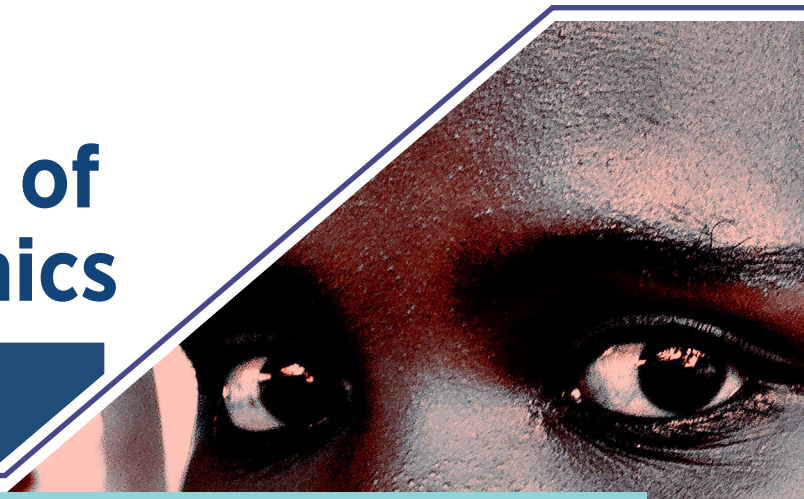
Regional Analysis of Youth Demographics

TANZANIA



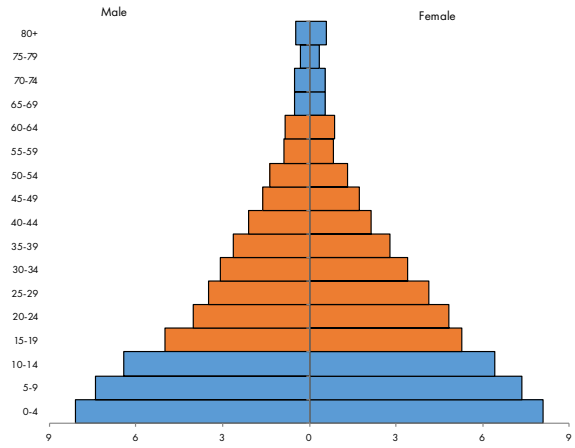
Key messages[1]

- Tanzania's population is projected to increase from 53.9 million in 2015 to 186.9 million by 2065. Young people aged 15-34 are projected to increase from 17.8 million to 62.3 million by 2065.
- As a result of persistent high fertility total dependency is high with about 92 young and old-age dependents (0-14 years and 65+ years) for every 100 people of working age (15-64 years) thus putting severe pressure on state and household resources.
- The demand for basic services such as schooling, housing and healthcare will increase significantly by 2065. For instance, demand for primary school places could increase from an estimated 10 million in 2015 to between 18 and 27 million by 2065.
- For Tanzania to benefit from its youthful population to reap a demographic dividend, it must intensify programmes to reduce child mortality, significantly lower fertility levels, invest in developing its human capital and equitably generate and distribute decent jobs to improve living standards.

Context

Tanzania's long-term development plan, Vision 2025, seeks to transform the country from a least developed to a semi-industrialised middle-income country with a modernised economy and high quality human capital by 2025.[2] Despite robust economic growth in the past decade, the country remains low income, with high poverty levels. Efforts to address these economic challenges and achieve the development goals of Vision 2025 are undermined by high population growth rate, which stands at 3.1% per annum.[3] Rapid fertility decline can have positive economic benefits by increasing the ratio of the working age people relative to dependants, thus enabling the country to harness the **demographic dividend**; a temporary economic benefit created by a significant increase in the ratio of working-age adults relative to young dependents.[4]

Figure 1: Projected age-sex distribution, Tanzania, 2016
(Source: Population and Housing Census, 2016 Projections)



Currently, Tanzania's population is very youthful. Children below 15 years comprise about 44% of the population and an additional 19% are youth between 15-24 years.[5] As a result, the population age-sex structure has a large base (Figure 1). Tanzania defines youth as those aged between 15 and 35 years, (same as the East African Community definition), while the United Nation's definition is 15-24 years. In 2012, youth (15-35 years) constituted about 35% of the population.[3] In absolute numbers, the youth aged 15-34 were 17.8 million in 2015 and are projected to increase to 62 million under the UN Medium variant or 47.7 million under Low variant scenarios by 2065.[5]

Tanzania's high fertility rate (at 5.2 children per woman on average)[6] has declined by only one child over a 25-year period while the under-five child mortality rate has fallen by more than 50%, from 141 deaths per 1,000 live births to 67 per 1,000 during the same period. Consequently, Tanzania's population increased from 12.3 million in 1967 to 43.6 million persons by 2012.[3] It is projected to

