OTHER INDICATORS AT DISTRICT LEVEL

Education

Adult literacy

Adult literacy rates by district are shown in the following map 2.2 based on data reported in the population census.

Districts with above average literacy rates are in Dar es Salaam, the South (Southern Highlands), the North - in Arusha and Kilimanjaro and around Lake Victoria. Low literacy rates are noted in the coastal districts of Mkuranga, Lindi and Mtwara. The lowest literacy rates are in Ngorongoro, Monduli and Kiteto, largely attributed to the pastoralist way of life

In contrast to the usual association between higher literacy and lower poverty, in southern Morogoro Region and western Ruvuma Region there are higher poverty rates together with higher literacy rates, while in Ngorongoro there is a relatively low rate of poverty, but also low literacy rates.

There is no district where women are more literate than men. Districts where women have the largest disadvantage (between 20 and 26 per cent) in literacy rates compared to men, are found along the Southern Coast and in the West.

Primary school enrolment

In 2002, higher primary school enrolment rates were associated with lower rates of poverty. This negative relationship of net enrolment and poverty seems to have disappeared in 2004, indicating that the Primary Education Development Programme has had a levelling effect on enrolment in primary education.

Table 16 shows the results of an analysis of poverty and some education indicators in 2002 and in 2004. The analysis uses Pearson correlation coefficients which have much lower values in 2004 than in 2002, indicating that the correlation between rates of poverty and primary school enrolment, pupil/classroom ratios and pupil/teacher ratios became much weaker in 2004 than had been the case in 2002. As the table also shows, the coefficients associated with pupil/classroom ratios were much lower than those associated with pupil/teacher ratios, indicating that classroom construction has been more successful in the poorer districts than has the deployment of teachers. Nonetheless, teacher pupil ratios also show substantial improvement.

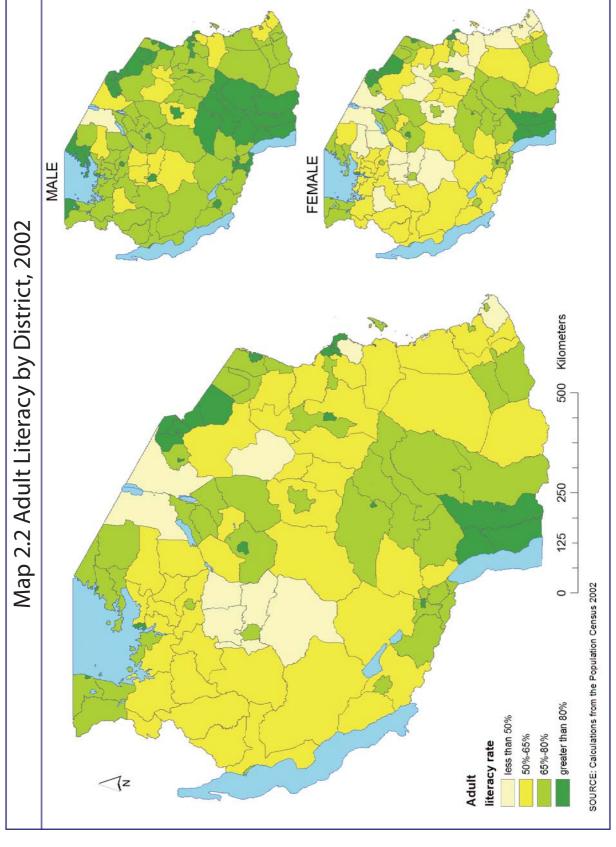


Table 16. Poverty correlates: Pearson correlation coefficients of education variables with district poverty rates

Variable	2002	2004
Net primary school enrolment	-0.27**	-0.10
Pupil/classroom ratio	0.22*	0.14
Pupil/teacher ratio	0.43**	0.26**

Note: * significant at 5% level; ** significant at 1% level

Source: Authors' calculations using 2002 Population and Housing Census, NBS 2003 and Basic Statistics on Education, Ministry of Education and Culture, 2002 and 2004, Kilama and Lindeboom et al., Where are the Poor in Tanzania, forthcoming

