Mapping of Faith-based Actors’ Contributions to Sustainable Development Goals 3, 4, 5, 10 and 16 in Tanzania
Contents

Abbreviations ................................................................. 1

1. INTRODUCTION....................................................... 3
  1.1 Background .......................................................... 3
  1.2 Objectives of the study ......................................... 3

2. METHODOLOGY .................................................... 5
  2.1 Validation Workshop ............................................. 6
  2.2 Limitations ......................................................... 6

3. RESPONDENTS AND PARTICIPATING FBOs .......... 7
  3.1 Respondents’ Demographic Characteristics .......... 7
  3.2 Brief Overview of FBOs Reached for Mapping ....... 7

4. FBOs’ CONTRIBUTIONS IN ACHIEVING SDGs 3, 4, 5,
   10, AND 16 ............................................................ 11
  4.1 SDG 3 (Good Health and Well-being) .................. 11
  4.2 SDG 4 (Quality Education) .................................. 17
  4.3 Contribution to SDG 5 (Gender Equality) .......... 21
  4.4 SDG 10 (Reduced Inequalities) ......................... 25
  4.5 SDG 16 (Peace, Justice and Strong Institutions) ..... 27

5. WAYS OF ENGAGEMENT OF FBOs ....................... 31
  5.1 Participation in local, national and international forums,
      committees, meetings and conferences ................. 31
  5.2 Engagement by government in planning, implementing
      and reporting .................................................... 31
  5.3 Reporting and documenting FBOs’ work on SDGs ...... 32
  5.4 FBOs’ focus on vulnerable population groups ....... 32
  5.5 Collaboration among Tanzanian FBOs .................. 33

6. CONCLUSION .......................................................... 35
## Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACT Alliance</td>
<td>Action by Churches Together</td>
</tr>
<tr>
<td>Act CoS</td>
<td>Act Church of Sweden</td>
</tr>
<tr>
<td>AICT</td>
<td>African Inland Church Tanzania</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>BAKWATA</td>
<td>National Muslim Council of Tanzania</td>
</tr>
<tr>
<td>CBPS</td>
<td>Community-based psychosocial support</td>
</tr>
<tr>
<td>CCT</td>
<td>Christian Council of Tanzania</td>
</tr>
<tr>
<td>CSSC</td>
<td>Christian Social Services Commission</td>
</tr>
<tr>
<td>DDH</td>
<td>Designated district hospital</td>
</tr>
<tr>
<td>ELCT</td>
<td>Evangelical Lutheran Church in Tanzania</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith-based organization</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus group discussion</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>IR-VICOBA</td>
<td>Inter-Religious Village Community Banks</td>
</tr>
<tr>
<td>KCMC</td>
<td>Kilimanjaro Christian Medical Centre</td>
</tr>
<tr>
<td>KII</td>
<td>Key informant interview</td>
</tr>
<tr>
<td>LLITN</td>
<td>Long-lasting insecticide treated net</td>
</tr>
<tr>
<td>LWF</td>
<td>Lutheran World Federation</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>Monitoring and Evaluation</td>
</tr>
<tr>
<td>NCA</td>
<td>Norwegian Church Aid</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
</tr>
<tr>
<td>OPD</td>
<td>Outpatient department</td>
</tr>
<tr>
<td>PPP</td>
<td>Public Private Partnership</td>
</tr>
<tr>
<td>RCH</td>
<td>Reproductive and child health</td>
</tr>
<tr>
<td>SACCOS</td>
<td>Savings and Credit Co-Operative Society</td>
</tr>
<tr>
<td>SDG</td>
<td>Sustainable Development Goal</td>
</tr>
<tr>
<td>SILC</td>
<td>Savings and Internal Lending Community</td>
</tr>
<tr>
<td>SRHR</td>
<td>Sexual and reproductive health and rights</td>
</tr>
<tr>
<td>TB</td>
<td>Tuberculosis</td>
</tr>
<tr>
<td>TCRS</td>
<td>Tanganyika Christian Refugee Services</td>
</tr>
<tr>
<td>TEC</td>
<td>Tanzania Episcopal Conference</td>
</tr>
<tr>
<td>TIP</td>
<td>Tanzania Interfaith Partnership</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
</tr>
<tr>
<td>VICOBA</td>
<td>Village Community Bank</td>
</tr>
<tr>
<td>WASH</td>
<td>Water sanitation and hygiene</td>
</tr>
<tr>
<td>WCC</td>
<td>World Council of Churches</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>WtG</td>
<td>Waking the Giant</td>
</tr>
<tr>
<td>4CCP</td>
<td>Four Corners Cultural Program</td>
</tr>
</tbody>
</table>
1. INTRODUCTION

1.1 Background

Faith communities in Tanzania, like in many other places in the world, have a longstanding history of engaging in the public space. Many faith-based organizations (FBOs) have established themselves as important actors in their local contexts in fields such as education and health. They have acquired credibility and respect as providers of social and development services and as advocates for global human values, such as peace and justice. Faith-based organizations often have a wide reach at community level, including the remotest areas where state institutions are few or even absent. It is unfortunate that only a small number of these activities are well documented and recognized nor are their contributions formally acknowledged.

Between June and November 2019, the Waking the Giant (WtG) initiative in Tanzania conducted a mapping study of contributions by faith-based organizations (FBOs) to achieving five specific goals under the United Nations’ (UN) 2030 Agenda for Sustainable Development in Tanzania, namely Sustainable Development Goal (SDG): Good Health and Well-Being, SDG 4: Quality Education, SDG 5: Gender Equality, SDG 10: Reduced Inequalities and SDG 16: Peace, Justice and Strong Institutions. The mapping activity aimed at gathering evidence of the ways in which FBOs contribute to these five goals, thereby establishing a baseline for future planning of FBOs’ engagement in those thematic areas.

1.2 Objectives of the study

The objectives of the mapping study were to:

1. create an initial evidence base of the contributions by Tanzanian faith-based organizations on the implementation of selected SDGs;

2. provide evidence for further planning by faith-based organizations in the implementation of the 2030 Agenda.
## 2. METHODOLOGY

The mapping exercise used a mainly qualitative approach to data collection. This included visiting selected FBOs, including Churches, church-related development organizations, a Muslim organization, and social service institutions owned by FBOs to conduct in-depth key-informant interviews (KIIIs) and focus group discussions (FGDs) with beneficiaries. It also included conducting a document review of reports on relevant work done by FBOs.

The study covers the two main religions in Tanzania: Christianity and Islam. Key partners include members of ACT Alliance Tanzania (ACT Forum): the Christian Council of Tanzania (CCT), the Evangelical Lutheran Church in Tanzania (ELCT), the Tanganyika Christian Refugee Service (TCRS), Norwegian Church Aid (NCA) and Act Church of Sweden (Act CoS). Moreover, two ACT Forum interfaith partners were included: Baraza Kuul la Kiiismu Tanzania (BAKWATA) and the Tanzania Episcopal Conference (TEC).

To ensure consistency, efficiency and integrity, data collectors were recruited through the involved FBOs. They were either university graduates or postgraduates. Prior experience with data collection was seen as an advantage in the selection. Data collectors were trained and oriented in the use of the data collection tools by a research expert and the National Coordinator of Waking the Giant Tanzania. Head offices of all key partners were visited, and respondents were requested to share relevant documents and reports for review. Officers responsible for projects and activities related to the five SDGs covered in the study were requested to participate in in-depth interviews. Key respondents who were interviewed include heads or directors of FBOs/dioceses/regions/institutions, health managers and monitoring and evaluation focal persons, education officers, project officers, justice and peace focal persons, program coordinators, and beneficiaries. The beneficiaries who participated in FGDs included women and men at health institutions, students’ parents/guardians, and members of faith-based women’s and men’s groups. In addition, a selection of Christian dioceses and Muslim regions and institutions to be visited across the country was created jointly, resulting in a total coverage of 13 regions (about 50%) of Tanzania Mainland.

Collectively, six targeted FBOs: BAKWATA, CCT, ELCT, NCA, TCRS TEC and one institution, the CSSC, were consulted. Six zones of the country with a total of 13 regions in Tanzania Mainland were reached. A total of 113 key informant interviews (KIIIs) were conducted for the five SDGs (23, 25, 27, 17, and 21 respectively). Furthermore, a total of 22 FGDs were conducted for SDGs 3, 4, and 5 (9, 4, and 9 respectively).

Two main tools were used for data collection: a KII guide which was administered to key informants and heads of programs at FBOs’ head offices and selected dioceses/regions and institutions and a FGD guide which was used to guide focus group discussions with beneficiaries. The tools were first tested in Dar es Salaam to ensure that they were understandable and able to capture the intended information. The test experience was used to refine the tools which were then translated into Kiswahili for easy use.

Data collectors’ competencies were approved before they were deployed to the field and data collection was conducted under close supervision by the research expert and the WtG National Coordinator. The data collection team reviewed all collected data at the end of each field workday to ensure correctness, completeness, and relevance. All identifying information (such as respondent names) was removed from the datasets. Quantitative data were entered into SPSS, sorted and cleaned before analysis. In addition, all notes taken during focus group discussion and key informant interviews were entered in Kiswahili into password-protected computers and translated into English. Notes taken during interviews and discussions were augmented by transcriptions of audio records. All qualitative data were then transferred into Excel sheets for analysis.

Team leaders and supervisors ensured data quality and assurance by supervising and participating in data collection, conducting spot-checking, and reviewing information entered in data collection tools for completeness and discrepancies. A joint session organized by the National Coordinator at the end of field work was used to convene all enumerators to examine their data for completeness, logic, and accuracy before collating it into a common data base.

A two-day data analysis workshop was held with a data analysis group to review all the collected data with the aim of obtaining key and meaningful information for the exercise.

The mapping exercise adhered to standard research ethics including getting informed consent from each participant, ensuring confidentiality, and causing no harm to respondents. The mapping team made it clear to all
participants that they were under no obligation to participate in the mapping. All participants were assured that there would be no negative consequences if they chose not to participate. Data collectors obtained informed written consent from all participants before commencing the interview or focus group discussion. Participants were assured anonymity and confidentiality.

2.1 Validation Workshop

After finalization of data collection and analysis, initial findings from the mapping exercise were verified through a “Stakeholder verification workshop” which was attended by representatives from all key FBOs. The aim was to get FBOs’ feedback on the mapping findings; to triangulate facts and identify any overstated or misrepresented information; to fill in gaps of missing information, and to propose initial recommendations based on the findings. The workshop aimed as well at getting an idea of the value and possible use of the gathered information for participating FBOs and at discussing how they might use or apply the information in their work.

The validation workshop was also used to further examine existing efforts for interfaith collaboration in Tanzania in regard to what has worked well, what are the potential good practices and lessons learned, what have been the obstacles, and what can be done to improve interfaith collaboration in the country. The meeting explored the main challenges for FBOs’ contribution to achieving the SDGs as well as the experiences, challenges and dynamics of FBOs in working with the government and in reporting their achievements to government data authorities.

2.2 Limitations

The mapping did not reach all FBOs, dioceses, regions and institutions in Tanzania, thereby limiting the breadth of data collected and findings reported through this mapping exercise. The activity was limited to the two main faiths in the country, i.e. Christian and Muslim. Ten of 30 BAKWATA regions, four of 12 CCT members, eight of 26 ELCT dioceses, eight of 34 Catholic Dioceses, one of four TCRS project sites and one of five NCA project sites were covered. Together this is about 3 percent of the sampling frame. Approximately 30 percent of Tanzania Mainland regions were visited due to the limited resources available for the mapping activity. Quantitative data on specific SDG indicators and targets were not available at the time of data collection or simply never existed in some organizations, as the majority of the visited FBOs do not report on SDG indicators and targets. Generally, the majority of FBOs had very weak or no relevant quantitative data to share.