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[2]United Republic of Tanzania, 1998. Tanzania Development Vision 2025.
[3]National Bureau of Statistics. (2013). 2012 Population and Housing Census (PHC). Population Distribution by Age and Sex
[4]Bloom, D., David Canning, & Sevilla, J. (2003). The Demographic Dividend: A New Perspective on the Economic Consequences of Population Change, by, RAND MR-1274-WFHF/DLPF/RF, 2002, 100 pp., ISBN: 0-8330-2926-6. Santa Monica, CA, USA
[5]United Nations, Department of Economic and Social Affairs, Population Division (2017). World Population Prospects: The 2017 Revision. Accessed in August 2017
[6]Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC) [Tanzania Mainland], Ministry of Health (MoH) [Zanzibar], National Bureau of Statistics (NBS), Office of the Chief Government Statistician (OCGS), and ICF. (2016). Tanzania Demographic and Health Survey and Malaria Indicator Survey (TDHS-MIS) 2015-16. Dar es Salaam, Tanzania, and Rockville, Maryland, USA: MoHCDGEC, MoH, NBS, OCGS, and ICF.
[7]Agwanda A. and Haidari Amani. (2014). Population growth, structure and momentum in Tanzania. THDR 2014: Background Paper No. 7 ESRF Discussion Paper 61. http://www.thdr.or.tz/docs/THDR-BP-7.pdf

increase to 138 million in 2050 under the UN Medium variant scenario.[5] Not surprisingly, Tanzania's dependency ratio is very high. In 2012, there were 92 dependants (0-14 years and 65+) for every 100 people of working age (15-64) or if we use the alternative dependency ratio calculation, 143 dependents (01-19 years and 65+) per 100 people (20-64 years).[5] The country's low level of female education, low status of women, preference for large families and poor access to contraception among rural and young women are the main factors that contribute to high fertility.[7]

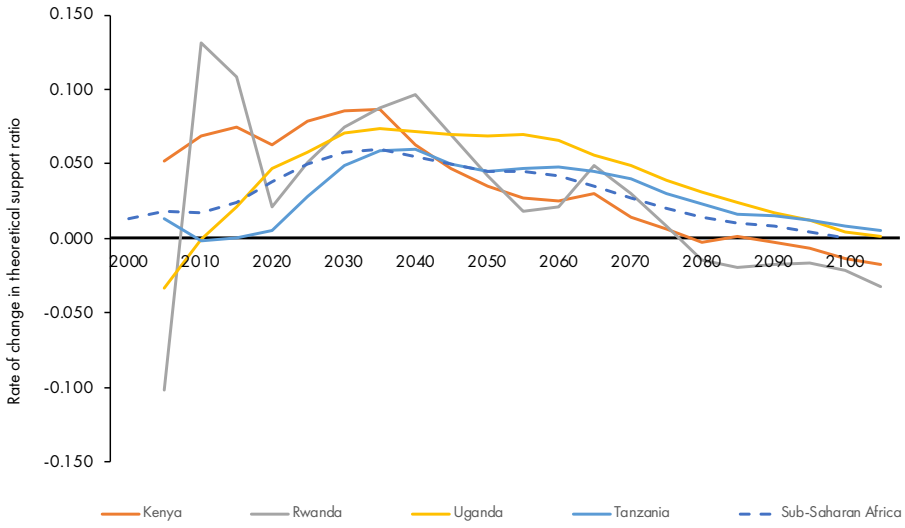
This briefing note summarises a review of literature and policies on youth demographics and implications from our scenario modelling of the short, medium and long-term projections of the youth population in Tanzania, and their demand for services. From the literature review and participatory workshops on the demographic dividend in the four East Africa Community countries (EAC), we have identified four major domains for youth development: health including access to sexual and reproductive health services; education and skills development - including information technology and communication; employment; and migration and urbanisation. Gender is a cross-cutting issue for youth development. This briefing note focuses on these domains, while acknowledging that there are other important domains in youth development that should be addressed. It also draws from the country's demographic dividend report (2017) for which the African Institute for Development Policy (AFIDEP) provided technical leadership.[8]