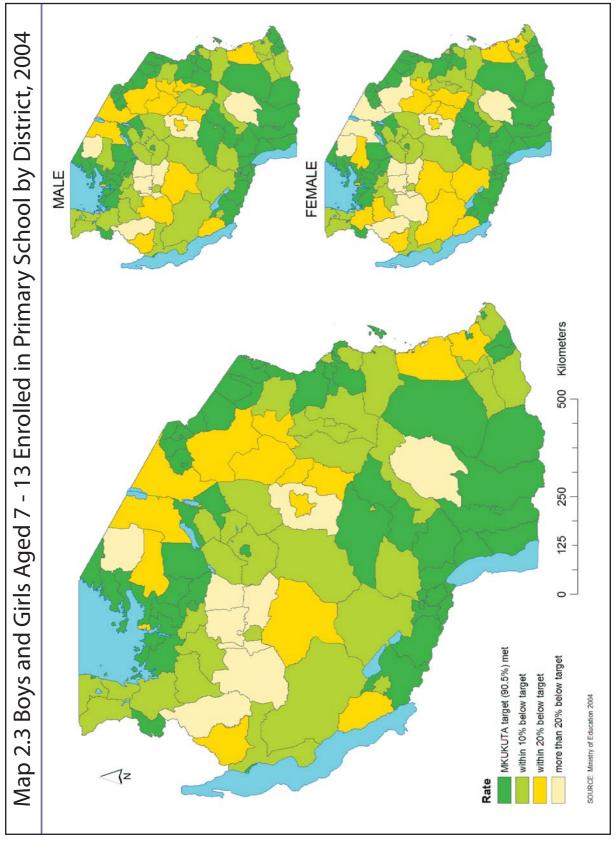
By 2004, slightly more than half the districts have recorded net enrolment rates to match or exceed the MKUKUTA target of 90.5 per cent for 2004, and about a quarter were within 10 per cent of reaching the target. Seven districts were more than 20 per cent below target: Uyui (58.1 per cent), Kibondo (63.4 per cent), Nzega (65.1 per cent), Dodoma Rural (66 per cent), Igunga (67.2 per cent), Ulanga (68.3 per cent) and Urambo (69.2 per cent).

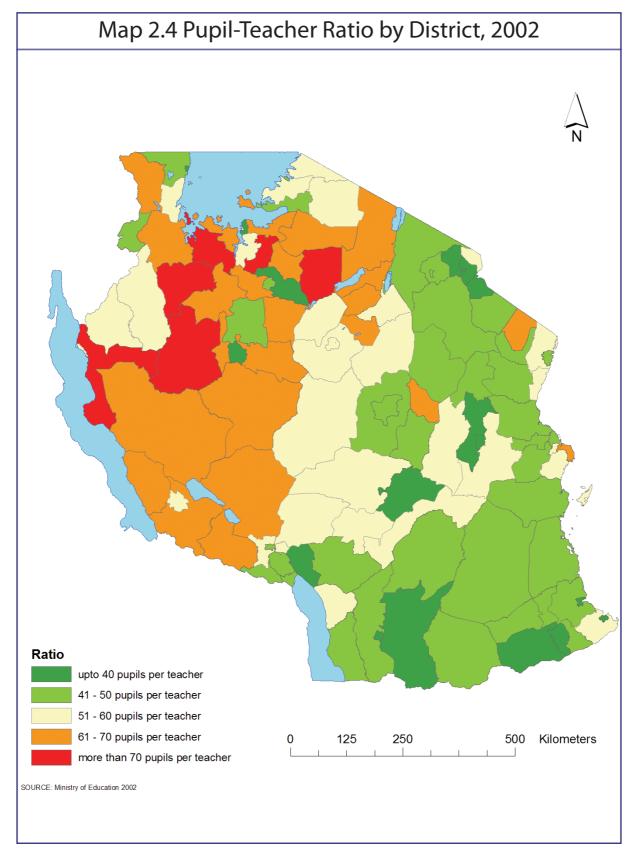
There are gender gaps in net primary enrolment. The north-eastern districts of Ngorongoro, Bariadi, Simanjiro, Monduli and Nzega have substantially fewer girls enrolled than boys, while in Mbinga, Karagwe, Kondoa and Moshi Rural, more girls than boys are enrolled (see map 2.3).

Pupil-teacher ratios

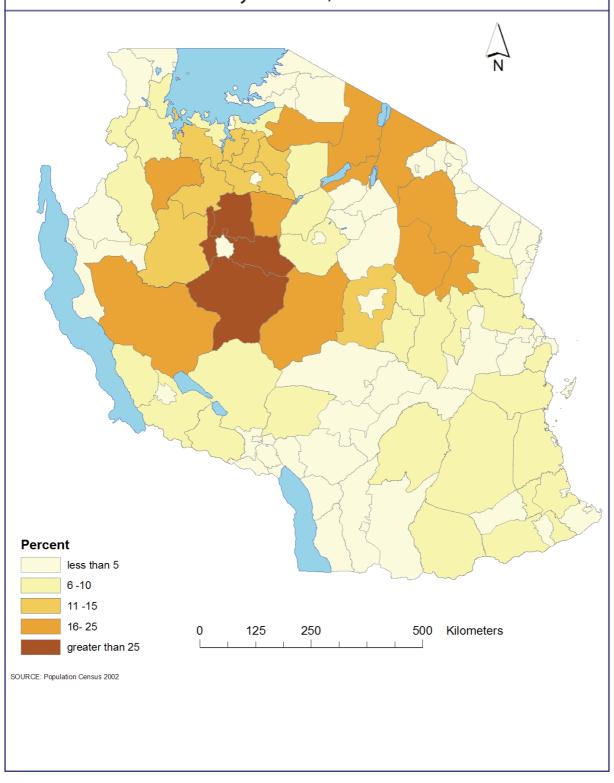
Map 2.4 shows the pattern of pupil-teacher ratios. Districts with higher ratios in 2002 had lower net enrolment rates in 2004 among girls. A reason for this may be that large class sizes may have discouraged parents from enrolling their children in school.

