Council and a Department responsible for the disabled people currently placed under the Chief Minister's Office. The Council is the advisor to the government on disability-related issues, particularly on best ways to create an enabling environment for People with Disabilities (PWDs). Associations of people with disabilities exist and these cater for socio-economic empowerment of their respective members[11]. Along with established institutional framework for PWDs, The Zanzibar Disability Policy was formulated in 2004 and Zanzibar Disability Act No. 9 2006 (Rights and Privilege) enacted.

HIV and AIDS pandemic threaten development prospects and delays poverty reduction. The pandemic begun to affect institutions and governance systems. It has affected certain population groups and sectors more than others and therefore calls for quick and concerted efforts to address it.

In response to the threat by HIV and AIDS the Revolutionary Government of Zanzibar has established the Zanzibar AIDS Commission whose main responsibility is to coordinate the national multi-sectoral response to this pandemic. The government has so far implemented a number of strategic interventions within the framework of its national HIV/AIDS policy and national multi-sectoral strategic plan; the implemented interventions address all the key areas of a comprehensive response to HIV and AIDS i.e. prevention, care and treatment and, impact mitigation,

An effective way of mainstreaming HIV and AIDS is through strengthening capacity of local government to respond to HIV and AIDS. Strengthening the capacities of District AIDS Coordination Committee (DACCOM) and Shehia AIDS Coordination Committee (SHACCOM) and ensuring involvement of Most At Risk Populations (MARPs) and People living with HIV AIDS (PLHAs) in developing community response and plans is paramount if HIV and AIDs are to be contained. In addition the Zanzibar AIDS Control Program (ZACP) is among the development projects within the MOHSW, which is responsible for undertaking surveillance related to HIV and AIDS.

Currently, there is high level of stigma against HIV and AIDS in Zanzibar communities, leading to open discrimination and violation of human rights of both PLHA and people affected by AIDS. Lack of proper and timely information on legal and social rights of PLHA also contributes to high stigma and poor response to in terms of care and treatment for HIV and AIDS.

Another area for empowerment centres on the creation of a Revolving Fund for local investors, including economic empowerment programs such as the Jakaya Kikwete and Amani Karume Fund is also commended. Some initiatives by the government, civil society as well as financial sector

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[11] Some of the People with Disability who are not members do not benefit directly with the services

microfinance institutions like the WEDTF, SELF, PRIDE Tanzania, Changamoto LPF to mention a few, are also respected for their efforts to empower young entrepreneurs and support pro-poor growth.

Many of the NGO's and Private Sector Microfinance Institutions are urban based, have limited resource base, and employ lending conditions and terms that crowed out most poor women and men. Apparently on the part of the government, funds allocated for micro lending are insufficient, and faster disbursement are hindered by bureaucratic red tapes. There is also the problem of inadequate knowledge and technical capacity on the part of most of women groups and individual lenders that are required create more sustainable micro finance system. Existing safety net programs for special groups equally insufficient and not well harmonized.

To promote the rights of every member of the society is a governance concern which should be strategised in MKUZA II. Apart from protecting human rights, there is need to empower all members of the society in order to enable them realise their potentials in contributing to their livelihoods more specifically and to the achievements of MKUZA II objectives more broadly.

Empowering and Encouraging Non State Actors

The government recognises and encourages the developmental role played by the Non State Actors. Under MKUZA I efforts were made by the government to build partnerships with other stakeholders on planning, implementing and monitoring development programmes including service delivery functions. Eventually the core roles of government would focus on ensuring law and order, formulation of enabling public policies for the private sector and other actors to flourish in economic development and service delivery, promote democratic governance, mobilization of resources for provision of public services and deliver effective and efficient public services. Positive measures taken by the government to promote private sector development include: formulation of the investment policy, programme to promote business entrepreneurship, creation of investment promotion institutions, as well as the establishment and operationalisation of the Zanzibar Business Council (ZBC). Participation of Non - State Actors (Non-Governmental Organizations, Faith Based Organizations, Community Based Organizations and the private sector) in national policy dialogues and debates as well as in contributing to policy formulation has also been promoted by the Government. Not only that but the key stakeholders now participate in Public Expenditure Reviews, Medium Term Expenditure Framework and in the Poverty Monitoring and Evaluation.

The emergence of civil society represents an attempt to assert greater control over the environment in which they live and to contribute to the process of collective self-empowerment psychologically and organizationally. The tenet behind civil society formation is that development is not only about growth but also about the construction of a society that gives more power to fashion and enjoy the spaces in which they live. Civil society organizations can serve as vehicles for disseminating public information on government policies, programs and other decisions to their many and varied clients. Awareness of government activities by the people could afford them the opportunity for monitoring government projects for possible financial misappropriation or impropriety. Through civil society activities, women, men, youths and other groups have been empowered both economically and psychologically, as well as their capacities and determination to claim rights were developed. Civil society organizations also have become vehicles, albeit, imperfectly so, for helping to link local actions back to national structural changes and hence foster national unity. Nevertheless, there are no well structured dialogue mechanisms to accommodate effective participation of CSOs and capacity of CSOs to proactively engage in policy dialogue and articulation of policy issues is low.

The private sector, however, is still nascent and fragmented Much as its role as an engine of growth is given prominence in the   Zanzibar Growth Strategy, the   institutional framework for to support this role leaves a lot to be desired. The Zanzibar National Chamber of Commerce, Industry and Agriculture (ZNCCIA) and the Zanzibar Business Council are at an infancy stage. Similarly, a framework for promoting and developing the role and scope of partnership between the state and non state actors is not yet in place and   a conducive legal and regulatory framework, which is required to facilitate public-private partnership is yet to be finalised.

The wider participation of entrepreneurs in economic activities is limited by a number of factors including: existence of multi-Trade Licensing Agencies; multiplicity of taxes; inadequate support services for business development, most notably for Micro, Small and Medium Enterprises (MSMEs); poor infrastructure and; lax enforcement of Fair Trade and Consumer Protection Act of 1995. In addition, business is poorly regulated and legislations that guide business like Trade Licensing Act of 1983 and Company Legislation are outdated. Currently commercial cases are dealt with in the normal courts, which are under-funded, allegedly corrupt and with limited capacity.

Participation of women in decision making is an important pillar of equity and hence a positive undertaking towards good governance. Women's power to influence decisions therefore would enable the society to address issues that directly affect women. In that regard, a number of policy changes have been made and actions taken to facilitate the promotion of women in decision making positions including those at policy levels,   in concurrence with regional and international conventions. Nevertheless, there are still gender disparities in education as well as economic endeavours, and hence limiting further promotion and participation of women in decision-making positions (as shown in the table below).

Table 2.9: Representation of women in selected posts

Position	M	F	Percent
Ministers	10	3	23
Deputy Ministers	5	1	16.7
Principal Secretary	12	2	14.3
Regional Commissioners	5	0	00.0
House of Representative (HoR)	59	19	24.4
District Commissioners	8	2	20.0
Councillors	145	54	27
Shehias	318	17	5.2

 Source: Various Reports (RGoZ)

The government and the society at large recognise that the youth have an important role to play in the development of the country. In this regard, the government, through the ministry responsible for youth development has formulated the Youth Development Policy and Action Plan, focusing on building their capacity for their effective engagement in social, political and economical development. Accordingly, the plan to implement the policy provides guidelines for increasing youth participation.

Along with the Youth policy and plan, a youth council with its own constitution has also been established with the purpose of enabling the youth create their own platform where they can discuss matters of their concern. Equally important was the formulation of Youth Employment Action Plan, whose main objective is to address specific youth employment problems and design a workable framework for generating decent and productive employment for them: the framework focused on four pillars, namely; Employment creation, Employability, Entrepreneurship, and Equal opportunity for young men and women and those young persons with disabilities.

Despite of the above progress, youth unemployment and underemployment remains a serious challenge in Zanzibar. Youth organizations are fragmented and lack capacity to plan, manage and advocate for their goals and objectives, leave alone inadequate resources made available to them. Access to information on policies and programs targeting the youth is limited. Implementation of youth policies and programs require a multi-sectoral approach that should involve participation and involvement of private sector and the civil society; this type of participation, however, is lacking.

Increasing access to Public information

The Zanzibar Revolutionary government recognizes the positive role that the media and civil society can and should play in disseminating relevant and usable informing to the people. In taping this potential, the Revolutionary Government of Zanzibar has broadened and strengthened the media houses to contribute to debates and knowledge dissemination about strategies for poverty reduction and those for promoting economic More freedom and facilitating environment for operations by media houses have been provided. As a result, there has been a proliferation of both public and private media corporations. Policy-wise, MDAs have been directed to appoint communication officers to promote interfaces between public institutions and the public through provision of information on and public hearing. Further, the Government is strengthening the Government unit responsible for publishing Official Gazette and ensuring that the Gazette is printed and distributed regularly. On the other hand, civil society organizations is encouraged to and facilitated to serve as vehicles for disseminating public information on government policies, programs and other intervention /decisions to all citizens; this is intended to make the government accountable to its citizens.

Another major source of information is the Office of the Chief Government Statistician (OCGS) whose main responsibility is collection, management and dissemination of statistical information. The OCGS's capacity has been strengthened in terms of equipment, human and financial resources. MDAs capacity in data management is being improved through the appointment of focal persons. The OCGS, in collaboration with the National Bureau of Statistics also undertake periodic House Hold Budget Surveys, Demographic Health Surveys, National Census and Integrated Labour Force Surveys to mention just a few, all of which provide baseline and trend data to support planning and monitoring processes.

Factors limiting access to public information include: limited distribution of the print media; low literacy levels especially among senior citizens; lack of special prints for people with impaired sights; limited application of Information Communication Technology; absence of policy on data production, management and sharing and; inadequate interface between the OCGS and its stakeholders, particularly the data consumers; a situation that is attributed by low efforts to stimulate demand for information and; weak coordination of and linkage between Research and Development issues.

2.4.2 Promotion of Accountability, Transparency, Rule of Law and Respect of Human Rights

Strengthen Accountability and Oversight Institutions

There have been deliberate efforts to promote transparency and accountability among oversight institutions including Office of Controller and Auditor General, House of Representatives, Media and CSOs. Information on government activities and performance is readily available to many people through good governance structures including: laws, budgetary processes and financial management. Much of the information is currently availed to the public through radio/TV and print

media. CSOs are now invited during House of Representatives committees' consultative sessions on Bills before these Bills are presented to the full house of the House of Representatives.

Given that the Office of Controller and Auditor General and the House of Representative Committees play the oversight roles, the government has strengthened them in order to enable them o effectively fulfil their mandates. In addition to making the OCAG more autonomous independent and transparent, efforts to increase its efficiency and capacity for objective reporting have been made. In terms of efficiency, efforts were to ensure timely production of the Auditor's Reports and promote value for money audit. In this regard, capacity building and training of staff in OCAG was done. Similarly, the working environment in the headquarters office based in Unguja has been improved and efforts are underway to build an OCAG office in Pemba. Close collaboration between the OCAG Zanzibar and OCAG is an added value to those efforts. The enactment of the Public Procurement and Disposal of Public Assets Act 2005 was not only meant to help combat corruption, but also ensure efficient use of budgeted financial resources. For the purpose of deepening accountability and transparency among politicians and public officials, the Public Procurement Act will be supported by an Anti- corruption and Leadership Ethics Law, soon to be enacted.

The press is an equally important instrument for promoting public transparency and accountability. A number of Radio and TV stations have increased, of which some have started to discuss issues that were previously considered sensitive. Protection of Freedom of speech within the legal framework has been guaranteed.

Nevertheless, transparency and accountability mechanisms within government ministries, civil society organizations and the private sector still leaves much to be desired. Corruption is still a serious problem in public and private sector. Corruption practices are manifested in the provision of public services such as in land, health, tax and investment and the justice system, to mention just a few. Corruption in the business circles coupled with limited fiscal compliance among the private sector institutions also contribute to low revenue collections.

Legal Sector and the Existing Legal Framework

The Legal Sector Reform framework has identified the following Legal Sector Institutions: The Judiciary, the Attorney General's Office, Office of the Director for Public Prosecutions, The Law Review Commission, the Ministry of Constitutional Affairs and Good Governance, Registrar General's Office, Police Force; and Zanzibar Food and Drugs Board. Others are Offenders Correctional Institutions (Prisons), Legal Training Institutions as well as the Private Legal Practice and the NGOs. Some remarkable achievements have been recorded in the legal sector reforms, especially in criminal justice.

The Office of the Director of Public Prosecutions (DPP) has been strengthened both in terms of institutional setting/structural development and in numbers and quality of human resource that is required. Civilianization of Prosecutions, which is being done in phases, has now been rolled to the district level courts. In the case of the Attorney General's Chambers great efforts have been to improve the availability of important legal reference materials, including those on Zanzibar Laws.

Law schools have been established and a number of Zanzibari graduates are now employed in key legal institutions such as the Attorney General's and DPP Offices. Lawyers in the Attorney General's Chambers and the House of Representatives have been trained in legal drafting. Achievements registered under the Judiciary include renovation and construction of new court buildings, the establishment of the Judicial Service Commission and a community service

programme has been designed to operate as an alternative to imprisonment for offenders. Land and Labour Tribunals are now in operation and so is the Food and Drugs Authority. Also in operation are the Zanzibar Female Lawyers Association (ZAFELA), Zanzibar Legal Service Centre (ZLSC) and Zanzibar Law Society (ZLS), all being private Legal institutions offering legal aid.

However, the legal sector is facing: inadequate institutional and operational capacity; poor infrastructure; delays in delivery of justice, and poor legal practice and procedures. It also responds slowly to new social, economic and technological realities. Apparently, there is public perception that corruption in the legal sector has now become endemic. Other challenges in the legal sector include: low public awareness on basic justice process and rights, absence of an appropriate framework for managing and coordinating legal education and training, and inadequate aid support to legal matters. In addition, the legal courts are under-funded, leading to delays in provision of justice. Apparently, of the three arms of the state, the Judiciary is the most disadvantaged when it come to resource allocation.

The Public Service Reform Initiatives

Under the MKUZA I, implemented strategies to improve public service management included: formulation of comprehensive public service reform program; a review of remuneration structure; a comprehensive review of Public Sector Employment and Wage Bill issues, formulation of new schemes of public services; training and capacity building of civil servants. Although implementation of those strategies were somewhat affected by limited noticeable success was registered in the area of training and capacity building for human resources. The challenge now is on how to retain the trained and well qualified human resources; there is high rate of brain drain among the trained technical staff and more so among some specific professions.

MKUZA II will ensure the implementation of Zanzibar Public Service Reform Program, which is intended to create a committed public service that would pursue excellence in service delivery, loyalty to the government, and diligence to duty.

Human resources and capacity building Institutions

Human resource development and capacity building in Zanzibar is being undertaken by among others, the Institute of Public Administration, Zanzibar Institute for Financial Administration (ZIFA), State University of Zanzibar (SUZA), and the Zanzibar University. What are lacking are institutions for building capacity for trainers in rare fields, particularly those for poverty reduction and sustainable growth.

Human Rights

During MKUZA I the Human Rights Commission of the United Republic of Tanzania began to operate in Zanzibar. Between July 2008 and March 2009 the Commission received 35 complaints and managed to complete investigation of ten. However, the Commissions' performance in Zanzibar compromised by shortage of staff and working tools. MKUZA II deals with this weakness.

Gender- Based Violence (G-BV) in the isles is more pronounce among women victims than among men. GBV is a result of discrimination arising from unequal power relationships between men and women. The origins of GBV are deeply rooted in patriarchy, culture and attitudes that perceive women as second class citizens. GBV is even worse pronounced for women with disabilities. Due to widespread ignorance on what constitutes GBV, and low sensitivity to domestic violence, victims and their families rarely take action against incidents of GBV. Most of GBV cases are never

prosecuted because of difficulties in assembling evidence and lack of enforcement mechanism on laws that address GBV. There exists no specialized institution to deal with GBV crimes hence leaving most GBV issues being solved at the family level where the practice is to hide the shame rather than consider the human and legal rights of the victims.

Public Safety and Security

The government has always been responsible for safety and security of its citizens. To this effect, institutions like Zanzibar Voluntary Services, Fire Brigade, Economic Brigade, Prisons and Anti Smuggling Brigade, in collaboration with the Police Force are responsible for such safety and security.

Public safety and security awareness campaigns have been conducted through different approaches, including the media. The Zanzibar Medicine Policy and Strategy were launched in 2008 and the Food and Drug Authority (FDA) has been established to protect the rights of consumers. The Anti Smuggling unit (KMKM) continues to patrol the coast in order to stamp out smuggling. Still, work of these forces is constrained by limited qualification of their staff, limited equipment, and poor coordination among these institutions as well as lack of comprehensive modern strategies to handle new advanced threats to safety and security.

The Department of Disaster Management was established under the Chief Minister's Office to oversee all issues related to disaster management and early warning systems. However, challenges include capacity to plan and respond to disasters and emergency situation. The capacity to predict disasters such as floods, drought and outbreaks is fairly low. Unprepared as Zanzibar is, disasters befall on its citizens, and unfortunately more among the poor members of the society. Likewise, skills and proper equipment for preventing and responding to emergencies (Fire and rescue services) are inadequate and of low standards.

2.4.3 Promotion of Good Governance Practices at All Levels

Improving Coordination of Good Governance

A number of key measures have been taken in terms of legislation, policies and programs, institutional development and resource allocation to ensure effective and transparent functioning of the government and promote good governance practices among all government, private sector and civil society institutions. MDAs were empowered through training seminars and workshops to link Strategic Plans and the Budget for implementation of MKUZA I. For this purpose, the Medium Term Expenditure Framework (MTEF) has been adopted and used in budgetary process, a process that involves all key stakeholders, particularly the private sector and civil society organisations. This is done through a task force on fiscal review, National and Sectoral Budget and planning committees; a similar framework is used in the review, formulation, monitoring and evaluation of key policies, strategies such as MKUZA and Zanzibar Growth Strategy (ZGS).

Much as the frameworks for formulating public policies are well designed, some of the policies and programmes either do not have implementation strategies or their strategies/action plans are not implemented systematically. One good example is Community Development Policy which has remained in draft form for a while, hence limiting the application of Community Development approaches; approaches that are expected to influence changes in the developmental mindset of the people.

Coordination of institutions responsible for promoting good governance remains ambiguous. While there are a number of central ministries like the Office of the President and Chairman of the Revolutionary Council, Chief Minister's Office, MOFEA, MOCAGG, and MORASD, unclear definition of roles between and among them has undermined coordination of good governance initiatives within the government. While there is weak inter-sectoral collaboration and synergies at the centre, coordination of activities at local level is equally very limited, leading to incoherence and misalignment of objectives across sectors. Annual Plans are, by and large, shopping lists, with hardly few comprehensive strategic plans. This makes it difficult to link strategic plans with the three-year MTEF Clear objectives and measurable targets are missing, thus compromising monitoring and evaluation of implemented strategies. Although MKUZA I advocated for greater collaboration/coordination within the government setting for promoting good governance, actual implementation of interventions for promoting the same, promotion of good governance under MKUZAI has been negatively affected by inadequate institutional capacity and coordination. In particular, the Technical Working Groups have not delivered tangible outputs due to those inadequacies, among others.

There is a general feeling among Zanzibaris that the concept of good governance is not well understood, by many, including government officials. As a result, little has been done to mainstream good governance principles in national development policies and strategies. Moreover, the perception among stakeholders that promotion of good governance is the responsibility of one ministry, has worsened the situation, by making coordination of Good Governance initiatives even more difficult.

2.4.4 Promoting Democracy, Political Governance and National Unity

Democratic institutions and processes
There have been improvements the structures of administrative staff, training of members of the House of Representatives and their supporting staff in budget control, communication, gender budgeting, gender analysis, and legislative processes. A new House of Representatives building with adequate capacity that provides ample working space and facilities including a library and communication room has been completed and officially opened. The government has improved legislative processes by allowing other stakeholders to participate in review of legal policies and bills. These achievements have enhanced capacity of the House to exercise oversight, legislative and representative functions and work as a framework for strengthening further the capacity of House of Representatives.

Despite the achievements, there are still numerous challenges to be addressed, these include:

 i. Further promotion of Transparency and a sense of accountability;
 ii. Removing the apparent conflict of interest between personal priorities vis a vis those of the society, as currently shown by some members of House of Representative when exercising their powers;
 iii. Further involvement of local communities in the House of Representative, particularly on gender issues.

MKUZA II will address capacity and other challenges of the House of Representatives in a more comprehensive manner by putting in place strategic interventions for improvement of the House, Members, Staff as well as the working environment.

The Government has strengthened the Zanzibar Electoral Commission (ZEC) with the aim of making it more responsive to democratic challenges in relation to election processes. The

Commissions' working facilities, with a particular focus on technology transfer have been improved. ITC is deployed in ZEC activities from registration of voters through to data analysis and this alone has enhanced both efficiency and accuracy of information. Staff training is done regularly in order to re-tool and enable them to better handle the electoral processes.

National Unity

National unity is a necessary condition for sustainable socio- economic and political stability. Poverty on the other hand, inhibits a challenge towards the realization of good governance. Persistent poverty is a destabilizing factor, especially if such poverty is manifested in a grossly unequal distribution of resources and unequal participation opportunities in socio-economic and political development. Other destabilizing factors include socio-economic exclusion due to ones ethnicity, class, political and religious orientation.

Ethically the isles are homogeneous, united by a similar culture, religion, language and ways of life. These elements have worked to cement the unity among the people. Another important achievement in relation to unity is intermarriages among the people of Zanzibar. Inter-marriages between people from different locations, race, political affiliation and historical origin have worked to minimise the negative impacts of other social-political differences by cultivating more tolerance on such differences.

The physical communication and transport network that criss-crosses the breadths and widths of the islands in rural and urban areas alike, has reduced distances and brought together people from otherwise distant places. The advent and strengthening of soft-technology communication together with air transportation have successfully further cut down distances; mobile phones are available in almost all households, thus linking and bringing together families in all times.

The National Constitution, Judicial, Legislature, Electoral and general democratic systems all provide the platform and institutional set up for structured and non structured dialogues among the people. Resolutions of conflicts through dialogue has been promoted and generally practiced in the society; in this regard a number of home grown accords such as one between CCM and CUF, have been reached. Likewise, and despite the challenges discussed earlier on, the existence and operations of Non-State Actors (NSA) have promoted the interest of organised groups and interface with the public sector. The freedom accorded to the media has helped provide timely and proper information to the public on events happening nationally and internationally, thus putting them in the same wavelength, something that enriches constructive dialogue among the population. Likewise regular advocacy of issues of National interests, challenges and performance, through public meeting, workshops, seminar, religious platforms and the media has continued to cement patriotism and National Unity. Further, the building of National Unity is a process that needs to be natured from childhood through school curricular.

The Government on its part, and in collaboration with other stakeholders, has continuously raised awareness of its citizens on the importance of building and harnessing national unity for socio-political stability, which is a necessary condition for achieving sustainable socio-economic development. Through varied approaches including the adoption of policies and legal frameworks, the government has continued to maintain the rule of law; protect human rights; engage in constructive dialogues; and promote religious and political tolerance among the people and political parties.

Peace and tranquillity that prevails in the country is an outcome of the achievements narrated above. However further measure are needed to address the remaining challenges, which include:

i. Prejudice that blurs the vision of a few zealots who are ready to pursue at any cost, short term interests at the expense of long time peace, security and national unity.
The short-term self interests that compromises achievements of long-term national interests should   be controlled, through legal and regulatory frameworks that moderate the activities of such self-   centred individuals and groups;

ii. Political dogmatism is another feature in social interaction that may jeopardize National Unity. While multi party political systems are generally considered useful in promoting democracy and healthy competitive political pluralism, dogmatism blocks dialogue between contending parties. The CCM – CUF dichotomy, fuelled by self seeking political actors has in several occasioned put a risk the Unity of the Nation. It is important therefore to moderate the actions of such actors and ensure peace accords arrived at by the two parties and the reconciliation are sincerely adhered to and implemented;

iii. Limited religious tolerance between sects within a religion block breeds seeds of division among other-wise and;

iv. Where racial and geographical difference for political gains has threatened national unity, programmes for civic education need to be strengthened and implemented so as to breed a more united nation.

Core Reforms

The Core Reforms package was born out of the need to institute a governance environment for effective implementation of MKUZA I, called for the following core reforms: Public Finance Management Reforms; Economic Management Reforms; Public Service Reforms; Human Resources Reforms; Local Government Reforms; Legal Sector Reforms; Good Governance Reforms as well as Procurement and Disposal of Public Assets Reforms. While these reforms are at different stages of completion, remarkable achievements have been scored in the areas of Public Finance Management through institutionalization and operationalisation of Integrated Financial Management Systems (IFMIS), Payroll System, MTEF, as well as Formalization of Procurement Procedures and the Strengthening of Aid Coordination through the Aids Management Platform (AMP).

Notable steps are underway in finalising implementation of Public Sector Reform Programme (PSRP), Legal Sector and Local Government Reform Programmes. Nevertheless, much remains to be done with regard to Institutional and Human Resources and Good Governance Reforms. The proposed comprehensive coordination of reforms through the PSRP will create effective synergies and do away with duplications.

2.5 Status of cross-cutting issues/supporting environment

2.5.1 Status of cross-cutting issue under Cluster 1 (Growth and Reduction of Income Poverty)

Challenges from MKUZA I

Women in Zanzibar constitute 74 percent of the labour force in agro enterprises, and predominate in onshore fisheries. Women carry out most of the weeding, harvesting, transportation, threshing, processing, and storage activities and they are also responsible for household chores such as food preparation, fetching water, and collecting firewood[12]. Women have very limited access to productive resources. Since men tend to carry out most of the marketing activities, women do not have control over the proceeds of their labour[13]. In both urban and rural areas men earn about 3 times more income than women. For example in rural areas, men earn an average annual income of Tshs. 598,243 compared to Tshs. 180,328 for women, while in urban areas men earn an average annual income of Tshs. 1,029,701 compared to Tshs. 420,626 for women[14].

The majority of women are employed in the informal economy (subsistence farming, informal sector activities and as casual labourers in commercial plantations). Workers in the informal economy experience serious poor working environment including limited coverage of social protection, limited labour legislation and absence of organisational capacity. They perform unskilled or semi skilled jobs, which are time consuming with low pay, even though measures have been taken to address these inequalities through interventions relating to institution building and, employment generation which includes training, credit and empowerment.

While 21.4 percent of all households are female-headed[15] they are substantially less educated than male heads of household. About 56.8 percent of female heads have no education at all, compared to only 26.6 percent of their male heads of households[16]. The HBS observes that *"female headed households (are) slightly more likely to be poor"*[17]

HIV and AIDS is another cross-cutting issue. HIV transmission risks among women are higher compared to men.[18] HIV prevalence in Zanzibar currently stands at 0.6 percent of the general population. A breakdown by sex shows HIV prevalence is 0.7 percent among women and 0.5 percent among men. HIV prevalence is lower in Pemba compared to Unguja[19]. Elevated risk among women also arises in co-wives marriages, when one of the partners in the polygamous relationship is unfaithful. Rural agricultural communities are amongst high risk population groups[20] mainly due to low schooling and awareness on HIV and AIDS.

Enhanced decentralization at district level is one of the operational targets to accelerate effective delivery of public services[21]. However, current documented levels of stigma against HIV and AIDS in Zanzibar have been found to promote open discrimination and violation of human rights of both PLWHAs and people affected by AIDS[22]. Human rights violation issues pervade among

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[12] World Bank, 2007. Tanzania Gender and Economic Growth, pg 50
[13] Ibid, pg 50
[14] Household Budget Survey, 2006. pg 111, Table 9.7
[15] Ibid, pg12
[16] Household Budget Survey, 2006. pg 13
[17] Ibid, pg 98
[18] Christopher Awinia, Background paper on mainstreaming HIV and AIDS Issues in MKUZA II, pg 8
[19] Ibid, pg1
[20] Christopher Awinia, Background paper on mainstreaming HIV and AIDS Issues in MKUZA II, pg 9
[21] Christopher Awinia, Background paper on mainstreaming HIV and AIDS Issues in MKUZA II, pg 27
[22] Ibid, pg28

correctional facility inmates who are exposed to high risk sexual abuse, sexual violence and HIV transmission while in correctional facilities[23]. In March 2007, the Zanzibar House of Representatives developed a Strategy on its response to HIV and AIDS for 2007-2010[24]. Nevertheless, an integration of HIV and AIDS indicators is essential in order for HIV and AIDS issues to be effectively taken in MKUZA II[25].

Increasing HIV prevalence may affect MKUZA II institutional capacity to effectively deliver social services and to meet its planned MDG-based outcomes[26]. For instance, in the education sector, HIV prevalence among teachers in Unguja was 1.4 percent among those who tested for HIV in Unguja in 2005[27]. HIV pervasiveness among health workers who tested for HIV in Unguja is 11.6 percent [28]. Health sector workers are considered to be at risk of HIV infection since they handle blood products and piercing instruments[29]. Increasingly, students who dropped-out of school are a result of a far-reaching drop in household income due to loss of a productive household member as a consequence of HIV/AIDS[30]

Unemployment rates, which currently stand at 6.4 percent among males and 53.8 percent among women, prejudice male youths to engage in substance use and girls in sex work[31]. The underprivileged, including poor young females are also less likely to bargain over sex and use of condoms due to enticement caused by eagerness for partners to pay more for unprotected sex.[32]

The tourism sector accounts for about 8,000 direct jobs and another 38,000 indirect jobs. The majority of those who are employed in the sector are youth aged between 17 and 35 [33]. HIV prevalence is reported to be 28.6 percent among Intravenous Injectable Drug Users (IDUs), 12.9 percent among substance users, 10.3 percent among hotel staff, and 0.5 percent among youth less than 18 years and 0.2 percent among youth aged 15-24.[34] It is also documented that commercial sex workers in Zanzibar are at a risk of getting HIV infection because some tourists are ready to pay 2-3 times more for unprotected sex[35]

2.5.2   Status cross-cutting issues in Cluster 2 (Social Services and Well Being)

Challenges from MKUZA I
Over 20 percent of the adult population do not have any formal education, while 43 percent of women and 41 percent of men have at least attained secondary education. Overall 84 percent of women in Unguja have been to school compared to 68 percent in Pemba. According to the Zanzibar Education Development Programme (ZEDP[36]), Primary education Gross Enrolment Rate (GER) is close to 100 percent while Net Enrolment Rate (NER) is at 80 percent. The NER for girls at primary school is much higher than that for boys. The current MKUZA I target of 70 percent GER by 2010 is far from being achieved. However, the GER rate has increased faster among girls

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23   Ibid, pg31
24   Ibid, pg30
25   Ibid, pg 33
26   Christopher Awinia, Background paper on mainstreaming HIV and AIDS Issues in MKUZA II, pg16
27   Ibid, pg22
28   Ibid, pg22
29   Ibid, pg23
30   Ibid, pg 19
31   Ibid, pg5
32   Ibid, pg 6
33   Ibid, pg12
34   Ibid, pg12
35   Ibid, pg12
36   ZEDP, pg 61,

compared to boys. Overall, more boys drop out of school than girls. The three biggest drops out reasons for girls are: marriage, parental separation, and prolonged illness[37].

The HBS reveals a strong relationship between poorer children and their likely hood to be in school, especially in rural areas; they are also more prone to illnesses and injury. Around 74.5 percent of poor children are in school in rural areas compared to 90.3 percent of the same in urban areas. More than 70% of teachers at primary school level are female, whereas at the secondary school level nearly 64 percent are male[38]. Most teachers with science qualifications are males. Also around 83% of all teachers with degrees are male. Even though the majority of trainee tutors at TTC are female, most opt for non humanities or arts courses. Pemba Island has fewer female teachers as well as fewer qualified teachers.[39]

With regard to children with disabilities, available data show gender discrepancy in their enrolment, in favour of boys. Nevertheless, little evidence is available with regards to their enrolment, attendance and completion rates[40]. More disabled women are illiterate (30.2%) compared to (17.5%), of men, both in the rural and urban areas[41].

Child mortality is strongly associated or linked to a mother's level of education[42]. Women with secondary education experience only 56 deaths per 1000 live births compared to 101 deaths per 1000 live births among women with no education. Under five mortality rates are also higher among women under 20 years of age or for those with at least seven children. . Overall, the 2006 HBS, states that *"there is no marked difference in the patterns of reported illnesses by gender, except for accidents where male have more accidents than their female counterparts"*[43].

Teenage fertility is lower in Zanzibar, with only 9% of girls aged 15 to 19 having begun childbearing. Total Fertility of 7.2 in Pemba is higher than in Unguja, whose total fertility is 4.5 children. Generally, women with at least secondary education have an average of 3.3 children, compared to 6.9 among those who have no education. Poorest women generally have more than double the number of children (total fertility of 7.3) compared to the well off women[44] who have total fertility of 3.3.