Tanzania's Youth Demographics and Prospects for a Demographic Dividend

Eminent scholars have defined the "youth bulge" as a temporary demographic phenomenon which occurs when child mortality and fertility rates fall rapidly such that the previous cohort of births is larger than subsequent cohorts.[9] As the large birth cohorts move into the working ages (15-64 years), we get a bulge in the population age-structure and an increase in the ratio of the working age population relative to young dependents. Another benefit can arise because fewer dependents implies that resources that would have paid for education, health, and basic services for large numbers of children can be re-invested for longer-term economic growth and capital development. Examples of this temporary "youth bulge" were seen in countries such as South Korea, Taiwan and Malaysia in the 1980s and it is thought that this phenomenon contributed to their economic growth by between 25-33%.[10, 11, 12] Many African countries currently have youthful population age-structures as portrayed in Figure 1. Such an age-structure, not to be confused with a youth bulge, has an unfavourable ratio of working-age population to dependents and countries are unlikely to benefit economically unless there are significant investments to rapidly reduce fertility. With a fertility rate of 5.2 children per woman, Tanzania does not have a youth bulge, and is unlikely to have one soon, even with the projected fertility decline to 3.4 by 2050 and 2.9 by 2065 under UN's Medium variant scenario. Therefore, the current high dependency burden will continue for the next 50 years, unless there are serious investments in policies to accelerate fertility decline.

Demographers use the inverse of the dependency ratio as a proxy for the support ratio (ratio of effective producers to consumers), in effect assuming that everyone between 15-64 years (or 20-64 years) is contributing to household income and the rest are consumers rather than producers. The rate of change of the support ratio can be used to show the timing when the window of opportunity for harnessing the demographic dividend opens and closes. While the rate of change of the theoretical support ratio is positive, the window of opportunity to reap the demographic dividend is open. However, once the rate of change of the support turns negative, the dividend becomes negative, implying that the demographic change acts as a brake on economic growth rather than an impetus for economic growth.[13]

Figure 2: Demographic Dividend Windows of Opportunity: Rate of change in the support ratio for four East African countries and Sub-Saharan Africa



[8] Pathfinder-Tanzania, UDSM, AFIDEP, 2017. Prospects and challenges of harnessing demographic dividend in Tanzania. Dar es Salaam, Tanzania

[9] Justin Yifu Lin. (2012). Youth Bulge: A Demographic Dividend or a Demographic Bomb in Developing Countries? http://blogs.worldbank.org/developmenttalk/youth-bulge-a-demographic-dividend-or-a-demographic-bomb-in-developing-countries.

[10] Lee R., and A. Mason, principal authors and editors. 2011. Population Aging and the Generational Economy: A Global Perspective. Cheltenham, U.K.: Edward Elgar Publishing

[11] Bloom, D. E., & Williamson, J. G. (1998). Demographic transitions and economic miracles in emerging Asia. The World Bank Economic Review, 12(3), 419-455.

[12] Bloom DE, Humair S, Rosenberg L, Sevilla JP, & Trussell J. (2014). Capturing the demographic dividend: Source, magnitude and realization. 2014. Pp 23-39 in A Soucat and M Ncube (Eds). One Billion People One Billion Opportunities: Building Human Capital in Africa. Tunis: African Development Bank.

[13] Oosthuizen MJ. Bonus or mirage? South Africa's demographic dividend. The Journal of the Economics of Ageing. 2015/04/01/ 2015;5(Supplement C):14-22.

Figure 2 shows that the window of opportunity for Tanzania and other countries in the EAC and sub-Saharan Africais open from now until 2100, when the ratio of effective producers relative to consumers will become unfavourable. It should be emphasised that this window of opportunity can close without a country reaping a sizeable demographic dividend if the youth do not have the relevant skills for the labour market or the country is unable to create enough quality jobs for the workers.

In realisation of the potential of its youth demographics, the country has developed policies to address challenges faced by youth, including unemployment, poverty, HIV/AIDS, environmental degradation, drug abuse and vulnerability to communicable and non-communicable diseases. The 2007 National Youth Development Policy (NYDP), aims to address youth social and economic problems.[14] Critics of the NYDP however argue that the policy was developed too quickly without consultation on the realities on the ground. Furthermore, the policy is criticised for lacking clarity regarding the main implementer since the proposal to form a National Youth Council has not been implemented.[15] The 2nd five-year National Development Plan (NDP) focuses on addressing the challenges experienced by young people by ensuring a broad-based and inclusive economic growth through increased productive capacities and job creation.[16]