The mapping exercise was an internal review activity among FBOs and did not include government structures, authorities and statistics where relevant data could potentially have been obtained as well. Some prospective and or selected respondents were not available, despite efforts to reach out in advance.
This chapter presents an overview of demographic characteristics of the 113 respondents. It moreover includes a brief description of the main FBOs that were reached with the mapping exercise.

### 3.1 Respondents’ Demographic Characteristics

Table 3.1 (a): Key informants interview respondents’ demographic characteristics – see page 7.

Table 3.1 (b): Focus group discussion participants’ demographic characteristics – see page 8.

### 3.2 Brief Overview of FBOs Reached for Mapping

**Act Church of Sweden (Act CoS)**

Act Church of Sweden (Act CoS) is an Evangelical Lutheran church with international work integrated fully into the Church’s life. International commitment started with the formation of Church of Sweden Mission in 1874. International work focuses on responding to the global challenges of our time in collaboration with other Churches and with ecumenical organisations. Act CoS is influenced by the strategic orientations of the global alliances to which it belongs: Action by Churches Together (ACT Alliance), Lutheran World Federation (LWF) and World Council of Churches (WCC).

Act CoS works on humanitarian action, development cooperation, church cooperation, and policy dialogue in four thematic policy areas: Gender Justice and Gender Equality; Sustainable Livelihoods; Peace and Reconciliation; and Sexual and Reproductive Health and Rights (SRHR) in 16 country programs. The work is rights-based with the aim to strengthen local civil society. Together with partner organisations, Act CoS strives to contribute to the development of just, peaceful and democratic societies in which human rights are respected and defended. Act CoS is a recognised civil society actor with long experience in supporting local civil society organizations around the world.

Within ACT Alliance, Act CoS is the leading agency for Community-based Psychosocial Support (CBPS). CBPS is a holistic approach to well-being, focusing not only on individual and “traditional” basic needs (e.g. shelter, non-food items, water, sanitation and hygiene) but also on beneficiary participation, ability to influence humanitarian assistance, and the creation of community spaces for engagement. They also seek to make it possible for crisis-affected persons and communities to have an effect on efforts towards increased protection and well-being.

In its development and humanitarian work, Act CoS takes advantage of the special opportunities and experience it has as a faith community by implementing and collaborating with partners through churches and organizations on a long-term basis. Act CoS prioritises both a rights-based approach and a Community-based Psycho-Social (CBPS) approach.
Baraza Kuu la Kiislamu Tanzania (BAKWATA) was registered as a faith-based organization in 1968 to represent the interests of all Muslims in Tanzania Mainland. BAKWATA has offices in all 26 regions of Tanzania Mainland. The vision of the governing body of BAKWATA is to promote unity among Muslim communities on issues related to economic development, education, health, women and development, peace and justice. Since its inception, BAKWATA has played a big role in supporting Tanzania’s social development initiatives by implementing health, education, social and economic programs.

A number of programs have been implemented with a focus on capacity building and technical assistance to leaders at different levels, as well as on the establishment of specific health and social services such as for HIV and AIDS prevention education, advocacy against stigma, home-based care and support for orphans and vulnerable children and people living with HIV and AIDS, food and nutrition support, sexual and reproductive health and rights, life skills programs for youth and married couples, household economic strengthening support, gender equality/gender-based violence and legal aid, child labor, and mainstreaming HIV and AIDS in all programs and activities of the Council and mosques.

Christian Council of Tanzania (CCT)

CCT is a Christian ecumenical organization founded in Tanzania in 1964 that serves as an umbrella organ bringing together Protestant denominations and church-related institutions. Currently 13 denominations and 10 church-related institutions are CCT members. The CCT vision is to be an ecumenical Christ-centered instrument promoting sustainable, holistic development for the kingdom of God, whilst its mission is to foster unity in the body of Christ and coordinated engagement in addressing challenges and using the available opportunities to achieve sustainable, holistic development in society.

Apart from its core evangelistic niche, CCT has provided diverse services to communities since its establishment including spiritual, social, economic and humanitarian services. As a faith-based umbrella organization, CCT members provide education services, health services and economic empowerment to communities with a focus on women’s development, children and gender, youth development, health and HIV/AIDS; climate change, environment and food security; social-economic justice and good
governance; policy analysis, interfaith relations and ecumenism.

CCT has an extensive Health and HIV/AIDS Program with diverse projects using different approaches to address special population groups including Most Vulnerable Children (MVC), Most at Risk Populations (MARPs), and People Living with HIV/AIDS (PLHA). Current programs include health and nutrition projects in Kondoa district, Chamba district, Kibondo and Kakonko district respectively. CCT also collaborates with ACT CoS in preventing female genital mutilation. In the area of economic empowerment programs, CCT provides financial assistance through Village Community Banks (VICOBA) worth three billion Tanzanian shillings from members’ savings.

**Christian Social Services Commission (CSSC)**

The Christian Social Services Commission (CSSC) is an ecumenical body jointly established by the Tanzania Episcopal Conference (TEC) and the Christian Council of Tanzania (CCT) in 1992 to coordinate social services provided by member churches. CSSC’s main objectives are to contribute to the physical, mental, social and spiritual development of the Tanzanian people by facilitating the provision of quality social services to all people, regardless of color, race, and creed; and to improve and expand education, health and other social services across the country.

The CSSC’s vision is “an enlightened and well-educated community that is enjoying quality life and is free from diseases of poverty” and its mission is to “support the delivery of social services by church institutions in Tanzania through collaboration and partnership, advocacy, lobbying, capacity building and selected interventions, with the compassion and love of Christ”.

CSSC’s main focus is on coordination of health and education services offered by faith-based actors in the country.

**Evangelical Lutheran Church in Tanzania (ELCT)**

The Evangelical Lutheran Church in Tanzania (ELCT) is among the largest and fastest-growing Churches in Tanzania. In June 19, 1963, seven Lutheran denominations merged under the umbrella of a federation to officially become a single Church, known as the Evangelical Lutheran Church in Tanzania. ELCT has 26 dioceses with over seven million church members spread throughout Tanzania and is registered as a voluntary and not-for-profit agency. The ELCT Vision is ‘a communion of people rejoicing in love and peace who are blessed spiritually and physically and hoping to inherit eternal life through Jesus Christ’. Its mission is to make people know Jesus Christ and have life in its fullness by bringing to them the “Good News” through word and deed based on the word of God as it is in the bible and Lutheran teachings, guided by its constitution. The ELCT head office is in Arusha, Tanzania but is divided into 26 dioceses spread through all regions and districts of Tanzania.

ELCT’s core businesses is to evangelize, but the Church has long been known for providing social and development services in the country particularly in the fields of education, health services, and economic empowerment of communities. The priorities are capacity building for mission and evangelism, income generation and stewardship, promotion of women’s work, gender relations and children’s rights, provision of quality social services, including education and health services, and policy analysis and advocacy which targets local level and high-level policy issues.

The services target diverse groups of beneficiaries including women, children, men, the elderly, adults and children with disabilities, victims of gender-based violence, marginalized groups, poor, incapacitated, and sick community members.

In the education sector, ELCT has two full-fledged universities and six constituent university colleges. It has over 67 registered secondary schools, 15 English medium primary schools, nine special schools for children with disabilities, 40 Vocational Training Centers, and four teacher training colleges. In addition, ELCT has 114 nursery schools. ELCT also has orphanage centers and centers for persons with disabilities. In the health services sector, ELCT owns a number of health facilities, including one national referral hospital, 24 hospitals, 148 health centers and dispensaries which are estimated to contribute up to 15 percent of available health facilities in Tanzania. ELCT also operates economic empowerment programs. Through its sustainable livelihoods and empowerment program, ELCT runs programs for raising dairy cattle and goats, (over 220 dairy cattle distributed); tree planting; biogas promotion, and establishment and strengthening of VICOBA groups. To realize these social services and economic empowerment programs, ELCT works very closely with the Government of Tanzania as a social service provider (health, education and social welfare). It also advocates for gender justice issues and for combating injustice in society.

**Tanganyika Christian Refugee Services (TCRS)**

Tanganyika Christian Refugee Services (TCRS) was established in 1964 as an operational field program of the Lutheran World Federation’s Department of World Service. During the first
20 years of operation, the organization was primarily involved in the development of semi-permanent refugee settlements, mainly for Burundian, Rwandan, and Mozambican refugees in Tanzania. Following the aftermath of the ethnic conflict in Burundi 1993 which drove more than half a million people out of Burundi and the Rwandan genocide of 1994, TCRS’ work with refugees was concentrated in the Burundian refugee camps in Kibondo District, and in Karagwe District for the Rwandese refugees. The main activities were camp management, water and sanitation, environment, education, refugee self-reliance and logistics. More recently, TCRS has become more active in refugee rights and advocacy as part of an overall commitment to rights-based interventions.

Over the years, TCRS has contributed its resources and capacities to marginalized, vulnerable and oppressed communities through construction of 66 primary schools in Monduli, Ngorongoro and Kiteto districts; construction of 25 primary schools in Lindi rural and Kilwa district; post-drought rehabilitation in Same, Simanjiro, Hai, Rombo and Anumeru districts through soil and water conservation and livelihood diversification. Its work in refugee settlements has included infrastructure development, camp management, education, community services and provision of logistics, psychosocial support and counselling, care and maintenance, extension services, donated commodities, and long-term development projects to refugee hosting communities.

TCRS vision is empowered communities living in a just, democratic society, united in diversity, and enjoying quality of life and God-given dignity. Its mission is to empower vulnerable, marginalized, and displaced communities to achieve self-reliance and sustainable development and to reduce human suffering and poverty.

As a diaconal arm of the Evangelical Lutheran Church in Tanzania and the wider ecumenical network under CCT, TCRS recognises the spiritual and physical needs of its believers and engages in different programs including food security, education, health, water, sanitation and hygiene, climate change adaptation and mitigation, peace and reconciliation, and gender justice. This concurs with TCRS’ objective of serving marginalized and disadvantaged communities in development and disaster relief projects. In fulfilling its mission, TCRS also reaches members of ELCT/ CCT who may be direct or indirect beneficiaries of projects.

Currently TCRS works in districts and locations with the highest vulnerability to disaster and the greatest concentration of poverty. It focuses on remote and vulnerable areas where adequate local capacities and services are not available. Current projects are in Ngara District, Dar es Salaam Urban Area (for urban refugees), Morogoro District, Kibondo District, Kakonko District, Kilwa District and Kishapu District.

**Tanzania Episcopal Conference (TEC)**

The Tanzania Episcopal Conference (TEC) is a permanent institution (the assembly of the Bishops of Tanzania) where, according to the norm of the church law, certain pastoral functions are jointly exercised on behalf of Christ’s faithful in view of promoting that greater good which the Church offers to all people. TEC’s Vision is “To be a pastorally driven organ of the Catholic Bishops of Tanzania that lives Catholic values and demands professional competence in its work”. Its mission is to be an instrument to guide, coordinate, facilitate and promote pastoral and social services through collaboration with people of good will, for the evangelization of all.

TEC runs a number of programs through its departments for education, health, social welfare, publicity, legal affairs and insurance. TEC provides a number of education and health services in Tanzania in collaboration with other stakeholders to enhance the development and well-being of people.