The nutritional status for children is not sex disaggregated. But in the Tanzania Demographic and Health Survey (TDHS[45]), the height for age, weight for height and weight for age proportions are always higher for males compared to female in both Unguja and Pemba. Malnutrition, especially among women children and pregnant women, remains a major problem.

According to the HBS, *"distance to drinking water, in particular in dry seasons, is a proxy indicator for poverty"*. This is so because, a *"long distance for fetching water has an impact on participation in economic activity and hence on generating income for the household."*[46]

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[37] Ibid, pg 84
[38] ZEDP, pg 84
[39] Ibid, pg 72 and pg 111
[40] Ibid, ZEDP, pg 115
[41] HSB, pg 29
[42] Tanzania Health and Demographic Survey, Summary. 2004-2005. pg7
[43] HBS, pg.41
[44] Tanzania Health and Demographic Survey. Summary, pg3
[45] TDHS, Table 11.11, on page 198
[46] Ibid, pg 61

2.5.3 Status of cross-cutting issues under Cluster 3 (Good Governance and National Unity)

Challenges from MKUZA I

The MDG Report states that *"women remain under-represented in political and socio-economic decision making especially in rural areas, due to poor implementation of laws combined with cultural practices and customs which exclude women and discriminate them against ownership of productive assets"*[47]. More specifically, the MDG Report states that *"number of female members in the House of Representatives has been between 18 and 19 since 2000, whereas that of males has been between 60 and 61."*[48]

Despite all the progress made so far gender equality remains elusive particularly in the world of work. Women in Zanzibar still occupy the lowest ranks of employment in the formal sector with limited participation in decision making processes.

2.5.4 Status of Cross Cutting Issues: Gender

The policy on protection and development of Women, has clearly articulated the need for gender mainstreaming with a strong focus on women advancement. Several key documents in the Zanzibar Government (MKUZA I, Vision 2020, the Zanzibar Constitution, MDG etc), have defined the guiding principles, goals, objectives and strategies for gender mainstreaming in government activities.

MKUZA II has clearly targeted gender equity, equality and women empowerment as among the major development issues in Zanzibar which requires multi-sectoral approach. Moreover, under each cluster there will be specific gender related targets and interventions to address gender issues identified in the situational analysis. Furthermore, MKUZA II will target vulnerable groups such as women, widows, youth, orphans, elderly, neglected children, people with disabilities, those infected and affected by HIV/AIDS and the poorest of the poor[49].

The Government of Zanzibar recognizes that the problem of unemployment affects gender and age groups differently. The government sector employs a total of 29,562 employees of whom 12,717 are women. Farming and livestock keeping is the main activity of about 39 percent of the rural population aged 15 years and above. Women are *"more into this sector than males"*; about 27.1 percent of women are involved in farming and livestock keeping compared to about 20.7 percent of men. Priority has been put on creating and supporting economic activities in productive and service sectors that involve youth, women and other vulnerable groups; financial support for micro credit schemes for the youth women entrepreneurs and other vulnerable groups and; developing skills through vocational education and counselling[50].

The Government has designed special programmes to enhance the participation of women in development. There is a special fund in the Ministry of Labour, Youth, Women and children Development (MLYWCD) for lending to women entrepreneurs. However, the per capita loans given to female borrowers are still far less than those to male borrowers[51].

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[47] Millennium Development Goals. Progress report. Tanzania. 2006. pg 17
[48] Ibid, pg 16
[49] Christopher Awinia, Background paper on mainstreaming HIV and AIDS Issues in MKUZA II, pg 27,
[50] MKUZA AIR
[51] Ibid

Training in participatory planning has been undertaken to enable citizens to adopt participatory planning in their development projects. The Government adopted pro-poor and pro-gender budgeting by training planners in MDAs, regions and districts. Plans from the districts inform national plans and are pro-poor. All the plans mainstream gender issues[52].

The Government has developed and adopted a new Education Policy in 2006. The policy focuses on the introduction of early childhood care, and development of primary, secondary and higher education. In order to strengthen human capacity building, higher learning activities have been centralized within the Ministry of Education and Vocational Training, and a higher education development fund has been established to offer loans to students who join higher education[53]. In addition, the practice of expelling girls from school due to pregnancy has been revised such that pregnant school girls are now allowed to continue with studies after giving birth[54]. What's more, the GER at the secondary school level has reached 56.23 percent in 2007/08, compared to 54.7 percent in 2006/07. The gross enrolment rate for girls is slightly higher than that of boys. Accordingly, the Government of Zanzibar has focused on *"addressing gender specific gaps in mathematics and science at secondary schools"* and is providing specific training to female teachers who teach science as a subject[55].

In the health sector, particular focus is being given to the training personnel in primary health facilities, with gender considerations. With regard to knowledge about HIV and AIDS prevention methods, most women are familiar with the practice of limiting sex to one partner (88.2%) and abstaining from sex (86.2%). As for men, the most known method in preventing HIV and AIDs is also limiting sex to one partner (70.2%) and abstaining from sex (67.5%)[56]. When it comes to prior HIV testing, 90.1 percent of women have not been tested (more so in Pemba at 95.5%), compared to 77.7 percent of men (more so in Unguja at 80.6%).

Housing is an equally important cross-cutting issue. In this regard, the Government has established a house construction credit facility, in order to promote the construction of decent and affordable human settlement. This initiative has contributed to increased the number of women and men with decent shelter[57].

2.6 Implementation and M&E

An important aspect of implementation involves putting in place a coherent system of monitoring and evaluation so that up-dates and reviews of MKUZA II implementation can be conducted regularly. Effective and continuous monitoring and evaluation would ensure that ministries, departments and government agencies are adhering to the MKUZA II in their strategies, plans and execution of their respective duties. The effectiveness and efficiency of monitoring system for MKUZA II would be enhanced through:

i. Designing a more robust institutional arrangement for reporting and evaluation of the implementation of MKUZA II. Incentive structure to encourage continuous reporting and investment of appropriate authority to the monitoring and evaluation organs to ensure effective follow up are some of the aspect of this institutional design. A system of M&E across all implementing units (MDAs) has to be established and a reporting system that flow all the way to the national level designed.

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52   Ibid,
53   MKUZA AIR
54   Ibid,
55   ZEDP, pg 111
56   TDHS, Table 12.2
57   MKUZA AIR

ii.   Improvement in the organization and reporting of routine data from the MDAs and ensuring that survey data such as the Household Budget Survey, the Integrated Labour Force Survey and the Household Panel Survey are conducted at appropriate intervals and are extensively analyzed to inform the trends in the attainment of MKUZA II targets and goals. Concurrently, MKUZA II would adopt more realistic targets based on the existing information and experience in the implementation of MKUZA II; Investing in building capacity for M&E at all levels, including the use of data and analytical studies to inform the implementation of MKUZA II at each level.

2.6.1   MKUZA I M&E Challenges and Lessons

M&E challenges and lessons for each cluster from the experience of implementing MKUZA I appeared under the analyses of each cluster above. The identified challenges and lessons learnt from MKUZA I will be considered during the formulation of M&E for MKUZA II.

3.0 CHAPTER III: THE STRATEGY FRAMEWORK

3.1 Overview

This chapter employs the challenges and lessons learnt from MKUZA I develop and present the strategic framework of MKUZA II in terms of (a) the guiding principles; (b) organising framework; (c) core clusters and related major strategic interventions (d) conceptualization in terms of relative priorities of the issues to ensure a sharper and more focused strategy and; e) design of implementation framework and related inter-dependencies.

3.2 Principles of the Strategy

MKUZA II will continue with the principles of emphasise National ownership; Political commitment; Commitment to ensure stability of macroeconomic fundamentals, and continuation of structural reforms; Macro-micro linkages along with Sector linkages, strategies, and coordination; promotion of local partnerships; Strengthening partnerships with Development partners; Ensuring Equity and; Sustainable human development. In addition to these principles, MKUZA II will adopt a new principle based on sharper and focused priority setting; given limited resources, prioritisation of the outcomes will be based on the extent to which they contribute to broad-based growth, social-well being and good governance and national unity.

3.3 Organizing Framework: A Cluster Approach

MKUZA is a medium term strategic plan that organizes strategic interventions to achieve specific goals and ultimately to a specific desired broad outcome. Strategic interventions are therefore clustered around specific broad outcome. The following broad outcomes have been identified as constituting the overall objective of growth and reduction of poverty:

   i.   Achieved and Sustained Equitable Pro-Poor Growth;
   ii. Improved Social Wellbeing and Equitable Access to Quality Social Services and;
   iii. Good Governance and National Unity.

Each broad outcome is pursued through implementation of a cluster of strategies that cut across interlinked sectors, bestridden by some cross cutting issues and involving a number of actors. . The annex in this document offers a matrix that summarizes the relationship between broad outcomes, goals, targets, cluster strategy, key interventions and the key actors. It is this framework that is then linked up with M&E framework, the budgetary process to provide appropriate funding support MKUZA II.

Organizing a strategy along the clusters helps to avoid the pitfall of simply selecting and focusing on sectors that are considered a priority for some clusters without due consideration to other clusters that have a bearing on the performance of the prioritised cluster; there is interdependence among the clusters. In order to achieve any specific broad outcome a number of interventions need to be made across several sectors, including sectors that at the face value may not appear to be connected to the desired outcome. Such interconnectedness and synergy of specific elements across sectors can easily be taken into account through the cluster approach.

This framework also creates a useful link between constraints that need to be overcome for the attainment of a specific goal/target and address them through a core cluster strategy which shed light on the types of interventions necessary for addressing the constraints. The challenge, however,

is to ensure effectiveness through sharply defined targets and well prioritized interventions. Thus MKUZA II has sharper targets most of which are quantified (or dated) and care has been taken to ensure interventions are well prioritized to link well with the targets, goal and ultimately broad outcomes.

3.4   The Rationale for the Cluster Contents in MKUZA II

The following sections provide a summary of major issues that inform the contents of the MKUZA II clusters. Hence   the discussion in this section revolves around Growth and Reduction of Income Poverty; Social Wellbeing and Equitable Access to Quality Social Services; and; Good Governance and National Unity.

3.4.1   Cluster I: Growth and Reduction of Income Poverty

 Strategic intervention intended to improve social wellbeing through provision of quality education, health, adequate and safe water and infrastructure can only be achieved and sustained if there is a requisite income to support them. There exists a broad albeit imperfect correlation between income and indicators of social wellbeing, which suggests that income, cannot be ignored in any effort to improve social wellbeing.   The first cluster of MKUZA II therefore strategise on increasing growth and reduction of income poverty, including attainment of food security both at the national and household levels.

Despite the great diversity of existing economic and social settings, there are a few general lessons that can be drawn from the experience amassed over the past forty five years. At the macro-level, the following policies and measures have proved effective: Sound economic and financial policies designed to forestall high inflation rates or overvalued currencies as well as confining government activities to those tasks which markets are unable to effectively handle; also needed are social policies that places particular emphasis on meeting basic human needs, such as education, health, water as well as availability of resources foster to promote self-reliance.

It is now widely recognised that economic growth is a necessary but not sufficient condition for reducing poverty. Income distributional policies and those which provides opportunities for individuals and households to make use of and thrive, regardless of gender, race, socio-cultural background or other differences are equally important. Where a socio-economic ambiance of this quality has been put into effect it has led to impressive economic success from which the lowest income groups have also benefited.

Just like its predecessor strategy, MKUZA II recognizes macroeconomic stability as a key pre-requisite for sustained economic growth; in this regard, the state is expected to use monetary and fiscal policies as instruments for containing inflation, reducing government deficits, increasing net export earnings and collection of domestic taxes all of which are needed for maintenance of macroeconomic fundamentals.   MKUZA II also recognizes the importance investments in infrastructural development for economic and social development. Along with these interventions, MKUZA II will promote a vibrant private sector, whose role is paramount for growth.

However, the role of government in maintaining law and order and ensuring macroeconomic stability is a necessary condition but not a sufficient one for the reduction of income poverty;   the government will have to be more pro-active in the economy in order to ensure that growth is broad-based and shared equitably as the best way to reduce income poverty. MKUZA II will strategise on this important aspect.

The details on clusters, goals, targets, and strategic interventions necessary for growth and reduction of income poverty are presented in chapter four and summarized in the matrix form in the annex.

3.4.2   Cluster II: Social Wellbeing and Equitable Access to Quality Social Services

When assessing the social wellbeing of a society, there is a tendency of looking at the performance of the economy in terms of GDP growth and ignoring other indicators such as income distribution, life expectancy, child mortality, literacy rates, maternal mortality, malnutrition, enrolment rates, gender disparity and environment. A country can achieve very high economic growth without improving the living standards of the majority of the population. Likewise a poor country that mainly focuses on increasing growth/ income without investing in human capital is most likely to achieve unsustainable growth. There is huge amount of evidence showing that if left alone growth in income will not trickle down to the poor majority of a society; the government should play a key role in designing policies that deliberately promote equitable distribution of income in such a way as not to compromise growth. Such policies include promoting broad-based growth,   collection of taxes and funding social services like education,   health and water which are important for developing human capital especially among the poor.

The above justifies the inclusion of cluster II, which focuses on social wellbeing and equitable access to quality social services. Social services contribute to wellbeing in various ways: better health services and care reduces morbidity and increases life expectancy; improve the capacity of a person to work more productively and hence contributing to economic growth.

Chapter four of this document and the matrix in the annex show details of goals and strategic interventions, for this cluster.

3.4.3   Cluster III: Good Governance and National Unity

The discussion around Good Governance and National Unity requires a bit more clarity in view of the fact that the definition of governance and its relationship to growth and reduction of poverty is not explicitly understood by many people. Making these issues explicitly understood both in terms of the clarity of definition and the exposition of the many links to growth and poverty reduction is important for operational purposes.

Good governance is guided by a number of principles, namely: Democracy, Rule of law, Accountability and transparency, protection of Human Rights, and participatory rights of all citizens in shaping their society. Good governance is also about the definitive but independent relationship among the three arms of the state, namely, the Executives, the Legislature and the Judiciary. Promotion of good governance entails a series of public policy formulation, participatory decision-making, laws, rules, regulations and their implementation.

A basic issue that arises in relation to governance is the proper role of government in economic management.   Governments are expected to perform certain key functions. These include: (i) maintaining macroeconomic stability, (ii) developing infrastructure, (iii) providing public goods, (iv) preventing market failures, and (v) promoting equity; (vi) ensuring rule of law; (vii) promoting democratic institutions, including participation of all citizens in decision-making

Poor governance generates a socio-economic and political environment that is most likely to be detrimental to stability, security and overall development. "Good governance" puts people into the centre of development. "Where people grow, profits grow": this well-tried business rule is

applicable to development policy as well. Where there is long-term investment in people's health and education, where both men and women, regardless of their social status, have access to the necessary means of production, extension and credits, they can take their fate in their own hands and make use of opportunities to improve their quality of life. A national development policy of this calibre can then be successfully supported through regional and international cooperation.

Decentralization of systems

Local government is imperative for the successful implementation of decentralization process. The implementation of local government reforms should lead to strong local governance that empowers local people. Central and local governments have ensure that decentralization delivers the political, social, and economic benefits envisaged and expected by the people; this could be achieved by instituting proper mechanisms that monitor implementation of decentralized functions. Participation and empowerment of local communities to plan and implement their own development programmes will encourage and motivate enable them mobilize their energies and resources to implement development activities based on locally identified needs.

The main principles of the local government reforms include promotion of participation by all people in all aspects of governance such as election of their leaders, planning, implementation and monitoring of programmes and oversight functions on financial, legal and political accountability.

Transparency and accountability

The Government recognizes that for development projects and programs to be effectively and efficiently implemented and for the legitimacy and credibility of public institutions and corporations to be maintained, management of public affairs must be carried out in a transparent, accountable and corrupt free manner. The public also must equally engage in the fight against corruption and unethical behaviour. All institutions, public and private alike, must conduct their business following principles of accountability, transparency and ethical manner.

To support the oversight role of the House of Representatives the Government has strengthened the Office of the Controller and Auditor General, which is responsible for auditing and reporting to the House the utilisation of resources by all government and public institutions. The institution is also influential in fighting and preventing corruption. However, the capacity of OCAG requires further strengthening in order to effectively fulfil its role. At a local government level, cooperation between the OCAG, CSOs and the general public will be promoted with the objective of providing oversight function.

Another instrument of public transparency and accountability is the press. The press and media organizations have to work together to create a platform that could play the role of educating and informing the public on matters of their interests; Such information is also useful for public debates on issues of national concerns.

Access to justice

Major reforms of the legal system along with capacity building of legal institution and law enforcing agents will be undertaken with the objective of improving accessibility to justice. Efficiency and effectiveness of legal courts will be improved through: strengthening the whole system of courts, from primary courts to the high court; the chain linked initiatives will be extended to reduce case backlog and; correction facilities (prisons) will be strengthened. In the commercial justice, alternative dispute resolution mechanisms will be promoted.

Enhancing and sustaining peace and security

Peace and security are a necessary condition for the creation of a favourable environment for investment. Institutions charged with security, law and order such as the police, the army and the judiciary would be strengthened in order to provide timely, fair and trustworthy services to the public. Strengthening of security at community level by mobilising community members will be prioritised.

Chapter four and the related annex offers detailed cluster outcomes, goals and strategic interventions are deemed necessary for attaining good governance and national unity in Zanzibar in the coming five years.

4.0   CHAPTER IV: THE STRATEGY

4.1   Overview

This chapter presents the key features of the National Strategy for Growth and reduction of Income Poverty II (MKUZA II). The three clusters as well as the respective broad outcomes, goals and operational targets are also spelt out. In addition, core cluster strategies, strategic interventions, some of the key actors and implementers of the strategy are also identified.

4.2   Cluster I: Economic Growth and Reduction of Income Poverty

Zanzibar has experienced unsustainable GDP growth over the last few years. This has been attributed by among others, global financial crises, climate changes and their impacts on growth of sector, particularly tourism and agriculture. Other local factors that still hamper achievement of high level economic performance includes; inadequate control of inflation, weak macroeconomic planning, slow pace of reform process and inadequate implementation and monitoring capacities by MDAs. These factors are aggravated by unfavourable business environment, weak private sector and inadequate linkages in the economy, particularly low value addition.

Short and long term broad-based growth performance would be improved significantly in order to achieve substantial reduction in poverty raise the standard of living of all Zanzibaris.   The current low per capita income would substantially increased along with appropriate income distribution measures that target to support the productive capacity of the poor.

Cluster one is primarily intended to address the growth challenges in Zanzibar. The cluster has one broad outcome, namely, Achieved and Sustained Equitable Pro Poor Growth., along with four goals and a total of 53 operational targets. In addition there are core cluster strategies as well as intervention packages associated with this broad outcome.

4.2.1   Goal 1: Create an Enabling Environment for Growth

The main focus of goal one is to create an enabling environment for stimulating and sustaining growth and provide adequate economic, financial and regulatory systems, provision of effective economic infrastructures and incentives that will support, promote and increase long term investment for sustainable socio economic development. This includes prudent fiscal and monetary policies that are supportive to Zanzibar Growth Strategy. Monetary policies have a big impact on a number of socio-economic indicators such as inflation and foreign exchange rate. As the policy is one of the union matters and based on the fact that URT comprises of two economies with different structures and growth strategies, any change in monetary policy should take into consideration the impacts on both economies.

 Intervention packages are presented in the annex. They   focus on improving the investment environment for growth, through applying the following core cluster strategies:

   i.   Pursue prudent fiscal policies and improvement in revenue collection;
  ii.   Improve macroeconomic indicators, forecasting and estimation;
 iii.   Strengthen aid coordination based on aid effectiveness principles;

iv.   Strengthen union financial matters related to monetary policy;
v.   Strengthen and develop an efficient and effective public debt management system
vi.   Plan and implement measures to control inflation;
vii.   Strengthen integrated human and payroll system;
viii.   Strengthen Government accounting ,financial reporting and use of information technology;
ix.   Enhance financial planning and budget execution;
x.   Strengthen public enterprise management;
xi.   Enhance public sector auditing;
xii.   Develop ICT legal and institutional framework;
xiii.   Enhance the use of ICT in all sectors and;
xiv.   Ensure provision of effective hard and soft infrastructure that will facilitate safety and economic growth as stipulated in the transport master plan.

Other core cluster strategies include:

i.   Facilitation of the construction of new Maruhubi port and Wesha port as elaborated in the ZTMP;
ii.   Facilitation of rehabilitation of Wete and Mkoani ports;
iii.   Promote land use planning and land delivery system;
iv.   Implement Zanzibar energy policy;
v.   Enhance gender responsiveness to HIV and AIDS in workplaces of all sectors in order to protect human capital for sustained growth;
vi.   Remove impediment and reduce transaction costs in doing business;
vii.   Strengthen an investment regime which attracts investors;
viii.   Strengthen climate change adaptations responses at all levels;
ix.   Implement National Adaptation Programme of Action (NAPA);
x.   Implement environmental policy;
xi.   Provide adequate and reliable physical infrastructure for efficient management of industrial, medical and domestic wastes.

4.2.2   Goal 2: Promote Sustainable and Equitable Pro-Poor and Broad Based Growth

Despite the increased focus on the attainment of sustainable growth and reduction of both income and non-income poverty, the majority of Zanzibaris are still living below poverty lines. Both the projection of poverty (based on income) and the preliminary analysis of the Household Budget Survey whose data is still being collected indicate poverty has only marginally declined from 2005 levels.

The main challenges that faced the previous strategies for growth include:

i.   Unacceptable low production and productivities of economic sectors;
ii.   Inadequate linkage between agriculture and drivers of growth such as trade, tourism and services; ,
iii.   Low productivity of labour; ,
iv.   Inadequate economic infrastructure such as feeder roads, market, information, storage, transport;
v.   Poor implementation of National land use plan and poor availability and accessibility of investment capital and;
vi.   Weak value chain in agriculture that tremendously reduces the competitiveness of local products and their access to both domestic and export markets.

As pro- poor growth is about increasing the impact of growth on poverty reduction, the strategic interventions are designed to have maximum impacts on poor women and men and address issues of unemployment and other key underlying causes of persistent poverty that inflict upon the most vulnerable groups of our population. To this end the core cluster strategies to be considered shall include the following:

    i.   Implement Zanzibar Growth Strategy (ZGS);
   ii.   Improve the quality of the workforce and working conditions in key growth sectors;
  iii.   Harmonize population issues with economic growth;
  iv.   Enhance effective implementation of Zanzibar population policy;
   v.   Enhance policy awareness about the linkages between population and environment, poverty eradication and sustainable development;
  vi.   Improve population data collections, processing, analysis, storage and dissemination;
 vii.   Enhance implementation of Zanzibar employment policy, job creation programme and youth employment action plan with gender perspective;
viii.   Ensure timely delivery of agriculture support services with a focus on private sector participation;
  ix.   Develop implementation framework for cooperative policy;
   x.   Strengthen agricultural M&E system;
  xi.   Improve rice productivity;
 xii.   Improve root, tuber, fruits and vegetable productivity;
xiii.   Implement Clove Development and Coconut Rehabilitation Program;
xiv.   Develop and implement organic farming with focus on increased export;
 xv.   Secure access to reliable commodity markets for farmers and agro processing;
xvi.   Encourage private sector involvement in the sector along the entire commodity value chains;
xvii.   Improve district market centre with private sector participation;
xviii.   Improve seed multiplication units; Increase agro processing activities to add value and generate employment and;
xix.   Strengthen capacity and improve quality in technical agricultural education.

Other core strategies include:

    i.   Develop and implement farmers training program;
   ii.   Improve investment in irrigation infrastructure;
  iii.   Improve and maintain central slaughter houses;
  iv.   Improve production and quality of livestock products;
   v.   Promote cottage processing infrastructure and facilities;
  vi.   Put in place adequate and appropriate storage facilities for livestock products;
 vii.   Strengthen provisions of livestock support services;
viii.   Improve artisanal fisheries through the use of improved technologies;
  ix.   Improve processing and marketing (domestic and export)of fish and other marine products;
   x.   Build at least one fishing dock by 2015;
  xi.   Promote deep sea fishing;
 xii.   Promote marine and fresh water fish culture;
xiii.   Improve mangrove conservation and management;
xiv.   Increase protection and conservation of marine resources for sustainability of the fisheries sector;
 xv.   Enhance management and conservation of coral rag forests;
xvi.   Enhance management and development of protected forests;
xvii.   Improve beekeeping programs;
xviii.   Improve and diversify tourism products;
xix.   Deepening tourism development;

xx.   Strengthen linkage of tourism sector with other sectors;
xxi.   Promote up-market tourism and economic diversification in the tourism sector
xxii.   Improve tourism marketing abroad and in the domestic market.
xxiii. Make use of preferential trade arrangements such as AGOA, EAC, SADC and other integrations;
xxiv.   Increase access to market information using affordable ICTs;
xxv.   Strengthen export promotion activities and;
xxvi.   Promote Zanzibar as Special Economic Zone (SEZ).

Intervention packages related to each set of the cluster strategies are also presented in the annex.

4.2.3   Goal 3: Reduce Income Poverty and Attain Overall Food Security

Poverty is a well-known cause of hunger, but at the same time lack of sufficient and adequate nutritious food undoubtedly causes food poverty. Measures that address reduction of income poverty are essential in reducing food poverty/attaining overall food security. Accordingly, reducing hunger and food and nutrition insecurity is one of the international development goals, as reflected in the 1996 Rome Declaration of the World Food Summit (WFS). The United Nations Millennium Declaration reflected the WFS target by making hunger eradication part of the Millennium Development Goals. The Government is committed to achieve the targets set by the Millennium Development Goal (MDG) of halving the proportion of people suffering from hunger by 2015, as measured by prevalence of underweight children (under the age of five) and the proportion of the population below the minimum level of dietary energy consumption.

The strategic interventions are designed to address multiple dimensions of food security and income generation based on employment policy and job creation programme. The strategy will put more emphasis on introducing feasible and innovative practices that impact positively on sustaining food security and income generation at households and community levels with emphasis on the following core cluster strategies:

i.   Implement employment policy and job creation program;
ii.   Increase labour productivity;
iii.   Increase the access of food insecure groups to nutritious foods;
iv.   Improve utilization of nutritious foods;
v.   Enhance market efficiency, trade and access to credit as foreseen in Food Security and nutrition policy and Programme;
vi.   Integrate nutrition into policies, plans and budgets and strengthen necessary institutional arrangements for delivery of essential nutrition services;
vii.   Develop effective coordination mechanism and monitoring and evaluation of food security system and response;
viii.   Implement gender responsive employment policy;
ix.   Establish labour market information system;
x.   Promote Technical Vocational Education and Training among youth;
xi.   Increase access to business development services for out-of-school youth including affordable financial services;
xii.   Promote innovative youth entrepreneurship programs;
xiii.   Establish partnerships with micro finance institutions, and corporative unions to create "youth finance windows" and;
xiv.   Institutionalise labour market information system.

4.2.4   Goal 4: Create a Vibrant Private Sector for Economic Growth

The Growth Strategy identified the private sector among others as a key engine of growth in its implementation. The Government recognizes the role of the private sector as a partner in advancing economic progress in Zanzibar. Therefore, for most of the strategic interventions in MKUZA II the Government shall put emphasis on creating the enabling environment for private sector activities to flourish.   The strategy is set to strengthen the private sector capacity to take advantage of opportunities availed to it with emphases on the following cluster strategies:

  i.   Facilitate access to credit;
  ii.   Build capacity to private sector on business management skills;
  iii.   Promote access to market;
  iv.   Promote access to technology and;
  v.   Create business opportunities for private sector.

The intervention packages associated with goal 4 cluster strategies are also spelt out in the annex.

4.3   Cluster II: Social Well Being and Equitable Access to Social Services

Economic growth and reduction of income poverty are instruments for improving the quality of life and fostering enhanced social wellbeing. Provision of high quality social services has a more direct impact on the improvement of quality of life and wellbeing. MKUZA II recognizes that economic growth is important for sustainable improvement in the provision of social services. On the other hand, improved social services lead to improved human capital which in turn enhances higher economic growth. Cluster II of MKUZA II therefore focuses on improving equitable access to quality social services both as an end in itself in terms of improving the quality of life and promoting social wellbeing and also as an instrument for fostering even higher economic growth. Under the broad outcome of improved social wellbeing and equitable access to quality social services, seven goals have been selected with 65 operational targets, a number of core cluster strategies as well as intervention packages. These 7 goals and associated core cluster strategies are presented and discussed below.

4.3.1   Goal 1: Ensure equitable access to quality education

Zanzibar has an impressive overall gross enrolment ratio, although this is only because of high enrolment at the primary and secondary levels. Much still needs to be done to expand enrolment at the tertiary level of education. It is encouraging that intake of the Universities located in Zanzibar is increasing at an impressive rate. Another critical issue is the level of education of teachers. While the RGoZ has done a very commendable job of training teachers, there is a need to ensure that the level of education of teachers is sufficiently high to enable provision of education. In order to sustain and further improve the social achievements accomplished during MKUZA I, education component of MKUZA II mainly focuses on the following core cluster strategies:

  i.   Create broader participation and diversity in Early Childhood Care and Development (ECD) Programmes;

ii. Ensure equitable access to quality pre-school education for all children at the age four and five;

iii. Strengthen the capacity to implement and effectively monitor programmes that promote child and girls' education;

iv. Ensure equitable access to quality primary school education for all children at the age six to eleven;

v. Ensure that inclusive education and active learning is effectively practiced in schools;

vi. Provide adequate facilities to improve access;

vii. Ensure equitable access to quality secondary education for all children of age 12 to 15;

viii. Ensure enrolled children complete their basic education;

ix. Expand basic literacy programmes with special emphasis to women and PWDs;

x. Enhance functional literacy and continuing education with special emphasis to the youth, women and People With Disabilities (PWDs) and;

xi. Create conducive teaching and learning environment.

Others are:

i. Strengthen the capacity of teacher training institutions;

ii. Improve the quality of secondary education;

iii. Strengthen institutional capacity to increase enrolment of students in teachers training institutions;

iv. Ensure that qualified teachers are retained and equitably distributed; Improve monitoring, evaluation and assessment mechanism at all levels;

v. Ensure all schools have appropriate and sustained water supply, sanitation and functional hand washing facilities;

vi. Promote use of scientific and technological knowledge;

vii. Strengthen institutional capacity in tertiary education;

viii. Promote the quality of tertiary education;

ix. Provide life skills education to students and teachers and;

x. Ensure right of students and teachers to receive comprehensive HIV & AIDS and reproductive health education and freedom from stigma and discrimination towards PLHIV.

4.3.2 Goal 2: Improved health delivery systems particularly to the most vulnerable groups

Zanzibar shall strive to ensure health services are people-centred, leaning towards the goal of universal health coverage, inclusive decision making, health promotion and protection, safety of practice and health security. The commitment shall strive to provide comprehensive primary health care which encompasses integrated health services of acceptable standards, such as equity in access, distribution, and allocation and inter sectoral coordination of inputs, outputs and processes. Rehabilitation services that would enhance the well-being of drug users, victim of substance abuse and juvenile is pre-requisite in the protection of the rights of MARPs and other vulnerable groups including people with disabilities. To ensure that the second goal of cluster two is adequately addressed, the core cluster strategies are identified and spelt out based on the following focus areas:

Service Delivery: The core cluster strategies under service delivery include:

i. Develop and implement a comprehensive health care financing strategy;

ii. Develop, review and implemented guidelines, regulations, standard Operating Procedures as per ZFDC Act No. 2/06;
iii. Ensure smooth management of the procurement and supply chain for essential medicines and other supplies;
iv. Strengthen management, accountability and performance of health professional board and;
v. Build and strengthen capacity of local health research institutions

Infant and Child Mortality

Under infant and child mortality only one core cluster strategy has been identified namely;

- Improve access to and utilization of quality health services for by the newly-born and children.

Maternal and Reproductive Health: The following core cluster strategies will be implemented in order to reduce maternal and improve reproductive health:

i. Increase the number and improve the quality of skilled birth attendants;
ii. Expand delivery services at the primary health care level and create conducive environment to attract birth delivery at health facilities;
iii. Strengthen EmOC services and create demand for quality services and;
iv. Improve the availability of Family Planning information and services for men and women.