Those districts which had higher pupil-teacher ratios also tended to have larger proportions of children aged between 7-13 who were working and they tended to have lower school enrolment rates. Districts with higher proportions of school-age children working and not in school also tend to have higher rates of poverty (Map 2.5)





Map 2.5 Children 7-13 Years Working and Not in School, by District, 2002



VULNERABILITY OF CHILDREN

Children working and not in school

In more than two thirds of the districts in Tanzania, fewer than a quarter of children aged between 7 - 13 are working and do not go to school. On the other hand, Tabora, Shinyanga and parts of Arusha region have a high prevalence of working children not in school. In the high prevalence districts of Ngorongoro, Monduli, Simanjiro, Kiteto and to the centre of the country towards the West in Manyoni, Sikonge, Mpanda, Uyui, Nzega, Kishapu, Maswa and Bariadi, the proportion of children between 7 - 13 who are working and not going to school ranges from 25 to 39 per cent.

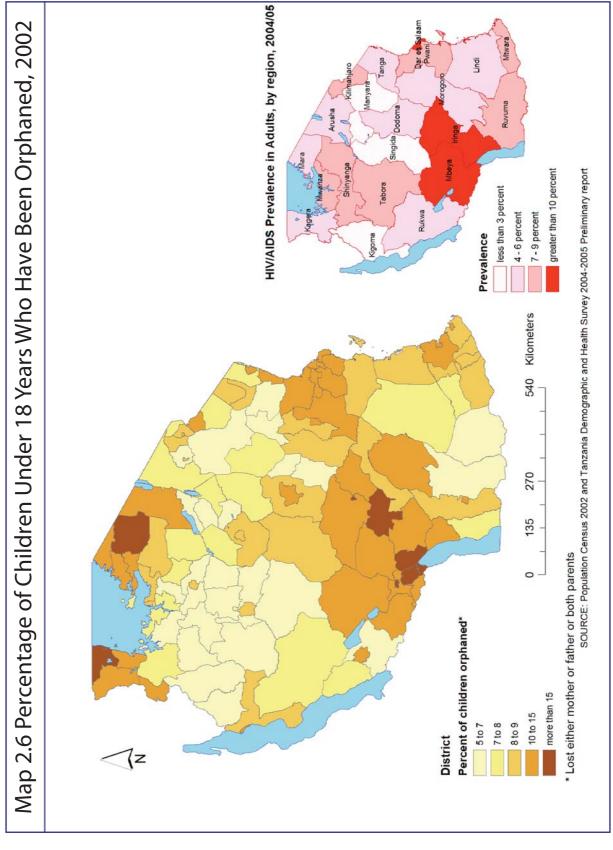
This would suggest that in those districts more resources, and teachers in particular, may be needed to strengthen the education system. School systems may need to be adapted where pastoralism and long distances to school discourage enrolment. Satellite schools for the first few standards of primary school might be established with good effect.

Orphanhood

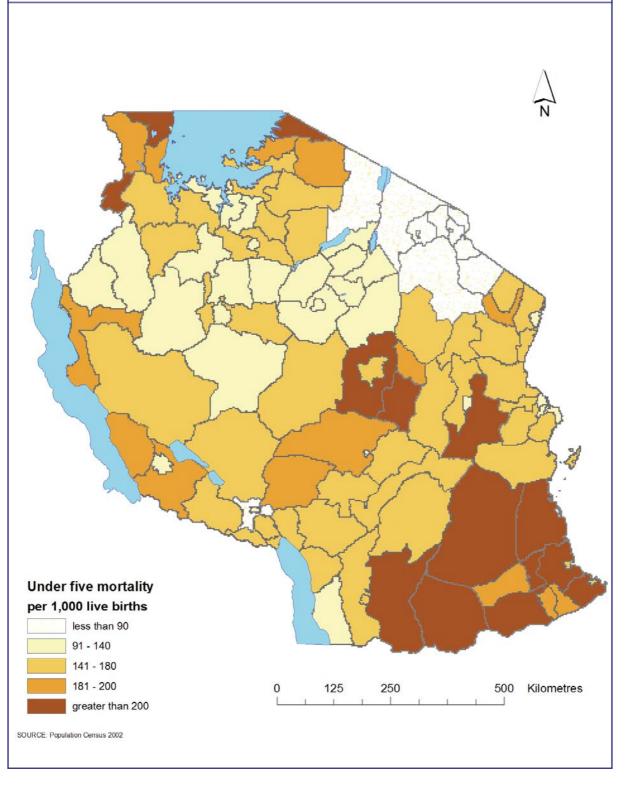
Another indicator of possible vulnerability of children is orphanhood, which has been discussed in chapter 2 above. Map 2.6 shows the geographic pattern of orphanhood, by district, based on the population census reports of children under the age of 18 who have lost their mother, or father, or both.