**Norwegian Church Aid (NCA)**

Norwegian Church Aid (NCA) is a Norwegian non-governmental and development organization working to promote social justice, human rights and economic justice for poor communities. NCA has its foundations based in congregations in Norway whose efforts are dedicated towards eradicating poverty and its causes and social deprivation.

In Tanzania, NCA works in collaboration with 12 local faith-based partners in 22 regions and 37 districts. NCA Tanzania implements two global programs: economic empowerment and resource governance; and two contextual programs: water, sanitation and hygiene and Haydom Lutheran Hospital. In addition, NCA focuses on cross-cutting issues to improve the quality of work. These include interfaith work to strengthen civil society and build social cohesion, gender justice, and youth engagement. NCA is planning to engage in a major gender justice project.
4. FBOs’ CONTRIBUTIONS IN ACHIEVING SDGs 3, 4, 5, 10, AND 16

Respondents were asked to explain what their FBO, diocese(s) and institution(s) are doing to contribute to achieving SDGs 3, 4, 5, 10 and 16. They were further requested to elaborate what their FBO, dioceses and institutions are doing to contribute to specific targets under each SDG. This section presents a synthesis of their responses, integrating findings from review of project documents and reports, and from testimonies narrated by beneficiaries through focus group discussions.

4.1 SDG 3 (Good Health and Well-being)

SDG 3 aims to “Ensure healthy lives and promote well-being for all at all ages”. The Tanzania Human Development Report 2017 reports noticeable improvements in Tanzania in the area of health since the beginning of the century. Average life expectancy over the period from 2002 to 2012 increased by almost nine years for men (from 51 years to 60 years) and by almost 13 years for women (from 51 years to 64 years). Reductions in child mortality, a stabilization in HIV and AIDS levels, improved nutrition and hygiene, increased access to safe drinking water, and effective birth control and immunization have contributed to this positive development. Nevertheless, important concerns remain in the field of health in Tanzania, including a continued threat through malaria and marked regional variances in relation to various health indicators.

According to the WHO, health financing is a central issue in Tanzania. The level of spending is still insufficient to ensure equitable access to basic and essential health services and interventions. A major concern is thus to ensure adequate mobilization and equitable resource allocation for health.¹

Faith-based actors contribute a major share of the basic healthcare system in the country. CSSC’s health department coordinates and strengthens health services provided by Church health facilities falling under the Tanzanian Episcopal Conference (TEC) and the Christian Council of Tanzania (CCT). Currently, these facilities total more than 900: 103 hospitals (two Zonal Referral Hospitals, 10 Regional Referral Hospitals, 37 District/Council Designated Hospitals, and 54 Voluntary Agency Hospitals), 102 health centers and 696 dispensaries.

In addition, Churches also offer pharmaceutical services and operate 62 middle cadre health training institutions which provide certificates and diploma level professionals as well as two universities and three constituency colleges that provide health and medical education. Together, Churches own 42 percent of all hospitals in Tanzania.

All of the FBOs participating in the mapping report that they own and run health facilities and/or implement health programs that provide services to different population groups including women and children. These health facilities and programs provide important lifesaving services such as reproductive and child health (RCH) services, and prevention and treatment of communicable and non-communicable diseases.

In addition, some FBOs operate universities and colleges that offer health and related sciences courses. For instance, ELCT and TEC have universities and a number of allied colleges that provide health-related courses from certificate to PhD level. Courses include medicine, nursing,

---

¹ See WHO country information on Tanzania: https://www.afro.who.int/countries/united-republic-tanzania
clinical medicine, clinical pastoral education, public health and medical laboratory training. In addition, FBOs provide extensive medium-level professional training. For example, the African Inland Church Tanzania (AICT) runs Kolandoto Health Training College in Shinyanga region. ELCT has the Ilembula Hospital, TEC runs the Ndanda Hospital, and the Anglican Church has Mvumi Hospital.

**BAKWATA**

BAKWATA operates health facilities across the country offering a number of essential health services. Most of its health services are found in the coastal area which has a higher share of Muslim communities. In Dar es Salaam, Pwani and Tanga regions there is a concentration of lower-level health facilities run by BAKWATA. In addition, it also runs several facilities in other regions of Tanzania, most of them in cities and town centers with few in rural areas. In Singida region, BAKWATA provides health services at Gumanga Health Centre to all people regardless of their religion. Other regions include, Iringa, Tanga, Arusha, and Morogoro.

An example of a health-related program implemented by BAKWATA is the USAID-funded “Kizazi Kipya” (in English: ‘New Generation’) project which serves thousands of orphans and vulnerable children with improved access to health and HIV services, among others. There is also a project under the Legal Service Facility which provides legal assistance to vulnerable population groups.

**CCT**

CCT owns and runs health facilities that provide quality health services to the general population. For example, AICT runs 16 health facilities in different parts of the country. The Anglican Church also operates a number of hospitals and lower-level health facilities. Other member churches also have health facilities, most of them in rural and hard-to-reach parts of the country. As well, CCT provides community health services through community health workers. CCT Mbeya uses community health workers to reach communities with health services including health education.

**CSSC**

CSSC coordinates health services provided by church members all over the country.

**ELCT**

ELCT is among the major providers of health services in the country. It offers quality health services for all at all ages. ELCT runs 24 hospitals and 148 lower-level health facilities (health centers and dispensaries) all over the country. Most of these health facilities are located in rural areas. For example, ELCT Mwanza, through its health facilities, provides health services such as reproductive and child health, outpatient departments (OPDs), and surgery. Furthermore, ELCT operates one of key national referral hospitals, the Kilimanjaro Christian Medical Centre (KCMC) which is owned by the Good Samaritan coalition. The KCMC also serves as a teaching medical university. In addition, ELCT has five regional referral hospitals, six District Designated hospitals and seven Council Designated hospitals. Altogether, ELCT provides approximately 15 percent of all hospital-based services in the country. Furthermore, ELCT through its rural and urban health facilities provides health services such as RCH, treatment of communicable and non-communicable diseases, and surgery. Apart from running health facilities, ELCT implements community-based programs to improve community health through health education.

ELCT respondents underline that some of their health facilities have an outstanding reputation for the quality of services provided. For instance, a health facility of ELCT in Shinyanga region provides dental services and attracts people from distances as far as 50-100 kilometers. ELCT Mwanza region is proud of the RCH services offered by its Nyakato health center in which not a single case of maternal death has occurred since its establishment in 2006.

**TEC**

Another major provider of health services in Tanzania is the TEC. Like other FBOs, TEC owns and runs health facilities across the country, offering quality health services to different
population groups, including women and children. Among faith-based actors in Tanzania, TEC owns the highest number of health facilities. It runs a national referral hospital, the Bugando Christian Medical Centre, five regional referral hospitals, 12 designated district hospitals (DDHs) and a number of health centers and dispensaries distributed all over Tanzania. Most of the lower-level facilities are located in rural areas and run by nuns. In addition, TEC owns a medical university and several medical/health colleges attached to its health facilities. TEC health facilities offer outreach services to public and primary schools to create awareness of public health issues in the communities and to vaccinate children. TEC health facilities also provide maternal and childcare services. Most health services are provided on a fee-for-service basis. All fees are subsidized to enhance their accessibility for communities. This implies that operating the facilities is expensive for TEC. A respondent from one TEC facility in Shinyanga reported that although they were not getting any grants, they had been running a health centre for more than ten years without interruption. This included paying monthly salaries on time, purchasing essential medicines, and running other facility activities.

**TECRS**

TECRS works in collaboration with districts and village authorities to coordinate health programs. TECRS provides health education – such as on clean and safe water – with a special focus on reaching communities of the most vulnerable, marginalized and displaced populations.

**SDG 3 Targets**

The following table provides an overview of the evidence that this study has been able to gather in relation to the surveyed FBOs’ involvement with specific targets under SDG 3. It is not meant to provide comprehensive information on all the activities that these FBOs are implementing.

<table>
<thead>
<tr>
<th>Target</th>
<th>FBOs</th>
</tr>
</thead>
<tbody>
<tr>
<td>TARGET 3.1: By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births</td>
<td>TEC, TCRS, ELCT, BAKWATA, CCT</td>
</tr>
</tbody>
</table>

All surveyed FBOs own and run health facilities in several regions of the country through which they provide services to pregnant women, including antenatal care, labor and delivery, postnatal care and services to lactating women. They also organize advocacy actions to improve maternal health and promote awareness on the subject.

ELCT and TEC in particular are major stakeholders in improving maternal health and reducing maternal mortality. The work of FBOs in reducing maternal mortality rate ranges from the direct provision of related services throughout the country to programmatic community-based work focused on behavioral changes. The status, capacity and quality of FBO facilities in the field of maternal health is recognized by the government. For instance, Cardinal Rugambwa Hospital (a TEC-owned hospital in Dar es Salaam) receives government subsidies that provide incentives and staff salaries for supporting maternal and child health services. As well, TEC provides training and seminars for service providers to increase skills and competency in attending pregnant women.

“Our healthcare providers receive different trainings to ensure all women and children are offered the right health services.” (TEC Iringa).

Faith-based organizations make significant contributions to increasing the proportion of births attended by skilled health personnel, thereby playing a crucial role in preventing and reducing maternal and child mortality in Tanzania. They provide pre-service training for maternal healthcare providers such...
ELCT trains health workers at its own training centers and colleges as well as through internal capacity building in its health facilities. Moreover, ELCT uses training organized by government and other health actors to enhance the skills of their health workers in maternal care and birth attendance.

“Our health service providers have been participating in different trainings undertaken by the government or non-government organizations but also we have been imparting skills among ourselves just to remind and strengthen the provision of better birth attendance services.” (ELCT Nyakato Health Centre in Mwanza region)

TEC health facilities provide training of midwives and birth attendants mostly from its own training facilities attached to several hospitals in the country. It also gets additional skilled staff from other colleges and institutions.

“We provide employment to maternal healthcare providers, also the government provides us with experts.” (Respondent at TEC Facility – Iringa region)

FBOs are particularly active across the country to improve newborn and child health and reduce mortality of newborns and children under five years of age. FBOs implement child and newborn health programs in almost all regions in Tanzania, including facility-based child health services; outreach child health services, such as immunization services; and newborn care services.

Child health services form part of the standard package of health services provided by FBOs and several of their health facilities have special units or departments for maternal, newborn and child health services, often with a good reputation regarding the quality of their services. Where specialized services cannot be provided, FBOs refer patients to the appropriate health institutions, as reported by BAKWATA. Several FBOs, including CCT and ELCT report that they run community-based programs on topics related to child health, e.g. in the area of infant nutrition. Outreach activities also include immunization services to children. In many cases, child health services are provided at a highly subsidized rate or free of charge.

“We have an RCH unit which attends children and we are doing our best to ensure no child or newborn dies at our health facility. The department has experienced and qualified healthcare providers and up to now the facility has good reputation in serving children and mothers.” (ELCT Nyakato Health Centre, Mwanza)

“All health facilities owned by ELCT provide immunization, outreach, and pediatric care services for all children to get treatment services”. (Respondent at ELCT Arusha Region)

“We have RCH services that help women and children. We have equipment that supports child breathing since it is very important to help child breathing. Not only that but also we have established a referral system. Once we face any complications that are out of our control, we provide referral to nearby hospitals.” (TEC Health Center, Shinyanga)

“Newborn babies and their mothers receive free healthcare services at our health facilities.” (TEC Respondent, Iringa)

When it comes to ending epidemics, neglected tropical diseases and other communicable diseases, FBOs are among the key actors in Tanzania. Their activities can broadly be categorized into regular services provided through the health facilities owned by FBOs, specific (donor-funded) health programs, and activities in the field of awareness raising aimed at encouraging behavioral changes. All visited FBOs report that they are supporting or providing prevention, care, treatment, support, and referral and linkage services for HIV and AIDS, tuberculosis, malaria, neglected tropical diseases, hepatitis (including provision of hepatitis vaccine), water-borne diseases, and other communicable diseases. They also
raise awareness about healthy lifestyles through sharing information, teaching, and preaching. FBOs encourage healthy behaviors such as sleeping under long-lasting insecticide treated nets (LLITN), washing hands before eating and after using the toilet, and drinking safe and clean water. They promote two components of safer sex: abstinence and fidelity. FBOs also organize and support advocacy actions to improve public health policies and practices at the local and national levels.