Communicable Diseases

To address the challenges related to communicable diseases MKUZA II will focus on the following core cluster strategies:

i. Promote safer sex practices among sexually active women;
ii. Enhance access to HIV information and services with special focus on addressing concentrated epidemic;
iii. Reduce sexual and drug related HIV predisposing risk behaviours and increase access to quality and comprehensive STIs and HIV & AIDS related services;
iv. Strengthen delivery of HIV& AIDS treatment care and support services;
v. Alleviate the impact of HIV & AIDS through reduction of stigma and discrimination and provision of socio-economic support;
vi. Scale up Malaria Control recommended strategies (ACTs, Long lasting Insecticide treated nets, Indoor Residual Spraying, Behavioural Change Communication, Monitoring and Evaluation); Use of Long Lasting Insecticidal Mosquito Nets and;
vii. Strengthen Tuberculosis control and Management.

Non Communicable Diseases

The core cluster strategies identified under non communicable diseases include:

i. Ensure adequate control and management of NCDs mainly diabetes, hypertension, cancer (esp. breast, cervical, prostate), filariasis, leprosy, fistula, asthma, mental health illness and others;
ii. Control the spread of non-communicable and emerging diseases and enhance effectiveness of treatment of NCDs;
iii. Attain better understanding of the incidence, prevalence and risk factors of NCDs in Zanzibar;
iv. Improve prevention, early detection and management of five priority NC diseases and;
v. Improve awareness and management of injuries and congenital condition.

Human Resources for Health

Adequate and appropriate planning, training, deployment and management and retention of health workforce are the critical strategies required to ensure equitable access to health services, whether promotional, preventative or curative services. Appropriate actions will be needed to:

i. Improve HRH capacity, retention and management of skilled personnel to provide quality services especially at primary level;
ii. Develop and implement HRH strategic plan (including performance monitoring), among others;
iii. Maintain and utilize HRIS for planning and management of HRH;
iv. Review and revise HRH curricula to ensure skilled health personnel are trained to provide services according to the EHCP;
v. Deploy appropriate skilled health personnel to ensure implementation of the EHCP;
vi. Develop and implement retention strategies especially for hard to reach population and explore and;
vii. Implement e-learning and telemedicine strategies as appropriate.

Social Welfare

Social welfare will focus on one core cluster strategy, namely to:

- Strengthen the organization and human capacity of health sector, CSOs and CBOs in order to provide substance abuse related services

Cross Cutting Issues

Under cross cutting issues for health, the following core cluster strategies have been identified:

i. Ensure use of HIS for analysis, and promotion of evidence based health interventions at community and national levels;
ii. Strengthen Health Promotion services and;
iii. Create mechanisms to monitor and improve workplace interventions on HIV and AIDS, gender mainstreaming, population issues, sanitary and environment conditions in public facilities.

4.3.3   Goal 3: Improved access to water, environmental sanitation and hygiene

The RGoZ recognizes access to clean, adequate and safe water as well as quality environmental sanitation and hygiene are fundamental rights and instrumental in fostering social and economic

development. Water is an important factor for achieving the 202 vision objectives, while environmental sanitation and hygiene play the key role for the improvement of health and social wellbeing.

Water Supply

Under MKUZA II improved access to water, environmental sanitation and hygiene will be achieved through a number of strategies. With respect to water supply and in line with Millennium Development Goals, the vision of water sector is to ensure adequate, affordable and sustained water supplies to all users using environmentally sound water resources. Appropriate actions will thus be needed to, among others:

i. Develop and promote an efficient water supply and management systems that ensures reliable water supply for all purposes at a reasonable cost;
ii. Establish and protect specific areas for sources of drinking water and expansion of rainwater catchments system;
iii. Promote community ownership and rights to water supply;
iv. Enhance equity of access, distribution and sustainable supply of clean water to households in rural and urban areas;
v. Ensure that installed capacity for water supply functions adequately and is properly maintained and;
vi. Encourage a broad range of environmental sound technologies in the provision of water, including gravity piped, pumped, deep, shallow and open wells, etc.

That set of strategies will also:

i. Encourage the development of technologies for rain water harvesting and activities;
ii. Institute and maintain an efficient and effective water tariff, billing and timely revenue collection system for all water users;
iii. Rehabilitate and improve the reticulation system in urban areas and the construction of protected water sources in the rural areas;
iv. Eliminate loss of scarce water by rehabilitating the antiquated mains and household supply systems and;
v. Improve policy and administration of the water sector by involving local communities to ensure the sharing of water resources and supply is provided to meet the basic needs of the population.

Furthermore, they will also:

i. Promote beneficiaries' contribution towards its share of water consumption;
ii. Protect the resources and sources from pollution and safeguard against the spread of pollutants in the environment;
iii. Involve women in water development programmes;
iv. Enable application of commercial operational and financial principles of water sector in urban areas;
v. Improve operation and maintenance through revenue from the consumers in form of collected charges from water sales, providing adequate, reliable and efficient incentive package for investors in the provision of water services;
vi. Enhance legal and regulatory framework for water resource management;
vii. Encourage local government and community investment initiatives in water services and;

viii. Allow for staff rationalization, training and support to enhance productivity and effectiveness

Moreover, they will also:

i. Facilitate and enhance improvement of databases, mapping and decision-support systems for effective water resources management, customer service, revenue generation and financial management;
ii. Improve water demand management and water resource conservation;
iii. Increase rainwater harvesting, improved water supply access, service reliability and quality as well as sewerage services, optimally decentralized and efficient service delivery as well as achieving financial self reliance.

Environmental Sanitation and hygiene

According to the survey conducted by the Institute of marine science the degree of marine pollution due to sewage discharge is not alarming but there is an urgent need to minimize the discharge of sewage into the sea by running an intercepting sewer along the coastal line to collect all waste water from the existing sea outfalls and then transport the proposed Conventional waste water treatment plant at Kisakasaka about 17 km away from Old stone town. But with the capacity that could be filled completely within a span of three years, it was proposed to construct a proper Sanitary landfill at Kisakasaka of at least 15 hectares for solid waste disposal; however, due to financial constraints the proposal has not been implemented. Solid waste disposal and drainage still needs more funding to address the problems of serious flooding in areas of Sebleni, Sogea, Chumbuni, Meya and Magomeni. In addition, there are other areas in town where the drainage and sewerage system needs rehabilitation and extension of their network. This includes areas such as Kwahani, Kidongo Chekundu and Jang'ombe.

The Zanzibar sanitation and drainage programme also included improvement of existing solid wastes collection and disposal, procurement of vehicles, plants and equipments and institutional capacity building. These tasks will be achieved by the newly established Division of Sewerage, Drainage and Solid Waste (DSDSW), introduction of by-law on new service charge along with new tariff structure, Billing and revenue system and Customer database to ensure a sustainable sanitation services within the Municipality areas.

Thus, MKUZA II will mainly undertake to:

i. Facilitate construction and use of sanitary facilities in both rural and urban areas and good hygiene practices;
ii. Strengthen and safeguard provision of sanitation services; Increases access to sanitation facilities at public places and institutions and;
iii. Develop sewerage and drainage and solid wastes disposal facilities and promote good hygiene practice in all whole and retail markets.

4.3.4 Goal 4: Provide decent and adequate shelter and sustainable human settlement

With respect to the provision of adequate shelter and sustainable human settlement the focus would be both in terms of increasing access to affordable housing and reviewing land use plans to improve the human settlements. Decent shelter and sustainable human settlements ensure safety and good living environment, which are essential in building a healthy workforce. It is imperative that in the process of developing settlements, environmental conservation is promoted and safeguarded. To

ensure attainment of this goal and its related operational targets, the following core cluster strategies will be implemented:

i.   Encourage development of PPP and participation of financial institutions in housing schemes;
ii.   Ensure provision of affordable housing to accommodate the demand;
iii.   Ensure balanced land-use distribution for social and economic activities;
iv.   Strengthen and enforce the existing urban and rural settlement standards;
v.   Sensitise the public awareness about participatory planning with particular emphasis on decent urban and rural settlement and;
vi.   Ensure capacity building programmes are put in place.

4.3.5   Goal 5: Improved nutritional status of children and women with focus on the most vulnerable   groups

Malnutrition is slowing Zanzibar's progress towards economic growth and poverty reduction. Children who are malnourished are incapable of growing, learning and earning decent incomes when they reach adulthood, and therefore unable to make contribution to the economy. Poor nutritional status also weakens the immune system, making children susceptible to diseases and therefore death. Malnutrition reduces the impact of investments in all key basic services. Resources spent on education, health, and in the treatment of HIV and AIDS will have less impact unless malnutrition is prevented and treated. Good nutrition is fundamental for a productive nation and is a powerful driver of economic growth.

The core cluster strategies to be implemented under this goal shall include:

i.   Promote consumption of food fortified with vitamins and minerals
ii.   Support and promote appropriate infant and young children feeding practice;
iii.   Ensure treatment of acute malnutrition;
iv.   Design early warning systems and related responses and;

4.3.6   Goal 6: Improved safety nets and social protection for poor and vulnerable groups

The increase in the number of orphans and vulnerable children, child- headed households and the inability of the extended family system to provide basic care and love for such children remains a serious challenge to their well being. Studies show that many more orphans are living with and often caring for ill parents or primary caregivers, as well as for their siblings. In addition, diseases, lack of social protection measures and poverty lead to these children being discouraged from accessing basic services, such as health care, education and social services.

The extended family, which is already weakened by social upheaval, urbanization and poverty, is not able to provide care and protect such large proportions of orphans and vulnerable children. The crisis has led to a situation where the protection of the rights of orphans and other children made vulnerable by HIV and AIDS and other chronic diseases and social factors can no longer be guaranteed without government, community, business and civil society interventions.
 While in Zanzibar there is not enough evidence to suggest HIV and AIDS is amongst the important causes of child vulnerability, as the number of children who are orphaned is very small and most of the children are living with their parents, caution should be taken to the fact that the number of children that are living with their parents could be significantly higher due to the availability of Anti

Retroviral Treatment.

The MVC have almost no access to external support except that which is provided by the members of the extend family. The government currently does not have enough measures to provide support to the MVC due to budgetary constraints among others. Support from the non-profit organization is not consistent, inadequate, and covers only a few MVC within small geographical areas. Scaling up external support from the government side and NGOs would be an essential step. The magnitude of needed protection, care and support for MVC is increasing as the number of MVC is escalating. The increasing number of MVC coupled with increased advocacy for getting results for MVC have necessitated the Government to establish and or strengthen existing MVC response systems. The government recognises the need to work in partnership with the private sector and the non-profit organizations (FBOs and CSOs) in this matter. Efforts to coordinate FBOs and CSOs and private sector involvement are at various stages of implementation.

While child protection and related issues of ensuring access to essential services are addressed in the government policies and legislations, systems and coordination mechanisms are still very weak at all levels. Strengthening coordination of stakeholders is crucial if effective scaling up of MVC responses are to be realized.

In addition, ensuring access by MVC to essential services requires an efficient and effective systems and process (service delivery or MVC programmatic interventions). Currently these are fragmented or non-existence and therefore needs to be formally established. Availability of resources for MVC responses is one of the major challenges. Designing a sustainable resource mobilization strategy is important in order to guarantee and sustain protection, care and support to the MVC.

Lastly, quality control system or guidelines are needed in order to ensure that the prevention, care and support responses to the MVC are equitable, accessible, affordable, comprehensive, and sustainable. There are now 49,700 people aged 60 and above or one per cent of all people in Zanzibar. Some 16.5 per cent of households in Zanzibar are headed by older men and women.

For older people and their households, their health is an asset that has an impact on the wellbeing of others. Health and income security are cited by older people as their two key priorities. Older people's health status determines not only their physical, mental and social wellbeing, but in many cases, is also a crucial factor influencing their ability to earn an income in the absence of any secure income. For older people, declining health leads to loss of income.

Thus, to facilitate the attainment of this goal the following core cluster strategies have been identified:

  i.   Support formulation of Social Protection Policy and develop management information system to assist its implementation;
  ii.   Ensure access to and utilization of services by vulnerable and hard-to-reach areas;
  iii.   Reduce exposure to risk / shocks and enhance resilience among vulnerable households;
  iv.   Ensure better quality of life and care for elders, PWD, MVC and others;
  v.   Ensure safety nets provision; and
  vi.   Ensure better quality of life and care at old-age.

4.3.7   Goal 7: Promote sports, culture and preserve historical and cultural heritage

One of the reasons for the review of laws was to define the relationship Stone Town Conservation and Development Authority (STCDA) and the Zanzibar Municipal council. There is also need to clearly establish and enhance the relation between STCDA and agencies, such as the Tourism Commission and ZIPA that are responsible for promoting tourism in the Stone town. This is because one of the duties of STCDA as manager of the Town is to make sure that any future development project in the area does not compromise the objective of safeguarding the towns' Outstanding Universal Values and hence endanger its World Heritage status recognised by UNESCO.

Apart from material and technical support provided by the STCDA to houses in the town, Stone town needs more and better social, economic and cultural facilities. Yet in this regard, STCDA alone cannot provide such additional facilities; the authority has limited resources to expand its services. In order to address such challenges the following core cluster strategies will be implemented:

i.   Enhance conservation of Stone Town as one of the world's cultural and historical heritage sites;
ii.   Promote community based conservation programs that focus on preservation of cultural and historical heritage sites;
iii. Review Cultural Policy and implement the Act appropriately;
iv.   Participate effectively in national, regional and international tournaments and;
v.   Enhance promotion and use of Kiswahili as national, regional and international language.

4.4 Cluster III: Good Governance and National Unity

4.4.1   Cluster Summary

As discussed earlier under Chapter II, MKUZA I registered remarkable success in the implementation of strategies for promoting good governance and national unity. That success notwithstanding, some of the interventions were marred with an array of challenges, most notably:

i.   Inadequate decentralization and weak local government system leading to limited participation of grass root players in public affair
ii.   Weak capacity coupled with weak mechanism for enforcement of the legal framework, transparency and accountability within the state and non state actors
iii. Wrong perception that good governance is role of one ministry and the consequential ineffective coordination of good governance initiatives.
iv.   Scarcity of qualified human recourses and facilities at all levels of the government for promoting good governance
v.   Weak institutional capacity for oversight, in terms of human resource capability and lack of requisite tools and equipments
vi.   Weak legal framework which is not supportive of effective and timely implementation of MKUZA.

Overall Goal and Outcome

The overall goal of this cluster is to put in place an improved governance system that will support socio-economic growth initiatives and reduction of poverty. MKUZA II intends to build on the achievements of MKUZA I in promoting good governance and national unity. Moreover, the Strategy will take into account the challenges encountered during the previous Strategy in order to garner maximum results. The expected broad outcome of this cluster is **"Enhanced Democratic Institutions and Processes, Rule of Law and National Unity"**

In order to be more focused achieve possible organic synergies amongst the goals, the number of specific goals has been reduced from eleven (under MKUZA I) to three. Nevertheless, the coverage remains more less the same. MKUZA II will therefore implement the following goals under this cluster.

Goal 1: Ensure Greater Citizens Participation in Democratic Governance
Goal 2: Strengthen the Rule of Law, Respect for Human Rights and Access to Justice
Goal 3: Improve Democratic Institutions and National Unity

In order to implement the Strategy and achieve the planned outcomes under this cluster, the following broad interventions will be implemented:

i.   Strengthen democratic institutions and processes including Electoral Democracy;
ii. Strengthening the capacity of the House of Representatives, LGAs, Vulnerable groups, Women, the Youths)
iii. Promote community empowerment through (Community Development Groups, Sustainable Savings and Credit Societies, Shehia Development Committees) provision of empowerment assistances and facilities.
iv. Develop a coordinated reform program for the legal sector to achieve credible, effective and affordable system for the dispensation of justice
v.   Enhance initiatives in the fight against corruption and immoral ethics
vi. Strengthen coordination of good governance initiatives with clear roles of Non State Actors and emphasis on Civic Education

4.4.2   Goal 1: Ensure Greater Citizens Participation in Democratic Governance

The goal aims at deepening and widening involvement of the stakeholders, particularly at grass roots level, in planning and implementation of public activities. To attain this, the local government structures and roles will be devolved and make them more meaningful, effective and democratic in terms of participation by people of all walks including women, youth, people with disabilities and other vulnerable groups. The on-going reforms on Local government will be fast tracked for effective participation and service delivery. Non- state actors will be empowered to become well equipped in planning and more importantly in their advocacy roles. Building capacities of grass roots and district level stakeholders is envisioned to facilitate District level planning implementation and monitoring. By the same token, NGOs and CSOs capacity to identify their needs and responses will be assessed and training programme developed and implemented. MKUZA II will ensure that more efforts are made to empower special groups, including the vulnerable one, such as poor women, youths, the old-age people, the sick and those with disability. Women empowerment and representation in decision making as well as promotion to higher positions in government and political arena will be done. Cross cutting issues such as HIV and

AIDS, gender and environment will be mainstreamed in order to ascertain sustainability of growth and reduction of poverty initiatives.

The recognition of the private sector as an engine of growth is a commendable decision. Since the private sector is nascent and fragmented, the strategy plans to make the private sector a robust partner. Public Private Partnership arrangements and the resultant dialogue platforms such as The Zanzibar Business Council will be fostered to enhance growth. These arrangements are of paramount importance in building trust and generating funds for investments. Furthermore, guidelines will be prepared to make working relationship and partnership mandatory and more formal.

The presence of strong governance will provide more and better access to capital, badly needed for economic growth and development. Corporate governance also has broader social and institutional dimensions. Properly designed rules and promotion of corporate governance should focus on implementing the values of fairness, transparency, accountability and responsibility to shareholders and society at large. In addition to good internal governance, the business community need a sound and business-friendly institutional environment; ; this include protection of private property rights, a well functioning judiciary that can professionally and timely translate corporate governance laws and regulations that promote business operations.

The implementation of this goal will be carried out through six operational targets; ten core cluster strategies and an array of interventions. The following are the core cluster strategies under goal one of this cluster:

i. Fast track finalization and implementation of Local Government Reform Program through Decentralization by Devolution;
ii. Strengthen local level governance, by increasing participation and representation of all, including the most vulnerable groups in design, implementation and monitoring of policies;
iii. Strengthen Planning, M&E and MIS at MDAs;
iv. Mainstream cross-cutting issues in District Planning System; and Promote community participation in planning and implementation of natural resource management, utilization and maintenance.
v. Empower and increase representation of women in policy and decision making levels;
vi. Promote inclusion of youths and vulnerable groups in decision and policy making processes;
vii. Improve institutional and regulatory systems to ensure good corporate governance;
viii. Develop effective framework for partnership and cooperation between government and NSAs;
ix. Develop conducive environment for the private sector to grow and thrive and; Develop Government - CSOs policy dialogue platform

4.4.3 Goal 2: Strengthen the Rule of Law, Respect for Human Rights and Access to Justice

This goal envisages improving the legal sector to make it more responsive to its mandate and give expedited justice in a fair and accountable manner.

A comprehensive Legal Sector Reform Program will be developed and implemented to fulfil the following objectives:

i. Effective and efficient national legal framework;
ii. Public safety, national peace, stability and economic prosperity of individuals through credible means;
iii. Credible, effective and affordable system of dispensation of justice;
iv. Skills and Knowledge of the Legal Sector Personnel to meet the demand of sector service delivery and;
v. Highest Standard of Service delivery and Management of the Legal Sector Institutions.

Strategic Framework for Access to Justice for all stakeholders will be developed and made operational (with link to the mainland Legal Sector Reform Programme). Participatory capacity needs assessment in the judiciary, police, and DPP, Attorney-General Chamber, prisons, and human rights institutions. Campaigns to build an informed and enlightened populace with knowledgeable and skilled human resource (through an effective free and responsible media, and accessible education and training for all) would be conducted.

MKUZA II accords special attention to the issues of child rights and protection, matters that are specifically addressed under goal 2 of this cluster. The government intends to put in place legislative framework for the protection of children to conform to the requisite international standards and obligations as stipulated by various international charters, protocols and agreements. Special effort will be made to prevent children from entering the justice system in the first place and when they must enter it to go through it as quickly as possible with minimum disruption in conformity with internationally accepted standards and procedures.

This goal will also address issues related to Gender-Based Violence and other forms of Violation of Human Rights in a comprehensive and a more collaborative manner among all stakeholders. Consumer protection and preparedness to disaster management are also an important part of this goal.

The core cluster strategies associated to goal two of cluster three are presented below as follows:

i. Develop and implement Legal Sector Reform Program;
ii. Improve access to justice and ensure accountability;
iii. Put in place and operationalize institutions and legal instruments for public safety enhancement;
iv. Enhance service delivery at all levels;
v. Enhance the promotion of human rights and ensure the fulfilment of the obligations;
vi. Domesticate, implement and enforce relevant International and Regional Conventions, Declaration and Protocols;
vii. Institute effective mechanisms to respond to rights violation and infringement - physical and non physical (including all forms of violence, especially violence against women, children and other vulnerable groups);
viii. Combat domestic violence, harassment, GBV and discrimination;
ix. Promote fair treatment for all risk-prone groups, including the Most At Risk Populations (MARPS) and people with disability;
x. Strengthen and enforce law and regulations for child protection;
xi. Develop and implement Consumer Protection Policy and Strategy and;

xii.   Develop and implement Disaster Management Strategy

With respect to immigration, which exerts enormous pressure to the effective allocation of limited resources and the improvement of social services provision, the Government will review, strengthen and enforce the legal framework in order to control the influx of illegal immigrants. For this purpose, RGoZ will consider the reintroduction of entry-exit permits for travel to and from Zanzibar. Furthermore, Zanzibar will continue to be strategic and prudent about regional integration in SADC, EAC and other organizations.

4.4.4   Goal 3: Improve Democratic Institutions and National Unity

As   earlier pointed out, the existing democratisation institutions such as the House of Representatives, Local Government Councils, and the Electoral Commission, all need some strengthening to be able to cope with the level and extent of inclusiveness required for implementation of MKUZA II. In order to realize MKUZA II objectives, further empowerment of the existing democratic institutions, to enable them handle their respective mandates, is inevitable.

The Strategy acknowledges the paramount importance of oversight institutions and intends to take measures to strengthen them. These institutions are necessary if public operations are to be credible and command public respect. Peace and tranquillity as well as protection of Human Rights are inevitable inputs for growth and reduction of poverty. This Strategy will go a long way in creating an enabling environment for the protection of rights of all citizens and appropriate measures taken to enforce laws in case of any violation.

The thrust here is to enhance transparency, accountability in the democratic system but particularly so among the elected leaders. As far as National Unity is concerned, the strategy is to   strengthen social, political and religious tolerance as a necessary condition for national stability that is needed for sustaining   growth and reduction of poverty. Roles and benefits of Zanzibar in the United Republic of Tanzania, the East African Community and other Regional and International organizations are addressed under this goal.

Equity and fairness is one of the key requisite factors for growth and the reduction of poverty. In cognizant of the same, MKUZA II will create an environment and mechanisms for promoting equity and fairness in all aspects.

This goal further aims at stumping out the scourge of corruption, domestic violence, harassment and other forms of discrimination that frustrates social harmony and growth. To this effect, the enactment of the anticorruption and leadership ethics legislation and its operationalisation will be expedited. In addition,   corporate governance will be promoted and management of public resources improved. Envisaged measures to combating violence and related evils include Civic education and up scaling of regulatory framework and enforcement for combating violence and related evils will be provided.

This goal further aims at mainstreaming good governance principles in all public policies, guidelines, plans and programmes. The perception that good governance is the responsibility of one government Ministry will be dissolved through the development of a guiding framework for mainstreaming good governance principles in all institutions of government, public, private and Non-State Actors;   awareness creation and capacity building in all these institutions will be done. Implementation of the framework will be centrally coordinated and ministries will be required to set Good Governance Integrity Committees. Furthermore, the Strategy will design and institute an audit system where MDAs would conduct audit on self good governance through their respective

integrity committees, to be followed by external independent audits on the same. Good Governance Audit reports would enlighten on the performance and hence influence future additional actions.

While core reforms in a number of sectors are inevitable, there is need for good coordination mechanisms of the reforms process,   as present Coordination of reforms is weak. A coordinating Secretariat will be established to harmonize the process and outcomes, avoid duplications/gaps and promote potential synergies.

The core cluster strategies associated to goal three of cluster three are presented below as follows:

    i.   Enhance transparency and accountability for elected leaders;
   ii.   Strengthen democratic institutions;
  iii.   Strengthen Oversight Institutions;
  iv.   Forge social, political and religious tolerance;
   v.   Strengthen coordination institutions;
  vi.   Mainstream good governance principles in policies, Guidelines, plans and programs;
 vii.   Institute a system of Good Governance audit and reporting;
viii.   Develop a coordinated implementation of core reforms;
  ix.   Combat corruption in all its forms and manifestations and improve management of public resources; Strengthen efficiency and effectiveness of mass media and information services;
   x.   Build a coherent Research and Development system;
  xi.   Enhance effective data management system.

5.0 CHAPTER V: IMPLEMENTATION FRAMEWORK

5.1 Overview

The chapter summarises challenges from implementation of MKUZA I and draws lessons for the implementation of MKUZA II. MKUZA II implementation framework adopts a cluster and outcome based approach employed in the previous strategy and asserts that MKUZA II implementation will require close coordination and collaboration between and among Sectors, MDAs, the private sector and Non-State Actors. The coordination and collaboration mechanisms provide opportunities for developing and strengthening linkages and maximizing synergies during the implementation process. This will in turn help minimize duplication of efforts, cut down transaction costs and reduce wastage of resources. All Actors will collaborate throughout, from planning, budgeting and implementation of strategies designed to achieve cluster- based broad outcomes.

5.2 The Previous Implementation Framework

The implementation arrangement under MKUZA I covered many milestones, including harmonization of planning and budgeting processes, introduction of Budget Allocation System (ZBAS), strengthening of the Integrated Financial Management Systems (IFMS), and monitoring and evaluation.

However, the implementation of MKUZA I faced a number of challenges. These include:

(i) Inadequate prioritization and coordination of interventions
(ii) Some of the needed complementary strategies, plans and programmes/projects were not developed
(iii)Inadequate attention and speed in implementing public private partnership
(iv)Slow pace of core reform implementation.

The implementation arrangement for MKUZA II will address these challenges and other setbacks.

5.3 Implementation Modality and Management Arrangements of MKUZA II

The government will develop an implementation plan for MKUZA II and further guide the Actors (MDAs and NSAs) on how they could implement the strategies actions. The implementation arrangement shall be anchored in the ongoing core reforms, institutional strategic plans and budgetary processes. The implementation plans for MKUZA II will, among other things include:

(v) Development of complimentary strategies and plans
(vi)Costing of MKUZA II and financing scenario
(vii)   Capacity support to implementing Actors (MDAs and NSAs) on addressing implementation bottlenecks faced in implementing activities, projects and programmes and
(viii)   Scaling up and localisation of MKUZA II and Millennium Development Goals.

The Government will ensure that all MDAs and the Civil Society have comprehensive plans that are reflective of MKUZA II outcomes, objective and targets. While each MDA will finance its implementation through the MTEFs and annualized budgets, the Civil Society will finance their

plans and strategies using non MTEF resources but implement activities that are within MKUZA II framework,

The budgetary and implementation process for MKUZA II through MTEF/PER will must conform to the principles of cluster and outcome based approach taking into account the need to harmonise and align policy, planning, and expenditure review and budgeting. The PER review process will form the basis for consultative processes to review and relate budgets with priority interventions as outlined in the MKUZA II outcome clusters.

The PER review process would feed into the comprehensive Monitoring System for MKUZA II. The analysis and recommendations for improved effectiveness and efficiency of development interventions emanating from MKUZA Monitoring System, will feed into the work of the PER working groups. In order to ensure that the budget process under MTEF and PER frameworks are well aligned to MKUZA II and implemented effectively, the Ministry of Finance and Economic Affairs will implement measures aimed at enhancing capacity of the government staff to undertake better coordination of planning and budgeting. These measures will include:

  i.   Developing the Planning, Budgeting, Monitoring and Reporting Manuals;
  ii.   Training of MDAs staff responsible for planning, budgeting, monitoring and reporting;
  iii. Enforcing standards and principles established in the manuals through strengthening of MDAs budget committees, Budget Guideline Committee and clusters; and
  iv.   Tasking the Policy and Planning Departments in each MDA to oversee the implementation of the manuals and report to MOFEA.

5.4   Cluster and Outcome Approach

Implementation of MKUZA II through the cluster approach provides opportunities for strengthening linkages of the planning process and will ensure an integrated thematic response, drawing upon the comparative advantages of each participating partner. The matrix at the end of this document shows various cluster related strategies, interventions and cluster-based list of stakeholders. Also, mainstreamed in the matrix are cross-cutting issues like HIV and AIDS, population, environment and gender.

MKUZA II is a sharper and focused strategy and continues to focus on outcomes and capitalising on lessons learned from MKUZA I. it makes use of Sector Strategic Plans, District Strategic Plans and MTEF, among others. New systems of resource mobilization and allocation will be promoted to facilitate efficient budgetary allocation, expenditure tracking and monitoring and reporting. MKUZA II will align with MKUKUTA II in terms of adopting a common strategic approach and a common five-year time frame, namely 2010- 2015.

5.4.1   Cluster I: Growth and Reduction of Income Poverty

Through stakeholders' dialogue, planning, budgeting and implementation of activities enshrined in MKUZA II, all actors involved in the productive sectors such as tourism, trade, agriculture and infrastructure will collaborate to achieve the broad outcome of this cluster. Therefore, the cluster aims to achieve coordinated and collaboration efforts to implementing growth and poverty reduction strategies and monitoring performance of such intervention.

5.4.2 Cluster II: Social Services and Well-Being

Under this cluster, Actors involved in provision of social services will collaborate in planning, budgeting and implementation of activities to achieve the outcome as articulated in the cluster.

5.4.3 Cluster III: Good Governance and National Unity

Governance issues cut across Government structures, legislative bodies and judicial system as well as in the operations of the private sector and civil society at large. The implementation of interventions under this cluster has a bearing on the other clusters. It is important to continue fostering autonomy and strengthening capacity of the major governance organs. Under the guidance of the government, the key actors will be required to collaborate and scale up their efforts to implement the envisaged interventions as articulated under this cluster.

5.5 Harmonisation and Alignment of Key National Processes

Implementation of MKUZA II entails effective linkages with other key National Processes. The Government will continue to ensure that the budgeting process, including MTEF, its execution and monitoring is MKUZA II based. The operationalisation of ZBAS and Report on Implimentation of MKUZA (RIMKUZA) will be central to implementation of MKUZA II. Monitoring and evaluation system is already harmonized with MKUKUTA M&E, so are the processes of monitoring population related issues and inflow of external resources through the Aids Management Platform (AMP). Other frameworks such as Joint Assistance Strategy for Tanzania (JAST) and other mechanisms that ensure linkages and synergies across sectors shall also be monitored and evaluated as part of MKUZA II implementation.

As a guiding framework for the Government and Development Partners in enhancing aid effectiveness for development, implementation of JAST calls for further harmonization and alignment of development processes between Zanzibar and Tanzania Mainland to ensure that development partners work closely with the two Governments so that foreign resources are mobilized and properly allocated in the two parts of the URT. In order to further harmonize and align budgeting and MKUZA II processes, the government will undertake the following measures:

(i)   Harmonization of Strategic Planning and Budgeting Guidelines
(ii)   The Ceiling Committee shall be strengthened to ensure that resources allocation addresses MKUZA II Goals, Objectives and Targets
(iii)   Public Expenditure Review processes shall be strengthened and widened to cover all the sectors
(iv)   Enhance the Civil Society involvement in the monitoring and evaluation of MKUZA II implementation

MKUZA I budgetary process, implementation, monitoring and evaluation was compromised by inadequate or delayed information and data. To address this challenge under MKUZA II, data needs and capacity to implement MKUZA II, periodical training in MDAs and the OCGS on harmonization of statistical data with annual budget cycle will be undertaken. The set up and accountability of the Technical Working Groups of MKUZA monitoring systems remain as important determinant of the harmonization process. In addition, short-term training programmes on poverty analysis will be organized to all staff members in the Departments of Planning and Policy in MDAs, in order to stimulate data needs, analysis and adequate reporting.

5.6   Review of On-going Core Reforms

The centrality of Core Reforms in the implementation of MKUZA II is well recognised. The Government has completed reviews of the following Core Reforms:

   i.   Public Sector Reforms Program;
  ii.   Economic and Public Finance Management
 iii.   Local Government Reforms and;
 iv.   Good Governance;

 In order to ensure effective implementation of the core reforms, the Government will:

(i)   Ensure that the coordination mechanism for core-reforms is strengthened under the Reforms   Coordination Unit
(ii)   Establish and make the reforms task forces operational and;
(iii)   Strengthen partnerships and linkages with development partners through informed reports   and technical assistance.

5.7   Development of Complimentary Strategies and Plans

Capacity development

It is widely recognised that capacity building at all levels is imperative for performance improvement and hence a priority for MKUZA II. The Government considers it crucial to build the human resource base and to improve technical capacities of organizations and institutions in order to improve service delivery.