The map shows the relatively high prevalence of orphaned children in districts in the Southern Highlands. In Makete, 24 per cent of children have been orphaned. In 10 more districts, more than 15 per cent of the children are orphaned, most of them in the Southern Highlands: Kyela (19 per cent), Iringa Urban (19 per cent), Rungwe (17 per cent), Mbeya Urban (16 per cent), Mufindi (16 per cent), Iringa Rural (15 per cent); but also in Kagera: Bukoba Rural (18 per cent) and Bukoba Urban (16 per cent); and in Mara: Serengeti (16 per cent) and Tarime (15 per cent).

The map is accompanied by a regional map of HIV prevalence in adults, and it is clear that the higher rates of orphanhood are associated with higher rates of HIV prevalence. The analysis reported in the status chapter above suggests that orphaned children in 2002 were only slightly more likely to live in poor households, and that overall, district-level analysis did not show significant differences in the conditions of orphaned children compared with those who are not orphaned. Nonetheless, households, communities and districts with much higher percentages of orphaned children are straining to provide the necessary support. Co-ordinated public intervention is sorely needed in these areas.



Map 2.7 Death of Children Under Five Years (per 1,00 Live Births), by District 2002



MORTALITY, HEALTH, WATER AND SANITATION

Under-five mortality

Map 2.7 shows the geographic pattern of under-five mortality. South-Eastern districts have higher under-five mortality than most other districts in the country.

There does not seem to be a one-to-one relationship between district poverty rates and under-five mortality rates.⁷⁶ Districts in the North-West (mainly in Tabora, Shinyanga and Mwanza) have low under-five mortality rates but relatively high poverty rates, while in the South (Lindi, Mtwara and the eastern part of Ruvuma) there are high under-five mortality rates and high poverty rates.

In most districts, under-five mortality has declined. Map 2.8 shows district estimates of under-five mortality based on the 1988 and 2002 population censuses. There has been little or no improvement in Lindi, Mtwara and parts of Ruvuma.

Map 2.9 shows that facilities providing health services are mainly concentrated in urban areas and in districts with major roads. A higher concentration of health facilities per square kilometre is associated with lower under-five mortality.

WATER AND SANITATION

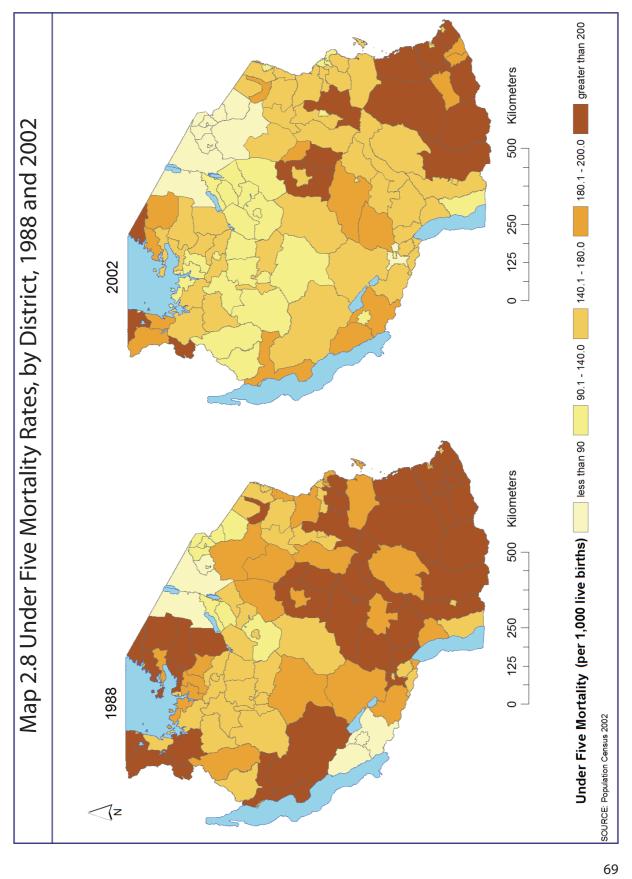
Improved water supplies and sanitation also have an impact on under-five mortality rates. Diarrhoeal and other water-borne diseases are common causes of young child deaths. A cleaner environment and safer storage of waste provides a safer environment with a reduced risk of disease. Overall, access to and use of improved toilets, defined as flush toilets or improved ventilated pit latrines, is very low. Even though a high proportion of households has a latrine, in most cases this latrine is not improved and may well be unsanitary and unsafe. On average, fewer than 5 per cent of households have access to an improved toilet. The highest access is in urban areas, and highest in Moshi urban district (36 per cent). In over a third of the districts, less than 1 per cent of households has an improved toilet.