BAKWATA, CCT, TCRS, ELCT and TEC are all major actors in combating HIV and AIDS. Their services include HIV testing, prevention, care and treatment, including a focus on preventing mother-to-child transmission. Tuberculosis and malaria also form part of the communicable diseases that are treated as part of the standard services provided by faith-based health facilities. Only some FBOs focus on addressing hepatitis. TCRS has a specific focus on providing safe and clean drinking water and preventing water-borne diseases. FBOs refer patients to government hospitals whenever their health facilities are not able to provide the needed care and treatment.

“We provide treatment for different diseases though not all diseases. For example, we test people for HIV but treatment for HIV positive is provided by other facilities as we don’t have a care and treatment clinic. Furthermore, we don’t deal with TB since our facility does not have diagnostic tests for TB.” (A respondent at one ELCT health facility in Shinyanga region)

Through their health facilities all over the country, FBOs are involved in the prevention and treatment of non-communicable diseases. Most lower-level facilities focus on prevention of such diseases and only provide treatment of early symptoms due to their limitations in capacity for specialized treatment. The provision of information on prevention and treatment of cardiovascular diseases, cancer or diabetes forms part of the services widely provided by FBO-owned health facilities. BAKWATA, CCT, ELCT and TEC are among the FBOs reporting activities in this area. ELCT and TEC have a particularly wide geographical reach and provide specialized services in some of their health facilities.

Moreover, FBOs provide pastoral care, spiritual support and counselling to people living in despair and hopelessness. Some of these offer specialized secondary and tertiary level mental health services.

Despite the fact that substance abuse is an important health concern in Tanzania, most FBOs interviewed indicate that they have insignificant or no interventions to address the issue. Among the few FBOs that address substance abuse is TEC in Dar es Salaam and the Coastal region which has related activities within the implementation of a donor-funded community-based project on HIV. The ELCT, in the Northern zone, reports having specific hospitals that provide services for drug and substance abuse as well as for mental health. These are the Kilimanjaro Christian Medical Centre (KCMC), Haydom Lutheran Hospital, and Lutindi Mental Hospital.

Most of the interviewed FBOs support the Tanzanian government in enhancing access to sexual and reproductive healthcare services for women, men, and youth. However, FBOs differ in their approaches to the topic and in the nature of interventions undertaken. These differences are based on religious belief and convictions and concern particularly the question of modern family planning. For instance, as the use of modern contraceptive measures is against the Catholic faith, TEC institutions do not provide any services in that respect. However, TEC institutions provide natural family planning services. BAKWATA, CCT, ELCT and TEC all report that they provide sexual and reproductive healthcare services in their health facilities. TCRS offers awareness training on sexual and reproductive health to youth in schools as well as to Inter-Religious Village Community Banks (IR-VICOBA) members during their sessions. Some of the interviewed FBOs underline that these services are provided free-of-charge as directed by the Tanzanian Ministry of Health.
All FBOs which run health facilities have incorporated health insurance services that help all members to have access to health services when needed. FBOs report that they have strengthened their services over the years with a view to accepting different kinds of insurance in their health facilities. Additionally, some of the interviewed FBOs indicated that they encourage people to get enrolled in health insurance schemes. There are also FBOs that have no health facilities but which support or pay insurance for people. For instance, CCT through the Anglican Church in Shinyanga implements a project funded by Compassion International which provides health insurance coverage for children.

FBOs provide education and awareness to the communities they serve, thereby encouraging the utilization of available health services in order to improve community health. FBOs do little, if anything, to support research and development of vaccines and medicines for communicable and non-communicable diseases in Tanzania. However, they are very active in ensuring access to affordable essential medicines and vaccines, mostly through direct provision of vaccines in their health facilities and their participation in national vaccination campaigns. ELCT Arusha reports they are currently involved in medical research which does not however involve vaccine development.

FBOs own three main research hospitals in the country: KCMC in Mosh (owned by ELCT), and Ifakara Hospital in Ifakara and Bugando Hospital in Mwanza (both owned by TEC). Other upcoming faith-based research hospitals include Haydom Hospital in Manyara, Peramiho, Hospital in Ru- vuma, and Mvumi Hospital in Dodoma.

Several FBOs support and run colleges which provide pre-service training for healthcare workers. The training provided covers both standard medical services as well as para-medical education. An example of the latter is the Clinical Pastoral Education program of the KCMC through which ELCT provides training annually to about 50 pastors from various confessions from all over Tanzania on counselling and spiritual support to chronically sick people or people living in despair.

“We have two health colleges which train a large number of healthcare workers who are employed in different health facilities in the country”. (AICT Mwanza)

**SDG 3 Implementation Challenges**

Focus group discussions were conducted in order to obtain detailed information on challenges that FBOs face in implementing interventions and activities contributing to meeting SDG 3. The challenges identified can be grouped into the following areas of concern: policy and legal framework; shortage of funds and of human resources; and conflicting priorities within FBO health facilities.

**Policy and legal framework**

Policy and legal challenges are twofold. On the one hand there are good policies which, however, do not work in practice. A respondent at ELCT Mwanza region reports concerns with the Public Private Partnership (PPP) initiative, which, according to that respondent, has potential for improving health services but is dysfunctional. Initially, the PPP initiative was meant to pull together resources from both private and public sectors for improving health services in FBO facilities. Unfortunately, the state has not lived up to the expectations as it has failed to provide the necessary, and agreed, inputs to faith-based facilities.

Some policies and legal frameworks are not friendly for FBOs’ operations. A respondent at TEC Shinyanga region shares concerns that the current policy on exemptions has no budget and that therefore the government does not reimburse costs incurred by pregnant mothers, children under the age of five, and the elderly. The respondent further suggests that the government should provide grants to cover the costs for exempted popula-
Funding for health services

Almost all FBOs declare that shortage of funds is a major challenge for their effective contribution toward the realization of SDG 3. The lack of sufficient funds hinders the operation of FBOs in different areas, particularly in the recruitment and retention of a healthcare workforce (specialists), procurement of medical equipment and medicines, and construction of infrastructure that facilitates easy operation of medical procedures.

Due to the general shortage of human resources for health in Tanzania, FBOs likewise face a great challenge in recruiting and retaining professional health workers in their facilities. Almost all FBO respondents indicate that there is shortage of medical specialists, nursing staff as well as laboratory and imaging specialists as they tend to move to government-owned facilities. In this regard, the government is the biggest challenger when it comes to staffing.

Conflicting priorities within FBO health facilities

Underlying internal conflicts within FBOs have significant negative impacts. This happens mostly between the leaders of an FBO on the one hand, who may understand health facilities as sources of organizational income, and the health facility leaders on the other hand, who report that funds collected from patients' fees are insufficient to cover actual costs. Most FBOs are financed by user fees which have never been enough to meet hospital operating expenditures.

FBOs do take measures to overcome the above-mentioned challenges, depending on the specific situation. Respondents gave the following examples of how they deal with challenges within their institutions:

"In response to the challenges, we do everything we can to explore different sources of funding including finding donors to support our initiatives. But also on issues concerning policies and legal framework, we have been discussing with the government through CSSC." (TEC Dar es Salaam and Coastal region)

"Due to lack of grants from the government, we have now started to review the prices for services that ought to be free so that clients can share the cost and can reflect the real situation. Furthermore, due to insufficient funds, particularly on paying the workforce, we have started to downsize human resources as salaries take almost 60 percent of our budget, something that we can’t afford." (ELCT Mwanza)

SDG 4 (Quality Education)

SDG 4 aims to “ensure provision of quality and equitable education for all” including the ambition to offer all children free, equitable, and quality primary and secondary education by 2030. The goal is in line with Tanzania’s human rights obligations to realize the right to primary and secondary education for all. The Tanzania Human Development Report 2017 reports noticeable improvements in education in Tanzania particularly regarding primary and secondary school enrolments.

Faith-based actors have for long time been major contributors to the basic education system in the country. The majority of FBOs’ schools provide heavily subsidized school fees and also sponsor a significant number of poor and marginalized children.

According to CSSC, education facilities owned and managed by the current TEC and CCT member churches include:

- 370 registered pre-primary schools
- 172 primary schools
- 370 secondary schools (including 52 seminaries)
- 12 teachers colleges
- 126 vocational education and training centers
- 26 universities and university colleges

These facilities are spread throughout the country, and many are rural based.

4.2 SDG 4 (Quality Education)

In total, Churches own about seven percent of all basic education facilities in the country.

In Tanzania, until recently, many families did not enroll their children in school because they could not afford school fees and related expenses. But the government has now taken a crucial step by abolishing all public school fees and “contributions”, i.e. additional fees charged by schools to pay for the schools’ running costs which were previously required to support...
schools in the country. Both primary and secondary school enrollment has significantly increased as a result. The abolition of school fees has been one of the most important actions taken by the government to implement its ambitious education goals.

Respondents were asked to explain what their FBO, diocese(s) and institution(s) are doing to ensure inclusive and equitable quality education and to promote lifelong learning opportunities for all.

FBOs are working towards achieving quality education in Tanzania through ensuring inclusive and equitable quality education and promoting lifelong learning for all. All interviewed FBOs indicate that they run education centers ranging from pre-school to college and university level. They highlight that particularly their secondary schools produce good academic performance as compared to public schools. Furthermore, all the responding FBOs report that they provide support to students from poor families which cannot afford to pay the required school fees.

**BAKWATA**

BAKWATA supports children who cannot afford education expenses, enabling them to also get an education. For instance, BAKWATA in Arusha region identifies the needy in order to give them education opportunities through their schools. BAKWATA enrolls students regardless of gender or socio-demographic status.

**CCT**

Similar to other FBOs, CCT is a very important actor in promoting inclusive and equitable quality education as well as lifelong learning opportunities for all. CCT’s activities in education include running schools that enroll students without any discrimination as well as the mobilization of communities to get access to education through existing education facilities. CCT members throughout the country own schools at all levels from kindergarten to university, including local and international schools. One of the schools visited during this mapping is Isamilo International School in Mwanza which is owned and managed by the Anglican Church in Mwanza.

**ELCT**

ELCT runs many schools across the country, accommodating students of different socio-demographic status. Thousands of students have graduated from ELCT education facilities including secondary schools, colleges and universities. Furthermore, ELCT supports and sponsors students facing difficult financial conditions thereby helping them to access quality education.

**TEC**

TEC operates many schools at different levels from kindergarten to university level. TEC reports that their schools enroll any person requiring education, regardless of religion, sex, ethnicity, or economic status. A majority of the country’s political leaders and senior civil servants graduated from TEC schools. Additionally, TEC supports large numbers of students who cannot afford to complete their studies due to school fees.

**TCRS**

TCRS contributes in three different ways to ensuring inclusive and equi-
Almost all of the interviewed FBOs provide forms of early childcare and pre-primary education. The services are often religious in nature, with some secular curricula. This includes the operation of Sunday schools or Madrassas providing detailed Christian or Muslim education to children of pre-primary school age to motivate them about their traditional religions.