Efforts will be made to align MKUZA II and efforts to develop human resources Inadequate and unskilled human resource remains one of the critical constraints in the implementation of MKUZA II, sectoral policies, strategies, programmes and projects. Hence government will thrive to build the capacity of human resources, The following priority actions will be taken:

(i)   Formulating a coherent and comprehensive capacity development strategy that is linked to MKUZA II and Zanzibar Growth Strategy
(ii)   Ensuring that capacity is developed in areas of procurement, contracting, program and projects management based on capacity needs assessment
(iii)   Develop specific plans/activities and budgets to address capacity gaps
(iv)   Improving the enabling environment for the growth of the private sector and enhance the position of CSOs as partners of the government in delivering services
(v)   Focusing on capacity development. Systems and procedures to monitor the impact of Technical Assistance on capacity development will be developed and applied

Public – Private Partnership

Given the large resource requirements relative to the budgetary and borrowing constraints the government will encourage r private sector investment and participation in growth and poverty reduction priority areas. These measures will include:

(i)   Review PPP related policies and legal frameworks;
(ii)   Sensitize key Actors on PPP framework in the implementation of MKUZA II;

(iii)   Develop a guiding document for PPP implementation

(iv)   Develop capacity for institutions engaged in PPP and;

(v)   Further promote Public-Private dialogue on partnership.

Communication/Dissemination Strategy

During the implementation of MKUZA II, communication/dissemination of information to stakeholders on progress and challenges emanating from implementation of the strategy is imperative, as it enables the review of interventions. To this effect, the government will review and develop a new communication strategy that will meet the expectations of all stakeholders.   The Communication Strategy will be implemented by both government and NSAs, including the media. It will therefore spell out roles and responsibilities of different Actors to be defined on the basis of their comparative advantage, knowledge, skills and needs.

Tools for mainstreaming of cross-cutting and employment issues

Cross-cutting issues will be properly mainstreamed in all three clusters and in relevant sectors. Their relative contribution to MKUZA II outcomes will guide resource allocation to each one of them; emphasis will be given to employment generation, given that it is   the major link between growth and reduction of poverty. The rights based approaches will be adhered to throughout the implementation of the strategy. The government will also undertake measures to localize MKUZA II and MDGs by promoting Local Economic Development (LED) in every region and district.

5.8 Accountability, Roles and Responsibilities of Key Stakeholders

5.8.1   Collaboration, Accountability and Performance Review

The outcome-based approach adopted in MKUZA II requires   collaboration, inter-linkages and synergies across clusters and sectors in order to the expected outcomes. The key levels of collaboration are at macro, productive, socio-economic and public administration sectors. The key Actors that will implement the strategy include Central Government Ministries and LGAs, independent Departments and Agencies, Private Sector, Civil Society Organizations (CSO) and the Citizenry/Communities. The House of Representatives will play an oversight role over the government in the implementation process. Likewise, Development Partners (DP) will play a supportive role by providing technical and financial assistance to facilitate implementation of MKUZA II.

The cross-cutting issues will be mainstreamed into the MKUZA II clusters by individual sectors with the support of other stakeholders as explained earlier on in the section on mainstreaming crosscutting. Each level of collaboration is described below.

Collaboration at Macro sector

The areas of collaboration include formulation of macro policy frameworks, cross-sectoral issues, coordination and supervision/monitoring of macro variables at national and local levels. Major areas include financial mobilization and management, particularly fiscal and monetary issues at central and local government levels as well as policy coordination. Private sector and Civil Society will be involved through a consultative process on macro policies. The performance of each actor will be assessed throughout the implementation process.

Collaboration in the Productive sectors

The areas of collaboration include public- private partnerships in investments, markets and regulatory mechanisms, communication, employment and cross-cutting issues. Key sectors include: tourism, trade and small and medium enterprises (SMEs). Main actors in this area include the private sector and the government, which will provide an enabling environment in selected areas of production. Communities will take proactive roles in engaging in productive sectors, especially in income generation activities.

Collaboration in Socio-economic sectors

The areas of collaboration in the social sectors (education, health, nutrition, water and sanitation) include providing access to quality services as well as social protection. The actors involved are LGAs, private sector, central government and civil society organizations. The economic sectors include hard and soft infrastructure (roads, transport and communication, energy, water, lands, storage facilities and Information and Communication Technology). The possible areas of collaboration are in investment, joint ventures, regulatory framework, employment, infrastructure and cross cutting issues. Actors include the respective central government ministries and LGAs , the private sector and the community at large.

Collaboration in the Public administration sector

Public administration areas of collaboration include policy guidelines, administration of law, peace, security, protection of human right and stability. The actors include central Government ministries and agencies and LGAs (districts).

5.8.2   Roles and Responsibilities

The importance of the roles of key stakeholders in implementing MKUZA II cannot be over emphasized. The key stakeholders with roles in implementing MKUZA II are:

  (i) The RGoZ, House of Representatives, Ministries, Departments and Agencies;
  (ii) Non State Actors (the Communities/Citizenry, Private sector; Civil Society Organizations) and;
  (iii) Development Partners.

The RGoZ

The main roles and responsibilities of the Government will be on preparing policy guidelines, resources mobilization, coordination of MKUZA II implementation and review, and awareness creation on MKUZA II framework, supervising the its implementation, monitoring and evaluation of MKUZA II, as well as reporting on performance.

Within the government the cabinet has its own mandate and responsibility. As an executive body of the Government, the Cabinet, also known as the Revolutionary Councils, will continue to oversee overall Government functions on MKUZA II implementation. The Cabinet will be informed by the Inter Ministerial Technical Committee (IMTC), composed of all Principal Secretaries. The Cabinet will forward major issues to the HoR for decisions in accordance with the existing laws. The IMTC will be informed by the MKUZA II Technical Committee, a forum which will provide technical inputs to MKUZA II and oversee its implementation.

The House of Representative (HoR)

The House of Representatives will continue to oversee Government business on MKUZA II implementation and other government ministries based on the current structure of Parliamentary select committees. The capacity of the House of Representatives will be reassessed and strengthened by imparting necessary skills through training and awareness raising on selected critical development issues.

Ministries, Departments and Agencies and Local Government Authorities

The Ministry of Finance and Economic Affair, through its MKUZA Secretariat, will be responsible for the overall coordination of MKUZA II. Composed of Members from MDAs, MKUZA Secretariat will coordinate day to day implementation work of MKUZA II guided by MKUZA II Technical Committee. It will also coordinate motoring and evaluation work of MKUZA II, to be assisted by Technical Working Groups (TWGs). Membership to each Cluster Working Group, including the selection of lead sectors, will be determined on the basis of contributions of each cluster and would be finalized following a review of the entire implementation of MKUZA and its Monitoring and Evaluation System. Participation by Non State Actors (including the private sector and CSOs) in the budgeting, implementation and review process will be promoted as will be the involvement of grass roots and sub-district level communities.

Technical Working Groups will gather information on MKUZA II implementation. The MDAs will continue to play a lead role in policy formulation, management of public resources, implementation and monitoring of progress made. In order to improve performance of MDAs, increased participation of non-state actors in policy discussions, budget processes, implementation and monitoring will be encouraged and given more prominence. The MDAs staff would also be provided with better working environments including equipments and accessories to increase their capacity to deliver services. The Government is committed to improve these processes and enable increased participation by all key stakeholders with the objective of promoting transparency and accountability of Government and other Actors to the citizens. The cluster approach will be used as a preferred modality for dialogue. MDAs and LGAs will also:

  i.   Establish and incorporate MKUZA II priorities in the preparation of Medium Term Expenditure and Annual Plans and Budget.
 ii.   Identify detailed priority activities (sectoral and cross -cutting) that will be taken up during the implementation of the MKUZA II.
iii.   Mobilize, allocate and monitor financial resources made available to MKUZA II Actors.
 iv.   Ministry responsible for Local Government will coordinate implementation of programmes at regional and district levels. It will also be responsible for capacity building measures at the local government levels. On the other hand, the ministry will spearhead collection and dissemination of data from grassroots level to the national level (MKUZA Secretariat) and vice versa.
  v.   At the district and Shehia levels, they will plan and implement programmes within their areas of jurisdiction, in collaboration with other actors, including communities and households through participatory process.

Non-Government Actors

The key roles of Non State Actors (NSAs, namely Communities, the private sector, and Civil Society Organisations will be:

i. Communities

Communities will participate in planning, implementation and monitoring community initiatives and activities supported by government and other actors. Communities will also monitor quantity and quality of services delivered to them e.g. through Participatory Service Delivery Assessment (PSDA) and other preferred methods. Actors such as NGOs will develop ways to enable communities hold their leaders, local authorities and central government accountable through awareness raising and increased associational presence at community level.

ii. Private sector

With regard to the private sector ,the government will only concentrate on its core functions of policy formulation, economic management, provision of economic and social infrastructure, and legal and regulatory framework, maintenance of law and order as well as selected areas of public-private sector partnership. Otherwise the private sector will spearhead non-public investment projects/programmes; lead the implementation of the growth strategy, complement RGoZ efforts in Services Provision; complement RGoZ's efforts in human resources development and ensure effective implementation of public private partnership. The factors that hinder the active private sector participation in the economy will be addressed through enabling trade and investment policies and public private partnership (PPP).

iii. Civil Society Organizations

The civil society organizations are key actors in poverty reduction. Their roles and responsibilities will include: building local capacity and empowering communities; participating in monitoring and evaluation at national and community level; mobilizing and enhancing community participation; sensitising the general public (at the grass-roots level) to understand MKUZA and their role in implementing it,   mobilize community resources for poverty reduction and complement RGOZ efforts to deliver social services. CSOs will advocate for accountability of its members and government to the people. CSOs will work closely with the government Ministries and local authorities to ensure that cross-cutting issues are included and implemented in the sectoral, district and sub-district level plans. In order to improve the effectiveness of civil society organizations there is need for collaborative efforts between the government and CSOs to review and strengthen the organizational and management frameworks at national, regional, district and community levels.

iv. Development Partners

Development partners will continue to work closely with key local actors in addressing growth and poverty reduction outcomes. According to the thrust of the Rome and Paris Declarations, Tanzania Assistance Strategy and Joint Assistance Strategy, the Development Partners will use the existing agreed national systems and processes to provide additional financial, technical and other support in the implementation of the poverty reduction strategy geared towards achievement of the Millennium Development Goals. Development Partners will also support the implementation of Core Reforms and facilitate deployment of capacity building initiatives within the poverty reduction framework as well as participating in reviews, monitoring and evaluation of MKUZA.

6.0 CHAPTER VI: COORDINATION, MONITORING AND EVALUATION

6.1 Introduction

This chapter outlines main mechanisms for the Coordination, Monitoring and Evaluation (M&E) of MKUZA II. Coordination between and among various stakeholders in the implementation of MKUZA II is important for the optimal achievement of MKUZA II targets. The MKUZA Monitoring System (MMS) will enable the Government and other stakeholders to link and relate inputs, intermediate outputs, broad outcomes and impact at each relevant level of implementation. The structure, membership, and Terms of Reference for the MMS will be elaborated in a separate document (MKUZA Monitoring Master Plan).

6.2 Coordination

The coordination of MKUZA II implementation shall be through the MKUZA II Secretariat while strategic guidance shall be drawn from the MKUZA–Technical Committee. Regular implementation reports shall be drawn from MDAs through MKUZA II Technical Committee where new measures to strengthen the process of implementation will be made. The Implementation process shall benefit from the good practices of its predecessor and perfect the way the challenges have been addressed. The harmonization of the time frame, structure and the monitoring master plans of MKUZA II and MKUKUTA II shall be used to enhance the exchange of experiences between Zanzibar and Mainland Tanzania.

MKUZA Technical Committee, which is chaired by the Ministry of Finance and Economic Affairs, will continue to undertake the overall coordination of MKUZA II. The Technical Committee will guide the day to day activities through its MKUZA Secretariat. The Secretariat is responsible for facilitating the work of the committee and coordinating activities of Technical Working Groups (TWGs) of the MMS as well as the thematic PER Working Groups. The Budget Department, the Accountant General, the MDAs and the Secretariat will work jointly to ensure that the MDAs annual plans and MTEF are in conformity with the MKUZA II operational targets.

6.2.1 Challenges and Strategies for M&E

General assessment and evaluation of the MKUZA I Monitoring Master Plan indicates that despite of the achievements gained over the past three years with respect to M&E system, the latter fell short in addressing the five M&E performance/evaluation questions -- of relevance, effectiveness, efficiency, impact and sustainability -- which are critical for developing appropriate policies and for effective decision making in managing and influencing MKUZA II and its impact. The main contributing factors to this short fall have been low human capacity for M&E, low incentives for carrying out M&E functions, weak monitoring structures and processes, weak Management Information Systems (MIS) and inadequate Financial Resources. With the increasing demand for evidence-based data/information for decision-making poor systematic data collection, storage, analysis and its full utilization at Shehia, district and MDAs levels could not provide timely and relevant information for that purpose. MKUZA Technical Working Groups (TWGs), particularly Cluster PERs who were at the centre of M&E system, together with the Office of Chief Government Statistician (OCGS), have not been able to perform its duties in its full capacity.

MKUZA II, through its Secretariat and in collaboration with OCGS, will address those challenges by setting up appropriate strategies for M&E that will enable more effective monitoring and

evaluation of MKUZA II progress and propose remedial actions where need be. MKUZA II will focus on four pillars that will promote better management of the strategy, these are:

i. Creating a learning environment

Efforts will be made to establish and strengthen a culture and set of relationships with all those involved in MKUZA II in order to build trust, stimulate critical questioning and innovation and gain commitment and ownership;

ii. Guiding MKUZA II strategy

A strategic perspective will be taken to spearhead MKUZA II towards its goals (impacts) and provide timely reviews of its interventions or even objectives and targets in response to changed circumstances or failure;

iii. Ensuring effective operations

Efforts will be made to improve day to day management and coordination of financial, physical and human resources to ensure the actions and outputs required by the current strategy are being effectively and efficiently achieved and;

iv. Strengthening and establishing core M&E functions of collecting and disseminating information

Proactive measures will be taken to ensure that the systems are in place to provide the information that is needed to guide the strategy, ensure effective operations and encourage learning.

MKUZA I Monitoring Master Plan will be revised to conform to MKUZA II aspirations.

6.2.2   Harmonisation of Strategic Planning and Budgeting Guidelines

Successful implementation of MKUZA II is anchored on how effective and efficient the Budget Department, the MDAs and the Secretariat will work jointly to ensure that the MDAs' annual plans and MTEF are in conformity with the MKUZA II operational targets and indicators. Previous attempts to design and operationalise full-fledged functional electronic tracking systems for budget allocations (Zanzibar Strategic Budget Allocation System, ZBAS) aligned to MKUZA implementation progress (RIMKUZA) failed to operate due the computer bugs/virus, in ZBAS and RIMKUZA. Despite these shortfalls, prompt reviving, rolling out and maintaining those systems would be inevitable for MKUZA II implementation.

6.2.3   The Link between the Sectoral Planning and MMMP

The alignment of sectoral planning, District Plans and MMMP is another core function of MKUZA II M&E Framework. In this scenario, well alignment of sector strategies to MKUZA II intervention packages, which will be incorporated in MTEF, would be the prerequisite for matching of policy priorities and budget allocations in the context of the annual budget process and incorporating the emerging policy changes. Tracking of budgets and the allocation of the resources with respect to the MDAs needs is a challenging action unless a more effective system is designed. This problem will be addressed in MKUZA II by reviving Zanzibar Budget Allocation System (ZBAS), which was initially designed for this purpose but failed to be rolled out in MDAs due to some computer bugs.

The transparency requirements under MTEF that allows easy measurement of government's commitment to MTEF will be deployed for example in publishing the Economic and Fiscal Update, Fiscal Framework Statement, Budget Policy Statement and Corporate Plans of Ministries in specified periods.

The MDAs will revise their three-year strategic plans, which were developed in 2008, to reflect the intervention packages stipulated in MKUZA II. Furthermore, all reports from MDAs would be based on indicators agreed upon in MKUZA II.

6.2.4 The Requirements for Human Resource Capacity for M&E

The human resource capacity for M&E is still limited in MDAs, OCGS, districts, and Shehias, due to shortage of staff, most with inadequate skills and knowledge on M&E. As such, insufficient or lack of routine data collection, storage, analysis and reporting pose a great challenge to MKUZA II monitoring system. Since the successful implementation of MKUZA requires more organized M&E functions, high priority will be on capacity building at OCGS and MDAs that would include imparting knowledge on managing for impact with emphasis on result-based management, data collection methodologies, secondary level analysis, report writing skills, ICT, policy analysis, among others. The recruitment of new M&E staff in Shehias, districts and MDAs will be undertaken regularly and remuneration strategies to retain such staff will be taken.

6.2.5 The Requirement for Effective M&E System

MKUZA M&E system aspires to establish M&E units that are effective in monitoring and evaluating the performance, proposing remedial measures needed to attain the intended goals and outcomes of MKUZA II. An equally important player is the OCGS, responsible for centralized storage database of information generated from different actors for decision-making and, therefore, improving the interface between MDAs and OCGS.

Within MDAs, the Departments of Policy and Planning are the strategic locations for M&E Units; yet most MDAs lack such units and the existing ones are ineffective in conducting M&E functions. This gap consequently contributes to insufficient monitoring of the implementation progress through the systematic routine data collection, management, analysing and reporting. The information generated from routine data is largely needed to contribute to evidence-based evaluation of the implementation progress and the achievements of the outcomes and goals through e.g. surveys, census, HBS, MDG, PSDA, as well as in reporting MKUZA II annual implementation progress. On this front, more organized M&E functions would be required to enable strengthening of the existing M&E units and establishing new ones in places where they do not exist. MKUZA Secretariat, in collaboration with OCGS, will take this responsibility from the onset in order to address this outstanding gap.

On the other hand, interventions are needed to identify key data collectors and conduct sensitization workshops on data collection and analysis; provide a data bank and a clear system of harmonizing data; strengthen the OCGS as a centralized storage unit of information, including acceleration of ease accessibility of the generated information by different stakeholders for decision-making.

Incentives for carrying out M&E activities have been provided during the provision of specific information needs e.g. surveys, census and in reporting the progress on MKUZA annual implementation. However, no regular scheme is in place to motivate staff and stakeholders to carry out M&E activities in Shehias, districts and MDAs. Incentives like the provision of adequate and skilled personnel for M&E provision of the recommended 5-10% of the total budget as finances for

M&E, good offices and equipment, reliable transport and incentives for reporting writing will be considered among others as intermediate and long-term strategies for MKUZA M&E system to excel.

The multi-stage M&E framework adopted by MKUZA II is a challenge for full-fledged M&E system as some of the necessary structures and processes for M&E are not in place leave alone their inadequacy. MKUZA II will address those challenges by ensuring that: M&E roles and responsibilities are clearly defined in job descriptions and adhered to; that the M&E responsibilities within the system are integrated and complementary; decision making processes are clearly linked to findings from the M&E system and are transparent, unambiguous, and functional and; decision making processes are a shared responsibility between MDAs and all the MKUZA II key stakeholders.

A functional M&E system for MKUZA II will require a strong MIS for inputting, collating and organizing data needed by stakeholders for that would provide selective data and reports to MKUZA II stakeholders, to assist in monitoring purposes. The development of ZBAS and the establishment of MIS in MDAs are attempts meant to provide such information. Strategies to improve MIS will include:

   i.   Establishment of database that are clearly linked to the M&E system and centralised in the OCGS and which are user-friendly and are accessible to stakeholders;
  ii.   Enhancing regular communication and feedback with different stakeholders, with special attention on cluster PERs; MDAs and Districts should establish close collaboration with the OCGS - in line with the Statistical Act No. 9 of 2007.

During MKUZA I M&E functions at Shehia, district and MDAs were affected by inadequate resources allocated for routine data collection, analysis and for report writing. In MKUZA II, financial improvements will be made in order to provide for a separate budget line for M&E.

Concerted efforts will be directed towards strengthening Local Government Authorities to enable them provide the necessary platforms for communities to effectively participate and contribute to the achievement of MKUZA goals and outcomes. This will not only stimulate proactive and critical reflections by communities during the implementation processes but would also enrich monitoring and feedback processes within the MKUZA II framework.

6.2.6   Interventions for Strengthening the Reporting and Analytical Capacity

The reporting system under MKUZA I was   gradually improved. However, due to increasing demands for timely and quality implementation reports MKUZA I M&E system experienced shortage of skilled staff coupled with low motivation, and hence witnessed sub-standard reports in the OCGS, Shehias, districts and MDAs.

MDAs and Districts will continue to produce annual and other periodical reports on performance appraisals of MKUZA II. These reports are coordinated under the Department of National Planning, Sector Development and Poverty Reduction in MOFEA. The driving force for this process is the placement of strong MIS in each MDA, district and community levels.

Although there are some gradual improvements in the quality of MKUZA AIR its preparation is time consuming due to inadequate documentation in MDAs and information available is sometimes fragmented and unrealistic. This challenge will be addressed in MKUZA II by facilitating the

development of Report on Implementation of MKUZA (RIMKUZA) system, which was adopted three years ago to capture MKUZA implementation progress. The RIMKUZA will be backed up by documentation and information centres in MDAs. TWGs, particularly the cluster-based PERs, will be made more proactive and be accountable for documenting and reporting on most significant success and challenges attributed by MKUZA II. This information so generated will be used in MKUZA AIR, PSDA, impact assessment and other periodical reports. Likewise, MKUZA Secretariat will spearhead the timely preparation of user-friendly feedback reports to all MKUZA II stakeholders. For broader outreach, mass media - including documentaries on TV, radio and newspapers - will be used as a means to reach the broader audience.

The Information Communication Technology (ICT) has been growing gradually. The strategic use of ICT in data coordination and quality control and improving access and dissemination will provide synergetic effect in increasing the use of ICT in strategic communication on MKUZA II performance. This objective will be met by placing ICT on the MKUZA M&E system agenda e.g. by: strengthening the use of email and internet in MDAs and districts; taking the advantage of community-wide high mobile penetration to communicate data and to assess up-to-date key stakeholders' information needs from the central database.

Capacity building and strategic involvement of higher learning and research institutions would be addressed as a means to stimulate demand for statistical data as well as enhancing internal capacity that will eventually fill the missing link between data collection, analysis and interpretation for policy purposes. Institutions capable of providing technical support like REPOA, ESRF and UDSM will be consulted and the knowledge and skill generated would gradually be transferred to all staff engaged in the MKUZA II process.

Short-term operational support for procurement and outsourcing of technical assistance would be sought out, where appropriate, with strong elements of capacity building to MKUZA stakeholders, including institutions like the OCGS.

6.2.7   Monitoring and Evaluation of MKUZA II

The MKUZA Monitoring System is been managed by MKUZA Technical Committee (MTC) through MKUZA Secretariat and supported by six TWGs. The objective of MKUZA Monitoring System is to support the successful implementation of MKUZA II by providing good quality and timely reports that promote efficient allocation and utilization of resources for the achievement of MKUZA II targets and outcomes. Members to the TWGs come from all Ministries, Departments and Agencies, academic institutions, civil society, Development Partners and the private sector. The set up of the TWGs is as follows:

  i.   The Census, Surveys, Routine Data TWG;
 ii.   The Research, Analysis and Advisory (RAATWG) TWG;
iii.   The Communications TWG; and

Three cluster-based PER TWGs:

  i.   PER I Cluster: Growth and Reduction of Income of Poverty
 ii.   PER II Cluster: Social Services and Well-being
iii.   PER III Cluster: Good Governance and National Unity

Indicators for monitoring the progress of MKUZA II were developed during the first phase of MKUZA intervention, which included core indicators for each cluster as well as additional sector specific indicators provided by other relevant stakeholders. Although an attempt was made by MDAs to align their indicators with MKUZA indicators and targets through their Strategic Plans, this was inadequate to provide the relevant information on progress towards achieving MKUZA goals. This called for MKUZA Secretariat to carry out a coordinated process of harmonizing MKUZA and Sectoral level indicators in respect of time frame in achieving set targets; examine the baseline year and terminal year with a careful look at the quality of indicators, their rationale and availability of data. As a result, the number of monitor-able indicators was reduced to a manageable size of 78 indicators: i.e. 29, 25 and 24 indicators for cluster I, II and III respectively. The Participatory Service Delivery Assessment (PSDA) is adopted in the MKUZA II as a feedback mechanism from the beneficiaries of the services. In a bid to accommodate the voices of the poor in the implementation of the MKUZA II, PSDA has been, and will be, carried out annually to evaluate service delivery.

6.2.8 Monitoring of the MKUZA II at Various Levels

District Level

At the District level, the District Administrative Office is the Secretariat to the District MKUZA team, which includes the District Planning Committee. The other members are the Members of the House of Representatives, MPs and Councillors in the District. At this level the M&E system is being coordinated and managed by the District Administrative Office who in turn reports to the Ministry of Regional Administration and Special Departments.

The District Planning Committee will plan and implement its activities in conformity with the MKUZA II and its M&E system. These activities will define inputs, outputs and outcomes that would be monitored and evaluated. The District will determine its indicators relevant to its development targets and activities in addition to those prepared for the three clusters at the National level.

The National Level

At the national policy level there are two key institutions, namely the Inter-Ministerial Technical Committee (IMTC) and the Cabinet. The IMTC is composed of all Principal Secretaries in Government Ministries and is chaired by the Chief Secretary. The Principal Secretaries where the TWGs are housed as well as the Principal Secretary of MOFEA where the Secretariat is housed are the links between MKUZA II monitoring and the IMTC. The Terms of Reference for IMTC is to develop appropriate policies/strategies based on the findings of the MKUZA II M&E and inform the Cabinet on the progress of the MKUZA II.

The Cabinet

The Cabinet under the chairmanship of the President of the Revolutionary Government of Zanzibar who is also the Chairman of the Revolutionary Council receives feedback reports on MKUZA II issues from the IMTC through the Chief Secretary for appropriate policy decisions.

The House of Representatives (HoR)

Also, the House of Representatives possesses the legal mandatory of assessing and accepting the effectiveness and appropriateness of MKUZA II performance through annual implementation of

planning and budgeting of the MDAs. The House of Representatives will scrutinize MDAs planning and budgeting considering the alignment of MKUZA II operational targets. Attempts should be taken to strengthen House of Representatives capacity in conducting its functions in conformity with MKUZA II objectives

Sources of Information

Within RGoZ, there are four levels at which planning and decision-making and hence information generation take place. These are the National, MDAs, District and Shehia. At the national level the sources of information include surveys and censuses managed by the Office of the Chief Government Statistician, OCGS. The data produced is usually at national level and disaggregated to sub-national levels, by gender, rural/urban and so on. At the MDA the sources of data are the surveys and censuses from the OCGS disaggregated to that level, the official statistics collected by these institutions as part of their routine work (routine data) as well as their annual plans and reports, which are reported annually or bi-annual. At districts, the sources of data are the surveys and censuses from the OCGS disaggregated to that level, Community Based Management Information System (CBMIS) and district routine data systems. Likewise at the Shehia, the data sources include the above together with the Shehia register. The other equally important source of information is routine data from MDAs.

6.2.9   Key Outputs of the MKUZA II Monitoring System

The key outputs from the MKUZA II M&E include sector expenditure reviews based on the three clusters, National Surveys and MKUZA II Annual Implementation Reports where trends and results are detailed and discussed. PSDA is being institutionalized in the MKUZA II and is reviewed annually. The results will aid the sectors to be better providers of services that are really needed by the people. There are three important reports that are produced by the MKUZA Secretary, these are: MKUZA Annual Implementation Report (MKUZA AIR), Zanzibar Human Development Report (HDR) and Zanzibar Millennium Development Goal (MDG) Report. Other reports, which are produced by OCGS under Census and Surveys TWG, are: Zanzibar Economic Survey, which shows the economic status of the country; Quarterly macroeconomic performance, which analyses aggregated indicators such as GDP, unemployment rates and price indices to understand how the whole economy evolves.

Tanzania Socio Economic Database (TSED) has been adopted as the standard repository of the MKUZA Monitoring System data. Dataset from TSED are to be used by a wider range of stakeholders for planning and policy formulation. The dataset would be updated continuously whenever new information and data are available.

7.0   CHAPTER VII: RESOURCE MOBILIZATION AND FINANCING FRAMEWORK

7.1   Background

MKUZA II will guide all development activities in Zanzibar for the period 2010/11–2015/16. The challenge to fully fund MKUZA II will be met from a mix of domestic revenues and external financing. The credibility of MKUZA II largely hinges on the extent to which resources to fund it can be realistically available.

This chapter lays out the principles upon which resources will be mobilized for MKUZA II. This covers the current projection of resources, both external and domestic, that are likely to be available for the implementation of MKUZA II, accounting for other expenditures and commitments that need to be honoured; a discussion of the costing of MKUZA II and the funding gap that must be filled for its comprehensive implementation; the plan for filling these funding gaps; and finally the risk factors that may threaten mobilisation of adequate resources.

7.2   Principles for Resource Mobilization

A study commissioned by the RGoZ in February 2010, showed that MKUZA I was financed primarily from domestic resources; two third of the resources were mobilized domestically for this purpose. MKUZA I was however not adequately funded, which means that a strategy to further diversify sources of funding for MKUZA II is imperative. Resources for MKUZA II will be drawn from an array of domestic and foreign sources. It is important to ensure that these resources are drawn in a manner that allows maximization of resources subject to the constraint that they should only be accessed on sustainable and preferential grounds.

Resource mobilization and financing must abide by the basic principle that the need for increased resources should not outweigh the need to contract or collect resources on the best possible terms and practices. Occasionally trade-offs may be considered to fill specific funding gaps, but these tradeoffs will be considered very carefully, according to the principles laid out here.

Overall, the financing framework for this national strategy is built around allocations from government own revenue, loans and grants; private sector investment (both domestic and foreign); communities contributions, and contributions from development partners. The resources for financing this strategy will be mobilized in several ways, including through efforts to scale up domestic revenue mobilization, borrowing internationally on concessional and commercial terms (while ensuring external debt sustainability), domestic borrowing, use of PPP arrangements, investing in land to facilitate private sector investment in property development and community contributions.

7.3   Economic Trends and budgetary assumptions: 2011-2015

The following is a summary of key assumptions regarding the budgetary situation for MKUZA II:

   i.   The domestic economy will gradually recover   and normalise from the impact of global oil, food, financial and economic crisis;
   ii.   Macroeconomic stability is well maintained largely by URT Government and socio-economic development will continue to be improved;

iii.	Domestic revenue collection as percentage of GDP will be enhanced from 18.5% in 2008/9 to 22% by 2015; inflation rate reduced from 8.8% in 2009 and maintained to 5% by 2015.
iv.	Supportive policies to achieve low inflation i.e. budget deficit from 9.2% of GDP in 2007/08 to 8% by 2015, a narrowing interest rate spread, and increased credit to the private sector;
v.	Zanzibar Export Strategy will be implemented;
vi.	Increased impetus in the implementation of MKUZA II and resource allocation in areas that have rapid multiplier effects in the economy;
vii.	Tourism Master Plan and related initiative will be fully implemented;
viii.	Increased progress in private sector development, including further improvements in the business environment;
ix.	Political stability will be maintained, especially after the general election in 2010; and
x.	Strengthened monitoring and evaluation, to ensure effective use of public resources.

The Zanzibar 5-year economic framework is crafted in the context of a continuation of sound policies and structural reforms, taking into account the unfavourable external environment that still hurt the global economy. The global economy is projected to recover with a sharp pickup in growth at 4.2 percent in 2010 from a contraction of 1.1 percent in 2009 and a further growth rate to 4.5 percent by 2014.

As a result of global economic recovery, the Zanzibar economic growth is envisaged to recover above its former trajectory path in the medium term 2010 - 2015. Table 7.1 below provides the trend of real GDP growth starts with a gradual rebound of 7.3 percent in 2010/11 from 6.7 percent in 2009/10, and thereafter to 7.9 percent in 2011/12, 8.7 percent in 2012/13, 9.5 percent in 2013/14 and further rise to 10.3 percent by 2014/15.