Health status and access to sexual and reproductive health services

According to the Institute of Health Metrics and Evaluation (IHME), HIV/AIDS is the leading cause of death in Tanzania, followed closely by lower respiratory tract infections and diarrhoeal diseases. A recent study showed that HIV/AIDS, violence and injuries were the leading cause of deaths among young people in several African countries, including Tanzania.[17] Access to sexual and reproductive health (SRH) information and services among youth remains poor. According to the 2015-16 Tanzania Demographic and Health Survey (TDHS), more than 30% of sexually active unmarried young women (15-24 years) had an unmet need for contraception (women with unmet need are those who are want to stop or delay childbearing but are not using any method of contraception), compared to 17% among sexually active unmarried women 25-34 years and 22% among unmarried women 35-49 years. Not surprisingly, about 27% of girls aged 15-19 had started childbearing, with 132 births for every 1,000 girls aged 15-19 in 2015.[6] The high childbearing at young ages is partly due to the high prevalence of child marriages; in 2015, about 30% of women 20-24 years reported to have been married by 18 years. These issues curtail the educational achievement of young people especially girls, and consequently their potential economic productivity in the future. Although the population policy and the NYDP highlight the need to provide quality youth-friendly SRH services for men and women in both rural and urban areas by removing all legal, regulatory, structural, and attitudinal barriers to accessing such services, the high unmet need for contraception among youth implies that the policies are not effective. Tanzania participated in the CDC/WHO sponsored Global School-based Student Health Survey (2008) which showed high levels of alcohol experimentation among youth 13-15 years, risky sexual behaviours and violence.[18] Although sexuality education is integrated in secondary school curriculum, pupils' source of sexuality knowledge is largely from sources other than school.[19] Drugs and substance use are also reported to be high among the youth aged 15-24, with a very high ever use prevalence of 82% among university students and 66% among female sex workers.[20]

Education and skills development

A well-educated and highly skilled labour force is essential to propel Tanzania to a semi-industrialised middle-income economy as envisioned in the country's Vision 2025. Quality education is a key pillar of Vision 2025 and is seen as an enabler to responding to the country's development challenges and positioning it to be effectively competitive regionally and globally. Tanzania needs to invest heavily to develop its human capital. At present, a sizeable proportion of youth are inadequately skilled with many facing unemployment, a combination of deflating factors for accelerated economic growth.[16] Overall, the net enrolment rate for early childhood development (pre-school) was estimated at 46.7% in 2016; 74% for primary school and 24.7% for secondary school. Gross enrolment rate for tertiary education was only 5.2% in 2014.[21] Although gender parity has been achieved at primary and lower secondary levels, girls lag far behind their male counterparts in access to senior secondary and tertiary level education. Developing quality basic and tertiary education and providing technical and vocational training opportunities for developing globally competitive human capital and for attracting foreign direct investments that contribute to creation of jobs for the youth. The NYDP emphasises quality basic education for all young men and women and developing a demand-driven vocational and technical education system. However, it has been observed that there is a mismatch between the skills that graduates have to offer and the needs of the labour market.[16]

Employment and job creation

The country has experienced impressive economic growth in the last decade, with annual growth averaging 7% between 2007 and 2016, and GPD per capita increasing from USD 563 to USD 979 over the same period.[22] Despite this growth, Tanzania faces serious development challenges, with about 28% of the population living in poverty,[23] and 10.3% being unemployed.[21, 24] The burden of unemployment is skewed towards the youth (15-24 years) and women, with unemployment rates of 13.7% and 12.3%, respectively, in 2014, against an unemployment rate among men of 8.2%.[21] Even among those employed, about 11.8% are underemployed,[25] again with young people age 15-24 bearing the heaviest burden (15.2% among males; 12.8% among women). The high levels of underemployment are explained in part by the fact that a majority of Tanzanians work in the agricultural sector for subsistence. The 2014 Integrated Labour Force Survey (ILFS) showed that about two-thirds (65.8%) of employed youth (15-35 years) were engaged in agriculture, forestry and fishing. The report also showed that 82.3% of the employed youth were in vulnerable[26] employment, thus unlikely to have access to benefits or social protection programmes.[24] Another key problem giving rise to youth unemployment is lack of equitable access to available jobs due to corruption, nepotism and other discriminatory practices. In addition to creating a favourable environment for individuals to create their own enterprises in the formal economy, Tanzania's Employment Policy (2008) advocates for equal employment opportunities for males and females, promoting

[14] United Republic of Tanzania (2007). National Youth Development Policy – December 2007. Dar-es- Salaam, Tanzania: Ministry of Labour, Employment and Youth Development http://www.youthpolicy.org/national/Tanzania_2007_National_Youth_Policy.pdf Accessed on 23rd/August/2017

[15] Chambi Chachage (2008), Does the new youth policy reflect youth demands?

[16] United Republic of Tanzania, 2016. National Five-Year Development Plan 2016/17 – 2020/21. Ministry of Finance and Planning.

[17] Patton, George C et al.2016. Our future: a Lancet commission on adolescent health and wellbeing. The Lancet, Volume 387 , Issue 10036 , 2423 – 2478

[18] United Republic of Tanzania (Ministry of Health and Social Welfare), CDC, and World Health Organization, (2008). Tanzania Global School-based Student Health Survey Report. Dar es Salaam.