FBOs make substantial contributions to ensure that youth and adults have relevant skills for employment, decent jobs and entrepreneurship. Interviewed FBOs report engaging in particular in the following three areas: provision of entrepreneurship education in the community and in churches and mosques; supporting youth and adults in getting access to technical and vocational skills by providing sponsorship or waiving school fees for those who cannot afford to pay; and running centers or colleges that provide technical and vocational education or skills-based education.

"We have been conducting entrepreneurship seminars here to our church members especially women and youths to help them start their own business to get income." (ELCT Shinyanga region)

"Here in our vocational centre, we provide education and handcraft skills that prepare youth for creating their own jobs and to be self-reliant." (BAKWATA Arusha region)

Within their educational activities, FBOs put an emphasis on addressing gender disparities and promoting equal access to education for all children. This includes providing access to education within their own education institutions without any kind of discrimination as well as supporting vulnerable population groups through financial sponsorship programs. Several FBOs engage actively in advocacy and community-based awareness raising to promote equal access to education for girls and boys. Some FBOs report that they pay specific attention to students with special needs, including those with disabilities, by adapting the school environment and infrastructure accordingly. One example is to ensure easy access to classrooms and sanitation facilities for children with physical disabilities.

Generally, this target is presently less in the focus of FBOs. This mapping exercise did not find any significant initiatives by FBOs that target achieving literacy and numeracy for youth and adults apart from enrolling youth in normal formal education in FBOs' schools. However, a respondent at...
TEC in Mbeya region reports that TEC does conduct additional literacy and numeracy classes through vocational training colleges for youth and adults who did not have an opportunity to get that training when they were children. An example is a TEC-owned vocational school called TOMASMOR, which encourages enrolment and participation of all people regardless of their literacy level.

Most of the interviewed FBOs focus on the creation of friendly environments that favor safe, non-violent, inclusive and effective learning environments for all. All FBOs that operate education facilities assert that they focus on building infrastructures that are friendly to, and can be used by, everyone, including people with disabilities. This includes building ramps for people with physical disabilities. Some FBOs report that they mobilize parents and guardians in contributing to a school infrastructure and environment that is friendly to all people.

With regard to gender sensitivity, the majority of FBOs which run boarding schools focus on building special dormitories for girls considering their vulnerability for early pregnancies and engaging in early sexual activities when they have to stay elsewhere than in school compounds.

FBOs are very committed to contributing to this target. The majority of FBOs make scholarships available to Tanzanians principally through two approaches: using internal FBO budgets for the direct provision of scholarships to those who perform well but also to those who cannot afford to pay fees; and reaching out to external donors who provide scholarships to Tanzanians through the FBOs. This strategy has contributed much in ensuring FBOs retain some well-trained professionals to work in schools owned by the organization or partners.

This mapping activity finds that FBOs have three main initiatives that help to increase the supply of qualified teachers and instructors to serve within their facilities: employing qualified teachers to support FBOs’ facilities for good results; providing incentives such as attractive salaries and other benefits including housing, loans, transportation and scholarships; and training teachers and covering costs of training for in-service teachers to increase their skills and academic qualifications. In most cases, external development partners have supported FBOs by providing focused sponsorships for training.

**SDG 4 Implementation Challenges**

The interviewed FBOs report bureaucracy as a main challenge for their effective work towards achieving quality education for all. Respondents claim that it takes too long for a request to be addressed by government authorities, consequently upsetting the smooth running of the FBO’s operations.

“Sometimes we start operating day schools but when we want to expand our operations to include boarding structures, problems start…. the government takes too long to provide permission to do so. This is an obstacle for us to accomplish our purpose.” (TEC in Dar es Salaam)

Sometimes the government imposes directives which, according to responding FBOs, lead to negative impacts. For instance, the government recently directed private schools not to dismiss students who are performing poorly. FBOs indicated that this may lead to their schools performing poorly.

Inadequate funding for FBOs’ education programs is found to be another impediment for progress towards achieving SDG 4 – Quality Education.
4.3 Contribution to SDG 5 (Gender Equality)

Different FBOs have different approaches in dealing with gender inequalities within their setting, under the guidance of their faith scriptures, the Bible and the Quran. However, Tanzania recognizes that gender inequality is a major obstacle to socio-economic and political development. Many studies have shown that gender inequality is one of the underlying causes of low productivity as it, among other things, hampers the participation of at least half of the country’s population.

In recognition of this fact, the government of Tanzania has taken measures to ensure equality of all its citizens and, in particular, gender equality and gender equity. FBOs are in the forefront in ensuring equality within communities and within their organizations by establishing dedicated desks to deal with gender development with a focus on overcoming discrimination of women and girls.

The ministry responsible for gender and children, among other things, facilitates policies and guidelines on women and gender development aiming at mainstreaming a gender perspective into all policies, programs and strategies. Some FBOs are actively including gender policies and guidelines within their religious operations. However, some recently adopted policies seem to undermine these efforts. For example, the government’s decision to disallow girls who fall pregnant to continue with their education in public schools is considered by civil society as an obstacle to giving such vulnerable girls a second chance in life.

FBOs in Tanzania actively promote gender equality and empowerment of women and girls in various ways. Their contributions range from economic empowerment to political empowerment, advocacy for gender rights and women’s education, to the application of gender policies within their own organizations and institutions.

**BAKWATA**

BAKWATA promotes and provides equal employment opportunities for women and men. Moreover, through several projects, it raises awareness on issues of gender equality in communities to create self-awareness. BAKWATA also provides women entrepreneurs with free training. Within its Islamic education, BAKWATA teaches about the rights of children (including girls) and women.

**CCT**

CCT promotes and provides employment opportunities for women and men equally. It also works to promote women economic empowerment by providing education on women
entrepreneurship and self-awareness, describing their rights and assisting them when they experience problems in their families. A project within CCT Dodoma demonstrates this through helping women and mothers to advertise their business products and to search for markets. CCT moreover has a project which works to encourage and empower women to vie for political positions at local and national level. They encourage women to contest for internal leadership positions and proactively involve women and girls in meetings, so as to build up their capacities.

The Moravian and Anglican churches, which are members of CCT, are particularly active and advocate for gender rights, give women education and skills so that they can own property. They also help them in managing crisis situations and conflict mitigations relating to or caused by gender inequalities within communities.

CSSC
CSSC being an advocacy body particularly in health and education, encourages women to apply for job opportunities and give them priority in recruitment. It also has a gender policy for fairness in the office and against domination by any sex.

ELCT
ELCT Arusha implements gender justice programs such as ELCT Gender Justice Program 2018-2020 which has the aim of correcting gender imbalances in the society. ELCT has succeeded to increase the number of female members in its general assembly up to 26% in 2019. ELCT moreover runs programs to enhance self-awareness and education on the rights of women and girls, with the aim of improving women’s independence. ELCT conducts seminars that teach gender issues and provides education for girls.

Within ELCT, women are provided opportunities to participate as representatives in decision-making boards and meetings. As an example, ELCT in Kilimanjaro region has succeeded in having a large number of women who are pastors. Recently, ELCT has launched its own gender policy document which will guide all gender related work in ELCT congregations and dioceses in the country.

NCA
NCA works to ensure that its projects are gender sensitive and prepares reports with gender sensitivity, focusing on the projects and beneficiaries. Furthermore, NCA provides training to its partners on gender equality and gender justice. NCA makes use of paralegal service providers to mainstream gender in existing projects such as the WASH program which cares for reproductive health in schools and ensures that all children, including girls, can access their rights. NCA supports Haydom Hospital which gives women priority. In addition, NCA supports a project on economic empowerment with emphasis for young women and mothers.

TEC
TEC encourages mothers and women to participate in decision-making processes, own assets, distribute work equitably within the family, and raise children equally. It also formulates policies, distributes the policies and guidelines, and takes initiative to educate followers so that they can recognize the position of girls and women in society. Increasingly, TEC provides education on gender issues. Furthermore, TEC runs a project focusing on economic empowerment of women as well as provision of psychosocial support. In addition, TEC has gender desks in all its dioceses with full-time staff to support the day-to-day operations of gender-related issues.

TCRS
TCRS in its area of intervention creates awareness to men and women on gender justice and equality, changing their mind set and including women in all interventions in all stages as equal members of society, empowering them through their inclusion in capacity building, formation of groups, VICOBAs and income-generating activities (IGAs), to generate income and to have control over the generated benefits. Gender-based violence (GBV) is addressed and considered as unacceptable in the community and women are supported to claim their rights. TCRS utilizes the VICOBA platform and IGAs to challenge taboos and practices that are discriminatory to women and girls. TCRS also trains cultural and religious leaders on GBV and engages them in advocating for gender justice and in the fight against GBV.

TCRS provides education for women and men. There are special empowerment classes, offering political and economic education for women. TCRS also offers education on sexual and reproductive health and rights in primary and secondary schools.

Both Christian and Muslim organizations promote gender equality and justice as part of their day-to-day preaching and interaction with their members. They also include gender topics as part of their formal and in-
formal education work and awareness raising at community level. Women’s meetings that form part of the regular church life are used to monitor gender equality and bring up concerns.

A number of FBOs stand out as strong advocates against all forms of abuse, violence and harassment against women and girls. A few FBOs, such as the ELCT, have specific desks for Advocacy and/or Women. Most of the interviewed FBOs report that they encourage and support victims in reporting cases to the authorities, offer counselling and/or psychosocial assistance. For instance, CCT and its member churches advocate specifically for the abolition of wife inheritance, widow re-marriages and harmful traditional practices, which continue to be practiced in some parts of the Tanzanian society. An example is a program through which legal aid through paralegals is provided to those concerned. ELCT provides legal and psychosocial support to girls who are victims of rape, abuse or oppression or who have experienced any form of discrimination. Those who have been abused are brought to church for legal support services, education and training. In Mwanza region, ELCT organizes meetings and social dialogues with lawyers, psychologists and pastors who educate people about sexual abuse and its effects.

Political, economic and social empowerment programs for women are one way in which FBOs contribute to reducing discrimination and violence against women and girls. One example is NCA, which through her local partners supports up to 2,795 women and girls in 13 districts of Tanzania to engage in vegetable farming. It thereby enhances women’s independence from men in their economic livelihoods.

Several FBOs have adopted gender and/or child protection policies. For instance, the child protection policy of CSSC plays an important role in the organization’s coordination role for health and education projects. Enforcement mechanisms include a disciplinary committee and a suggestion box where staff can submit any complaints related to sexual harassment. ELCT has adopted a gender justice policy.

Some of the interviewed FBOs underline their effort to mainstream gender considerations into all of their operations and programs. This is for instance the case of NCA, which advises all partner organizations to integrate a gender perspective into their project planning.

Christian and Muslim FBOs stand up against harmful practices, including early and forced marriage and female genital mutilation. They educate and raise awareness on the negative consequences of such practices through dedicated community-based programs and preaching. For instance, TEC supports the formation of youth clubs at its schools, with the aim of sensitization and reducing child marriage. It provides both physical and spiritual education on the rights of children, consequences of child marriage, and encourages girls to report any abuse. Various girls’ empowerment programs are implemented by FBOs as a means of preventing harmful traditional practices.

FBOs support victims of harmful traditional practices by providing safe homes, counselling, teaching them life skills and assisting them in obtaining legal aid. Some FBOs carry out or participate in specific campaigns, such as “The Child of Africa” in the case of ELCT.