Map 2.10 shows the inequitable water supply infrastructure across the country.

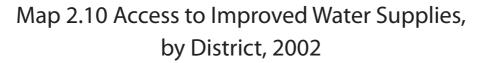
Only 42 per cent of rural households have access to improved water sources compared to 88 per cent in Dar es Salaam and 84 per cent in other urban areas. While the overall difference in access to improved water supply between urban and rural areas is high, available information from some of the districts provides further evidence about the depth of disparities. There are seven districts in which fewer than 10 per cent of rural households have access to improved water supply: Sikonge (4 per cent), Igunga (5 per cent), Kishapu (10 per cent), Liwale (8 per cent), Mkuranga (6 per cent), Rufiji (9 per cent) and Mafia (3 per cent). There are some difficulties in extending water supplies in these districts: Liwale and Sikonge have very low population densities, salinity is an issue in Mkuranga, and fluoride is a problem in Kishapu. In another 67 mainland districts fewer than 50 per cent of rural households have access to improved water sources. In addition, where district census data are complemented with water point mapping data, even in districts where over 50 per cent of households have access to improved water supplies, there can be considerable differences between and within wards. ⁷⁷

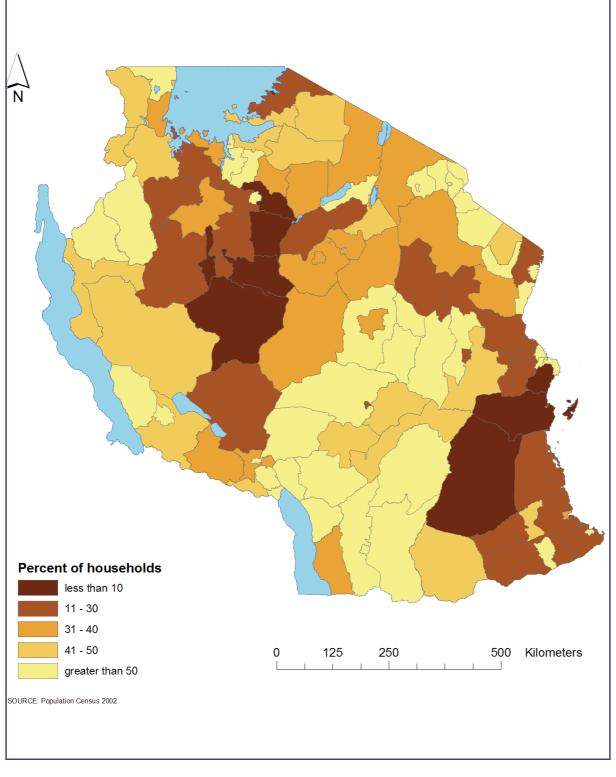
⁷⁶ Correlation is not very strong (0.18) but statistically significant at five per cent level.

⁷⁷ WaterAid (2005). Water and Sanitation in Tanzania: An Update based on the 2002 Population and Housing Census.



Map 2.9 Health Facilities, by District and the Road Network number of facilities 0 - 20 21 - 30 31 - 40 41 - 50 500 Kilometers 125 250 more than 50 SOURCE: Ministry of Health 2002/04





INFRASTRUCTURE

Access to the road network

Access to the road network helps with access to markets and services. Map 2.11 shows population density at ward level, together with the road network. It is clear that pockets of the country are densely populated, but that much of the land area of Tanzania remains sparsely inhabited. Population density follows the main roads - areas near main roads are densely populated - just as are urban centres. Road networks similarly tend to follow population concentrations.

Population density and the road network have also been shown to be strongly associated with other indicators of development, and the more widespread use of geographic information systems will permit analysis for even smaller geographic areas. The TEHIP work in Rufiji, for example, has also shown a strong relationship between indicators of survival and health within the district and proximity to population centres and road networks.⁷⁸ Likewise, Alderman et al. (2005)⁷⁹ report for Kagera the existence of a strong relationship between malnutrition and the proximity to and passability of roads.