Table 7.1. Macroeconomic assumptions 2010 -2015

Indicator	Unit	Actual	Estimate	Projections			Projections	
		2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15
GDP (Market prices)	Tshs Billions	748.1	878.40	1016.04	1173.05	1355.44	1568.80	1818.64
GDP growth rate (current)	%	28	18	16	15	16	16	16
GDP constant (2001) prices	Tshs Billions	339.2	361.93	388.35	419.03	455.48	498.75	550.12
GDP Growth rate (constant)	%	5.4	6.7	7.3	7.9	8.7	9.5	10.3
Exports growth	7.8	7.8	7.8	1.16	1.16	1.16	1.16	1.16
Imports growth	6.9	6.9	6.9	1.10	1.10	1.10	1.10	1.10
Inflation Rate	%	20.6	8.9	7.8	7.0	6.3	5.7	5.1
Domestic Revenue			142.39	171.68	202.68	241.29	306.77	382.49
Domestic Revenue/GDP			16.2%	16.9%	17.3%	17.8%	19.6%	21.0%
Budget Deficit before Grants			240.11	255.45	264.71	274.72	286.62	298.98

			27.3%	25.1%	22.6%	20.3%	18.3%	16.4%
Budget Deficit before Grants/GDP			27.3%	25.1%	22.6%	20.3%	18.3%	16.4%
Budget Deficit after Grants			93.02	121.23	121.08	123.91	127.07	130.94
Budget deficit after Grants/GDP			10.6%	11.9%	10.3%	9.1%	8.1%	7.2%

Source: Budget Framework 2010/11 – 2012/13 and other estimates

7.4   Total Financial Requirements (Expenditure)

The required funds for financing MKUZA II over the period of 2010 – 2015 are estimated in Table 7.2. The total expenditure is derived from the projected nominal GDP, revenue efforts and deficit. The total amount required from the public sector budget is Tshs. 3,005.11 billion over the period of 5 years. The domestic revenue to be generated is estimated at Tshs. 1,294.94 billion, which is only 43 percent of the estimated expenditure. Therefore, the funding gap is 57 percent before grants and financing. The expected grants to be mobilized for reducing the funding gap amounts to Tshs. 756.25 billion. This is about 25 percent of the total estimated resource requirement. The estimated grants together with domestic revenue cover about 68 percent of the total resource requirement. The other sources of financing namely: domestic borrowing, foreign loans and community contributions will only cover about 24 percent out of 32 percent of the gap leaving about 8 percent uncovered. For annual financing details see Table 7.2 below. It is important to notice that all these estimates are based on recent trends of Government budget and a proper and accurate costing of the strategy will be prepared along with launching of MKUZA II.

Table 7.2. Estimated Resource Requirements 2010/11 – 2014/15 in Tshs. Billion

	2010/11	2011/12	2012/13	2013/14	2014/15	Total
Total Required - Financing (Expenditure)	444.64	505.62	579.97	693.40	781.48	3005.11
Domestic Revenue	171.69	202.68	231.30	306.78	382.49	1294.94
Grants	134.22	143.63	150.81	159.55	168.04	756.25
Funding Gap after grants	138.73	159.31	197.86	227.07	230.95	953.92
Financing:						
T-bills (Domestic Borrowing)	3.00	2.90	1.50	3.20	2.70	13.30
Foreign Loans	132.79	135.43	146.40	147.72	151.41	713.76
Private Sector[58]	0.00	0.00	0.00	0.00	0.00	0.00
Community Contribution	4.80	4.80	4.80	4.80	4.80	24.00
Funding Gap	5.94	23.88	51.46	79.35	79.54	240.16
Funding Gap as % of total Expenditure	**1%**	**5%**	**9%**	**11%**	**10%**	**8%**

Source: CEMB, MOFEA

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[58] Private sector funding will be known after completion of the MKUZA II Costing exercise and identification of projects to be executed through PPP. As a result, the funding gap will further narrow.

The contribution of the private sector is in terms of domestic revenue and contribution in terms of investment, which is also implied in GDP growth rate. However, the private sector contribution in terms of financing goes beyond this resource estimates.

7.5   Filling the Funding Gap

To fill the funding gap, the Department of External Finance, together with MKUZA Secretariat and Sector Ministries will undertake the following:

i.   Further explore increases in Government domestic revenue (given growth) through improvement in tax administration and other tax policy measures;
ii.   Finance by borrowing internationally, on commercial terms, and also concessional terms, from both bilateral and multilateral sources;
iii.   Finance from the private sector through Public-Private Partnerships (PPPs) as an alternative source for financing long-term development expenditure especially public infrastructures;
iv.   Under the supervision of MKUZA Secretariat, sector ministries will re-prioritise their activities and;
v.   The re-prioritized activities can be used to form either suggested basket funds or stand-alone projects.

Re-prioritized activities will be in line with available financial resources. Only donor funding that contributes to these baskets or projects will be considered, except where they meet emergency needs. RGoZ will produce a more detailed aid strategy to implement JAST in Zanzibar, which will put these and other rules for ensuring that all aid contracted is aligned to MKUZA II in more detail and better context.

7.6   Prioritization Process

Step 1 in filling the funding gap is to prioritize the activities that conform to the MKUZA II. The consultant's report on MKUZA I financing for Pro-poor Activities emphasized that a robust prioritization was not undertaken, a situation that should be rectified for MKUZA II. Prioritization must be undertaken for the whole life span of MKUZA II as well as in each year, once the precise resource envelope is agreed. This will allow a rational allocation of scarce resources against the activities under the plan, and may also facilitate greater resource mobilization. A strong prioritization would allow Government to present a stronger case for increased donor funding for MKUZA II. It would also ensure a rational allocation of funds across sectors, avoiding the situation witnessed with MKUZA I, where Cluster 1, on Growth and the Reduction of Income Poverty, was particularly under-resourced, according to the consultants' report on financing for MKUZA I.

The prioritization process will be two-tiered, where each sector will be required to prioritize their own contribution to MKUZA, and then a central prioritization across sectors will be done.

7.7   Risk Factors

The funding of MKUZA II and the foregoing analysis may be threatened by a number of factors. It is contingent on at least four factors: the MKUZA II process itself, domestic resource collection,

domestic recurrent expenditures, mobilization of aid from foreign sources and the pace of implementing core reforms. The key risk factors associated with each are summarized here.

7.8 Domestic Revenue

Tax and non-tax revenues are the most common sources of financing expenditure within Government. They allow the greatest flexibility of resources, and of course are under complete Government ownership. Policy on taxation and non tax revenue will be determined taking into account of MKUZA II funding requirements.

However, since few donors will directly fund recurrent expenditure (except through General Budget Support), recurrent expenditures such as salaries, will have first call on domestic revenues. Only revenues over and above the level of recurrent expenditure will be available for MKUZA II development expenditure. Domestic borrowing may be driven in part by the needs for MKUZA II, but shall conform to strict limits and conditions to ensure that the debt load of Government remains sustainable. Though it offers flexibility and ownership of the resource base, domestic borrowing is the least preferred modality for financing MKUZA II, since it also accrues the highest costs, due to high domestic interest rates and the lack of formal restraints to borrowing.

7.9 External Resources

The guiding principles of the Joint Assistance Strategy for Tanzania (JAST), the Paris Declaration and Accra Agenda for Action, as well as the forthcoming strategy papers on aid mobilization and utilization for Zanzibar, will continue to form the primary basis for contracting aid to Zanzibar. Only support aligned to MKUZA II will be contracted by RGoZ. The level of alignment will be determined by the Department for External Finance together with the MKUZA Secretariat. The most preferred method for receiving new aid, subject to some reforms, is likely to be through the General Budget Support, since this gives the Government the greatest flexibility in its use. RGoZ preference is for GBS to be determined by a needs-based analysis rather than the current formula based approach used between RGoZ and the URT Government. Any basket funds contracted by RGoZ will all be for cluster II of l MKUZA II or for a number of sectors within that cluster. Single-sector baskets will be discouraged except under exceptional circumstances where the volume of support required dictates an individual basket.

Project funding is likely to remain a considerable proportion of donor funding. Projects that have already commenced will be seen through to their logical conclusion. However, all new projects signed by RGoZ will be required to be fully aligned to MKUZA II. This will require that all DEF, MKUZA secretariat and the sector Ministry involved to provide some proof that the project contributes to a specific MKUZA target.

7.10 Alternative Funding Arrangements

Where possible, RGoZ will encourage the use of alternative funding arrangements, such as Private-Public Partnerships (PPPs) and Community Contributions. Community Contributions are fees or in-kind contributions made to project implementers or other institutions. PPPs involve a contractual arrangement between private organizations and the public sector for the provision of specific services. PPPs require particularly close analysis before they become operative. Given that resources for MKUZA II implementation are scarce, PPPs should only be contemplated when they

are either likely to generate better services for the same   cost or where they are likely to reduce the cost of the providing the service or implementing the activity concerned. The use of these modalities will depend on the specific activities under consideration. Not all activities under MKUZA II will be appropriate for one of these modalities, but each activity planned by a sector under MKUZA II should be assessed for its suitability for alternative funding sources.

Community Contributions are more likely to be possible in social services, particularly in education where for example fees are paid to schools and in kind contributions are made in construction of school buildings, while PPPs are more suitable for infrastructure projects. For Community Contribution projects, one approach to consider is to extract contributions from the entire community. For example, for a schools project, fees may be paid by those families with pupils attending schools, and a different fee can be used for even those families who do not have children in school.   Priority in planning and resource mobilization will be given to projects that can realistically source the majority of their funds in this manner. Guidelines for PPPs and Community Contribution projects will be produced by RGoZ, either through a team of staff from the MKUZA Secretariat, Budget Department and Department for External Finance or through the use of external consultants.

MKUZA II Process

If the MKUZA II process does not produce a prioritized set of activities to be undertaken under the MKUZA framework, it will be very difficult to assign funding to different activities; thus a rational reduction of the funding gap will be hampered. The MKUZA II process must maintain development partner confidence, since without this, funding for unfunded activities or under-funded clusters may not be readily forthcoming. Implementation bottlenecks may slow down the flow of resources and / or lead to them being reallocated.

Domestic Revenue Collection

If expected domestic resources fall for any reason (for example if VAT receipts fall due to another electricity incident) the funding gap for MKUZA II will widen, and possibly beyond the ability of development partners to bridge it. If debt is used to finance MKUZA II there is a chance that the cost of servicing debt will outweigh the value of closing the funding gap it affords. This should be avoided through careful analysis of all credit market operations.

Domestic Recurrent Expenditures

If these rise for any reason, the available funding for MKUZA II development activities will fall correspondingly. This is a particular risk for major emergencies such as the recent power crisis, since these cause very large changes in recurrent and emergency expenditures.

Mobilization of External Finance

If donors are not confident in the robustness of MKUZA II and its associated sector / cluster strategies, then mobilization of external finance for MKUZA II will be difficult. Donors may be reluctant to use the aid modalities proposed by RGoZ, particularly flexible basket funds. There is a risk that this reluctance, unless overcome, may lead to RGoZ contracting sub-optimal grants or loans.

Predictability of Resources

Past experience suggests that donor funds are not very predictable. According to the consultant's report on funding for MKUZA I, the percentage of expected foreign funds that were actually disbursed between 2006/07 and 2008/09 never exceeded 41 percent and for 2007/08 it was just 27 percent. Unpredictable funds compromise the efficient and effective implementation of MKUZA. Actual Government expenditure on MKUZA I was also found to be well short of the budgeted volume. In the same period, the aforementioned report suggests the volume of spent funds against those budgeted ranged between 67 percent and 83 percent. Again this demonstrates a failure to maximize the use of available resources.

These issues may also reflect a low absorptive capacity for funds. Low absorption issue will require more in-depth study. It is possible that capacity building within Government is required before more funds can be absorbed and utilized for MKUZA II implementation.

ANNEX: CLUSTER MATRICES

This appendix below presents three clusters of the strategy namely Growth and Reduction of Income Poverty (Cluster I); Wellbeing and Social Services (Cluster II); and Governance and National Unity (Cluster III). Each of the three clusters consist the broad outcomes, operational targets, core cluster strategies, the intervention packages focusing on strategic actions to address the challenges raised as well as the key Actors responsible for implementation of strategies and the interventions.

CLUSTER I: GROWTH AND REDUCTION OF INCOME POVERTY
BROAD OUTCOME 1: ACHIEVED AND SUSTAINED EQUITABLE PRO-POOR GROWTH

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
GOAL 1.1: CREATE AN ENABLING ENVIRONMENT FOR GROWTH			
1.1.1 Stable macroeconomic environment achieved and maintained by 2015 (a) Increase domestic revenue collection as percentage of GDP from 15 % in 2008/09 to 22 % in 2015 (based on the current TRA cost of revenue collection) (b) Budget deficit reduced from 9.2% of GDP in 2007/08 to 8% of GDP by 2015	1.1.1.1 Pursue prudent fiscal policies and improvement in revenue collection	▪ Strengthen the institutional and technical capacity of the fiscal policy unit ▪ Finalize the development of revenue forecasting model ▪ Review and implement ZRB's and TRA's corporate plans. ▪ Enhance effectiveness and efficiency on revenue collection (e.g. improved fiscal administration, non-tax revenue collection and submission, implementation of recommendations arising from revenue related studies etc). ▪ Improve mechanism for budget allocation to MDAs ▪ Strengthen human resource base and business processes for the purpose of integrating human resource and payroll system	MOFEA, OCGS, MoRASD, ZRB, TRA, BoT, DPs, Private Sector, HLIs
(c) Inflation rate reduced from 8.9 % in 2009 and maintained to 5 % by 2015	1.1.1.2 Strengthen union financial matters related to monetary policy	▪ Develop human capacity of economic management & budget department of MOFEA on monetary policy issues ▪ Undertake impact analysis on exchange rate to Zanzibar economy and implement recommendations ▪ Ensure effective participation in the formulation of monetary policies with Union Government. ▪ Ensure that BoT identifies and implement specific measures to control inflation in Zanzibar ▪ Conduct study on impact of monetary and fiscal policy in Zanzibar and implement the recommendations	MOFEA, Private Sector, URT, BoT, OCGS, HLIs
	1.1.1.3 Improve macroeconomic indicators	▪ Develop a macroeconomic model and improve the macroeconomic framework and requisite skills in modelling and forecasting. ▪ Improve socio-economic data collection system and analysis.	MOFEA, OCGS, BoT

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Assess economic performance of key production sectors	
	1.1.1.4 Plan and implement measures to control inflation	▪ Address supply constraints of food and other goods and services. ▪ Review, update and analyze CPI basket regularly ▪ Develop competition policy	MOFEA, OCGS, BoT, MALE, MTTI, Private sector, TRA, ZRB
1.1.2 Governance on Financial Management improved by 2015 (a) A comprehensive PFMRP in place by 2011 (b) Analysis of public enterprise performance completed by 2012 (c) Aid effectiveness improved by 2015	1.1.2.1 Enhance financial planning and budget execution	▪ Prepare a comprehensive cost plans consistent with the MKUZA II. ▪ Strengthen PER/MTEF processes. ▪ Establish gender focused systematic service delivery and budget performance review. ▪ Ensure comprehensiveness and transparency of the budget process taking into account gender budgeting tool. ▪ Develop gender budget performance indicators. ▪ Develop mechanism for more consultative and gender inclusive planning process. ▪ Improve capacity of Budget and Planning Committees at MDAs. ▪ Introduce and implement stricter commitments on expenditure control system. ▪ Improve GFS and CoFoG classification system. ▪ Finalize and operationalise ZBAS and RIMKUZA. ▪ Regularize undertaking of PEFA and implement its recommendations. ▪ Design and implement mechanism for monitoring budget effectiveness and impact ▪ Conduct awareness and enforce implementation of Public Finance Management Reform and Procurement Act of 2005	MOFEA, MDAs, Private sector, DPs
	1.1.2.2 Strengthen public enterprise management	▪ Facilitate development of functional interrelation among the public enterprises. ▪ Finalize analysis of performance of public enterprises and implement recommendations. ▪ Strengthen oversight bodies overseeing public enterprises and management capacity of public	MOFEA, Public Enterprises, OCAG, TRA, ZRB

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		enterprise	
	1.1.2.3 Strengthen aid coordination for aid effectiveness	▪ Develop aid strategy for Zanzibar ▪ Enhance aid predictability and follow ups actions of commitment in line with Paris Declaration, Accra Agenda for Action and JAST by both RGoZ and DPs. ▪ Implement the Aid Management Platform (AMP) ▪ Strengthen financial management system to ensure aid effectiveness ▪ Strengthen aid coordination committee ▪ Introduce Zanzibar/sector specific basket funding mechanism ▪ Strengthen provision of annual food balance sheet report	MOFEA, MDAs, NGOs, CBOs, BoT, Private Sector, URT
	1.1.2.4 Strengthen and develop an efficient and effective public debt management system	▪ Strengthen debt coordination and management capacity at MOFEA ▪ Build capacity on debt contracting and sustainability analysis ▪ Build and regularly update debt databases (profile) ▪ Review of guarantee system of public corporation debt in the context of the Government debt management policy. ▪ Ensure regular auditing of contingent liabilities and inter-corporation debt.	MOFEA, MOFEA (Mainland), BoT
	1.1.2.5 Strengthen Government accounting, financial reporting and use of information technology	▪ Enforce compliance of Financial Accountability (Public Finance Act) provisions and sanction for non-compliance of financial regulations. ▪ Develop human capital for financial management ▪ Improve financial reporting mechanism ▪ Promote use of accounting package in the accounting system by adopting appropriate accounting standards from those established by the International Federation of Accountants ▪ Strengthen IFMS operation for the purpose of improving management of public accounts ▪ Develop and implement internal audit strategy to enhance efficiency of internal auditing	MOFEA, MDAs, AG Chamber, DPs.

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	1.1.2.6 Enhance public sector auditing	▪ Strengthen capacity of Office of Controller and Auditor General as well as the internal audit section. ▪ Link Internal audit functions with External Audit ▪ Strengthen capacity of internal audit section.	MOFEA, OCAG, DPs, MDAs
1.1.3 Adequate, sustainable, high quality, efficient and cost effective ICT provided by 2015 (a) Zanzibar ICT submarine cable laid down with the electric submarine cable completed by 2013 (b) By 2015, some tertiary learning institutions, high schools and other major productive sectors are connected to ICT backbone	1.1.3.1 Develop ICT legal and institutional framework	▪ Create an institution mandated to coordinate ICT ▪ Formulate and implement ICT policy	MOCT, MOFEA, MoICS, MJCA
	1.1.3.2 Enhance the use of ICT in all sectors	▪ Connect Zanzibar to ICT submarine cable and construct and operationalise national ICT back born. ▪ Promote the use of ICT in productive and service sectors ▪ Strengthen human capacity on ICT in all sectors ▪ Connect higher learning institutions and high schools with ICT backbone	MTTI, MOEVT, MOCT, MOFEA, MOCAGG, MoICS, MDAs, Private Sector
1.1.4 Urban and rural roads improved by 2015 (a) 33 km of urban entry roads rehabilitated by 2015 (b) Secondary economic roads (rural roads) and access roads of 284 km in Unguja and 167 km in Pemba constructed by 2015 (c) Road accidents decreased from 647 in 2009 to 200 in 2015	1.1.4.1 Ensure provision of effective Road infrastructure that will facilitate safety and economic growth as stipulated in the transport master plan	▪ Operationalise institutional reform in transport sector as stipulated in the master plan ▪ Rehabilitate and maintain urban entry roads ▪ Expand urban entry roads into double carriages to combat congestion ▪ Introduce bus lanes and pedestrian pavements in all urban entry roads ▪ Construct secondary economic roads (feeder roads) both in Unguja and Pemba. ▪ Maintain road network both in Unguja and Pemba ▪ Introduce requirements in road construction contracts for rights based interventions (including gender responsive HIV & AIDS, peoples with disabilities) ▪ Review and enforce road safety laws and regulations ▪ Create awareness on laws and regulations on road safety in schools and to the general public ▪ Improve access to transport services to disadvantaged groups	MoCT, CMO, MoRASD, MOFEA, Road Fund, MOHSW, Private Sector, The police,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Improve Storm water drainage system in all types of roads ▪ Strengthen integrated planning in urban and rural roads sub-sectors ▪ Improve rural infrastructure and trade-related capacities for improved market access	
1.1.5 Upgrade Zanzibar Ports (a) Phase 1 of New Maruhubi port with free port and dry dock facilities completed and operational by 2015 (b) Upgrade Pemba Ports by 2015	1.1.5.1 Facilitate construction of New Maruhubi port and Wesha Port as elaborated in the transport master plan - ZTMP 1.1.5.2 Facilitate rehabilitation of Wete and Mkoani ports	▪ Mobilize funds for construction of Maruhubi hub and Wesha port ▪ Design and construct new Maruhubi hub port that will cater for the region. ▪ Facilitate establishment of Roll on - Roll off facilities. ▪ Upgrade Wete and Mkoani ports	MoCT, MOFEA, Port Corporation, MOHSW, Private Sector
1.1.6 Airport infrastructures and facilities improved by 2015 (a) Construction of new airport passenger terminal building completed by 2015 (b) Old airport terminal rehabilitated and the runway extended from 2.6 km to 3.2 km by 2015 (c) Pemba airport terminal rehabilitated by 2015Facilities improved to international standards by 2015	1.1.6.1 Upgrade major airports to international standards to handle larger traffic	▪ Construct new airport passenger terminal that can accommodate minimum of 1.1 million passengers per year ▪ Rehabilitate and expand the existing airport runway that can accommodate large aircraft (air bus 300) ▪ Rehabilitate existing airports passenger terminals (Unguja and Pemba) ▪ Improve provision of services in airport infrastructure in both Unguja and Pemba ▪ Improve other facilities so as to meet ICAO standards ▪ Improve navigation services	MoCT, MOFEA, NSA
1.1.7 Land use planning promoted (a) At least 50% of the current productive land is demarcated and registered by June 2015	1.1.7.1 Promote land use planning and land delivery system	▪ Review Zanzibar land use plan, agricultural and tourism zoning plan. ▪ Conduct survey and demarcate plots for social and economic development ▪ Establish new inventory system on the ownership	MALE, MTTI, MWCEL, MOCAGG, MORASD, Private Sector

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		and uses of 3 acres plots. ▪ Educate communities and individuals on land ownership and land use through mass media, seminars etc ▪ Extend the area under sustainable land management and reliable water management system	
1.1.8 Energy security ensured by 2015	1.1.8.1 Implement Zanzibar Energy Policy	▪ Conduct feasibility studies and implement the recommendations for future energy demands and alternative sources of energy including wind and thermo energy, sea wave, solar energy and natural gas ▪ Purchase and maintain standby generators both in Unguja and Pemba. ▪ Expand storage capacity for strategic fuel reserve ▪ Conduct study to ensure petroleum and natural gas security for Zanzibar and implement the recommendations. ▪ Lay down electric submarine cable from Dar to Unguja ▪ Create awareness on the efficient use of energy ▪ Expand and maintain the present electricity infrastructure in Zanzibar ▪ Ensure financial sustainability of ZECO ▪ Build the human resource capacity of the energy sector ▪ Facilitate household energy installation	MWCEL, MOFEA, MORASD, Private Sector, ZECO
1.1.9 Employers enforce a requirement on right based and gender responsive HIV & AIDS, people with disabilities, vulnerable groups and environment. Percentage of registered employers implementing work place programme	1.1.9.1 Enhance gender responsive HIV & AIDS workplace interventions in economic sectors to protect human capital for sustained growth	▪ Introduce gender responsive HIV&AIDS in new trade investments and other economic sector agreements/contracts ▪ Develop HIV&AIDS workplace programmes for use by investors in specific economic sectors: trade, investments, tourism, transport, agriculture and construction ▪ Develop and disseminated IEC materials for employees and surrounding communities ▪ Train investors, managers and employees on the economic impact of HIV&AIDS and on workplace	MOFEA, ABCZ, ZAC, Targeted sectors,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		• programmes and interventions • Enforce contractual requirements in contracts for rights based, gender sensitive and HIV & AIDS interventions for workers	
1.1.10 Conducive environment for growth of private sector investment attained by 2015 (a) Baselines and targets of cost of doing business in Zanzibar established by 2011 (b) Single licensing institution established by 2011. (c) PPP policy and strategy established by 2012.	1.1.10.1 Remove impediment and reduce transaction costs in doing business.	• Review policy and laws on investment and trade • Regularize and make use of the data on the cost of doing business in view of improving business climate • Amend and /or repeal regulations that empower different institutions to offer business licensing. • Establish measures to improve issuing of licenses.	MOFEA, MTTI, ZRB, TRA, Private Sector, ZIPA, HoR, OCGS, BoT, MALE
	1.1.10.2 Strengthen an investment regime which attracts investors.	• Improve business infrastructure (e.g. ICT, telecommunication, electrification) • Review and implement the Zanzibar investment strategy • Promote strategy on Direct Foreign Investments • Strengthen capacity of ZIPA to spearhead PPP • Strengthen capacity of ZBC to engage in PPP • Review and amend Zanzibar Concessional Arrangement Act • Develop and implement PPP policy and strategy	ZIPA, MOFEA, MTTI
1.1.11 Capacity to mitigate and adapt impact of climate changes enhanced by 2015	1.1.11.1 Strengthen climate change adaptations responses at all levels Implement National Adaptation Programme of Action (NAPA)	• Initiate and implement impact mitigation programmes • Establish and/or strengthen disaster preparedness and disaster management • Strengthen the alert and early warning systems	MALE, CMO, MoCT
1.1.12 Reduce the level of environmental degradation and pollution by 2015	1.1.12.1 Implement environmental policy	• Develop strategy for implementing environmental policy • Review and enforce environmental legislation • Integrate and operationalise the principles of	MALE, MTTI, MOFEA, MoCT, MoCEL, MORASD

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
(a) Water catchments declared as special protected areas by 2015		sustainable environment into sector policies and programmes. ▪ Promote community-based environmental conservation programme ▪ Conserve terrestrial and marine ecosystem ▪ Introduce sustainable management practices for land and environment ▪ Promote the conservation of water catchment areas ▪ Take measures to improve integrated coastal zone management program ▪ Take concrete steps to minimize beach erosion through enforcement of laws and community sensitization ▪ Reduce emission from deforestation and forest degradation ▪ Reviewing or strengthen institutional coordination frameworks for environmental management ▪ Enhance capacity for addressing environment issues at sector and community levels	
	1.1.12.2 Provide adequate and reliable physical infrastructure for efficient management of industrial, medical and domestic wastes.	▪ Promote an efficient and accessible industrial, medical and domestic solid and liquid waste management system ▪ Promote environmental education at all levels. ▪ Develop integrated program for solid and liquid waste management with particular emphasis to institution that produce bulky solid waste ▪ Develop by laws on safe management of liquid and solid waste in industries and medical facilities ▪ Promote awareness and improvement of efficiency in resource use (reduce, reuse, recycle) ▪ Provision of waste management infrastructure in partnership with private sector ▪ Ensure effective training of health professionals and support staff on health care waste management ▪ Ensure functioning hand-washing facilities with soap at all health facilities	MALE, MOHSW, MOEVT, CSOs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
GOAL 1.2: PROMOTE SUSTAINABLE AND EQUITABLE PRO-POOR AND BROAD BASED GROWTH			
1.2.1 Increase the annual rate of economic growth from 6.7 % in 2009 to 10% by 2015	1.2.1.1 Implement Zanzibar Growth Strategy (ZGS).	▪ Review ZGS and prepare a road map for its implementation with gender perspective ▪ Enhance and promote investments in the productive and service sector identified in the growth strategy ▪ Increase budget allocation to key productive sectors ▪ Enhance productivity in all productive sectors and ensure environmental sustainability ▪ Provide affirmative measures to support investment in productive sectors especially agriculture ▪ Mobilize funds to implement recommendations arising from value chain analysis ▪ Promote sectoral forward and backward linkages ▪ Promote strategies that enhance income distribution	MOFEA, MTTI, MALE, ZIPA, BoT, MoWCEL, OCGS, MCT, MLYWCD, ZAC, Private Sector, CSOs, NGOs.
	1.2.1.2 Improve the quality of the work force and working conditions in key growth sectors	▪ Develop and implement sectoral programmes that strengthen skills of the labour force Enhance working conditions and participation of vulnerable groups in key growth sectors ▪ Undertake a regular study of the quality of the workforce in Zanzibar and implement recommendations ▪ Undertake gender sensitive measure to prevent HIV and AIDS spread, control malaria and improve nutrition at the work place, including for regular and irregular migrant workers to control morbidity and mortality of the workforce in rural and urban areas	AG Chamber, MOFEA, MTTI, MALE, ZIPA, BoT, MoWCEL, OCGS, MCT, MLYWCD, ZAC, Private Sector, CSOs, NGOs.
	1.2.1.3 Enhance implementation of Zanzibar employment policy, job creation programme, and youth employment action plan with a gender perspective	▪ Develop action plan for employment policy. ▪ Undertake demand driven skills development programs for promoting self employment and productivity (serving both men, women, youth, PWD and other vulnerable groups equitably). ▪ Transform micro enterprises in the formal and informal economy into more productive enterprises. ▪ Conduct labour force survey on regular basis	MLYWCD, ZATUC, ZANEMA, MTTI, MALE, NGOs, MFI, ZNCCIA, HLIs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Mobilize SMEs cooperatives and other social economic units to increase production and self employment among men and women in the community ▪ Establish Technical Vocational Education and training networks ▪ Provide training and support services to MSME groups of young women and men for enhanced quality economic diversification. Promote direct/indirect employment for young women and men in the tourism sector including linkages with agriculture sector ▪ Develop legal framework for implementation of employment policy and establishment of coordinating structure and multi-sectoral employment creation committees at regional and district levels including functional LMI system ▪ Finalize development of the apprenticeship training policy including national qualification framework ▪ Support piloting of apprenticeship training programme in the tourism and manufacturing sectors ▪ Develop programme to promote formal employment in labour intensive sectors ▪ Strengthen capacity of MLYWCD departments that implement Zanzibar employment Policy	
1.2.2 Transform smallholder agriculture and increase growth of Agricultural Sector from 4.4% in 2009 to 10% by 2015 (a) Yield in rain fed and irrigated rice increased from 1 ton in 2009 to 3 tons in 2015 per hectare and from 4 tons in 2009 to 7 tons in 2015 per hectare respectively.	1.2.2.1 Ensure timely delivery of agricultural support services with a focus on private sector participation	▪ Strengthen a Programme for increasing of mechanization to reduce the use of hand-hoe Demonstrate the use of improved seeds and planting materials to facilitate technology transfer. ▪ Distribute improved seeds and planting materials to farmers in a timely manner ▪ Introduce integrated pest management strategies into the curriculum of farmer field schools ▪ Facilitate and empower private sector involvement in the procurement and distribution of agricultural inputs, and provision of agro mechanization services ▪ Adopt and implement innovative measures to provide	MALE, NGOs, CSOs, Private Sectors, ZATI, MTTI, MOCT.

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
(b) Increased productivity of root and tuber crops from average of 5 tons in 2009 to 12 tons per hectare by 2015.		direct grants to farmers ▪ Develop and implement programmes for lending to farmers ▪ Motivate and mobilize MFIs including SACCOS to lend to farmers ▪ Establish and support agricultural market coordination unit ▪ Strengthen the physical and human capacity to [provide marketing services of the relevant ministries, municipality and local authorities ▪ Promote and strengthen farmers and fishermen organisations/association that respond appropriately to the market signals	
(c) Increased rehabilitation of agricultural feeder roads connecting main agricultural and tourist areas to trunk roads by 50% by 2015			
(d) Shares of local vegetables, fruits and spices in the local tourism market increased from 20% in 2009 to 50% in 2015	1.2.2.2 Develop implementation framework for cooperative policy	▪ Develop rural finance facilities and services and improve access to agro-inputs ▪ Review Cooperative Legislation and put in place the institutional framework ▪ Support the process of finalizing the Cooperative Development Policy and Cooperative Act ▪ Undertake cooperative reform	MALE, ZATI, MLYWCD, MTTI, MORASD, CSOs, AG
(e) Share of domestic rice in the local market increased from 15% in 2009 to 35% by 2015	1.2.2.3 Strengthen agricultural M&E system	▪ Develop a comprehensive centrally coordinated M&E system to all agricultural programmes and projects	MALE
(f) Formal credit to small holder farmers increased from 3% in 2009 to 10% in 2015	1.2.2.4 Improve rice productivity	▪ Establish appropriate water harvesting techniques in rain fed areas ▪ Improve availability and accessibility of both low land and upland high yield rice varieties. ▪ Expand area under irrigation	MALE,
	1.2.2.5 Improve root, tuber, fruits and vegetable productivity	▪ Improve availability and accessibility of planting materials ▪ Promote adoption of improved land husbandry practices. ▪ Facilitate agro-processing and value addition for root, tuber, fruits and vegetable. ▪ Enhance availability of appropriate inputs and provision of technical assistance in farm management and production skills through contract farming	MALE, MTTI, MoWCEL, ZNCCIA

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	1.2.2.6 Implement Clove Development and Coconut Rehabilitation Program.	▪ Restructure clove marketing system ▪ Intensify clove and coconut based farming systems by introducing high value intercropping ▪ Improve management of clove and coconut farms. ▪ Promote R&D in clove and coconut production ▪ Introduce new post harvest techniques	MALE, MTTI, MOFEA, NSAs
	1.2.2.7 Develop and implement organic farming with focus on increased export	▪ Promote research on spice crop varieties ▪ Promote processing and value addition on spices ▪ Facilitate smallholder's contract farming to enhance access to market ▪ Mainstream research and extension support to spice crops	MALE, MTTI,NGOs, HLIs
	1.2.2.8 Secure access to reliable commodity markets for farmers and agro processors	▪ Develop a programme for market linkages between agriculture and other growth sectors such as tourism, trade services and manufacturing ▪ Improve access to price information in the agricultural sector. ▪ Increase competitiveness of local producers with a focus on quality, price and stable supply.	MALE, MTTI, NGOs
	1.2.2.9 Encourage private sector involvement in the agriculture sector along the entire commodity value chains	▪ Take stock of private sector actors in the agricultural sector ▪ Undertake investor's forum for the agricultural sector. ▪ Enhance technology generation and transfer through strengthening research-farmers linkages. ▪ Upscale technology transfer and farmer empowerment through farmer field schools, integrated production and pest management and adaptive research programs. ▪ Facilitate use of integrated production and pest management	MALE, MTTI, MLYWCD, NSA
	1.2.2.10 Improve district market centres with private sector participation	▪ Build/renovate market centres in every district and equip them with modern facilities ▪ Upscale/strengthen market information centres (link them with existing farmer fora)	MALE, MTTI, Private sector, LGAs.