[19] Magreth Bilinga & Nkuba Mabula, (2014). Teaching Sexuality Education in Primary Schools in Tanzania: Challenges and Implications. Journal of Education and Practice Vol.5, No.27.

[20] Francis, J. M., Grosskurth, H., Changalucha, J., Kapiga, S. H. & Weiss, H. A. (2014). Systematic review and meta-analysis: prevalence of alcohol use among young people in eastern Africa. Tropical medicine & international health, 19, 476-488.

[21] National Bureau of Statistics (NBS) [Tanzania]. (2016). Tanzania National Panel Survey Report (NPS) - Wave 4, 2014 - 2015. Dar es Salaam, Tanzania: NBS.

[22] National Bureau of Statistics. (2017). National Accounts of Tanzania 2007 – 2016.

[23] Poverty rate refers to the national poverty line which estimates the population living with less than $1 per day. It's based on the minimum expenditure to intake of minimum calories for survival but also non-food expenditure for subsistence.

[24] National Bureau of Statistics (NBS) [Tanzania] (2014). Tanzania Integrated Labour Force Survey 2014, Dar es Salaam, Tanzania: NBS.

[25] Labour underemployment refers to working part-time when people are available to work full-time, implying that people are not earning sufficient wages and are thus likely to be among the working poor.

[26] Vulnerable employment rate of youth measures the share of young own-account workers and contributing family workers in total youth employment

equity and equality in employment opportunities and increased access to labour market information. This policy however does not address current unemployment challenges among the young people. With the growing numbers of youth joining the workforce, the country will face a serious unemployment challenge.

Migration and Urbanisation

The rapid increase in urban population has largely been driven by natural increase (i.e. the difference between births and deaths) within urban areas, which accounts for about 75% of the urban growth in Africa, compared to about 50% in Asia.[27] Although the contribution of migration to urban growth is low in Africa compared to other developing regions, there is a distinct pattern of rural–urban migration in the continent[28] characterised by significant mobility of young adults who navigate the perceived worsening rural economic conditions and the unpredictable livelihood opportunities. Tanzania is urbanising very rapidly, at 5.4% in 2012, and although only 29.6% lived in urban areas in 2012,[3] the urban population is projected to increase to 53% by 2050. Historically, urbanisation has offered important opportunities for economic and social development, acting as an engine of economic growth. Yet in Tanzania, as in much of Africa, cities and other urban centres are struggling to provide an enabling environment for innovation, rapid economic growth, and job creation. Many urban residents lack basic social services, including affordable housing. The 2016 UN Habitat report showed that about half of Tanzania's urban population (50.7%) lived in slum-like conditions without potable water and decent sanitation.[29] Although this is an improvement from the 2005 level of 66.4%, it still implies the need for serious planning and investments to improve the living conditions of half the urban population. Tanzania's Land Use Policy (1997) and Human Settlement Development Policy (2000) highlight the management of urban development as a national priority. However, the policy documents are out-dated and they do not make particular reference to the youth and their needs.

Future Implications of Youth Demographics in Tanzania

Fertility is the most influential determinant of population change in Tanzania. A reduction in total fertility levels and delayed childbearing beyond adolescent and early adult ages (25+) has a long-term impact in reducing the youth as well as total population of Tanzania. Due to the high population momentum created by decades of high fertility, the population will continue growing for decades to come even if fertility was to decline to replacement level of 2.1 immediately. As Figure 3 below shows, Tanzania's youth population will increase to 62.3 million by 2065 under the UN Medium variant scenario. However, if the Low variant – which assumes rapid fertility decline to 3.0 in 2065 – is followed, the population of youth will increase to 47.7 million people by 2065 (Figure 4).

Using UN models to generate population projections for 2030, 2050, and 2065, we assessed the future demand for schools, family planning services, and jobs. The UN Medium variant scenario assumes that increases in contraceptive use will result in fertility patterns similar to the experience of other countries that have gone through the demographic transition. The UN Low variant scenario, assumes that for most of the projection period, fertility is half a birth lower than the Medium variant scenario. The UN models make allowance for high mortality due to HIV/AIDS in high prevalence countries and migration in countries where there is significant people movement (see UN methodology for fuller discussion).[30] We also analysed an Accelerated model, where we assumed that Tanzania accelerated programmes for fertility decline so that total fertility reached replacement level (2.1) by 2065. The Accelerated scenario and Low variant model are almost identical up to 2050 in terms of the projected populations.