Access to electricity

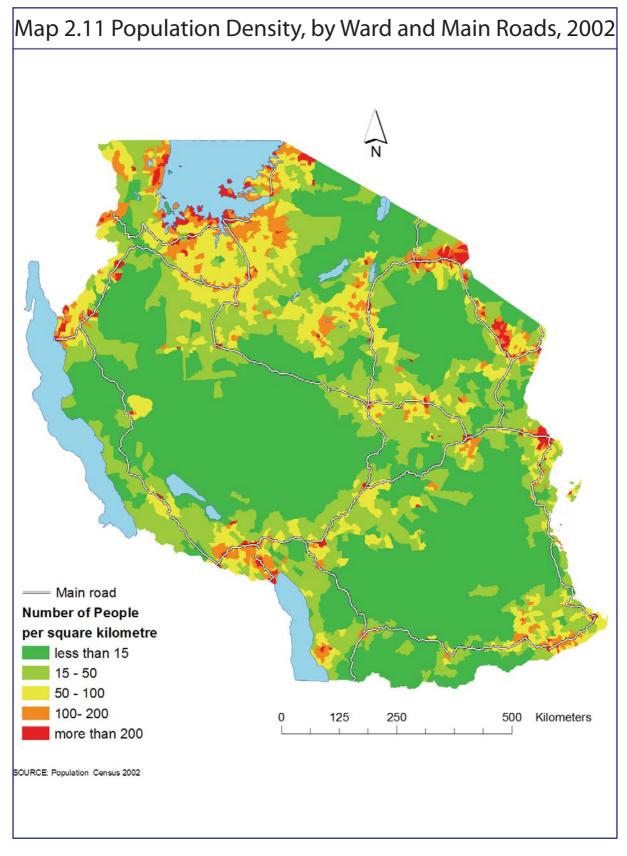
Most households do not have access to electricity. The highest percentages of households with electricity are in Kinondoni, Ilala and in Iringa Urban. At the other end of the spectrum are districts like Mtwara Rural and Kilindi (Tanga) where only 0.06 and 0.07 per cent respectively have access to electricity. In about a quarter of the districts less than 1 per cent of households has access to electricity.

Access to electricity is usually associated with the prosperity of the specific area. Electricity is generally available in the urban centres for example, but not necessarily in some of the more densely populated rural areas. Thus areas with a high population concentration in Shinyanga and Mwanza regions go without electricity. The largest proportion of non-urban households with access to electricity can be found in the North-Eastern part of country; this is because of the presence of the Pangani Grid that runs from Arusha to Pangani.

Other indicators of poverty, which have not been shown here in map form, show that poor quality housing, as reflected in poor flooring and roofing, is associated with higher rates of poverty.

⁷⁸ De Savigny D, Kasale H, Mbuya C & Reid G (2004). Fixing Health Systems. Ottawa: International Development Research Centre (IDRC) (in collaboration with Ministry of Health, Tanzania).

⁷⁹ Alderman, H., H. Hoogeveen and M. Rossi. Reducing Child Malnutrition in Tanzania. Combined Effects of Income Growth and Program Interventions. Journal of Economics and Human Biology. Forthcoming



Radio ownership

A radio is a quite common household asset. Based on district means, on average almost 50 per cent of households own a radio, ranging from 83 per cent in Moshi Urban to almost 16 per cent in Arumeru district. In 12 districts, less than a third of households own a radio. Districts with higher percentages of households with radios tend to have lower rates of poverty.

Table 17 below presents the coefficients of correlation between the district data on poverty rates and on various measures: access to improved water supplies, improved latrines or flush toilets, electricity, radio, telephone, bicycle, material for flooring, wall construction and roofing. In all cases, except for wall materials, there are strong correlations. In the case of improved water supplies, improved toilet facilities, electricity, radio, radio and telephone, increased ownership or access is associated with reduced rates of poverty. On the other hand, those districts where higher proportions of households own a bicycle or have a home of earth flooring and poor quality roofing material, are districts with higher rates of poverty.

Table 17. Poverty correlates: Pearson correlation coefficients of household characteristics with district poverty rate

Variable	Pearson correlation coefficient
Piped or protected drinking water source	- 0.50**
Flush toilet or ventilated improved pit latrine	- 0.50**
Electricity	- 0.53**
Ownership of radio	- 0.35**
Ownership of phone	- 0.51**
Ownership of bicycle	0.42**
Flooring: earth	0.55**
Poor quality material used for wall construction	0.10
Poor quality material used for roof construction	0.56**

Note: ** significant at 1% level

Source: Authors' calculation using 2002 Population and Housing Census, NBS 2003, Kilama and Lindeboom et al., Where are the Poor in Tanzania, forthcoming

IMPLICATIONS FOR POLICY

The data and the maps presented in the previous sections suggest considerable differences in outcomes among regions and districts and there is some evidence in these data that the unequal outcomes are related to unequal opportunities. Some patterns of relationships are evident from these maps, but the general picture is one of variation across the different indicators which have been presented.