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
		1.2.2.11	Improve seed multiplication units	▪ Strengthen seed production and multiplication programmes ▪ Strengthen agricultural extension services	MALE, MTTI, private sector
		1.2.2.12	Increase agro processing activities to add value and generate employment	▪ Undertake feasibility studies for agro processing establishments in the agricultural sector ▪ Identify resource centres and institutions as well as financial support for agro processing developments for spices, fruit and vegetables, cassava, and livestock products that fully involve women and women groups as producers ▪ Introduce commodity standardization centres for quality assurance in line with international standards	MALE, MLYWCD, MTTI
1.2.3	Number of qualified agricultural extension staff increased from 400 in 2010 to 700 by 2015	1.2.3.1	Strengthen capacity and improve quality in technical agricultural education	▪ Increase training facilities in technical agricultural education and develop long term plan for expansion of Kizimbani Agricultural Training Institute to enable them offer diploma courses ▪ Review curricular of the technical agricultural education institution to fulfil the needs of Zanzibar farming communities ▪ Conduct human resource needs assessment periodically ▪ Implement capacity building programme for Kizimbani agricultural training staff with emphasis on Masters and PhD degrees ▪ Strengthen research capacity of Kizimbani agricultural training institute ▪ Improve agricultural research, technology dissemination and adoption	MALE, MOEVT, HLIs, Private Sector
1.2.4	Capacity to offer specialized short term courses enhances by 2015	1.2.4.1	Develop and implement farmers training programme	▪ Increase farmer training facilities at Kizimbani agricultural training institute ▪ Promote specialized short term farmers' training to farmers ▪ Develop curricula for farmers' training programmes	MALE, MOEVT, HLIs

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
1.2.5	Increase land under irrigation from 640 ha in 2010 to 2550 ha by 2015	1.2.5.1	Improve investment in irrigation infrastructure	■ Rehabilitate irrigation infrastructure (irrigation canals, drainage canals, reservoirs and re-levelling) in the irrigation schemes ■ Customize agricultural mechanization proper balance between organic and chemical farming methods ■ Build and expand irrigation infrastructure (irrigation canals, drainage canals, reservoirs and levelling) in priority irrigation scheme ■ Build water harvesting infrastructure in the rain-fed areas (including drainage canals, etc) ■ Promote new water serving technologies in irrigation for sustainable use of water ■ Upscale use of drip-line irrigation systems for potential high value crops ■ Improve institutional capacity for irrigation development ■ Strengthen water user associations to improve operation and management of irrigation schemes	MOFEA, MTTI; MALE, MTC, Private Sector
1.2.6	Livestock productivity and products quality improved (a) New slaughter houses in every district constructed by 2015 (b) Milk productivity of dairy cattle increased from 7 litres to 10 litres per head by 2015. (c) Increase market share of domestically produced eggs, poultry and red meat by 50% by 2015	1.2.6.1	Improve and maintain central slaughter houses	■ Rehabilitate and construct new slaughter houses and abattoirs and equip them with essential facilities ■ Facilitate animal quarantine infrastructure and facilities	MOFEA, MALE, Municipal Council; other LGAs;
		1.2.6.2	Improve production and quality of livestock products.	■ Facilitate availability and access of quality livestock including chicks, and small ruminants ■ Production of animal feeds using available resources ■ Strengthen livestock research and extension services. ■ Encourage farmers and unemployed youth to develop specialised beef fattening unit ■ Encourage formation of credit and lending institutions that cover commercial beef, goat, sheep and poultry producers ■ Ensure availability and accessibility of pure and cross bred in calf heifers, dairy goats and A.I services ■ Promote cockerel exchange (promotion) programs to improve local poultry breeds ■ Promote commercial poultry production through	MALE, MoRASD, CMO, MOFEA, MOHSW, HLIs, Private Sector

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		improved access to quality breeds, feeds and veterinary services ▪ Rehabilitate facilities for quarantine areas, animal health production centres ▪ Develop pasture research and promote pasture seed multiplication	
	1.2.6.3 Promote cottage processing infrastructure and facilities	▪ Establish modern meat processing facilities (for cutting, grading and packaging); ▪ Establish cottage processing and packaging plants for milk and milk products;	MOFEA, MALE, MTTI
	1.2.6.4 Put in place adequate and appropriate storage facilities for livestock products	▪ Establish and rehabilitate cold storage facilities for livestock products	MOFEA, MALE, , Municipal Council, Private Sector
	1.2.6.5 Strengthen provision of livestock support services	▪ Improve diary breeding and husbandry practices ▪ Improve livestock nutrition and veterinary services ▪ Strengthen milk collection and distribution facilities. ▪ Encourage and support milk processing (pasteurisation and packaging) initiatives by private sectors operators and livestock associations ▪ Promote value addition of milk to include manufacture of yogurt, cheese, butter, ghee and UHT milk ▪ Strengthen artificial insemination services ▪ Strengthening laboratory services	MTTI, NSA, MALE
1.2.7 Production growth rate of fish and other marine products increased from 2.4% in 2009	1.2.7.1 Improve artisanal fisheries through the use of improved technologies	▪ Promote use of improved fishing gears and equipments	MTTI, MALE, MOFEA, NSA,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
to 5% by 2015	1.2.7.2 Improve processing and marketing (domestic and export) of fish and other marine products	▪ Increase diversity in the utilization of seaweed through agro-processing and value-addition for the benefit of women seaweed producers and groups ▪ Establish anchor processing plants to absorb excess produce during periods of glut and help to stabilize the price of fish ▪ Establish cottage fish processing unit for smoking, drying and salting ▪ Upscale sea weed cultivation in all potential areas	MALE, MTTI, MLYWCD, MOFEA
	1.2.7.3 Build at least one fishing dock by 2015	▪ Facilitate construction of fishing dock ▪ Establish fish collection and icing centres (Cold Rooms) in remote fishing areas	MALE, MTTI, MLYWCD, MoCT, MOFEA, NSA
	1.2.7.4 Promote deep sea fishing	▪ Promote and facilitate commercial fishing ▪ Improve access and availability of fishing gears ▪ Initiate partnership between domestic and foreign investors ▪ Promote investment in semi-industrial vessels and deep sea cages for deep sea fishing ▪ Develop and implement specific credit schemes and training for local deep sea fishers with a focus on enhanced access to improved technologies and fishing gears ▪ Promote deep see fishing research	MALE, MOFEA, NSA, MTTI
	1.2.7.5 Promote marine and fresh water fish culture	▪ Develop freshwater fish culture for tilapia and other potential fresh water fishes ▪ Support marine fish culture especially lobsters, prawns, and crabs ▪ Upscale oysters farming for production of pearls.	MALE, NSA, MoRASD
1.2.8 Conservation management and sustainable utilisation of forests and marine resources strengthened by 2015	1.2.8.1 Improve mangrove conservation and management	▪ Enhance research and information dissemination and adoption of best management practices on mangrove production and utilization ▪ Advocate development and implementation of integrated coastal zone management	MALE, NSA, HLIs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
(a) At least 25% of mangrove ecosystem of Zanzibar are under effective and sustainable management by 2015 (b) Designated marine protected areas increased from 10% in 2010 to 15% in 2015 (c) The population of wild animals stabilized by 2015 (d) At least 30% of coral rag forest conserved by 2015 (e) Contribution of forest conservation to community livelihood increased to 5% by 2015	1.2.8.2 Increase protection and conservation of marine resources for sustainability of the fisheries sector	▪ Develop an environmental management Strategy and implementation programme for Zanzibar's marine resources	MALE, NSA
	1.2.8.3 Enhance management and conservation of coral rag forests.	▪ Introduce and implement sustainable wood energy saving programs ▪ Facilitate coral rag based research and information dissemination	NSA, MALE, MWCEL
	1.2.8.4 Enhance management and development of –protected forests.	▪ Support promotion, establishment and improvement of gene banks ▪ Promote organic farming and agro-forest systems. ▪ Build Capacity and adopt improved technologies for wood conversion ▪ Promote the participatory forest management schemes to improve communities 'access to benefits	NSA, MALE, MOEVT, MLYWCD
	1.2.8.5 Improve bee keeping programs	▪ Promote research, training, marketing and extension services on bee-keeping ▪ Facilitate availability of appropriate tools and equipments for bee keeping ▪ Build capacity for honey quality improvement through appropriate post-harvest handling and value addition	MTTI, MALE, NSA, OCGS, HLIs
1.2.9 Growth of the tourism sector increased from 6.8% in 2008 to 10% in 2015 (a) Number of tourists visiting Zanzibar increased from 135,954 in 2009 to 250,000 by 2015 (b) Per capita Tourist Expenditure increased overtime (c) Number of Zanzibaris	1.2.9.1 Improve and diversify the tourism product	▪ Implement the Tourism Master Plan and related policies. ▪ Identify, promote and document innovative tourism sites and attractions including eco tourism areas and cultural tourism ▪ Promote and preserve historical sites ▪ Create awareness in the local community of the value of tourism for improving health, aesthetic value and recreational purposes ▪ Increase community awareness to youth and their involvement in tourism sector ▪ Enforce laws and regulations related to infrastructure development for the tourism industry	MTTI, MOFEA, NSA, MOCAGG, MALE, MOEVT, MLYWCD

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
trained in HOSPITALITY Industry increased	1.2.9.2 Deepening Tourism Development	▪ Improve destination products ▪ Provide capacity building in customer care to those involved in tourism industry ▪ Strengthen the Zanzibar Institute for Tourism Development to provide better training services ▪ Promote domestic and cultural tourism ▪ Improve service delivery to the Tourism Sector ▪ Enforce requirements that all Hospitality Colleges in Zanzibar have International Accreditation (Standards) ▪ Offer scholarship for Zanzibaris to study Hospitality Courses abroad	MTTI, MOFEA, NSA, MOCAGG, MALE
	1.2.9.3 Strengthen linkage of tourism sector with other sectors	▪ Promote forward and backward linkage with agricultu ▪ re and manufacturing sector ▪ Implement recommendations from study on potential revenue in Tourism ▪ Encourage the formation of strategic alliances among local producers to increase supply quantity and quality produces to tourism hotels especially fruits and vegetables producers ▪ Establish national tourism account (satellite account). ▪ Establish comprehensive tourism monitoring and evaluation framework	MTTI, MOFEA, NSA, MOCAGG, MALE
	1.2.9.4 Promote up market tourism and economic diversification in the tourism sector	▪ Establish a conducive environment for the promotion of the right calibre and targeted tourism investors	MTTI, NSA,
	1.2.9.5 Improve tourism marketing abroad and in the domestic market	▪ Organize regular tourism missions abroad; ▪ Attend international fora on tourism ▪ Revise and update web based advertisement ▪ Conduct survey for establishment of tourism antenna/office abroad ▪ Explore and carry out strategies to promote Zanzibar as International Conference hub	MTTI, NSAs
1.2.10 Export to GDP ratio increased from 4% in 2009 to 10% by 2015	1.2.10.1 Make use of preferential trade arrangement e.g. AGOA, EAC, SADC and Other integrations.	▪ Support and participate in the negotiation of bilateral, Regional and International Trade Agreements ▪ Strengthen Domestic and International Trade sector in response to globalization and regional integrations	MTTI, MOFEA, NSA, MOCAGG, PO

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Enhance Capacity building in human Negotiation skills. ▪ Build capacity and support private sector for competition in regional and international trade ▪ Improve and strengthen EPZ and free port zone facilities	
	1.2.10.2 Increase access to market information using affordable ICTs	▪ Strengthen the Zanzibar Business Information Centre ▪ Introduce market information points at regional level. ▪ Build online connection of Zanzibar Business Information Centre ▪ Create public awareness on market information access by affordable ICT techniques ▪ Introduce business incubators	MTTI, MOFEA, NSA, MOCAGG, MoCT, CMO
	1.2.10.3 Strengthen export promotion activities	▪ Sensitize effective international trade fair participation for looking new market opportunities ▪ Conduct mini fairs for products and services ▪ Establish trade fair and exhibition ground ▪ Implement Zanzibar Export Development Strategy	MTTI, MOFEA, NSA, MOCAGG, MALE, PO
	1.2.10.4 Promote Zanzibar as a Special Economic Zone (SEZ)	▪ Conduct feasibility study of SEZ and implement the recommendations ▪ Harmonise trade policies laws and regulations to align with EAC special economic zones rules	MTTI, MOFEA, NSA, MOCAGG, PO

GOAL 1.3: REDUCE INCOME POVERTY AND ATTAIN OVERALL FOOD SECURITY

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
1.3.1 Reduced population below basic needs poverty line from 49% in 2005 to 25% in 2015	1.3.1.1 Implement employment policy and job creation program	▪ Enhance competitiveness of labour force on skills and change of work attitudes to working age groups ▪ Develop entrepreneurship skills ▪ Demarcate places for artisanal works ▪ Support establishment of business incubators ▪ Support youth organisations to implement their programmes	MTTI, MALE, MOFEA, MOEVT, MLYWCD, Private sector
	1.3.1.2 Increase labour productivity	▪ Conduct studies related to labour productivity in various sectors ▪ Promote transfer and use of appropriate technologies to increase productivity	MALE, MOEVT, MLYWCD, MTTI, MOCAGG, MOFEA, NSA, OCGS, HLIs

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
1.3.2	Reduced population below food poverty line from 13% in 2005 to 7% by 2015	1.3.2.1	Increase the access of food insecure groups to nutritious foods	• Implementing income generating sub projects among food insecure households • Promote skills for employment and income generation. • Promote an effective credit schemes • Promote linkages between farmers and potential market outlets • Support for school feeding and school gardening sub-projects	MALE, MOFEA, CMO, NSA, MoLYWCD, MoRASD
		1.3.2.2	Improve utilization of nutritious foods	• Enhance value addition along production and supply chain • Support mass media campaigns on food hygiene, human nutrition and health issues • Strengthen analytical capacity of the food sector and harmonized standards and quality assurance mechanisms • Ensure secured agricultural land tenure system • Implement measures foreseen in the Agricultural Strategic Plan • Develop a strategy to implement Small and Medium Enterprises policy to enhance food security • Implement FSN policy and program	MALE, MOFEA, CMO, NSA, MOEVT, MOHSW, MLYWCD, MTTI
		1.3.2.3	Enhance market efficiency, trade and access to credit as foreseen in Food Security and Nutrition Policy and Programme	• Increase efficiency in (domestic) food marketing and trade • Improve accessibility of micro-credit to rural and urban entrepreneurs of all gender and business types	MALE, MOEVT, MLYWCD, MTTI
		1.3.2.4	Promote food security	• Reduce post harvest losses • Establish strategic food reserve • Prolong food shelf life • Increase agricultural production, reduce food insecurity and hunger and improve responses to food emergency crises	MALE, MTTI, MORASD, NSA

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
1.3.3	Capacity to plan and implement food security and nutrition intervention strengthened by 2015	1.3.3.1	Integrate nutrition into policies, plans and budgets and strengthen necessary institutional arrangements for delivery of essential nutrition services	▪ Strengthen the institutional arrangements for nutrition in all levels ▪ Integrate nutrition concerns into strategies, plans and budgets in all relevant sectors ▪ Improve capacity to scale up all essential nutrition services	MALE, MOHSW,
1.3.4	Regular food security and early warning system strengthened by 2012	1.3.4.1	Develop effective coordination mechanism and monitoring and evaluation of food security system and response	▪ Effective tool for food insecurity early warning and response system developed ▪ Support capacity building of FSN institutions at national, district and community levels ▪ Support awareness raising, public education and implement effective communication strategy ▪ Establish coordination structures and programme management ▪ Improve knowledge and update information about FSN situation ▪ Establish and operationalise Participatory Monitoring and Evaluation (PM&E) system	MALE, MOFEA, CMO, NSA MHSW, MLYWCD,CSO, MORASD, MOCAGG, ZAC, Private Sector, Community
1.3.5	Decent work for young women and men promoted by 2015 (a) Unemployment rate for youths reduced from 19.6 % in 2009 to 11.4 % by 2015	1.3.5.1	Implement gender responsive employment policy	▪ Mobilizing of SMEs to increase production and self employment in the community ▪ Formalise, support and strengthen the SMEs and informal sector	MALE, MOEVT, MLYWCD, MTTI
		1.3.5.2	Establish labour market information system	▪ Establish and strengthen labour market information unit ▪ Improve data collection and dissemination system on labour and employment issues ▪ Establish Technical Vocational Education and training networks to serve both men and women equitably, especially those who are poor, disabled and vulnerable ▪ Train youth groups, to respond to labour market needs, both short-term and long-term	MLYWCD, MOEVT, MTTI
		1.3.5.3	Promote Technical Vocational Education and Training among youth	▪ Enhance entrepreneurial knowledge and skills among youth including those with barrier to learning and development ▪ Promote vocational and entrepreneurship skills among school graduates, people with special needs and PWDs	MOEVT, MLYWCD, CSOs ZAC, Private Sector, MTTI

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Increase number of public vocational training centres from 3 in 2009 to 6 ▪ Reform vocational training programme to meet labour market demand ▪ Expand training infrastructure for skills development and upgrading to accommodate youth and PWDs ▪ Develop standard guidelines for better TVET programmes ▪ Develop apprenticeship programmes that promote participation of women in male dominated trades ▪ Standardize skills requirement by trades to ensure employment of trained professionals ▪ Promote public-private partnership in skills training	
	1.3.5.4 Increase access to business development services for out-of-school youth including affordable financial services	▪ Map out the existing small business start-up and management training materials and BDS that meet the needs of young entrepreneurs ▪ Business Development Service providers to jointly carry out the product development and develop new service products ▪ Increase employment opportunities for youth, men and women in rural and urban areas	MLYWCD, MALE, MTTI, MOFEA, NSAs
	1.3.5.5 Promote innovative youth entrepreneurship programs	▪ Conduct dissemination campaigns announcing the call for proposals ▪ Facilitate proposal writing seminars for short listed youth enterprises ▪ Extend grants to projects whose full project proposals are approved by a selection committee	MLYWCD, MALE, MTTI, MOFEA
	1.3.5.6 Establish partnerships with micro finance institutions, and corporative unions to create "youth finance windows"	▪ Take stock of the lessons learned with regards to both the challenges and opportunities of existing funds to reach young entrepreneurs develop new financial models for young entrepreneurs ▪ Identify local financial intermediaries and MFIs to pilot test "youth windows" to provide start-up capital and investment and working capital to potential and existing young entrepreneurs	MLYWCD, MALE, MTTI, MOFEA
	1.3.5.7 Institutionalize labour market information system	▪ Establish labour market information centre ▪ Promote training network to serve both men and	MALE, MOEVT, MLYWCD, MTTI

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		women	
1.3.6 Reduce population growth rate from the current 3.1% to 2.8% per annual by year 2015	1.3.6.1 Harmonise population growth with economic growth	▪ Support effective implementation of the Zanzibar Population Policy in line with MKUZA II ▪ Promote public awareness on the linkages between population, poverty eradication and sustainable development ▪ Promote public awareness on the importance of quality population ▪ Promote sustainable family formation and sizes ▪ Promote women participation in decision making and implementation ▪ Support women's' access to productive resources e.g. land, income, and credit ▪ Support integration of population studies in tertiary education ▪ Generate and use population data for planning and decision making ▪ Strengthen the capacity of coordination of population issues in planning ▪ Support 2012 population census ▪ Promote the use of population data in planning and decision making.	MOFEA, MDAs, NSA, OCGS

GOAL 1.4   CREATE A VIBRANT PRIVATE SECTOR FOR ECONOMIC GROWTH

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
1.4.1 Vibrant Private Sector developed by 2015 (a) Employment in private sector increased from 11,827 in 2008/09 to 21,000 in 2015. (b) Credit for productive activities to private sector increased annually by 5 percent from TZS	1.4.1.1 Facilitate access to credit	▪ Develop Microfinance Policy ▪ Establish MSMEs financial window in financial institutions and advocate for reduction of lending rates ▪ Upscale operation and coverage of community microfinance initiatives ▪ Establish linkages between cooperatives and microfinance institutions ▪ Develop the operation of credit guarantee schemes to private sector (e.g. SME Guarantee Scheme, Export	CSOs, MTTI, MALE, MOFEA, Private sector, MFIs, MLYWCD, BoT

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		Guarantee Scheme, Production Guarantee Schemes	
	1.4.1.2 Build capacity to private sector on business management skills	▪ Support capacity building efforts of private sectors in providing relevant business and extension services to their members including enhancing production quality, access to micro credit and markets, and social services to members and communities	MALE, MOEVT, MLYWCD, MTTI, MOCAGG, MOFEA, Private sector
43.2 billion in 2009 to TZS 86.9 billion in 2015	1.4.1.3 Promote access to technology	▪ Encourage and facilitate adaption of relevant technologies ▪ Establish technology exhibition ▪ Facilitate private sector exposure to foreign technology	MALE, MOEVT, MLYWCD, MTTI, MOCAGG, MOFEA, Private sector
	1.4.1.4 Create business opportunities for private sector	▪ Complete privatization of public enterprise that are due for privatization ▪ Enable domestic private sectors access public services ▪ Review Procurement Act and Regulations in favour of domestic private sectors ▪ Establish framework for property rights	MALE, MOEVT, MLYWCD, MTTI, MOCAGG, MOFEA, Private sector
	1.4.1.5 Promote access to market	▪ Strengthen business information centres to facilitate market accessibility. ▪ Promote PPP in the provision of marketing and business development services ▪ Improve and enforce compliance guidelines to enhance safety and quality along the marketing chain for both domestic and international market (standards, Export procedures, Processing, storage facilities)	MALE, MOEVT, MLYWCD, MTTI, MOCAGG, MOFEA, Private sector

CLUSTER II: WELL BEING AND SOCIAL SERVICES
BROAD OUTCOME 2: IMPROVED SOCIAL WELL-BEING AND EQUITABLE ACCESS TO QUALITY SOCIAL SERVICES

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
GOAL 2.1: ENSURE GENDER RESPONSIVE AND EQUITABLE ACCESS TO QUALITY EDUCATION			
A. EARLY SCHOOL CARE AND DEVELOPMENT (ECD)			
2.1.1　Integrated ECD policy developed and implemented by 2012	2.1.1.1　Create broader participation and diversity in Early Childhood Care and Development (ECD) Programmes	▪ Develop minimum standards for conducive learning environment that is gender sensitive and child friendly ▪ Develop and implement effective policy guidelines, to eliminate gender based violence and improve child friendly environment. ▪ NSAs and communities to establish ECD centres especially in rural and hard to reach areas ▪ Provide relevant, appropriate and gender responsive early childhood care especially to vulnerable and disadvantaged children with special needs ▪ Improve capacity of teachers, TC , TCC and caretakers ▪ Provide Health care and nutrition services in all ECD centres ▪ Establish Training college for Pre Primary Teachers ▪ Introduce in-service and pre-service courses on the early child education	MOEVT, MHSW, CSO/FBOS, Communities, CMO, ZAC, MOFEA, MLYWCD, MOICS, Private Sector LGAs
2.1.2　Increased net enrolment rate for pre-school from 20.1% in 2010 to 50% by 2015	2.1.2.1　Ensure equitable access to quality pre-school education for all children at the age four and five	▪ Construct and furnish new classrooms and associated facilities to meet with expanding demand in consideration to people with disabilities ▪ Introduce pre-school classes in existing	MOEVT, MHSW, CSO/FBOS, Communities, CMO, ZAC, MOFEA, MLYWCD, MOICS, Private Sector

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		primary schools ▪ Encourage and motivate private sectors to invest in pre-school education ▪ Sensitise community to send children with special needs and CWDs to pre-schools ▪ Sets standards for establishment of school facility requirement to maintain quality of education ▪ Strengthen institutional capacity to implement and monitor effectively programmes that promote child friendly and girl's education	
	2.1.2.2 Strengthen capacity to implement and monitor effectively programs that promote child friendly and girls' education	▪ Introduce and enforce School Feeding Program in all government and private schools ▪ Improve and maintain the physical facilities of the school to make it gender and child friendly ▪ Establish and strengthen participatory school governing bodies ▪ Promote school based water and environmental sanitation	MOFEA, MLYWCD, MOICS, Private Sector
B. PRIMARY EDUCATION			
2.1.3 Increased net- enrolment rate from 81.5% in 2010 to 95% by 2015.	2.1.3.1 Ensure equitable access to quality primary school education for all children at the age six to eleven	▪ Conduct school mapping exercise to demarcate school sites based on population growth rate ▪ Improve school infrastructure (class rooms, furniture, libraries, sanitation facilities and installation of power) to accommodate all children, including CWDs ▪ Introduce alternative forms of school contributions for poor and most vulnerable families and CWDs ▪ Promote child-friendly and gender sensitive school environment	MOEVT, CSO, communities, private sectors, MWCEL, MOHSW

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	2.1.3.2 Ensure that inclusive education and active learning is effectively practiced in schools	▪ Sensitize community to send their children [boys and girls] to schools ▪ Finalize and implement Zanzibar Education Development Programme ▪ Mobilize community to promote enrolment of school going age children and `CWDs ▪ Train all teachers in inclusive education ▪ Finalize and implement Zanzibar inclusive education policy	MOEVT, CSO, communities, private sectors, MWCEL, MOHSW
	2.1.3.3 Provide adequate facilities to improve access	▪ Support rehabilitation and re-integration of girls and boys withdrawn from child labour into education system ▪ Provide adequate facilities to promote environment to children with barriers to learning and development ▪ Develop and implement effective policies, strategies and activities to eliminate gender based violence against all children especially CWDs ▪ Reduce classroom over crowding ▪ Build capacity of key Actors including district officials, CSOs, using adapted simple version of child labour educational materials including formulation of by-laws ▪ Support long-term economic interventions in support of households with children in and at risk of child labour with a focus on female headed households ▪ Create enabling environment that will improve access	MOEVT, CSO, communities, private sectors, MWCEL, MOHSW, MORASD
C. SECONDARY EDUCATION			
2.1.4 Increased net enrolment rate from 38.2 % in 2010 to 60 % by 2015	2.1.4.1 Ensure equitable access to quality secondary education for all children of the age 12 to 15	▪ Construct, rehabilitate, equip and furnish secondary school class-rooms, staff houses, libraries, and sanitation facilities	MOEVT, CSO, communities, private sectors, MWCEL,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		especially accessible to CWDs in all districts ▪ Promote Public- Private – Partnership (PPP) in secondary education ▪ Sensitize community on importance of girls education ▪ Promote equitable distribution of secondary schools in underserved areas ▪ Promote the use of ICT in secondary education ▪ Rehabilitate Pemba Public Television Station to ensure accessibility of information	MOHSW
2.1.5 Increased completion rate of basic education by 2015	2.1.5.1 Ensure registered children complete their basic education	▪ Support regular meetings for existing school management committees ▪ Strengthen school based counselling services for both pupil and parents on the effect of school dropouts ▪ Implement measures that promote school and gender friendly environment ▪ Encourage use of alternative measures of disciplining children ▪ Active collaboration between teachers and parents in case of children attracted to petty business/child labour.	MOEVT, MOLYWCD CSO, communities, Private Sectors
D. NON FORMAL EDUCATION			
2.1.6 Increase overall literacy rate from 75.8% in 2005 to 90% by 2015	2.1.6.1 Expand Basic Literacy Programmes with special emphasis to women and PWDs 2.1.6.2 Enhance functional literacy and continuing education with special emphasis to youth, women and PWDs	▪ Develop non-formal, alternative and adult education policy guidelines ▪ Expand non-formal education in partnership with community groups ▪ Expand user-friendly library services throughout Zanzibar with full access to all including PWDs ▪ Strengthen coordination among literacy programme implementers ▪ Review curricula for non-formal,	MOEVT, MLYWCD, CSOs, private sector.