FBOs encourage women and the community generally to understand their rights and the importance of participating in leadership positions in society and building confidence to contest for political positions. Some of the responding FBOs, such as CCT and TEC, report that they conduct specific education and capacity building for women, in order to motivate them to participate in elections for leadership positions. The main objective is to ensure women participate effectively and have equal leadership positions at all levels of decision-making in politics, economics, and in the community. ELCT uses special days for women, such as International Women’s Day and Menstruation Day, for the same purpose.

FBOs in Tanzania promote access to sexual and reproductive health care and reproductive rights in various ways. Some of the FBOs limit their activity to raising general awareness of these rights and existing services and to encouraging women and girls to make use of them. Others, such as CCT and ELCT, through their health and education institutions, run dedicated programs on sexual and reproductive health as well as reproductive rights, offering related services either directly or in cooperation with specialists in the field.
TARGET 5.A: Undertaking reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources.

FBOs’ focus in relation to this target is mainly on providing awareness and education about women’s rights to own and inherit resources and property, including productive assets. CCT focuses on educating parents to realize that all children are equal and that all children should be allocated equal rights to own property, as well as providing entrepreneurial education to promote income generation, and land rights.

ELCT reviews policies that prohibit women from owning resources such as land. In addition, ELCT has started to organize women within women’s groups such as Village Community Banks (VICOBA) and the Savings and Credit Co-Operative Society (SACCOS), which help women gain financial independence by owning and managing their own financial assets.

TARGET 5.B: Enhancing use of enabling technology, in particular information and communications technology, to promote women empowerment.

FBOs increasingly make use of modern information and communication technology to reach out to their members and communicate on various topics, including women’s empowerment. Some FBOs proactively encourage women to own and make use of smartphones, the internet and social media to get access to information of interest and relevance to them.

Some FBOs recognize that the introduction of those technologies is an ongoing process, which will need further investment and dedication in the future.

TARGET 5.C: Adopting sound policies and enforceable legislation for the promotion of gender equality and empowerment of all women and girls at all levels.

Some FBOs, for instance BAKWATA, contribute to enhancing knowledge of existing national policies and laws that regulate gender equality. Others, such as ELCT, in collaboration with other Civil Society Organizations (CSOs), actively advocate for strengthening those policies and better enforcing existing rights of women and girls through legal duty bearers. ELCT is also among those FBOs that have adopted their own gender policy document. The ELCT’s gender policy document defines its internal commitment to gender equality and justice and to guiding gender-related advocacy and outreach in congregations and dioceses.

SDG 5 Implementation Challenges

Low community awareness and prevalence of gender stereotypes

In many cases, community members are influenced by their traditions and religions and still have limited awareness of gender and human rights. In Tanzanian society, there are still many cultural practices, traditions and taboos that hinder the elimination of gender-based violence in some areas. These, coupled with some religious teachings, make it a big challenge to promote change. Moreover, the demand for community gender education offered by FBAs is greater than the capacity of religious institutions.

Gender-based stereotypes are still strongly present in large parts of Tanzanian society and people resist changing their culture. This makes the work of FBOs challenging, e.g. when it comes to educating the community about the importance of including women at all levels of leadership.

At times, people are confused by the different teachings and guidance they receive from the state, religious education, and traditions.

Existence of conflicting laws

There are still contradictory laws when it comes to the promotion of gender equality in the country. For instance, the Marriage Act allows a girl aged 14 years to be married, while the Law of the Child Act protects her since she is still a child. Certain laws of inheritance and property management for women and girls are equally contested.
4.4 SDG 10 (Reduced Inequalities)

Tanzania is a developing country in which inequalities between individuals remain strong. Poverty rates are high, especially in rural areas, due to uneven distribution of economic gains and long-term historical trends. This is despite the fact that economic reforms have been undertaken and public and private investments in social sectors, such as education and health, have increased.

FBOs in Tanzania have engaged in advocating against economic inequalities. An example has been the advocacy of FBOs in favor of debt relief for developing countries like Tanzania. Until today, the majority of FBOs continues preaching and advocating for fairness and reducing the gap between rich and poor communities in the same country.

**BAKWATA**

BAKWATA motivates people in the community to work hard so that they can improve their living standards. Furthermore, BAKWATA supports women’s economic empowerment groups.

**CCT**

CCT supports community-based financial groups, such as VICOBA (Village Community Banks) and Savings and Internal Lending Community (SILC) groups in order to enhance living conditions for those with low income. CCT collaborates with the government to provide education to the community at all levels and supports members of small financial groups for participation in different occasions for learning such as Nane Nane Day.³

“...we are providing training to the community for the people to join VICOBA... We also support members of VICOBA to participate in different occasions for example nane nane day...” (CCT Shinyanga)

**ELCT**

ELCT supports financial groups such as SACCOS and VICOBA. It also encourages more people to join those groups in order to get loans and start their own small businesses. ELCT provides life skills education and capacity building for income-generating activities.

“…we encourage people to join financial groups such as VICOBAs and SACCOS so that they can get loans and start different businesses. We also offer loans to women who have children with disabilities to help themselves and their children... We offer loans not for the aim of getting profit but for improving life standards of people...” (ELCT Dodoma)

**NCA**

NCA supports its partners in implementing an economic empowerment project, which trains beneficiaries and supports them to form VICOBA groups in several districts. NCA also operates a resource governance project, which supports beneficiaries in the effective use of financial resources while advocating for equal distribution of state dividends, particularly from the extractive industry. NCA is currently supporting the Make It Possible Campaign, which seeks to redress effects of income inequality by advocating for progressive taxes and tax-funded social protection in order to ensure universal health coverage for all Tanzanians.

---

³ Nane Nane Day is a public holiday in Tanzania commemorated on 8 August each year to recognize the contribution of farmers to the national economy.
**TEC**

TEC collaborates with the government to provide entrepreneurship education. It also preaches about reducing inequalities. Moreover, it has VICOBAs for improving the economic status mainly of women.

**TARGET 10.1:** Achieving and sustaining income growth for the poor.

Providing entrepreneurship education and supporting the establishment of small financial groups (such as VICOBAs, SACCOS, and SILCs) are activities that most of the interviewed FBOs implement to improve the economic situation and livelihood of low-income groups. The financial groups are used as platforms to teach women and men about value chain development, entrepreneurship, and marketing.

“We are providing entrepreneurship skills……we support beneficiaries to establish small financial groups such as VICOBAs, SACCOS and SILCs for saving and giving loans to members…” (BAKWATA Dar es Salaam)

“We provide training in agriculture to ensure availability of food…We provide seeds which can survive semi-arid conditions.” (CCT Shinyanga)

FBOs moreover use preaching as an opportunity to motivate their members to work hard to improve their economic conditions.

“We encourage people to engage in production activities in order to improve their economic status …. we also preach in church by using the word of God “Asiyefanya kazi na asile” to influence people to work hard…” (ELCT Kilimanjaro)

Some FBOs, such as ELCT and TCRS, underline that they are promoting equality at the family level, between men and women, when it comes to managing financial resources, land ownership, and sharing other family responsibilities.

**TARGET 10.2:** Empowering and promoting social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status.

FBOs work towards inclusion and non-discrimination when it comes to participation within their own structures and activities. Moreover, several of them promote civil engagement, such as voting and standing for election, and some provide specific training on how to participate in the political sphere and compete for political positions.

“…. there is not any kind of discrimination ….in all groups discrimination has no space…” (BAKWATA Dodoma)

“We are providing training to our program communities’ members on how to participate and compete in political positions” (TCRS, Dar es salaam)

**TARGET 10.3:** Ensuring equal opportunity and reducing inequalities of income.

SDG 10 Implementation Challenges

Inadequate resources

Due to overwhelming poverty around the country, community needs are greater than the resources available in FBOs. There is a shortage of human resources. All FBOs are struggling to finance their support to communities and to provide community-based education. Common challenges are the shortage of capital to support small community groups, low education of community members, and high demand compared to the capacities available. Some FBOs try to address such challenges by entering into partnerships and building the capacity and knowledge of a few group members by having them attend relevant seminars.

Communities are slow to change

Even with robust appeals and encouragement of poor community members to join VICOBAs and SACCOS groups, and getting communities to accept to join hands in order to improve their economic situation, combatting inequalities remains a challenge. FBOs report that there is still a very low uptake, particularly among men, to join such groups, even after being oriented on the benefits that can be expected.

4 **Asiyefanya kazi na asile** means “whoever doesn’t work should not get food.”
4.5 SDG 16 (Peace, Justice and Strong Institutions)

Throughout history, FBOs in Tanzania have played a critical role in shaping political, economic, social, and cultural views and the opinions of many people. Faith has very much contributed to peace, tranquility, and harmonious co-existence in Tanzania.

Given the recent involvement of FBOs in the deliberation of various political issues, some political leaders and commentators criticized the positioning of religious actors stating that those should remain apolitical. These critiques reflect the shrinking public space for FBOs as ruling authorities concentrate their executive powers and limit the scope for checks and balances. With these powers, executive controls have limited democratic processes such as political parties’ meetings, freedom of speech, freedom of assembly and freedom of information. This has oftentimes created tensions among the authorities, members of political parties and citizens. In addition, the independence of the national parliament and judiciary as self-governing entities is observed to be at stake with reducing political space.

At the same time, the Tanzanian constitution does not prohibit FBOs from participating in strengthening good governance nor in participating in the provision of civic education aimed at creating a united, peaceful, and democratic Tanzania. Article 21(2) of the constitution states that “Every citizen has the right and the freedom to participate fully in the process leading to the decision on matters affecting him, his well-being or the nation.”

**BAKWATA**

BAKWATA contributes to promoting just, peaceful and inclusive societies in Tanzania by preaching on justice and peacemaking in the mosques. BAKWATA participates in various forums at all levels that aim at strengthening justice, peace and inclusion.

“Our religion preaches about peace as one of our duties in our daily activities.” (BAKWATA, Arusha region)

**ELCT**

ELCT conducts programs which sensitize people about peace maintenance and conflict resolution. Usually, these programs are conducted in cooperation with other stakeholders such as Norwegian Church Aid and ACT Alliance. As a religious institution, preaching on justice and peace is the main task. Furthermore, ELCT runs centers which take care of disadvantaged groups to ensure that their basic rights are realized.

“We have centres for protecting and educating children who are living in difficult environments. This strengthens them physically, mentally and gives them peace of mind.” (ELCT Arusha)

**CCT**

CCT promotes just, peaceful and inclusive societies on a daily basis through preaching. CCT supports and collaborates with paralegal centers to assist the communities in their legal matters. Moreover, CCT is a strong participant in national interfaith collaborations and hosts a forum yearly to promote national peace.

**NCA**

NCA implements a number of projects, including community-based projects, which incorporate issues related to justice, peace, inclusion and accountable institutions. For more than ten years, NCA has supported Public Expenditure Tracking Systems (PETS) at the community level whereby citizens are trained to track the use of local public resources, expose when these are not used for their intended purpose and seek justice so these resources are recovered for the developmental purposes for which they were intended.

NCA has supported the formation of interfaith committees to ensure that NCA projects benefit the entire targeted population regardless of religious orientation. In addition, NCA supports and encourages religious leaders to preach about peace, justice and inclusion.

**TEC**

TEC has a management structure with a specific department that deals with matters related to justice and peace. In addition, TEC currently hosts the National Interfaith Body which coordinates all faiths in working together
to promote peace, justice and democracy in the country. As well, TEC trains diocesan justice and peace workers.