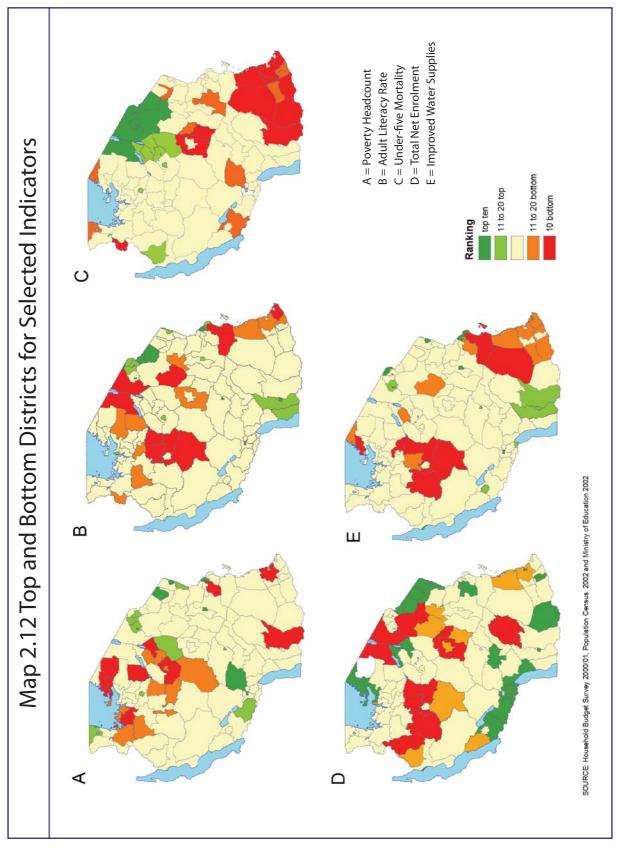
A summary of critical indicators - income poverty rate, net primary enrolment, under-five mortality, adult literacy and access to improved water - ranked by district, is presented in Table 18. This table lists, for each of these indicators, the 20 districts which have the best values and the 20 districts with the worst values. Appendix Table A.9 has the data for all districts.

The rankings in Table 18 show that different indicators produce different rankings, that specific districts have relatively higher or lower rankings for different indicators. This suggests that specific focus may be needed in districts ranking poorly to address the specific issues for which improvements are needed.

Table 18. Districts ranked by income poverty rate, net primary enrolment, under-five mortality, adult literacy and access to improved water

	Per cent of households below basic needs poverty line		Net primary enrolment rate		Under-five mortality rate (per 1,000 live births)		Adult literacy rate		Per cent of house- holds with access to improved water (piped or protected source)	
Rank	District	Value	District	Value	District	Value	District	Value	District	Value
1	Bukoba (U)	11	Lushoto	100	Ngorongoro	40	Moshi (U)	96	Arusha (U)	99
2	Arusha (U)	12	Korogwe	100	Monduli	48	Arusha (U)	94	Nyamagana	97
3	Mbeya (U)	12	Muheza	100	Arusha (U)	55	Ilala MC	93	Mbeya (U)	96
4	Mbarali	13	Tanga (U)	100	Moshi (R)	57	Nyamagana	92	Mtwara (U)	96
5	Morogoro (U)	14	Kibaha	100	Simanjiro	57	Bukoba (U)	92	Rombo	93
6	Kinondoni	14	Kisarawe	100	Arumeru	58	Kinondoni	92	Moshi (U)	92
7	Nyamagana	15	Karatu	100	Moshi (U)	63	Iringa (U)	92	Kinondoni	92
8	Lushoto	16	Mwanga	100	Hai	65	Mwanga	91	Musoma (U)	92
9	Ilala MC	16	Same	100	Mwanga	68	Same	90	Kigoma (U)	89
10	Tanga (U)	17	Moshi (U)	100	Rombo	73	Songea (U)	90	Temeke	89
11	Bukoba (R)	17	Babati	100	Same	84	Mbeya (U)	90	Tanga (U)	89
12	Moshi (U)	18	Kigoma (U)	100	Babati	91	Moshi (R)	89	Morogoro (U)	88
13	Arumeru	18	Ukerewe	100	Karatu	93	Temeke	87	Arumeru	85
14	Iringa (U)	18	Magu	100	Nyamagana	100	Tanga (U)	87	Kyela	85
15	Lindi (U)	18	Nyamagana	100	Hanang	103	Musoma (U)	87	Songea (U)	85
16	Kondoa	21	Tarime	100	Mbeya (U)	106	Hai	86	Iringa (U)	85
17	Mbozi	21	Musoma (R)	100	Mbulu	107	Morogoro (U)	85	Ilala MC	81
18	Hai	22	Bunda	100	Singida (U)	108	Mbinga	84	Namtumbo	79
19	Shinyanga (U)	22	Musoma (U)	100	Kasulu	109	Ilemela	84	Songea (R)	77
20	Pangani	22	Mufindi	100	Kondoa	110	Songea (R)	83	Moshi (R)	75
100	Singida (U)	46	Mpwapwa	79	Korogwe	192	Ngara	57	Mtwara (R)	26
101	Sengerema	46	Kilindi	78	Kongwa	195	Shinyanga (R)	57	Kisarawe	25
102	Biharamulo	48	Kiteto	76	Sumbawanga (R)	195	Meatu	55	Nzega	25
103	Igunga	48	Kilwa	76	Newala	197	Tandahimba	54	Tandahimba	25
104	Bukombe	48	Ilemela	75	Nachingwea	198	Kilindi	53	Nachingwea	25
105	Uyui	48	Nkansi	75	Tandahimba	200	Lindi (R)	53	Mbulu	24
106	Ukerewe	48	Sikonge	75	Bukoba (R)	204	Bukombe	53	Kiteto	23
107	Manyoni	49	Dodoma (U)	75	Tarime	207	Kilwa	52	Lindi (R)	23
	Hanang	49	Kisulu	74	Morogoro (R)	209	Dodoma (R)	52	Tarime	22
109	Mbulu	49	Simanjiro	72	Ngara	212	Bariadi	51	Kilwa	22
110	Babati	50	Kongwa	72	Tunduru	212	Rufiji	51	Rufiji	21
111	Kisarawe	51	Ngorongoro	71	Namtumbo	213	Igunga	49	Mafia	17
112	Lindi (R)	51	Monduli	71	Mpwapwa	217	Uyui	49	Musoma (R)	17
113	Meatu	53	Urambo	69	Kilwa	217	Nzega	49	Liwale	16
114	Namtumbo	55	Ulanga	68	Lindi (R)	220	Sikonge	49	Urambo	14
115	Singida (R)	56	lgunga	67	Liwale	221	Mkuranga	47	Kishapu	13
116	Serengeti	61	Dodoma (R)	66	Masasi	225	Mtwara (R)	46	Uyui	11
117	Geita	62	Nzega	65	Mtwara (R)	231	Monduli	43	Igunga	9
	Musoma (R)	64	Kibondo	63	Dodoma (R)	239	Kiteto	42	Mkuranga	9
119	Bunda	68	Uyui	58	Rwangwa	250	Ngorongoro	28	Sikonge	7