Future demand for school places

The official primary school age range for Tanzania is 7-13 years, while the official secondary school age range is 14-17 years. Figure 5 shows that under the UN Medium variant population projections, the primary school age population is expected to increase from an estimated 10 million children in 2015 to 26.7 million children by 2065. The numbers will rise at a much slower pace under the Accelerated model with the population of primary school age children increasing to 18.2 million by 2065. The secondary school age

Figure 3: Tanzania-Projected youth population, 2015-2065, UN Medium Variant Scenario (in thousands)

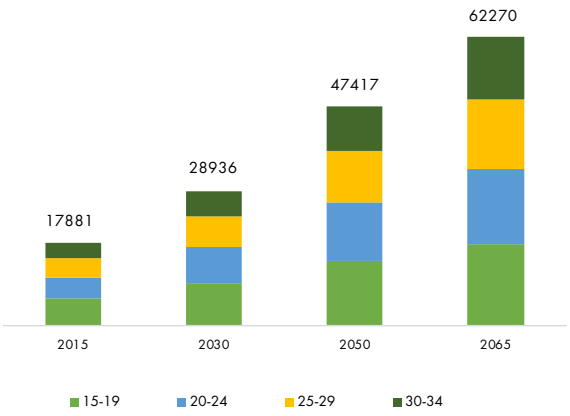
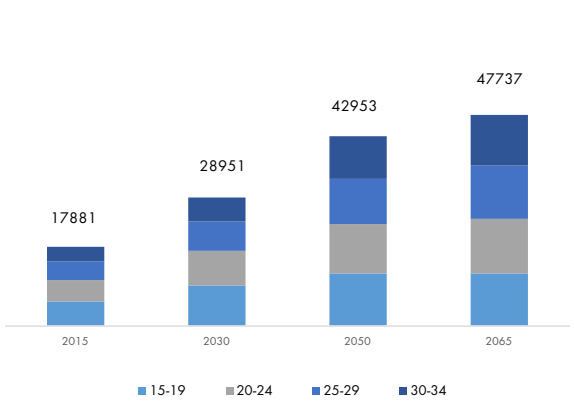


Figure 4: Tanzania- Projected youth population, 2015-2065, UN Low Variant Scenario (in thousands)



[27] BChen N, Valente P, Zlotnik H. (1998). What do we know about recent trends in urbanization? In: Bilsborrow RE, ed. Migration, Urbanization, and Development: New Directions and Issues. Norwell, MA: UNFPA–Kluwer Academic; 1998: 59–88.

[28] Beguy D, Bocquier P, Zulu E. (2010). Circular migration patterns and determinants in Nairobi slum settlements. Demographic Research. 2010; 23(20): 549–586.

[29] UN-HABITAT. (2016). Urbanization and development: Emerging Futures. World cities report, 2016. Nairobi, Kenya

[30] United Nations, Department of Economic and Social Affairs, Population Division (2015). World Population Prospects: The 2015 Revision, Methodology of the United Nations Population Estimates and Projections, Working Paper No. ESA/P/WP.242

population under the UN Medium variant projection is expected to increase from an estimated 4.8 million in 2015 to 14.2 million by 2065 while under the Accelerated model, there will be 9.7 million children by 2065 (see Figure 6).

The expected significant increases in the school age population at both primary and secondary school level in Tanzania means that the country will have to devote significant resources to expand school infrastructure, hire more teaching and management staff and pursue innovative education and training ventures such as online digital learning. This is the only way Tanzania will ensure the success of quality and relevant education and training in the short-term since free basic education policies have been extended to secondary school level since 2015. It is worth noting that in 2014/15, the net enrolment in secondary school was only 25% while it was 74% for primary school. If the enrolment rates are to increase to the current average levels of upper-middle-income countries, then the primary school net enrolment rates should increase to 95% while the secondary school net enrolment should increase to 79%. Such increases will also require an expansion of access to tertiary education and technical and vocational training to absorb the young people who will graduate from the expanded secondary school stream.

Demand for contraception among female youth

Using the UN Medium variant population projections for 2015-2065, we estimated the future total demand for contraception among sexually active female youth (married and unmarried) in Tanzania. Total demand includes women using contraception and those who have unmet need for contraception. For the 2015 period, we use the 2014/15 Tanzania DHS total demand for contraception for ages 15-34 years. For the 2030 projections, when Tanzania's total fertility rate (TFR) will be about 4.3 we use the average distribution by age based on the current demand levels for low and middle income countries with a TFR of between 3.8-4.5; for 2050, when Tanzania's TFR is projected to be around 3.4, we use the distribution for countries with TFR of around 3.1-3.4; and for 2065 we use the distribution for countries with TFR of 2.7-3.0 since Tanzania's TFR is projected to be about 2.98. The results are shown in Figure 7 and reflect significant increase in the demand for contraception for youth of all age-groups.