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		alternative and adult education ▪ Recruit and train adult education educators and other education facilitators such as librarian assistants ▪ Introduce in-service training programme for the existing adult education educators ▪ Provide support for integrating out of school youths especially girls into school system ▪ Promote functional literacy with focus towards the maintenance of progressive family value, promotion of gender equality, sexual and reproductive health ▪ Link with relevant sectors to promote the provision of appropriate technologies and services to women in urban and rural areas ▪ Promote demand-driven educational programmes addressing the needs of out of school youths	
E. QUALITY EDUCATION			
2.1.7 Standard six students' minimum level of mastering in reading, numeracy and writing skills by increased from 37.3% in 2007 to 50% by 2015	2.1.7.1 Create conducive teaching and learning environment	▪ Provide students with text books and learning materials to attain a 1:1 ratio. ▪ Provide adequate teaching materials for teachers ▪ Promote the use of ICT in teaching and learning ▪ Improve the quality of pre and in-service teacher training programmes at all level ▪ Ensure equitable distribution of primary school teachers and teaching materials in all districts	MOEVT, HLIs, Private sector, Non-state actors,

	Operational Targets		Core Cluster Strategies	Intervention Packages	Key Actors
2.1.8	General performance of "O" and "A" levels students, especially girls and CWD improved by 2015	2.1.8.1	Improve the quality of secondary education	▪ Assess necessary measure for improving quality of teachers centres and the national teachers resource centres ▪ Integrate Reproductive Health Education in school curricula at all levels ▪ Integrate education with world of work by diversifying curricular ▪ Recruit and train secondary school teachers, especially women teachers, with degrees of Science, Mathematics, and English ▪ Develop and implement leadership and management training program for school Heads ▪ Construct, rehabilitate and equip school, laboratories and libraries. ▪ Recruit and train laboratory technicians and library assistants ▪ Furnish the "O" Level and "A" Level schools with all necessary facilities	MOEVT, HLIs, Private sector, Non-state actors,
(a)	Increase the transition rate of "O" level students to "A" level from 23.3% in 2009 to 50% by 2015				
(b)	Increase the transition rate of "A" Level students to tertiary education from 50% in 2009 to 65% by 2015				
(c)	Increase percentage of qualified teachers at all levels of education from 94% in 2009 to 98% by 2015				
		2.1.8.2	Strengthen the capacity of teacher training institutions	▪ Revise and implement the plan for teacher education to meet demands for required qualifications ▪ Reinforce and implement school teachers qualification benchmarks in employment and deployment ▪ Promote the use of ICT in teacher training programme ▪ Formulate special incentive package to attract and retain qualified teachers working in remote areas ▪ Ensure equitable geographical distribution of qualified school teachers ▪ Provide incentive schemes to discourage brain drain. ▪ Improve planning and forecasting capacity in school teacher's allocation.	MOEVT, HLIs, Private sector, Non-state actors
		2.1.8.3	Strengthen institutional capacity to increase enrolment of students in teachers training institutions		
		2.1.8.4	Ensure that qualified teachers are retained and equitably distributed		

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
2.1.9 Education monitoring and evaluation system improved by 2015	2.1.9.1 Improve monitoring, evaluation and assessment mechanism at all levels	▪ Strengthen the roles and functions of the inspectorate ▪ Improve education management information system (EMIS) ▪ Develop indicators for monitoring and evaluation	MOEVT, HLIs, Private sector, Non-state actors
2.1.10 Increased schools with appropriate and sustained water supply, sanitation and hand washing facilities by 2015	2.1.10.1 Ensure all schools have appropriate and sustained water supply, sanitation and functional hand washing facilities	▪ Improve and maintain school physical facilities to make it gender and child friendly ▪ Develop alternative means of water harvesting ▪ Ensure latrines in schools are accessible to people with disabilities	MOEVT, HLIs, Private sector, Non-state actors, MOFEA, MOHSW, MWECL
F. SCIENCE, INFORMATION AND TECHNOLOGY			
2.1.11 Science subjects and ICT knowledge and skills enhanced in education at all levels by 2015	2.1.11.1 Promote use of scientific and technological knowledge	▪ Create an institution to coordinate and promote science and technology in Zanzibar ▪ Establish development fund to support research in science and technology by higher institution of learning and other centres ▪ Establish School Net programme ▪ Ensure the use of ICT at all levels of governance ▪ Promote science and mathematics based subjects in schools and higher learning institutions ▪ Support science, technology and research in all levels of relevant government institutions ▪ Strengthen science and mathematics camps for both girls and boys ▪ Establish science, ICT modern Schools ▪ Ensure availability of electricity in all schools (Connection to grid)	MOEVT, HLIs, Private sector, Non-state actors, MOFEA

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
G. TERTIARY EDUCATION			
2.1.12 Increased enrolment in tertiary education from 3,624 in 2009 to 6,000 by 2015	2.1.12.1 Strengthen institutional capacity in tertiary education	▪ Expand facilities in existing tertiary education institutions and increase diversity of programme ▪ Review curricula of higher learning institutions to bring them in line with the national priorities and international standards ▪ Develop and implement planned interventions to upgrade and expand institutions of higher learning ▪ Increase transparency and access to student loans with more inclusive criteria for girls and PWDs ▪ Promote the establishment of polytechnics ▪ Increase loan base and create re-payment mechanisms	MOEVT, HLIs, Private sector, Non-state actors
	2.1.12.2 Promote the quality of tertiary education	▪ Conduct human resource needs assessment periodically and implement capacity building programme ▪ Develop incentive package to attract and retain nationals to teach at tertiary institutions in Zanzibar ▪ Develop special incentive package to attract lectures from abroad for local capacity building ▪ Strengthen research capacity of tertiary institutions ▪ Provide scholarships for masters and PhD for lectures with gender consideration ▪ Promote education of women and PWDs in higher learning institutions ▪ Develop marshal plan for improving tertiary education	MOFEA, MOEVT, HLIs, Private sector, Non-state actors,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
H. CROSS CUTTING ISSUES			
2.1.13 HIV/AIDS infection and related risks in education sector reduced by 2015	2.1.13.1 Provide life skills education to students and teachers 2.1.13.2 Ensure right of students and teachers to receive comprehensive HIV & AIDS and reproductive health education and freedom from stigma and discrimination towards PLHIV	▪ Improve competence of tutors/teachers to manage HIV/AIDS, reproductive health and safety prevention education ▪ Train teachers in child, gender and youth friendly approaches to life skills education ▪ Improve competence of tutors/teachers to provide child and youth friendly gender sensitive life skills education, including HIV/AIDS and reproductive health ▪ Implement child and youth friendly gender sensitive life skills education in schools and colleges ▪ Cost and implement POA for support to OVCs in primary and secondary schools ▪ Control transmission and reduce new infections on HIV/AIDS	ZAC, MOHSW, MOEVT, NSAs
2.1.14 75% of children enrolled in schools benefit from a comprehensive school health program by 2015	2.1.14.1 Improve coordination and up-scaling of health promoting activities in schools	▪ Coordinate and implement a Comprehensive School Health Program ▪ Support primary health care workers involvement in school health promotion ▪ Review school curriculum to accommodate health related aspects	MOEVT, MOHSW, MLYWCD, NGOs
GOAL 2.2: IMPROVED HEALTH DELIVERY SYSTEMS PARTICULARLY TO THE MOST VULNERABLE GROUPS			
Operational Targets	**Core Cluster Strategies**	**Intervention Package**	**Key Actors**
A. SERVICE DELIVERY			
2.2.1 Strengthen institutional capacity for health service delivery by 2015	2.2.1.1. Develop and implement a comprehensive health care financing strategy	▪ Provide periodic account to House of Representative and the general public on health sector achievements and decisions made ▪ Establish mechanisms for clients to put forward their claims ▪ Develop a more transparent and fair	MOHSW, CSO, Private Sector, DCs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		referral mechanism for medical transfer abroad	
	2.2.1.2. Develop, review and implement guidelines, regulations, standard Operating Procedures as per Zanzibar Food and Drugs Commission (ZFDC) Act No. 2/06	▪ Strengthen Zanzibar Food and Drugs Board (ZFDB) capacity for safety and quality of food, medicines and cosmetics. ▪ Strengthen analytical capacity and harmonise standards and quality assurance mechanisms	MOHSW, CSO, Private Sector, DCs
	2.2.1.3. Ensure smooth management of the procurement and supply chain for essential medicines and other supplies 2.2.1.4. Strengthen management, accountability and performance of health professional boards	▪ Strengthen the functioning of integrated CMS systems on procurement and supply ▪ Strengthen boards and councils to assume their respective regulatory roles ▪ Support professional associations in their role to advance professionalism and adherence to quality standards ▪ Harmonise procurement plan and advocate for its adherence by all programmes ▪ Utilise General Orders (GO's) within the MOHSW, where appropriate, and enforce their adherence ▪ Ensure existing guidelines are reviewed and operationalised ▪ Establish mechanisms to monitor and report on client satisfaction ▪ Establish mechanisms for the public to participate in decision making	MOHSW, CSO, Private Sector, DCs
	2.2.1.5. Build and strengthen local health research institutional capacity	▪ Innovative approaches to health systems development health service delivery and health research development. ▪ Initiate promising innovations (such as e-learning and telemedicine), document and share their results. ▪ Document and share research results and promote their use ▪ Develop and implement research policy ▪ Mobilize resources for health research	MOHSW, CSO, Private Sector, DCS, HLIs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
B: INFANT AND CHILD MORTALITY			
2.2.2 Reduce infant and under five mortality by 2015 (a) Reduce neonatal mortality from 31/1000 in 2008 to 15/1000 by 2015 (a) Reduce infant mortality from 54/1000 in2008 to 48/1000 by 2015 **(b)** Reduce under-five mortality from 79/1000 in 2010 to 50/1000 by 2015	2.2.2.1 Improve access to and utilization of quality newborn and child health services	▪ Design, develop and disseminate IEC and BCC messages and materials for community members on neo-natal, infant and under-five child health and nutritional issues. ▪ Strengthen community based rehabilitation services for CWDs ▪ Increase and sustain immunization coverage for all antigens ▪ Strengthen the provision of IMCI and scale up community IMCI ▪ Develop regulations and legislations related to provision of neonatal and under five child care ▪ Strengthen and scale up PMTCT interventions to protect infants from HIV infection	MOHSW, CSO, Private Sector , ZACP, MOICS
C: MATERNAL AND REPRODUCTIVE HEALTH			
2.2.3 Increase the proportion of births attended by skilled health personnel from 51% in 2004 to 90% by 2015.	2.2.3.1 Increase the number and improve the quality of skilled birth attendants	▪ Build capacity of health providers on midwifery skills with special focus on nurses ▪ Improve incentive package for RCH staff to increase retention. ▪ Increase employment, deployment and retention of skilled birth attendants at all levels	MOHSW, Private Sector, ZAC, CSO
2.2.4 Increase percentage of births delivered in health facilities from 50% in 2008 to 60% by 2015	2.2.4.1 Expand delivery services at the primary health care level and create conducive environment to attract birth delivery at health facilities	▪ Strengthen and expand basic emergency obstetric care at PHCU+ and PHCU ▪ Improve the quality of care through various innovative approaches including trainings on patient cantered care ▪ Expand infrastructure to increase privacy and friendliness of service delivery ▪ Sensitize community on the importance	MOHSW, Private Sector, ZAC, CSO

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		of skilled birth attendant ▪ Improve quality care through tailor made training to RCH staff	
2.2.5 Maternal mortality ratio reduced from 473/100000 in 2007 to 170/100,000 by 2015	2.2.5.1 Strengthen EmOC services and create demand for quality services	▪ Ensure adequate and around the clock access of basic and comprehensive EmOC at all levels ▪ Strengthen EmOC services at hospital level ▪ Strengthen the referral system ▪ Ensure availability of emergency drugs at all levels ▪ Strengthen and expand youth friendly services in existing health facilities ▪ Institutionalize maternal death audits in all the health facilities ▪ Strengthen community participation and mobilization for timely utilization of quality maternal and newborn services ▪ Increase availability of SRH information and services targeting adolescents and monitor the trend in maternal mortality over time ▪ Review both the policy and the practice in view of increasing accessibility to health facility for deliveries ▪ Improve treatment of eclampsia, APH, PPH and Post Abortion Care	CSOs, MOICS

	Operational Targets		Core Cluster Strategies	Intervention Packages	Key Actors
2.2.6	Increased use of modern contraceptive from 9% in 2004 (TDHS, 2004/05) to 20% by 2015	2.2.6.1	Improve the availability of Family Planning information and services for men and women.	▪ Review laws and policy that hinder effective implementation of maternal health services ▪ Enhance knowledge, skills and right attitudes to service providers and supervisors of family planning (FP) services ▪ Ensure sustained adequate supply of safe contraceptive methods mix at all levels ▪ Strengthen partnership with CSOs including FBOs to promote utilization of FP ▪ Improve community access to correct FP information and services ▪ Enhance and strengthen awareness campaign on contraceptive services to both men and women ▪ Strengthen integrated community based FP initiatives ▪ Strengthen integration and linkages of FP and HIV and AIDS services	MOHSW, Private Sector, ZAC, MOICS, NSAs
D. COMMUNICABLE DISEASES					
2.2.7	HIV prevalence rate among 15-24 years pregnant women reduced from 0.6% in 2008 to 0.3% by 2015.	2.2.7.1	Promote safer sex practices among sexually active women	▪ Improve capacity of public and private health care facilities on provision of comprehensive and integrated PMCTC services. ▪ Strengthen PMTCT linkages with SRH and other HIV services (CTC, HBC, EID, TB etc) ▪ Promote male involvement in PMTCT services ▪ Increase access by women to HIV information and services.	MOHSW, Private Sector, ZAC, MOICS, NSAs
2.2.8	HIV prevalence rate among general population maintained below 1%	2.2.8.1	Enhance access to HIV information and services with special focus on addressing	▪ Ensure easy access of condoms ▪ Educate the MARPs and the entire	MOHSW, Private Sector, ZAC

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	concentrated epidemic	• population on the association of risk behaviour and contracting HIV/STIs • Strengthen integration and linkages between HIV and sexual and reproductive health (SRH) services. • Promote Behaviour change and create awareness on associated negative outcomes on risk taking behaviour • Advocate for mutual faithfulness among sexual partners. • Develop communication strategy to discourage and mitigate multiple and parallel sexual relations • Strengthen and Scale up HIV services. • Promote positive living among PLHIV • Strengthen existing programs that address stigma and discrimination • Strengthen management of HIV/TB infection.	
2.2.9 HIV prevalence rate among MARPs reduced by half 2015 a) HIV Prevalence among MSM reduced from 12.3% in 2008 to 6.1% by 2015 b) HIV Prevalence among IDUs reduced from 15.1% in 2008 to 7.5% by 2015 c) HIV Prevalence among CSW reduced from 10.8% in 2008 to 5.4% by 2015	2.2.9.1 Reduce sexual and drug related HIV predisposing risk behaviours and increase access to quality and comprehensive STIs and HIV & AIDS related services	• Educate the MARPs and the entire population on the association of risk behaviour and contracting HIV/STIs • Strengthen integration and linkages of sexual and reproductive health (SRH) and HIV and AIDS services • Improve access of MARPs to HIV prevention information and services • Produce BCC materials and associated negative outcomes on risk taking behaviour • Advocate for mutual faithfulness among sexual partners. • Develop communication strategy to discourage and mitigate multiple and parallel sexual relations	MOHSW, Private Sector, ZAC
2.2.10 Morbidity and mortality among people living with HIV	2.2.10.1 Strengthen delivery of HIV& AIDS treatment care and	• Build capacity of health care workers to provide quality HIV & AIDS services.	

	Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	& AIDS reduced by 80% by 2015	support services	▪ Provide comprehensive care and support to PLHIV ▪ Strengthen referral system and linkages to care and support ▪ Strengthen the delivery of care and treatment services for the prevention of mother to child transmissions (PMTCT+)	
2.2.11	Socio-economic impact of HIV & AIDS on individuals, families and communities reduced by 80% by 2015	2.2.11.1 Alleviate the impact of HIV & AIDS through reduction of stigma and discrimination and provision of socio-economic support	▪ Raise awareness among PLWH on the importance and means of good nutrition and intake of ARVs as prescribed ▪ Implement measures identified in the Health Sector Strategic Plan on HIV/AIDS 2006 (HSSP) and the ZNSP II ▪ Implement impact mitigation and monitoring, evaluation and research measures identified in the ZNSP II ▪ Strengthen income generation activities to PLHIV	MOHSW, Private Sector, ZAC, CSO
2.2.12	Incidence of malaria cases reduced from 0.9% in 2008 to 0.5% 2015	2.2.12.1 Scale up Malaria Control recommended strategies - ACTs - Long lasting Insecticide treated nets - Indoor Residual Spraying - Behavioural Change Communication - Monitoring and Evaluation	▪ Blanket/Focal residual house spraying ▪ Promote environmental manipulation to get rid of mosquito breeding sites ▪ Strengthen malaria surveillance to halt transmission ▪ Improve malaria case management and management of other childhood illness.	MOHSW, Private Sector NGOs
2.2.13	The percentage of under-five sleeping under ITNs increased from 80% in 2009 to 100% by 2015	2.2.13.1 Use of Long Lasting Insecticidal Mosquito Nets	▪ Scale up the use of LLITN/ITN and re-treatment of conventional nets ▪ Promote BCC and IEC materials with respect to LLITN/ITN	MOHSW Private Sector NGOs
2.2.14	HIV/TB co-infection cases reduced from 51/100,000 in 2009 to 24/100,000 by 2015 (a) Reduce number of TB cases from 369 in 2007 to 250 by	2.2.14.1 Strengthen Tuberculosis control and Management	▪ Sustain comprehensive TB prevention, care and treatment ▪ Increase control and management of TB cases ▪ Mobilize communities to utilize available TB related health services.	MOHSW, CSO, Private Sector, ZAC, CMO

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
2015		▪ Sensitize communities on routine counselling services of all TB cases.	
E: NON-COMMUNICABLE DISEASES (NCDs)			
2.2.15 Strategic Plan for neglected tropical diseases implemented by 2015	2.2.15.1 Ensure adequate control and management of NCDs mainly diabetes, hypertension, cancer (esp. breast, cervical, prostate), filariasis, leprosy, fistula, asthma, mental health illness and others	▪ Provide essential equipment and improve the supply of drugs and other supplies ▪ Strengthen prevention and treatment of NT Diseases ▪ Promote community health and nutrition education	MOHSW, CSO, Private Sector, ZAC, CMO, MOICS, NSAs
2.2.16 Reduced morbidity and mortality due to Non Communicable diseases	2.2.16.1 Control the spread of non-communicable and emerging diseases and enhance effectiveness of treatment of NCDs	▪ Continue prevention programs by focusing attention to young people and school children ▪ Strengthen the capacity of Health institutions to respond to emerging diseases ▪ Improve and strengthen institutional capacity (management, physical and human resources) for mental health illnesses and other neglected diseases ▪ Strengthen prevention and treatment of NC diseases ▪ Strengthen institutional management capacity for prevention and treatment of various types of cancers	MOHSW, CSO, Private Sector
	2.2.16.2 Attain better understanding of the incidence, prevalence and risk factors of NCDs in Zanzibar	▪ Administer prevalence survey of NCDs in Zanzibar	MOHSW, CSO, Private Sector,
	2.2.16.3 Improve prevention, early detection and management of five priority NCDs	▪ Implement recommendations from STEPs and KAP assessments ▪ Ensure availability of guidelines, equipment, drugs and supplies at all health facilities in line with approved guidelines (including dietary)	MOHSW, CSO, Private Sector,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ improve quality of care of patients with NCDs	
	2.2.16.4 Improve awareness and management of injuries and congenital condition	▪ Promote safety in the workplace ▪ Improve parenting skills in relation to prevention of accidents and injuries involving children ▪ IEC on need for prompt treatment of injuries and congenital condition ▪ Improve availability of skilled health professionals for treatment of injuries and congenital condition ▪ ensure injuries and congenital conditions are treated according to guidelines through routine performance assessment at health facilities	MOHSW, CSO, Private Sector,
F. HUMAN RESOURCES FOR HEALTH			
2.2.17 Proportion of skilled health personnel providing quality EHCP services with particular focus on primary level increased from 52.6 % in 2009 to 60% by 2015	2.2.17.1 Improve HRH capacity, retention and management of skilled personnel to provide quality services especially at primary level	▪ Develop and implement HRH strategic plan (including performance monitoring) ▪ Maintain and utilize HRIS for planning and management of HRH ▪ Implement the recommendations given in the Training Master Plan ▪ Review and revise HRH curricula to ensure skilled health personnel are trained to provide services according to the EHCP ▪ Deploy appropriate skilled health personnel to ensure implementation of the EHCP ▪ Develop and implement retention strategies especially for hard to reach population ▪ Protect the rights and safety of all health	MOHSW, CSO, Private Sector, DCS

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ personnel at the workplace ▪ Explore and implement e-learning and telemedicine strategies as appropriate	
G: SOCIAL WELFARE			
2.2.18 Awareness, knowledge and rehabilitation services to substance abusers increased by 2015 (a) Morbidity and mortality rate among substance users reduced by 50% in 2015. (b) Blood borne diseases related to substance users including HCV reduced from 26.2% in 2007 to 13% by 2015	2.2.18.1 Strengthen the organization and human capacity of health sector, CSOs, CBOs to deal with substance abuse related services	▪ Improve the proper care and treatment for substance users ▪ Control the spread of blood borne diseases to substance users ▪ Establish detoxification centres for substance abusers in both islanders ▪ Develop the training guidelines and operational manual for detoxification procedures in Zanzibar ▪ Develop institutional and human resource capacity for the detoxification centres ▪ Develop CSO/CBO capacity to mobilize and enhance demand generation for detoxification services ▪ Establish client monitoring system for those who have undergone detoxification process	MOHSW, ZAC, MORASD, MOLYWCD, CSOs, CBOs
H: CROSS CUTTING ISSUES			
2.2.19 Effective and efficient integrated Health Information Systems(HIS) developed and implemented by 2015	2.2.19.1 Ensure use of HIS for analysis, and promotion of evidence based health interventions at community and national levels	▪ Develop and Implement Strategic Plan on HIS ▪ Increase capability in all areas especially in epidemiology and biostatistics ▪ Develop and implement an IEC strategy on HIS targeted at the general public ▪ Solicit external support to implement an ICT & HIS strategy for the health sector ▪ Enhance sectoral integration in all health information sub-systems ▪ Strengthen the existing HMIS capacity (develop national standard HMIS tools	MOHSW, CSO, Private Sector, DCS
	2.2.19.2 Strengthen Health Promotion services	▪ Implement the Community Health Strategy (adopted in 2008)	MOHSW, CSO, Private

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
				▪ Develop and implement Community Health Strategic Plan (CSP) ▪ Raise Community awareness about health and conditions that affect health and Community involvement in health activities in the context of Zanzibar Culture, customs and taboos. ▪ Identify the development of viable community health projects ▪ Establish an integrated health and nutrition promotion forum at the district level, involving all programmes ▪ Enhance the capacity of districts to oversee and support the communities in implementing health and nutrition activities. ▪ Enhance the capacity of SHCCs ▪ Enhance the capacity of districts to respond to community demand for health services ▪ Strengthen Health Promotion unit	Sector, DCS
2.2.20	HIV&AIDS, Gender, Environment and Population aspects mainstreamed and International Conventions adopted by 2015	2.2.20.1	Create mechanisms to monitor and improve workplace interventions on HIV&AIDS, gender mainstreaming, population issues, sanitary and environment conditions in public facilities	▪ Develop a strategy to promote human rights based programming in the health sector ▪ Develop a strategy for gender mainstreaming in the health sector ▪ Reinforce infection prevention and control (IPC) in health facilities, in order to protect the health of health workers and their clients ▪ Ensure correct environmental disposal of expired items and medical waste	MOHSW, CSO, Private Sector, DCS, ZAC, Municipality,
Goal 2.3: IMPROVED ACCESS TO WATER, ENVIRONMENTAL SANITATION AND HYGIENE					
A. WATER SUPPLY					
2.3.1.	Access to clean and safe water in rural and urban areas	2.3.1.1	Expand water infrastructure and access in both rural and urban	▪ Enforce legal and regulatory framework for water resource management	MWCEL, communities, CSO, Private Sector,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
increased by 2015 a) Access to clean and safe water increased from 60% in 2010 to 75% in 2015 in Rural b) Access to clean and safe water increased from 80% in 2010 to 95% in 2015 in urban areas	areas.	▪ Encourage public private Partnership in provision, operation and maintenance of water projects and schemes ▪ Construct Ferro cement tanks and jars in schools ▪ Involve rural communities in construction and management of rural water schemes ▪ Involve women in decision making roles in water development programmes ▪ Improve customer satisfaction by consulting all types of stakeholders, including PWDs ▪ Develop back up power for all electricity powered water sources to minimise cuts in water supply ▪ Ensure mechanism for vulnerable groups to access water services	MORASD, AG
	2.3.1.2 Improve and sustain water supply services in urban and rural areas	▪ Establish mechanism to manage and maintain water supply at community levels both in urban and rural areas ▪ Ensure adequate training for water providers and community based water user entities ▪ Ensure that there is a clear and known strategy for ensuring access to water for the poorest and most vulnerable	MWCEL, communities, CSO, Private Sector, MORASD, AG
	2.3.1.3 Ensure cleanness and safety of water	▪ Reduce risks of contamination of catchment areas and water sources ▪ Support replacement of asbestos cement pipes ▪ Ensure that all piped supplies are chlorinated on a continual basis to leave a chlorine residual at point of abstraction and set up an intermittent schedule of chlorinating shallow wells ▪ Undertake a regular water quality monitoring programme	MWCEL, communities, CSO, Private Sector, MORASD, AG

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	2.3.1.4 Strengthen ZAWA technical management	▪ Improve technical knowhow of ZAWA staff on the issue of water resource management ▪ Improve human resources capacity and efficiency in water services delivery to consider both women and men	MWCEL, communities, CSO, Private Sector, MORASD, AG
2.3.2. Water revenue collection Increased from 700 million in 2009 to 5 billion by 2015	2.3.2.1 Strengthen financial management of ZAWA	▪ Improve efficiency and effectiveness of revenue collection ▪ Improve customer satisfaction, and public relation services ▪ Discourage illegal water connections by apprehending and prosecuting culprits ▪ Control water leakages and unauthorized usage ▪ Develop and implement strategy for enhancing revenue collection for commercial water users ▪ Improve management of water sources	MWCEL, communities, CSO, Private Sector, MORASD, AG
2.3.3. Saline water intrusion risks reduced	2.3.3.1 Enhance integrated management of database on ground water abstraction activities	▪ Control overexploitation and over abstraction of ground water resources ▪ Promote water use efficiency in tourism and hotel/guest houses industry (and other places) and encourage utilization of wastewater recycling technologies/plants ▪ Discourage drilling of private bore holes in town and rural areas ▪ Discourage overstocking of domestic water in urban and rural areas	MWCEL, communities, CSO, Private Sector, MORASD, AG
	2.3.3.2 Ensure efficient and effective Integrated Water Resources Management	▪ Promote local rainwater harvesting practices and introduce new technologies for both domestic and institutional facilities ▪ Introduce regular tracking and follow-up on reduction of time burden in access to water services to women and households ▪ Train and raise awareness on environmental management	

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
				▪ Demarcate and protect water sources in catchment areas ▪ Develop implementation plan for the Surface Water Management	
2.3.4.	water sector financing and monitoring improved and sustained by 2015	2.3.4.1	Ensure proper coordination of domestic and external financing	▪ Establish financial forum for partner coordination ▪ Enhance water project coordination in both planning and budgeting ▪ Strengthen local resources mobilization from different stakeholders	MWCEL, communities, CSO, Private Sector, MOFEA, MORASD, AG
2.3.5.	coordination and collaboration among national and regional water authorities and related sectors expanded and sustained by 2015	2.3.5.1.	Ensure water sector networking and partnership	▪ Share knowledge, skills and experience ▪ Provide technical assistance and support in water related matters ▪ Develop plans for responding to emergency situations	MWCEL, communities, CSO, Private Sector, MORASD, AG
B. ENVIRONMENTAL SANITATION AND HYGIENE					
2.3.6.	The proportion of households with access to basic sanitation increased from 83% in 2009 to 90% by 2015	2.3.6.1.	Facilitate construction and use of sanitary facilities in both rural and urban areas and good hygiene practices	▪ Involve CSOs in sensitization and advocacy for construction and use of sanitary facilities and good hygiene practices in both rural and urban areas ▪ Ensure that good hygiene and sanitation practices are a core part of the curriculum ▪ Acquire land for the treatment and disposal of solid waste in major towns ▪ Promote public-private partnership in solid and liquid waste management in both rural and urban areas ▪ Support community artisans to be able to build a number of designs for household latrines which are affordable to people of different income groups	Municipal Authority, community, Private Sector, MoRASD, MoWCEL, AG, MOHSW, LGA, CSOs, MALE, ZAWA
		2.3.6.2.	Strengthen and safeguard provision of sanitation services	▪ Develop and implement sanitation policy ▪ Develop national strategy for hygiene promotion ▪ Develop Public Health Law ▪ Legislate and enforce on compulsory	Municipal Authority, community, Private Sector, MoRASD, MoWCEL, AG, MOHSW, LGA, CSOs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		latrine usage ▪ Build the capacity of District Authorities on sanitation management ▪ Enforce laws on the provision of sanitation facilities in rural areas and unplanned settlements ▪ Strengthen coordination and management of sanitation service delivery ▪ Promote hygiene education into water and sanitation delivery ▪ Review National Water Policy and Legislation to accommodate sanitation issues	MALE, ZAWA
2.3.7. All schools and other public places have adequate sanitary facilities by 2015	2.3.7.1. Increase access to sanitation facilities at public places and institutions	▪ Construct adequate sanitation facilities at all public places including easy access to such facilities by women and people with disabilities ▪ Construction of 100 toilets with reliable water supply per year in primary schools ▪ Ensure all public facilities including schools and health facilities have functional hand-washing facilities and a constant supply of soap ▪ Develop guidelines for water, hygiene and sanitation facilities and ensure functioning hand-washing facilities at all schools and health facilities ▪ Ensure effective training of health professionals and support staff on health care waste management	MoWCEL, MOEVT, LGA, ZAWA
2.3.8. Zanzibar Urban Sanitation and Drainage Programme – Phase II implemented by 2015	2.3.8.1. Develop sewerage and drainage and solid wastes disposal facilities and promote good hygiene practice	▪ Promote the use of Ventilated Improved Pit Latrines (VIPs) and alternative options for the poorest members of the community. ▪ Improve the sewerage network system and Solid waste collection and Disposal facilities	Municipal Authority, community, Private Sector, MORASD, MWCEL, AG, MOHSW, LGA, CSOs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Provide sustainable storm water and waste water drainage system in urban and rural areas	
		▪ Strengthen coordination and management of sanitation service delivery	
		▪ Enforce laws on the provision of sanitation facilities in rural areas and un-planned settlements	
		▪ Promote hygiene education into water and sanitation delivery	
		▪ Expand and improve urban sewerage and drainage system	
		▪ Promote the use of simplified sewerage systems in rural areas and un-planned settlements	
		▪ Institute and implement human resource development schemes	
		▪ Develop and enforce by-laws on safe management of liquid and solid waste at household level.	
		▪ Ensure sustainable coordination of sanitation service delivery	
		▪ Build capacity of the municipality council and LGA to sustain and manage sewerage facilities	
		▪ Institute and implement human resource development schemes	
		▪ Promote hygiene education on water and sanitation delivery	

GOAL 2.4: PROVIDE DECENT AND ADEQUATE SHELTER AND SUSTAINABLE HUMAN SETTLEMENT

Operational Targets	Core Cluster Strategies	Intervention Package	Key Actors
2.4.1 Increased and ensured access to affordable housing	2.4.1.1 Encourage development of PPP and participation of financial institutions in housing schemes	▪ Encourage development of PPP and participation of financial institutions in housing schemes	Community, Private Sector, MLYWCD, MWCEL, MORASD,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
(a) Reduce by 50% housing deficit from 4,000 per year in 2010 to 2,000 per year by 2015 in urban areas and from 2,000 per year in 2010 to 1,000 per year by 2015 in rural areas (b) Reduce by 50% the growth of informal settlement by 2015 **(c)** Reduce by 50% the growth of unplanned settlement by 2015		▪ Ensure provision of affordable housing to accommodate the demand on housing ▪ Introduce affordable and low cost housing delivery system.	LGAs, CSOs
	2.4.1.2 Ensure provision of affordable housing to accommodate the demand	▪ Improve institutional coordination in implementing settlement plan ▪ Review and implement settlement structure plan ▪ Provide access and service to surveyed plots ▪ Develop and enforce quality and affordable construction standards	Community, Private Sector, MLYWCD, MWCEL, MORASD, LGAs, CSOs
2.4.2 Review and develop policies on land and urban development with respect to proper land use plan at local and national levels	2.4.2.1 Ensure balanced land-use distribution for social and economic activities.	▪ Prepare planning policies to guide proper human settlements development and affordable housing standards in urban and rural areas ▪ Encourage the development of multi-story housing schemes ▪ Ensure that development of urban and rural settlements are linked to rapid growth of populations and the need of basic service provision ▪ Encourage Public-Private Partnership (PPP) in housing and service provision ▪ Ensure gender-balanced in respect to access to land, both in rural and urban areas ▪ Introduce affordable low cost housing in rural areas.	Community, Private Sector, MLYWCD, MWCEL, MORASD, LGAs, CSOs, MHSW.
2.4.3 Plan and ensure appropriate services on urban and rural settlements with affordable standards and proper planning procedures	2.4.3.1 Strengthen and enforce the existing urban and rural settlement standards	▪ Promote enforcement of the urban and rural settlement standards through public sensitization and awareness creation ▪ Ensure rational distribution of infrastructural services	Community, Private Sector, MLYWCD, MWCEL, MORASD, LGAs, CSOs, MHSW, MJCA.

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Prepare integrated human settlement plans for urban and rural areas in coordination with the District Councils and local community. ▪ Encourage participatory planning and development control at grass root level. ▪ Prepare environmental profiles in order to enhance access to land free from hazards. ▪ Establishing land reserves in both urban and rural areas to ensure sustainable use of land and resources. ▪ Prepare and scale up formalization of informal settlements. ▪ Ensure provision of planned and serviced plots in urban and rural areas	
2.4.4. Develop participatory planning at grass root level	2.4.4.1. Sensitise the public awareness about participatory planning with particular emphasis on decent urban and rural settlement	▪ Integrate participatory planning in planning process ▪ Incorporating community and private sector in settlements planning and development. ▪ Harmonize process of participation between Councils, community and private sector in service provision ▪ Harmonize urban and rural settings to reduce the effects of pull and push factors ▪ Develop sustainable human settlements through participatory planning process with involvement of NGOs, civil society and local communities ▪ Design and adopt appropriate participatory models for Zanzibar ▪ Roll out participatory planning approaches	MOFEA, MLYWCD, LGAs, CSOs
2.4.5. Improve management capacity in planning of urban and rural settlements	2.4.5.1. Ensure capacity building programmes are put in place	▪ Enhance effectiveness and efficiency in land administration and management in order to improve social well being of the communities.	Community, Private Sector, MLYWCD, MWCEL, MORASD, LGAs, CSOs, MHSW.