**SDG 16 Targets**

<table>
<thead>
<tr>
<th>Target</th>
<th>FBO</th>
<th>BAKWATA</th>
<th>CCT</th>
<th>ELCT</th>
<th>TEC</th>
</tr>
</thead>
<tbody>
<tr>
<td>16.1</td>
<td></td>
<td>(BAKWATA Kilimanjaro region)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.2</td>
<td></td>
<td>(CCT Iringa region)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

FBOs contribute significantly to reducing all forms of violence and related deaths through their daily activities and ongoing programs all over the country.

Preaching about non-violence to their followers is one of the main forms of FBOs’ contributions in this area. Scriptures are used to condemn all forms of violence in the community and to urge people to love one another. Some FBOs (such as ELCT) make use of the media to disseminate their preaching against community violence to a large audience.

Next to preaching, FBOs use their education institutions and dedicated programs to carry the message of peace, non-violence and accountability. FBOs protect vulnerable population groups from violence, e.g. orphans, as is the case for CCT member churches. They also assist and support victims of violence and report cases to the relevant authorities.

Abuse, exploitation, trafficking and violence against children are addressed by FBOs through preaching. Various platforms and media channels are used by FBOs to carry their message to their members and the wider public.

BAKWATA uses the media, sermons, entrepreneurship seminars, schools, committees, and conferences to speak about abuse, exploitation, trafficking and all forms of violence against, and torture of, children.

“**We teach people by using sermons. We attend conferences and deliver speeches on peacemaking. Our peace committee collaborates with many legal entities to help end abuse, exploitation, trafficking and all forms of violence against, and torture of, children.**” (BAKWATA Shinyanga region)

“**We teach people about human dignity, we educate each other during funerals, peace sessions and we report violence incidents.**” (BAKWATA Kilimanjaro region)

“**We take children from vulnerable environments and bring them to safe environments.**” (CCT Iringa region)

“**We preach through radio programs using our radio station ‘Furaha radio’ to encourage our people to be pioneers for child protection and helping the poor.**” (ELCT Iringa region)

“**We teach people to end abuse, exploitation, trafficking and all forms of violence against, and torture of, children that is not right to humanity as it is said in the scriptures.**” (CCT Iringa region)

“**We collaborate with CARITAS (a Catholic organization) to provide education on ending violence. ...we also refer victims of violence to the police gender and children desk.**” (CCT Mbeya region)

“**We have a special program for educating children not to join bad peer groups that could expose them to risks... We have been conducting seminars to create community awareness on the consequences of violence and torture to children. For instance, in July 2018 we conducted a seminar to teach people on child trafficking. About 800 children participated.**” (TEC Singida region)
Christian and Muslim FBOs alike preach and teach against corruption and bribery and collaborate with the government in the fight against corruption, e.g. by bringing corrupt individuals to court.

“We preach against corruption in the mosques in support of our government under President Magufuli who is leading the fight against corruption and bribery.” (BAKWATA Arusha region)

“Corruption is part of our sermons to our community because we know it is an enemy of justice. They are not to accept giving or receiving bribes. The community is supposed to notice that, and it is our responsibility to tell them to refrain from corrupt behaviors.” (CCT Iringa region)

“Every month we collaborate with the national anti-corruption agency to reach people with education on corruption and bribery in all forms… we use sermons and teachings at all levels from regional, district and village level to drive corruption out so that someday it will come to an end.” (TEC Mbeya region)

ELCT emphasizes its significant commitment in this area by having their own anti-corruption policy. Whoever goes against the policy is subjected to strict punishment. ELCT sees bribery as something that devalues the person’s integrity.

“We do capacity building of our staff from lower to higher level to ensure everyone knows everything: nothing is hidden…” (BAKWATA Arusha region)

Some of the responding FBOs underline their processes for inclusive decision making, especially when it comes to programs providing services to the communities.

“In our region we have a transparent decision-making strategy that involves children, youths and women to provide their views on matters touching their lives”. (ELCT Singida region)

“We stick to directives from the church headquarters on how to undertake our activities particularly on serving communities, protecting the rights of different priority groups such as elders.” (TEC Mbeya region)

FBOs are particularly active in the country in supporting the development of effective, accountable and transparent institutions at all levels – both within public institutions and particularly within their own structures. Several of the interviewed FBOs underline that they have strict internal policies and guidelines for effectiveness, accountability and transparency within their institutions and programs, including all financial operations. Staff is trained and instructed accordingly.

FBOs make a significant contribution to this overall target. However, they are not directly involved in providing legal identity. They act as facilitators and help people make decisions on obtaining legal identities. FBOs, e.g. through their health facilities, are in a position to guide people on where and how to get legal identity, particularly birth registration.

As well, FBOs provide education to the community on the importance of having legal identities and birth certificates.

FBOs undertake programs that either directly or indirectly increase public access to information. A number of FBOs, including BAKWATA, ELCT and TEC, own media channels, including newspapers, radios and TV stations that provide public access to information. Social media channels are used for the same purpose. Related to that, FBOs often have dedicated communication desks/departments.

“We have media law that allows people to provide and get news. This law is found in the universal declaration of rights of 1984… We also have our newspaper, and Radio Imani…” (BAKWATA Arusha region)

Some of the responding FBOs, such as CCT and ELCT, report that their programs include specific activities aimed at promoting and protecting fundamental freedoms in accordance with national legislation and international agreements.

FBOs undertake programs that either directly or indirectly contribute to this target. For instance, BAKWATA conducts meetings to teach people about the dan-
The Lutheran World Federation

SDG 16 Implementation Challenges

Poor response from the community

In the course of implementing different activities, FBOs expect communities to respond positively so as to reach the intended goals. Unfortunately, in some cases community response is very low. For instance, BAKWATA in Kilimanjaro region reports that when people from the community are called to attend events that aim at enhancing justice and peace, response is poor, particularly for youth. Apart from that, communities fail to report perpetrators to the authorities. As a result, violence and other unjust acts persist in the community.

“One of the challenges is failure of members of the community to report perpetrators of violence.” (ELCT Singida region)

FBOs are significant actors in promoting and enforcing non-discriminatory laws and policies for sustainable development in Tanzania. BAKWATA and ELCT are among the institutions that report that they conduct targeted advocacy and collaborate with government and other stakeholders to promote and enforce such laws and policies.

Target 16.B: Promoting and enforcing non-discriminatory laws and policies for sustainable development.

Shortage of facilities to support FBOs’ activities

Shortage of facilities and equipment to support their activities hinders FBOs from effectively contributing to SDG 16. For instance, in Shinyanga region there is an interfaith partnership between Christians and Muslims. Most of the time it fails to conduct meetings because most members are not comfortable with attending a meeting at someone else’s compound. Since there is no “common ground” meeting/conference facility, they end up postponing meetings that could be important for justice and peace in the region and the country as a whole.

Lack of awareness of existing laws and policies

This is a common challenge in many areas where FBOs operate. The majority of people in the communities are unaware of existing laws and policies that protect and promote their rights. This gives FBOs a difficult time in bringing changes to these communities.

“One of the challenges that we face is poor understanding and awareness of existing laws and policies on rights and peace... We face difficulties because some people become resistant.” (BAKWATA Singida region)

FBOs use sermons, training and seminars to address some of the above challenges. Through sermons, people are constantly taught about how to address violence in their community despite the existing culture and prevailing perceptions.

As for the lack of funds, FBOs proactively search for alternative sources. For instance, FBOs mobilize resources from their members by asking them to support their programs and to support the needy through both in-kind and financial contributions. Furthermore, FBOs solicit funds from the government to support their activities and programs so as to reduce dependence on external donors.

Shortage of funds to reach the wider community

FBOs mention the shortage of funds as a major challenge for their operations toward achieving SDG 16. The lack of sufficient funds restricts them from reaching many people in the community. Furthermore, some programs fail to start since there are not enough funds.

“There is a severe shortage of financial resources compared to the needs.... And as the days go donors disappear...This creates a difficult environment for implementation of our projects.” (CCT Iringa region)

FBOs mention the shortage of funds as a major challenge for their operations toward achieving SDG 16. The lack of sufficient funds restricts them from reaching many people in the community. Furthermore, some programs fail to start since there are not enough funds.

“There is a severe shortage of financial resources compared to the needs.... And as the days go donors disappear...This creates a difficult environment for implementation of our projects.” (CCT Iringa region)

Shortage of facilities to support FBOs’ activities

FBOs use sermons, training and seminars to address some of the above challenges. Through sermons, people are constantly taught about how to address violence in their community despite the existing culture and prevailing perceptions.

As for the lack of funds, FBOs proactively search for alternative sources. For instance, FBOs mobilize resources from their members by asking them to support their programs and to support the needy through both in-kind and financial contributions. Furthermore, FBOs solicit funds from the government to support their activities and programs so as to reduce dependence on external donors.

FBOs are significant actors in promoting and enforcing non-discriminatory laws and policies for sustainable development in Tanzania. BAKWATA and ELCT are among the institutions that report that they conduct targeted advocacy and collaborate with government and other stakeholders to promote and enforce such laws and policies.

TARGET 16.B: Promoting and enforcing non-discriminatory laws and policies for sustainable development.

Poor response from the community

For example, in January 2019 our regional leaders got the chance of visiting Oman to learn how in this big Islamic country both Muslim and Christians live in peace but also through this trip, participants were able to learn how to fight and eliminate violence in communities.” (BAKWATA Shinyanga)

A number of Christian FBOs work in collaboration with the government and collaborate with partners from around the world to eliminate all forms of crime and violence, including terrorism. Preaching and teaching are used to inform followers about the risks and consequences of those dangerous acts and to promote responsible behavior.

SDG 16 Implementation Challenges

FBOs use sermons, training and seminars to address some of the above challenges. Through sermons, people are constantly taught about how to address violence in their community despite the existing culture and prevailing perceptions.

As for the lack of funds, FBOs proactively search for alternative sources. For instance, FBOs mobilize resources from their members by asking them to support their programs and to support the needy through both in-kind and financial contributions. Furthermore, FBOs solicit funds from the government to support their activities and programs so as to reduce dependence on external donors.

Shortage of facilities to support FBOs’ activities

FBOs use sermons, training and seminars to address some of the above challenges. Through sermons, people are constantly taught about how to address violence in their community despite the existing culture and prevailing perceptions.

As for the lack of funds, FBOs proactively search for alternative sources. For instance, FBOs mobilize resources from their members by asking them to support their programs and to support the needy through both in-kind and financial contributions. Furthermore, FBOs solicit funds from the government to support their activities and programs so as to reduce dependence on external donors.

Lack of awareness of existing laws and policies

This is a common challenge in many areas where FBOs operate. The majority of people in the communities are unaware of existing laws and policies that protect and promote their rights. This gives FBOs a difficult time in bringing changes to these communities.

“One of the challenges that we face is poor understanding and awareness of existing laws and policies on rights and peace... We face difficulties because some people become resistant.” (BAKWATA Singida region)

FBOs mention the shortage of funds as a major challenge for their operations toward achieving SDG 16. The lack of sufficient funds restricts them from reaching many people in the community. Furthermore, some programs fail to start since there are not enough funds.

“There is a severe shortage of financial resources compared to the needs.... And as the days go donors disappear...This creates a difficult environment for implementation of our projects.” (CCT Iringa region)
5. WAYS OF ENGAGEMENT OF FBOs

Apart from the contributions that FBOs make to specific goals under the United Nations’ 2030 Agenda, the mapping exercise aimed to identify ways in which FBOs get involved in SDG-related planning and implementation processes at local and national levels, and to what extent their contributions are recognized and documented. The exercise also served to identify the partnerships in which FBOs typically engage in order to strengthen their role in implementation and advocacy related to SDGs.