The Guttmacher Institute, in their 2014 'Adding It Up' publication estimate that in low income countries, the cost of providing adequate contraception per woman is around $10, and that each dollar invested in contraception reduces the costs of meeting the healthcare as a result of unintended pregnancies, unsafe abortion, HIV in pregnancy care, and unplanned births by $1.47. Assuming constant costs between 2014 and 2065, the cost and benefit of providing contraception to female youth is shown in Figure 8.

Figure 5: Estimated number of primary school age population (age 7-13), Tanzania (in thousands)

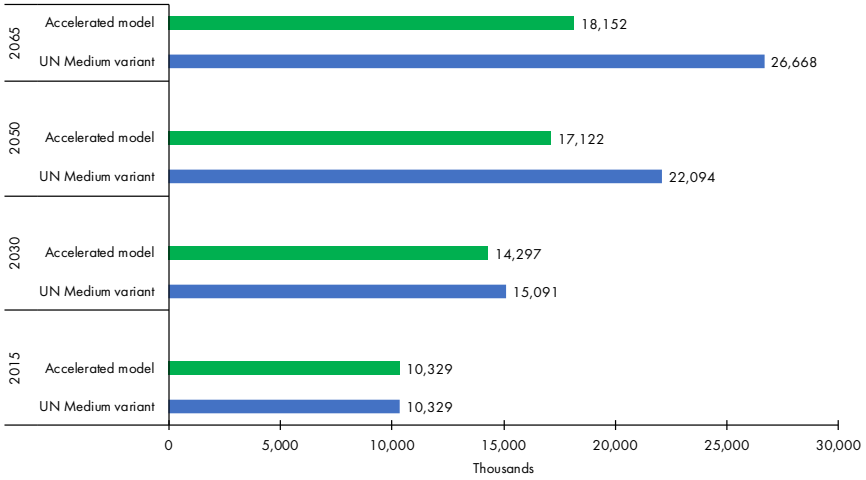


Figure 6: Estimated number of secondary school age population (age 14-17), Tanzania (in thousands)

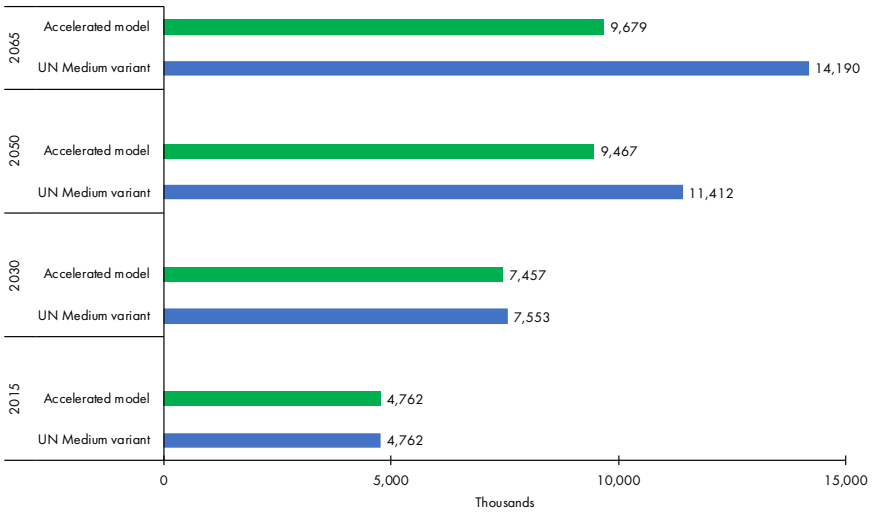


Figure 7: Number of Tanzanian youth, 15-34 years in need of contraception, 2015-2065 (in thousands)