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Establish land coordination units at District Council levels in order to efficiently administer and manage land development ▪ Building capacity (training) of land sector institutions and local councils in enhancing security of tenure and protection of land degradation. ▪ Provide education and awareness on land laws and regulations and land management. ▪ Enhance the enforcement of building standards and codes in the provision decent and affordable housing in urban and rural areas ▪ Ensure enforcement of planning and building legislations in view of standards and codes. Train more experts in the area of urban and rural settlement ▪ Ensure all urban and rural settlement departments have adequate skilled manpower	
2.4.6. Integrate population distribution and urbanization into national plans and policies by 2015	2.4.5.2. Reduce rapid rate of rural to urban migration	▪ Increase provision of social services to rural areas (water, education and health) ▪ Improve rural infrastructure e.g. power, road network ▪ Promote employment opportunities through PPP, state and non state actors	Communities, Private Sector, DPs, MLWCD,MWCEL, MORASD, LGAs, CSOs, MHSW
	2.4.5.3. Harmonize urban growth rate with supply of basic services e.g. housing, water, transport, health and education	▪ Promote policies to accommodate urban migrants ▪ Reduce proportion of slum dwellers ▪ Promote small towns development or satellite towns ▪ Improve professional capacity for urban management ▪ Promote recycling of urban waste ▪ Promote PPP in urban management	Communities, Private Sector, DPs, MLWCD,MWCEL, MORASD, LGAs, CSOs, MHSW

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
GOAL 2.5: IMPROVE NUTRITIONAL STATUS OF CHILDREN AND WOMEN, WITH FOCUS ON THE MOST VULNERABLE GROUPS			
2.5.1 The prevalence of malnutrition in children and women reduced (a) Underweight in children aged 6-59 months reduced from 19% in 2010 to 15% by 2015 (b) stunting in children aged 0-59 months reduced from 23% in 2010 to 20% by 2015 (c) Anaemia in children aged 6-59 months reduced from 75% in 2010 to 60% by 2015 (d) Anaemia in pregnant women aged 15-49 year reduced from 63% in 2010 to 40% by 2015	2.5.1.1 Promote consumption of food fortified with vitamins and minerals	▪ Supplement children aged 6-59 months with vitamin A twice a year, and postpartum women with vitamin A. ▪ Provide a package of interventions to children aged 6-59 months and pregnant women to prevent and control anaemia, including iron-folate/micronutrient supplements and de-worming tablets. ▪ Enact legislation and regulations for the mandatory fortification of food staples. ▪ Regulate foods imported or processed in Zanzibar to ensure that they conform to standards. ▪ Promote the consumption of fortified foods.	MOHSW MOICS, Community leaders, MTTI
	2.5.1.2 Support and promote appropriate infant and young children feeding practice	▪ Ensure every health facility with maternity services is Baby Friendly ▪ Integrate counselling on infant and young child feeding into antenatal, postnatal and child health services. ▪ Develop and implement a communication strategy to improve infant and young child feeding	MOHSW, CSOs, FBOs, NGOs
	2.5.1.3 Ensure treatment of acute malnutrition	▪ Expand services for the integrated management of acute malnutrition in children throughout Zanzibar ▪ Integrate services for the management of acute malnutrition into PMTCT and HIV Care and Treatment services ▪ Community mobilization for IMM	MOHSW
	2.5.1.4 Ensure quick response to early symptoms	▪ Establish systems to monitor nutritional status throughout the year ▪ Ensure that emergency preparedness and response plans prioritize nutrition interventions.	MOHSW, MALE

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	2.5.1.5 Improve utilization of adequate, nutritious and quality food	▪ Support mass media campaigns on food and nutrition. ▪ Support for school feeding and school gardening sub projects	MOHSW, MLYWCD, CSOs, MALE, CMO, NSA, MOEVT, MOFEA
GOAL 2.6: IMPROVED SAFETY NETS AND SOCIAL PROTECTION FOR POOR AND VULNERABLE GROUPS			
2.6.1 Policy framework for supporting Social Protection developed and endorsed by 2015. (a) Implementation strategy for the social protection policy in place by 2015	2.6.1.1 Support formulation of Social Protection Policy and develop management information system to assist its implementation	▪ Undertake situation analysis of social protection activities. ▪ Undertake assessment of different safety net schemes ▪ Develop and implement social protection policy ▪ Review and implement recommendations of the existing safety net schemes	MOFEA, MLYWCD, MOHSW, MOCAGG, ZSSF, CSOs, private sectors
	2.6.1.2 Ensure access to and utilization of services by vulnerable and hard-to-reach areas	▪ Target safety nets and transfers for vulnerable pregnant women and children. ▪ Monitor proper implementation of guidelines for granting waivers and exemptions from payment of fees for accessing services	MOFEA, MLYWCD, MOHSW, ZSSF, CSOs, Private Sector
	2.6.1.3 Reduce exposure to risk/shocks and enhance resilience among vulnerable households	▪ Support poor families and households to provide care and protection to the children under their care ▪ Expedite children law reform to improve the legal protection of most vulnerable children ▪ Ensure collection of adequate and reliable data on children outside family care (children's homes, foster homes); children in conflict with the law and children who are abused, neglected and exploited. ▪ Improve capacity to deal with disasters and strengthen emergency preparedness systems ▪ Build capacity institutions and individual in terms of equipment and necessary skills	MOFEA, MLYWCD, MOHSW, ZSSF, CSOs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	2.6.1.4 Ensure better quality of life and care for elders, PWD, MVC and others.	▪ Improve social services such as food, shelter and clothes. ▪ Strengthen and expand children and elders survival / protection and development ▪ Establish adequate rehabilitation of people with debilitating conditions (including rehabilitation of drug abusers outside the mental health hospital; and rehabilitation services for physically handicapped) ▪ Map out the profiles and special needs of various disadvantaged groups and people with disabilities ▪ Adopt the disadvantaged groups and people with disabilities service quality standard document to the Zanzibar context ▪ Develop and implement health policy for elderly and MVC ▪ Enhance the capacity for M/OVC to respond to their special needs established at all levels (national, District, Shehia levels). ▪ Develop an information and knowledge management system to ensure adequate and reliable data is collected on children outside family care and children at risk of abuse, neglect and exploitation ▪ Strengthen systems and service delivery mechanisms to assist children at risk and respond to child abuse and neglect	MOFEA, MLYWCD, MOHSW, ZSSF, CSOs, Community
	2.6.1.5 Ensure safety nets provision	▪ Implement targeted safety nets and social transfers for vulnerable pregnant women and children under 2 years of age. ▪ Monitor the impact of safety nets and social transfers on the promotion of good	MOFEA, MLYWCD, MOHSW, ZSSF, NGO,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		nutrition at critical points.	
2.6.2 The quality of life for MVC/OVC, PLHIV, people with disabilities and elders by 2015 improved	2.6.2.1. Ensure better quality of life and care at old-age, MVC houses and others	▪ Improve social services such as food, shelter and clothes ▪ Strengthen and expand elders survival/protection and development ▪ Establish adequate rehabilitation of people with debilitating conditions (including rehabilitation of drug abusers outside the mental health hospital; and rehabilitation services for physically handicapped) ▪ Map out the profiles and special needs of various disadvantaged groups and people with disabilities ▪ Adapt the disadvantaged group and people with disabilities service quality standard document to the Zanzibar context ▪ Establish elders protection policy ▪ Enhance the capacity for M/OVC to respond to their special needs established at all levels (National, Districts Shehia levels)	MOHSW, CSO, Private Sector, LGAs, ZSSF
GOAL 2.7: PROMOTE SPORTS, CULTURE AND PRESERVE HISTORICAL, CULTURAL AND NATURAL HERITAGE			
2.7.1 Conservation and sustenance of both cultural and historical heritage sites increased by 2015	2.7.1.1 Enhance conservation of Stone Town as one of the world's cultural and historical heritage sites	▪ Promote and preserve Stone Town cultural and historical heritage sites	MoICS, CSOs, Commission of Tourism, MWCEL, STCDA, MOEVT, MTTI
	2.7.1.2 Promote community based conservation programs that focus on preservation of cultural and historical heritage sites	▪ Develop sustainable eco-tourism culture and historic sites ▪ Promote community involvement in participatory planning and management programs of cultural and historical	MoICS, CSOs, Commission of Tourism, MWCEL, STCDA, MOEVT, MTTI

Operational Targets		Core Cluster Strategies		Intervention Packages	Key Actors
				heritage sites	
				▪ Advocacy private sector to support preservation of cultural and historical heritage sites	
				▪ Establish regional museums in potential cultural sites and sensitise community to establish community museums	
				▪ Establish leadership museum and documentation centre	
2.7.2	Cultural heritage and sports for social development promoted	2.7.2.1	Prepare and implement Cultural Policy and Act	▪ Review and implement policies and legal framework for sports and culture development	MOICS, MOEVT, CSO, Parents, Communities, Private Sector, CMO, ZAC, AG, STCDA, SUZA
				▪ Increase availability and accessibility of sports gears, facilities and training centres by both girls and boys	
				▪ Promote traditional cultural activities	
				▪ Redefine music and film as an industry within the context of tourism development	
				▪ Promote the establishment of public and private professional centres for identifying and training talented young female and male musicians and other performing artists	
				▪ Provide adequate and appropriate sports and recreational facilities at district, regional and national levels	
				▪ Establish linkages and partnership with countries and international sports agencies	
				▪ Encourage wider participation of communities in sports	
2.7.3	Sports clubs and cultural groups at all levels promoted by 2015	2.7.3.1	Participate effectively in national, regional and international tournaments	▪ Develop a system of training and retraining of trainers of culture and sports	MOICS, MOEVT, CSOs, Private Sector, HLI, MTTI, MOFEA, DCMA, COSOZA
				▪ Support programme for the development of physical culture and sports especially among male and female youth	

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		- Develop and improve talented national team under age of 17 and 21 to enable them to compete effectively - Provide adequate and appropriate sports and recreational facilities at district, regional and national levels - Establish Culture and Music Academy - Enhance artists and cultural performers in promoting Zanzibar values - Establish public and private professional centre for identifying and training of talented young musicians and artists - Redefine music and film as industry within the context of tourism development - Conducting comprehensive cultural survey and develop cultural map of Zanzibar - Support the establishment of national cultural centre in Pemba - Establish Culture and sports academy - Improve functioning of copy writes society	
2.7.4 Kiswahili promoted in Africa and globally for education and commerce by 2015.	2.7.4.1 Enhance promotion and use of Kiswahili as national, regional and international language	- Strengthen use of Kiswahili at different areas of international arena (cultural, professional, political and business) - Conduct and promote National writing and composing competitions with gender balanced participation - Publish Kiswahili books for foreigners and native, professionals and non professionals - Training of professional translators and interpreters - Establish modern Kiswahili Information Centre - Conduct workshops on uses of Kiswahili	MOICS, MOEVT, CSOs, Parents, Communities, Private Sector, SUZA, BAKIZA, MOFEA,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		in mass media ▪ Prepare and produce Kiswahili programme in mass media ▪ Conduct research on Kiswahili dialects, literature and usage ▪ Formulation of Kiswahili policy	

CLUSTER III: GOOD GOVERNANCE AND NATIONAL UNITY
BROAD OUTCOME 3: ENHANCED DEMOCRATIC INSTITUTIONS AND PROCESSES, RULE OF LAW AND NATIONAL UNITY

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
GOAL 3.1: ENSURE GREATER CITIZENS PARTICIPATION IN DEMOCRATIC GOVERNANCE			
3.1.1 The institutional and functional aspects of Local Government Authorities established by 2015	3.1.1.1 Fast track finalization and implementation of Local Government Reform Program through Decentralization by Devolution	▪ Create awareness of key stakeholders on Local Government Reform processes ▪ Formulate and implement a Policy Framework on Local Government ▪ Rationalize and harmonize responsibilities of Central, Regional Administration, Districts and LGAs ▪ Strengthen the management of human resource in LGAs; ▪ Strengthen the institutional capacities of LGAs; ▪ Develop and implement mechanisms to enhance financial resource base of LGAs ▪ Establish better and more constructive partnership and cooperation between the LGAs and NSAs ▪ Strengthen the Ministry responsible for Local Government and promote good governance practices within LGAs ▪ Facilitate mainstreaming of gender, HIV and AIDS and other cross-cutting issues in local government reform processes ▪ Harmonize other sectoral policies to conform with policy framework on local government	MORASD, PO, CMO, MOFEA, MOCAGG, MLYWCD, LGAs, CSOs, MOICS, HLI
3.1.2 Comprehensive Planning and Monitoring System established and Functional at both National and District level by 2015	3.1.2.1 Strengthen local level governance, increase participation and representation of all, including the most vulnerable groups in design, implementation and monitoring of policies	▪ Build district capacities for effective planning, implementation and M&E ▪ Institutionalize District level Development Planning Practices ▪ Design and implement training programs for the Councillors and other local level leadership ▪ Assess capacity of local NGO's and CSO's to identify their needs and design a program to support them ▪ Establish village (area) participatory planning, M&E modalities and facilitation	PO, MOFEA, MoRASD, MWCEL, MALE, CMO, CSOs, OCGS, MOEVT, MOHSW, LGAs
	3.1.2.2 Strengthen Planning, M&E and MIS at MDAs	▪ Improve MDAs capacity for effective planning ▪ Review the current Monitoring Master Plan and	MOFEA, MDAs, CSOs, private

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		Develop a new MMMP for MKUZA II ▪ Improve Monitoring Systems of MDAs ▪ Improve quality of reporting MKUZA implementation ▪ Establish/ improve MIS in MDAs	Sectors
	3.1.2.3 Mainstream cross-cutting issues in District Planning System	▪ Conduct training in participatory planning, budgeting and M&E to DACCOM/SHACCOMS ▪ Supervise, monitor and support implementation of cross-cutting interventions at district level	CMO, MORASD, MOFEA, MDAs
	3.1.2.4 Promote community participation in planning and implementation of natural resource management, utilization and maintenance	▪ Assess resource endowment in each district and develop a program for their management, utilization and maintenance ▪ Train community (women, men, youth) in participatory planning and management and raise awareness of community members on planning for natural resources management including land ▪ Create legal instruments and institutions that provide participation for citizens, including local people in the environmental/natural resources management.	MORASD, MALE, MLYWCD, CSOs, Private Sector, MWCEL, MOICS, MTTI, MoWCEL
3.1.3 Participation of women in policy and decision making organs increased from 30% to 50% by 2015	3.1.3.1 Empower and increase representation of women in policy and decision making levels	▪ Enforce affirmative action for women empowerment, including encouraging them to be in the forefront to take decision/policy making and other senior positions and build capacity of potential women candidates ▪ Develop and implement programs that promote education for women at all levels ▪ Develop and implement sensitization program for women and men to recognize the role and importance of active and meaningful women participation in decision making ▪ Train women in management and leadership skills ▪ Revise and implement Gender Development Policy ▪ Train top and senior government executives on gender issues	MLYWCD, MOEVT, CSOs, LGAs, CMOs
3.1.4 Framework for effective involvement of the youths and vulnerable groups in policy and decision making developed and operational by 2015	3.1.4.1 Promote inclusion of youths and vulnerable groups in decision and policy making processes	▪ Put in place institutions, which cater for the vulnerable groups to access credit and land, promote development of collective investment schemes – directly or indirectly ▪ Formulate, enforce and monitor equitable and	MLYWCD, MOEVT, MWCEL, MTTI, CSOs, LGAs, CMOs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		participatory policies and action plans (inclusive policies) and raise awareness on respective rights of youths and vulnerable groups ▪ Continue making use of Children, Youths and Disability Councils and fora to take action on matters that concern them ▪ Continue to empower the community members, especially the vulnerable groups through provision of information, training, education, guidance and material support, complementing this with a general sensitization program on empowerment for all stakeholders	MOCAGG, all Ministries, Zanzibar Disability Council, Youth Wings
3.1.5 Corporate Governance strengthened by 2015	3.1.5.1 Improve institutional and regulatory systems to ensure good corporate governance	▪ Create enabling environment for achieving adequate, regulatory and accountable system for corporate governance ▪ Improve accounting and auditing standards ▪ Adopt International Financial Reporting Standards (IFRS) ▪ Strengthen regulatory systems for corporate governance	MTTI, Private Sector, Audit Firms, MOCAGG
3.1.6 Public Private Policy engagement promoted by 2015	3.1.6.1 Develop effective framework for partnership and cooperation between government and NSAs	▪ Develop comprehensive guidelines for working relationship between State and Non State actors (private sector and CSOs) ▪ Redefine role and scope between public and private sector for effective service delivery and inculcate dialogue culture ▪ Strengthen the Zanzibar Business Council ▪ Design programs, which will facilitate the potential business men and women to venture more aggressively into business and actually own and run private enterprises	MTTI, MOCAGG, MLYWCD, Private Sector, CSO, PO, AGC, Zanzibar Business Council, MOICS, MOFEA, MDAs, ZNCCIA
	3.1.6.2 Develop conducive environment for the private sector to grow and thrive	▪ Review structure, performance and contribution of Private Sector to the economy and implement the subsequent recommendations ▪ Streamline licensing and taxation procedures for businesses and put in place effective business regulatory mechanisms	MTTI, MOCAGG, MLYWCD, MOFEA AGC, MALE CMO, CSOs

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Institute an effective tax payers forum to enhance harmonization of Tax Regimes ▪ Improve Taxpayers Education and remove nuisance taxes and Tax multiplicity ▪ Review legislations and policies that hinder development of the non state actors and businesses ▪ Formulate PPP Policy and Strategy ▪ Establish commercial dispute resolution mechanisms including commercial court and commercial arbitration ▪ Improve infrastructures that facilitate business ventures and increase provision of adequate business support services ▪ Promote more inclusive business modalities (tailor-made programs) that enhance effective participation of women, youths, and PWD ▪ Streamline the labour dispute resolution system, including by operationalising the Dispute Handling Unit and strengthening the Industrial Court ▪ Strengthen the effectiveness of the labour administration and related institutions, and improve their service delivery, inspection and enforcement capacity ▪ Improve the capacity of employers and workers' organizations to engage in the policy process ▪ Strength the labour tripartite consultative bodies.	MHSW, MORASD, Private Sector
	3.1.6.3 Develop Government - CSOs policy dialogue platform	▪ Put in place an annual forum for policy dialogue between Government, CSOs and HoR ▪ Empower CSO's to actively participate in the development process including initial discussions of House bills ▪ Facilitate CSOs representation in policy and decision fora	MOCAGG, CMO, MOFEA, MDAs, ANGOZA

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
GOAL 3. 2: STRENGTHEN THE RULE OF LAW, RESPECT FOR HUMAN RIGHTS AND ACCESS TO JUSTICE			
3.2.1 Legal Sector Reform Program implemented by 2015	3.2.1.1 Develop and implement Legal Sector Reform Program	▪ Develop Legal Sector Policy Framework to ensure Sector wide coordination ▪ Institute a mechanism for coordination of Constitution related issues ▪ Review laws and regulations which heighten vulnerability to HIV & AIDS and limit the human rights of MARPs, vulnerable groups and PLHIV	MOCAGG, MLYWCD, AGC, DPP, Judiciary, CMO, MOICS, CSOs, PO, MOHSW, Police Force, ZLRC, Private Legal Institution
	3.2.1.2 Improve access to justice and ensure accountability	▪ Develop and implement a program on basic justice process, prioritize and review of outdated laws, legal practice and procedures and provide Legal Aid support to marginal groups ▪ Build institutional and operational capacity and improve legal infrastructure in order to respond to new social, economic and technological realities ▪ Continue civilianization of prosecutions to the Primary Court level ▪ Build capacity of judiciary and its stakeholders including rehabilitation facilities (construction/renovation of its buildings, training, equipments) ▪ Build legal capacity of community members in knowing their legal rights and obligations in using the legal institutions ▪ Roll out relevant MKURABITA recommendations on formalization of legal entities at grass-root level ▪ Strengthen the system for inspection and enforcement of the labour laws, including the prosecution of serious violations of fundamental labour rights (child labour, forced labour, discrimination, restrictions on freedom of association). ▪ Strengthen Law review commission. ▪ Design and implement Parole Board and strengthen	MOCAGG, AGC, LRC, CMO, MLYWCD, MOHSW, MORASD, DPP, Judiciary and Prisons, Private Legal Institutions

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		Community Services Procedures ▪ Strengthen Juvenile Justice System	
3.2.2 Peace and tranquillity in Zanzibar enhanced by 2015	3.2.2.1 Put in place and operationalize institutions and legal instruments for public safety enhancement	▪ Develop and implement Public Safety Policy ▪ Develop and implement a strategy to prevent smuggling of goods, illicit drugs, firearms and illegal immigration ▪ Build capacity of law enforcement institutions ▪ Advocate for the establishment of community police ▪ Establish enabling environment for managing criminal issues relating to women, children and people with disabilities ▪ Promote a culture of peace, non violation and civic education in Zanzibar ▪ Review, strengthen and enforce legal framework to control influx of immigrants ▪ Reintroduce entry-exit permits for travel to and from Zanzibar	CMO, Public Safety, AGC, JUDICIARY, DPP, MTTI, MOFEA, MoRASD, Ministry of Home Affairs, Police Force, MoCT, DPP, LGAs, CSOs, MOICS
3.2.3 Service delivery and oversight improved by 2015	3.2.3.1 Enhance service delivery at all levels	▪ Install appropriate systems and tools to improve accountability and service delivery ▪ Establish mechanism to track public opinion in service delivery (Beneficiary Assessment, Public Expenditure Benefit Incidence Analysis) on regular basis ▪ Develop and implement a specific monitoring system to track how service delivery meets the needs of the poor and vulnerable ▪ Finalize and implement national and sector policies ▪ Improve capacity and facilities in Human Resource Institutions ▪ Develop and implement measures for the involvement of social partners in labour related matters ▪ Develop and implement specific measures for hard to reach areas	PO, MLYWCD, MDAs, Trade Union, CSOs, Private Sector, MOICS
3.2.4 Human rights awareness and observance enhanced by 2015.	3.2.4.1 Enhance the promotion of human rights and ensure the fulfilment of the obligations	▪ Put in place a mechanism for effective coordination between RGoZ and URT on Human Rights issues ▪ Advocate for strengthening of CHRAGG to effectively address its mandate in Zanzibar	MOCAGG, CMO, AGC, DPP, Judiciary, MORASD, PO,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Promote Human Rights institutions and Activists ▪ Strengthen the legal and law enforcement agents to handle and prosecute violation of Human and People's Rights.	CSOs, CHRAGG.
	3.2.4.2 Domesticate, implement and enforce relevant International and Regional Conventions, Declaration and Protocols	▪ Continue to mainstream issues stipulated in the conventions into laws, regulations, policies, plans and programs, monitor and report progress of their implementation on various treaties, conventions etc ▪ Strengthen structures for coordinating and monitoring the implementation of human rights issues.	MOCAGG, CMO, MLYWCD, MOFEA, Private Sector, CSOs
	3.2.4.3 Institute effective mechanisms to respond to rights violation and infringement - physical and non physical (including all forms of violence, especially violence against women, children and other vulnerable groups)	▪ Continue to review and enforce Act related to violation of Human Rights to be in line with current realities and technological development ▪ Raise awareness on human rights relating to social, cultural and economic endowments for all including women, children, people with disability ▪ Educate the public on evidence management on criminals for human rights violation, especially on GBV ▪ Establish/strengthen mechanism for responding to human rights violation at all levels including GBV ▪ Strengthen the system for inspection and enforcement of violations of labour rights.	DPP, Judiciary, PO, MLYWCD, HLIs , CSOs, Private Sector, Media, all MDAs, CHRAGG, Law enforcers,
	3.2.4.4 Combat domestic violence, harassment, GBV and discrimination	▪ Design and implement public education program and campaign against all forms of violence ▪ Strengthen capacity and coordination mechanism to handle and address GBV cases ▪ Formulate regulations on harassment and discrimination issues.	MLYWCD, CSOs, Legal institutions and Law enforcers, MOHSW, MOICS
	3.2.4.5 Promote fair treatment for all risks groups, including the Most At Risk Populations (MARPS) and people with disability	▪ Continue to conduct campaign against stigma and protect rights of PLHA in accordance with National and International laws ▪ Review prison regulations to control substance use, MSM and congestion in prison ▪ Initiate a comprehensive HIV prevention program in all correction facilities	CMO, MOHSW, MORASD, CSOs, ZAPHA+, UWZ

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
3.2.5　Legal framework for the protection of children developed and enforced by 2015	3.2.5.1　Strengthen and enforce law and regulations for child protection	▪ Enact Comprehensive Children's Protection Act ▪ Develop costed Legislative Operational plan ▪ Develop National Children's Law Training and Communication Strategies ▪ Official Diversion Programme introduced into juvenile justice system ▪ Programme of legal representation for children before the courts introduced ▪ Adequate number of trained probation officers employed by the DSW to sufficiently manage caseload ▪ Increase the rigor of the enforcement of the law against child abuse and marriage of children of school going age	MLYWCD, DSW, Judiciary, ZLS, AGC, DPP, HLIs, ZAC, Police, ZLSC, MOFEA, CSOs, MOHSW,
3.2.6　Consumer safety guaranteed by 2015	3.2.6.1　Develop and implement Consumer Protection Policy and Strategy	▪ Continue to improve the regulatory, investigative and enforcement capacity of the Consumer Protection institutions ▪ Enforce product safety standards ▪ Improve consumer protection mechanism ▪ Continue to create community awareness on product safety	MOHSW, MTIT, MALE, AGC, DPP, Private Sector, Judiciary
3.2.7　Preparedness and response to disasters guaranteed by 2015.	3.2.7.1　Develop and implement Disaster Management Strategy	▪ Review and harmonize disaster related laws and policies ▪ Create mechanism to support families affected by disasters ▪ Improve infrastructure and capacity to deal with disasters and strengthen emergency preparedness systems ▪ Build capacity of institutions and individuals in terms of equipment and necessary skills ▪ Empower community members, especially women and children to prevent and respond to hazards and disasters	CMO, MALE, MTIT, MWCEL, MOHSW, Police Force/Special Forces, MOICS, MORASD, Meteorology Department , LGAs, MLYWCD
GOAL 3.3 : IMPROVE DEMOCRATIC INSTITUTIONS AND NATIONAL UNITY			
3.3.1　Democratic institutions and	3.3.1.1　Enhance transparency and	▪ Train political leaders on transparency and	CMO, MOCAGG,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
processes strengthened by 2015	accountability for elected leaders	accountability matters ▪ Establish and facilitate consultation and feedback mechanisms between elected leaders and community members ▪ Establish programs within political parties and other democratic institutions for promotion of women, youth and PWD leaders	HOR, MoRASD, MLYWCD, CSO, ZEC, MOICS, Political Parties
	3.3.1.2 Strengthen democratic institutions	▪ Identify gaps and build capacity of the House of Representatives and the Zanzibar Electoral Commission ▪ Institute democratic system to choose local level (grass-root) leaders with adherence to women's representation quotas ▪ Design and implement programs to improve capacity of political parties to perform their roles ▪ Design and implement a continuous civic and voters education program ▪ Support formation of coalitions and networks among civil society to reinforce development initiatives	CMO, CSOs, MORASD, MOCAGG, MOFEA, MLYWCD, MOICS, ZEC
	3.3.1.3 Strengthen Oversight Institutions	▪ Develop and implement Leadership Code of Conduct and ethical framework for civil servants ▪ Strengthen redress mechanisms to cater for financial irregularities observed by OCAG and PAC ▪ Strengthen capacity of public media institutions through training and procurement of appropriate technology ▪ Empower media institutions to exercise their freedom with objective reporting and ensure Professionalism effectively ▪ Empower Civil Society Organizations to participate in oversight of public institutions	CMO, MOCAGG, MOICS, OCAG, HoR, ANGOZA, Media Council, PO
3.3.2 National Unity maintained by 2015	3.3.2.1 Forge social, political and religious tolerance	▪ Strengthen measures to cultivate culture that promotes political tolerance and forgiveness ▪ Create mechanism for national consensus and stimulate national dialogues on crucial national issues of constitution, politics, economic and social character ▪ Inculcate better management of political parties	CMO, MORASD, ZEC, MOICS, MOFEA, MOCAGG, Political Parties, CSOs, MOEVT,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		through Political Party Registrar's Office ▪ Design and implement program to foster patriotism ▪ Improve participation in Regional/spatial Socio-Economic Planning, implementation and evaluation ▪ Design and implement a strategy to instil and foster a sense of National Unity in all circles, including the social, religious and educational system	HLIs,
3.3.3 Roles and benefits of Zanzibar in the URT, EAC and other Regional and International organizations guaranteed by 2015	3.3.3.1 Strengthen coordination institutions	▪ Review the current intra and inter coordination mechanisms and make necessary changes ▪ Build capacity and empower coordination institutions ▪ Increase representation of Zanzibar in Union, Regional and International organizations ▪ Undertake regular internal consultations to build common position in all issues ▪ Develop a program to empower, encourage and support employees to compete in International labour market	CMO, PO, MOCAGG, MOFEA, MORASD, MLYWCD
3.3.4 Leadership and commitment to governance strengthened at all levels by 2015	3.3.4.1 Mainstream good governance principles in policies, Guidelines, plans and programs	▪ Develop a framework for good governance and create good governance coordination institutional set up among public /private sector and CSOs ▪ Develop and implement good governance campaigns for all sections in the society, including politicians, executive staff, MDAs and the general public ▪ Review and implement sector /MDA/district comprehensive Strategic plans to include issues of Good governance ▪ Build capacity of MDAs/districts to mainstream Good governance, Gender, Disability, HIV and AIDS, and Environmental issues in programs and plans ▪ Continue to strengthen intra and inter Institutional Coordination	PO, MOCAGG, CMO, MDAs.
	3.3.4.2 Institute a system of Good Governance audit and reporting	▪ Establish an Integrity Committees, build technical capacity and develop a coordinated planning and reporting system on good governance in all Ministries and NSAs for self governance review ▪ Undertake regular independent good governance audit ▪ Publish and circulate Good Governance Reports	PO, MOCAGG, CMO, MOFEA, private sector, MDAs CSO.

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
		▪ Create a strong and centralized good governance database	
3.3.5 Key Core Reforms implemented by 2015	3.3.5.1 Develop a coordinated implementation of core reforms	▪ Approve and operationalise the institutional framework for key core reform coordination. ▪ Operationalize the implementation plan for economic and public finance implementation strategy ▪ Implement public service management program under the ZPSR coordination secretariat. ▪ Finalize and implement the local government implementation program ▪ Finalize and implement reform program of good governance and legal sector. ▪ Prepare, circulate and share quarterly, biannually and annually reports on the implementation of key reforms. ▪ Engage the service of qualified advisors on economic and public finance and local government reforms.	PO, CSD MOFEA, MOCAGG, MORASD, MALE, MTTI, MOICS
3.3.6 Enhanced equity and fairness in society	3.3.6.1 Combat corruption in all its forms and manifestations and improve management of public resources	▪ Expedite the adoption process of the anticorruption and leadership ethics draft legislation ▪ Develop corporate management guidelines ▪ Review of the efficiency and effectiveness of parastatal organizations and develop an improvement strategy ▪ Build capacity of public and community stakeholders in implementation of Public Expenditure Tracking (PET) ▪ Promote establishment of citizens watch through community organization ▪ Ensure regular corruption perception surveys and publish findings	MOFEA, MOCAGG, PO, MTTI, AGC, CAG, Private Sector, CSO, DPP, Police Force, HORs, CMO, MDAs,

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
3.3.7 Public access to and use of information increased by 2015	3.3.7.1 Strengthen efficiency and effectiveness of mass media and information services	▪ Review policy and legal framework in view of promoting freedom of information and strengthening media freedom ▪ Implement Zanzibar Broadcasting Act and other relevant legal instruments to ensure a legal climate that supports a vibrant public and private media ▪ Develop capacity of Public and Private Media to enhance objective reporting and professionalism ▪ Expand geographical media coverage ▪ Develop public interest and culture to seek and use information ▪ Strengthen public hearing programs ▪ Promote facilities and outlets for providing alternative means of communication to cater for resource poor people and those with special information needs (deaf and blind people) ▪ Establish and promote community media	MOICS, Media Organizations, MOEVT, MOCAGG, CMO, PO.
	3.3.7.2 Enhance a coherent Research and Development system	▪ Formulate Research and Development Policy framework ▪ Establish Research and Development Coordination Institution and facilitate its operations ▪ Establish mechanism for resource mobilization to support Research and Development ▪ Build capacity of MDAs to conduct gender related researches and analysis ▪ Integrate an HIV & AIDS core indicator module into the MKUZA M & E System, routine data collection and in all national survey and analysis exercises ▪ Build capacity of MDAs and NSAs on Research and Data management	HLIs, MDAs, NSAs, OCGS, MOFEA

Operational Targets	Core Cluster Strategies	Intervention Packages	Key Actors
	3.3.7.3 Enhance effective data management system	- Review and develop regulation for the implementation of The Office of Chief Government Statistician Act No 9 of 2007 - Strengthen mainstreaming of OCGS operations in MDAs and Districts/LGAs to ensure timely and comprehensive availability of data disaggregated by sex, gender or other variables - Strengthen the capacity for data collection, analysis and storage at both central and local level - Strengthen links between data users (including Research Institutions) and the OCGS - Increase access of data to public and other users - Promote the utilization of statistics in decision making, planning, monitoring and evaluation of policies and programs - Improve vital registration system	OCGS, MDAs, Districts/LGAs