5.1 Participation in local, national and international forums, committees, meetings and conferences

Respondents were asked to what extent their FBO participates in local, national and international forums, committees, meetings and conferences related to SDGs 3, 4, 5, 10 and 16. They were also requested to explain their FBO’s role in such gatherings.

All of the interviewed FBOs participate in forums and meetings conducted by various stakeholders. This includes forums organized and hosted by NGOs where FBOs are invited to participate. However, most of these forums are local and regional. FBOs also attend interfaith meetings to discuss plans and strategies for their programs. These include CCT and CSSC forums.

The Land Justice for Sustainable Peace in Tanzania and the Peace and Justice Commission in Tanzania are two examples of forums through which FBOs promote just, peaceful and inclusive societies.

FBOs participate in a variety of meetings from village to national level. FBOs are invited to attend Regional Consultative Committee meetings to discuss development programs and issues including, but not limited to, poverty eradication and other community challenges such as gender-based violence.

**BAKWATA**

BAKWATA participates in national, regional and district events where they share information. Such events include International Women’s Day and the Day of the Africa Child. Their role is to educate the community and to encourage the public to recognize rights for women and men. They also provide education about child marriage, early marriage, and about ensuring that all children to get quality education.

**CCT**

CCT engages in meetings on policy making and participates in commemorating International Woman’s day and World AIDS Day. Their responsibility is to educate the community as well as to discuss topics such as gender rights. CCT participates in national level conferences where they present their position, progress and challenges.

“We participate as participants as well as facilitators.” (CCT Dodoma region)

**ELCT**

ELCT participates in several high-level political and social forums worldwide including the UN Commission on the Status of Women, the UN High-level Political Forum on Sustainable Development, and the International Forum for Gender Equality with the aim of promoting social protection and social security for women and girls and enhancing gender justice. In addition, ELCT participates in national and regional meetings where their role is to share views and opinions. The church is committed to work with interfaith partners in releasing prophetic statements that aim to strengthen the unity of the nation.

**NCA**

NCA participates in forums against gender-based violence where they bring leaders together and promote awareness in the community about human rights. Their main goal is to educate the community.

**TEC**

TEC participates in local, national and international conferences such as those organized by CARITAS and SHIKANET. Their main role is to mobilize communities around emerging challenges, as well as training the community on how to change society by identifying their problems and on how to find solutions to these problems. In addition, TEC participates in the commemoration of International Women’s Day and in local government authorities meetings. Their roles are to share their opinions and views on development issues and to share their reports and plans.

5.2 Engagement by government in planning, implementing and reporting

Respondents were asked about the extent to which their FBO is engaged...
by local and central governments in planning, implementing and reporting on programs related to SDGs 3, 4, 5, 10 and 16. They were further requested to state which types of data their FBO reports to the local and or central government, if any.

The study found that government has been involving FBOs to a large extent into the planning, implementing and reporting on programs at different levels. The emphasis is mostly on implementation and reporting programs. CCT and ELCT indicated that they are invited to attend sessions of parliament as observers e.g. during the preparation of the development budget. FBOs implement a good number of programs in partnership with the government. Example include vaccination programs, programs for vulnerable children or for people living with HIV and AIDS. Where applicable, FBOs follow government guidelines for providing services.

“We cooperate with government in many programs.” (TEC Shinyanga region)

“We have many programs implemented in different wards and streets in partnership with the government.” (ELCT Mwanza region)

“We participate in different meetings with government education officers…we also participate in capacity building programs.” (BAKWATA Arusha region)

In addition to program implementation, FBOs frequently report different types of data and information to local and/or central governments. The data includes, but is not limited to, the services provided by FBOs and the number of people reached and/or served. Most of the reports are submitted on a monthly or quarterly basis.

“We send our reports to specific sectors for them to know what we are doing.” (TEC Mbeya region)

5.3 Reporting and documenting FBOs’ work on SDGs

FBOs typically document and share their work through technical progress reports that are generated on monthly, quarterly, semi-annual and annual bases. Apart from sending their reports to the local and central government, they also keep copies to share with other stakeholders and for documentation purposes. Those reports inform their planning and implementation as well as policy making. This form of documentation, while shared with relevant stakeholders, is usually not made available for public consumption. Few FBOs publish examples of their work in newspapers for wider reach.

Respondents were requested to give suggestions for developing a monitoring, evaluation, and learning framework which Tanzanian FBOs could use to document and report their contributions to specific SDGs. Most of the FBOs suggest the establishment of a single shared monitoring and evaluation system for sharing FBOs’ work on specific SDGs, similar to some governmental systems in place.

“There is a need of establishing a single shared M&E system for sharing our information.” (ELCT Shinyanga region)

“There must be a system to provide reports for example in health and education for each sector to know its contributions, and how much was contributed.” (ELCT Arusha)

In addition, FBOs propose to build the capacity of their staff for writing reports and for documenting. This means having a system is not enough: the people who are responsible for preparing reports and data should be well equipped to do so, in order to ensure quality data and information are available about FBOs’ contributions in implementing SDGs in Tanzania.

“More education should be provided on report writing and emphasis should be provided on tracking indicators and during evaluation, there should be feedback on the performance.” (TEC Singida region)

5.4 FBOs’ focus on vulnerable population groups

FBOs have a long track record in serving special population groups such as orphans and vulnerable children, women, girls, and youth. In Tanzania there are policies and strategic plans that place special population groups at the centre of program implementation. These policies demand stakeholders to engage and give priority to such groups. There are two key forms of engagement:

3. FBOs directly provide services and support to special population groups. Almost all programs undertaken by FBOs serve one or more of those special groups.

4. FBOs engage special populations in supporting program implementation. Many community-based programs implemented by FBOs engage special populations to ensure effective implementation. The special groups are engaged as peer support groups who help to reach others in the special groups.

In addition, FBOs propose to build the capacity of their staff for writing reports and for documenting. This means having a system is not enough: the people who are responsible for preparing reports and data should be well equipped to do so, in order to ensure quality data and information are available about FBOs’ contributions in implementing SDGs in Tanzania.

“More education should be provided on report writing and emphasis should be provided on tracking indicators and during evaluation, there should be feedback on the performance.” (TEC Singida region)

5.4 FBOs’ focus on vulnerable population groups

FBOs have a long track record in serving special population groups such as orphans and vulnerable children, women, girls, and youth. In Tanzania there are policies and strategic plans that place special population groups at the centre of program implementation. These policies demand stakeholders to engage and give priority to such groups. There are two key forms of engagement:

3. FBOs directly provide services and support to special population groups. Almost all programs undertaken by FBOs serve one or more of those special groups.

4. FBOs engage special populations in supporting program implementation. Many community-based programs implemented by FBOs engage special populations to ensure effective implementation. The special groups are engaged as peer support groups who help to reach others in the special groups.

Below are some examples:

**BAKWATA**

BAKWATA supports and engages all special population groups by empowering them to solve their problems
in partnership with various local stakeholders. It implements projects with people from all population groups to support them, based on availability of resources.

**CCT**
CCT organizes women and widows, gives them seminars and teaches them about their rights. CCT provides girls in youth clubs with education about child losses. In Mara, Dodoma, Singida and Manyara regions, with the close support of ACT Church of Sweden, it supports safe places for girls who have refused to be abducted or genitally mutilated.

**ELCT**
Within its work on gender equality, ELCT supports special population groups through training and preaching about lifestyles that promote gender equality, and through national campaigns, where they provide adolescents with sex education and information about reproductive health. It also organizes sessions with adolescents and people with disabilities to listen to their challenges and provide advice.

**NCA**
NCA supports projects for the most vulnerable children. Examples of projects supported by NCA include Ilula orphanage in Iringa region and Four Corners Cultural Program (4CCP) which deals with orphans and neglected groups.

**TEC**
TEC has a Department of Children and Youth which provides general education and life-skills training to special population groups. TEC encourages women to form and register small self-support groups. They also provide technical education at technical colleges and give education and life-skills training to become independent. TEC gives those groups seed money for income generation activities to meet their basic needs.

### 5.5 Collaboration among Tanzanian FBOs

Respondents were asked to describe any networks and initiatives which are jointly implemented by Tanzanian FBOs. At the country level, various types of interfaith networks, linkages and joint initiatives exist that are used by FBOs as platforms to strengthen their operations. These networks play a role in addressing different issues facing FBOs and in sharing expertise. They form a strong voice for advocacy and sometimes represent the interests of the FBOs with the government.

Responding FBOs indicate four networks namely CCT, CSSC, Compassion and Tanzania Interfaith Partnership (TIP). These networks involve different FBAs and serve different purposes. CCT and CSSC have been introduced earlier in this report (see section 3.2). TIP is a joint initiative of major faith-based actors in the country, including CCT, TEC, BAKWATA, the Mufti of Zanzibar office, and NCA. The role of TIP is to coordinate the implementation of joint projects and provision of legal support. Compassion International Tanzania is an Evangelical Christian holistic child development ministry dedicated to the needy children of Tanzania. Compassion’s sponsorship programs help to release children from spiritual, economic, social and physical poverty, with a view to enabling them to become responsible and fulfilled Christian adults.

Apart from these established networks, there are various collaborations among FBOs on specific projects or processes. One example is the collaboration by BAKWATA, CCT and TEC on HIV and AIDS.
6. CONCLUSION

The findings of the mapping exercise make it clear that FBOs are key partners for the government and UN when it comes to making progress towards SDGs 3, 4, 5, 10 and 16 in Tanzania. FBOs in Tanzania can build on longstanding experience in providing social services, raising awareness, and advocating for societal, economic and political concerns. Their activity reaches large populations throughout the country, including in remote areas. FBOs are uniquely positioned when it comes to working with communities and vulnerable population groups as they have the potential to change people’s behavior and attitudes, taking their faith and traditions as a starting point. The FBOs that were interviewed during the mapping exercise repeatedly stated that preaching is used as an entry point to raise awareness on various societal issues, including sensitive topics.

The interviewed FBOs, whether Christian or Muslim, show many similarities in their general engagement with the SDGs. They typically engage with a variety of different topics and cover a large spectrum of SDG targets with various activities, however, usually without framing their engagement in terms of “working on SDGs”. Based on the history of each FBO, but also their self-understanding and individual mission, FBOs have developed different emphases or “specializations” in their work with, and for, society. Only in a few cases are differences in approaches based on different faith convictions, e.g. when it comes to sexual and reproductive health rights. The commitment to serve the most vulnerable and needy and “leave no one behind” is common to all FBOs.

Collaboration between FBOs and government is very common and seen as positive and productive in most cases. However, several FBOs said that at the same time they see potential for strengthening these relationships. Partnership with UN agencies is much less common at this point and it seems that the UN is yet to discover FBOs as a key partner in pursuing the 2020 Agenda in Tanzania. FBOs also acknowledge that there is room for strengthening collaboration and coordination among faith actors, including both intra- and inter-faith partnerships.

Awareness of, and alignment with, SDGs is still not very common among FBOs in Tanzania. The availability of quantitative data in relation to specific SDG targets and indicators is low. FBOs identified a need to build capacity for high-quality data collection and documentation of their contributions to the SDGs.

Financial limitations and limited capacities as compared to the huge developmental needs and demands that exist in Tanzanian society are some of the main challenges faced by FBOs in their work. To some extent, it might be possible to address some resource gaps through more intentional partnerships by exploiting synergies more effectively. Recognition by the government and UN of the key importance that FBOs have in achieving progress towards the SDGs will be a pre-condition to this. There is a need to consistently involve FBOs in implementation, but also in planning the national and local development agenda in Tanzania.
“There are places where churches and other religious institutions are the only supporting and trusted actors in society.”
(Act Church of Sweden, August 2019)