Source: Authors' calculation using 2002 Population and Housing Census, NBS 2003, Ministry of Education Basic Statistics 2004, Kilama and Lindeboom et al., *Where are the Poor in Tanzania*, forthcoming



However, there are some geographic concentrations of districts which have a general pattern of relatively poor indicators. They are mapped in Map 2.12, which shows the 20 districts with the poorest indicators and the 20 districts with the best.

From Map 2.12, we see that districts with the worst indicators tend to cluster in the same areas, while districts with the best indicators are more scattered, and most of them are located in and around urban centres, except for under-five mortality where districts with relatively low mortality rates are also clustered in the North. Districts in the Southeast have the worst adult literacy rates, under-five mortality rates and access to improved water. Districts in Kilimanjaro and Arusha (Arumeru and Arusha districts) stand out with strong indicators.

There are important considerations for policy in addressing such disparities and inequities, especially in those districts which have the poorest indicators. Concern with equality of opportunity implies that public action should focus on the distribution of assets, economic opportunities and political voice, rather than directly on inequality in outcomes. In doing so, policies can contribute to greater investment in human resources of the poorest, to greater and more equal access to public services and information, to improved equality of property rights, and to greater fairness in markets.

In a resource constrained environment, there may well be difficult budget decisions to be made with respect to measures to increase equitable investments in human resources and access to services. Cost-effectiveness considerations may mean that coverage is determined by lower unit costs. To the degree that the unit cost of an intervention aimed at poor households increases in isolated areas, it is evident that with an equal per capita budget allocation, fewer people will be reached in isolated areas. Hence a trade-off may be needed between reaching a larger number of poor people with lower unit costs, versus one where more is spent per capita on higher unit-cost services to reach people in isolated areas. The map which follows illustrates the dilemma.

Poverty density: a policy dilemma

Poverty density measures the number of poor persons per square kilometre. This is shown in Map 2.13. Areas with many people - urban areas - have the highest poverty density, have larger numbers of poor people per square kilometre, even though these areas are not the areas with the highest proportion of their population who are poor.

Arusha, Kinondoni, Ilala, Temeke and Ilemela have the highest poverty density, while Liwale, Ngorongoro, Simanjiro have the lowest number of poor people per square kilometre. Large districts tend to be sparsely populated, and thus have low poverty density, even though a larger proportion of their inhabitants may be among the poorest – living below the poverty line.

Current Government budget allocations to districts for education and health are derived from the use of formulae which are heavily weighted by population size (or the school-age population in the case of allocations for primary education). There is also provision in the formulae for some consideration for long distances in large districts, and for relative poverty rates. The increasing use of formulae such as these, and the use of more specific formulae according to the service to be provided - education, health, water, or others - accords with the conclusions from this spatial analysis.

In order to enhance equitable access to high quality essential services, it will be important to ensure that trained staff are also distributed more fairly, and that other potentially distorting factors are taken into account. These include the additional resources made available through specific projects and programmes supported by development partners, as well as the resources local authorities can generate from their own sources of revenue.

Map 2.13 Number of People Below Basic Needs Poverty Line per Square Kilometre by District