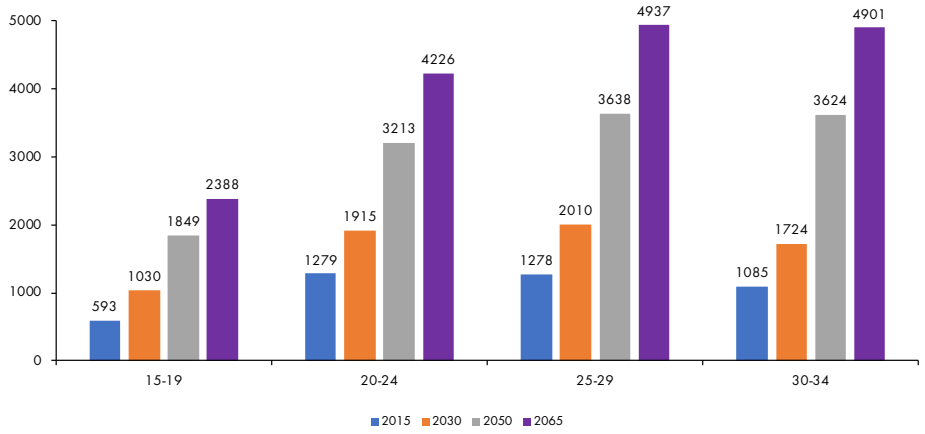
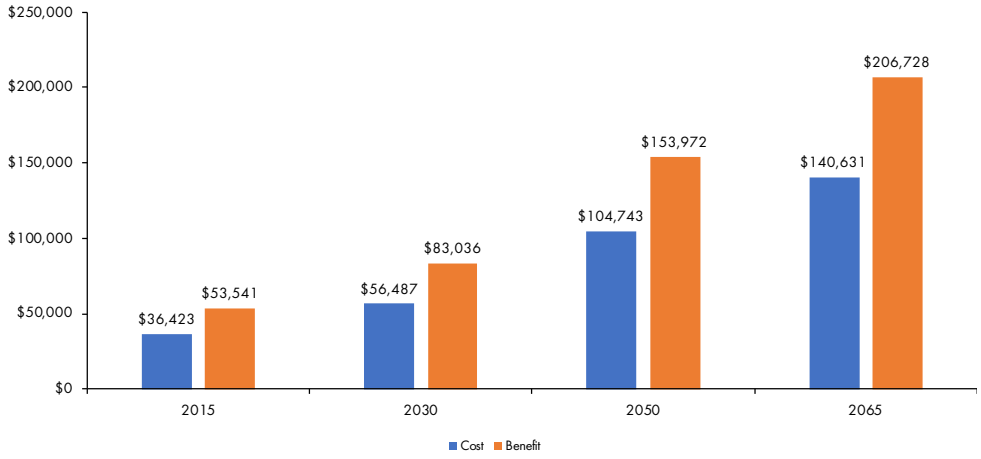


Figure 8: Cost of providing contraception to Tanzanian female youth, 15-34 years (US$ thousands) and benefit due to pregnancies and births averted



Youth population not in education, employment or training

The share of the young people not in education, employment or training (NEET) provides a broad measure of the untapped potential of young people who could contribute to national development through work. The International Labour Organisation (ILO) points out that this group is also important since they are neither improving their future employability through investments in skills nor gaining experience through employment. As a result, the group is particularly at risk of both labour market and social exclusion.

The 2014 ILFS shows that the 15-35 age group NEET was 17% and almost twice as high for females (21%) than for males (12%). Assuming that these NEET rates remain constant over the next forty years, we find that the absolute numbers of the 15-35 years NEET are expected to rise alarmingly (Table 1). From a baseline of 3 million in 2015, the numbers could rise to 5 million, 7.4 million and 8.3 million in 2030, 2050 and 2065 respectively under the Accelerated model. The number of NEET in this age group could rise as high as 10.7 million by 2065 under the UN Medium variant scenario. Apart from these socially excluded young people being at a high risk of falling into the poverty trap, they are also a potential destabilising force that can cause civil disturbance and be a potential recruiting pool for radical forces (including rebel groups and terrorists). They also form a pool of desperate potential labour migrants.

Modelling the demographic dividend

In order to demonstrate the potential benefits of the demographic dividend and identify the multi-sectoral policies and investments required to achieve those benefits in Tanzania, we used the modelling tool DemDiv which was developed by the USAID supported Health Policy Project at the Futures Group.[31] It is a scenario-based two-part model that projects demographic and economic changes up to 40 years in the future to estimate employment, gross domestic product (GDP) and GDP per capita as well as several other indicators of human development (including Human Development Index- HDI). The model allows users to design multiple scenarios showing how the combined power of policy investments in family planning (FP), education, and the economy can generate a demographic dividend.

We report the results of the DEMDIV modelling for Tanzania from 2015 to 2055 under four scenarios: (i) Business as Usual, where slow progress in economic reforms, human capital development and decline in fertility rate persist till 2055; (ii) Economic emphasis, where the focus of investments is on improving economic competitiveness and productive efficiency

Table 1: Estimated number of young people Not in Education, Employment or Training [NEET], Tanzania (in thousands)

Age Group	2015	2030		2050		2065	
	Baseline ((UN Medium Variant)	Accelerated	UN Medium Variant	Accelerated	UN Medium Variant	Accelerated	UN Medium Variant
15-19	938	1,516	1,521	1,945	2,313	1,975	2,898
20-24	795	1,304	1,302	1,856	2,076	2,026	2,699
25-29	670	1,096	1,091	1,732	1,845	2,005	2,484
30-34	565	890	889	1,597	1,637	1,918	2,256
35	93	149	150	292	290	365	404
15-35	**3,062**	**4,955**	**4,953**	**7,422**	**8,161**	**8,289**	**10,741**

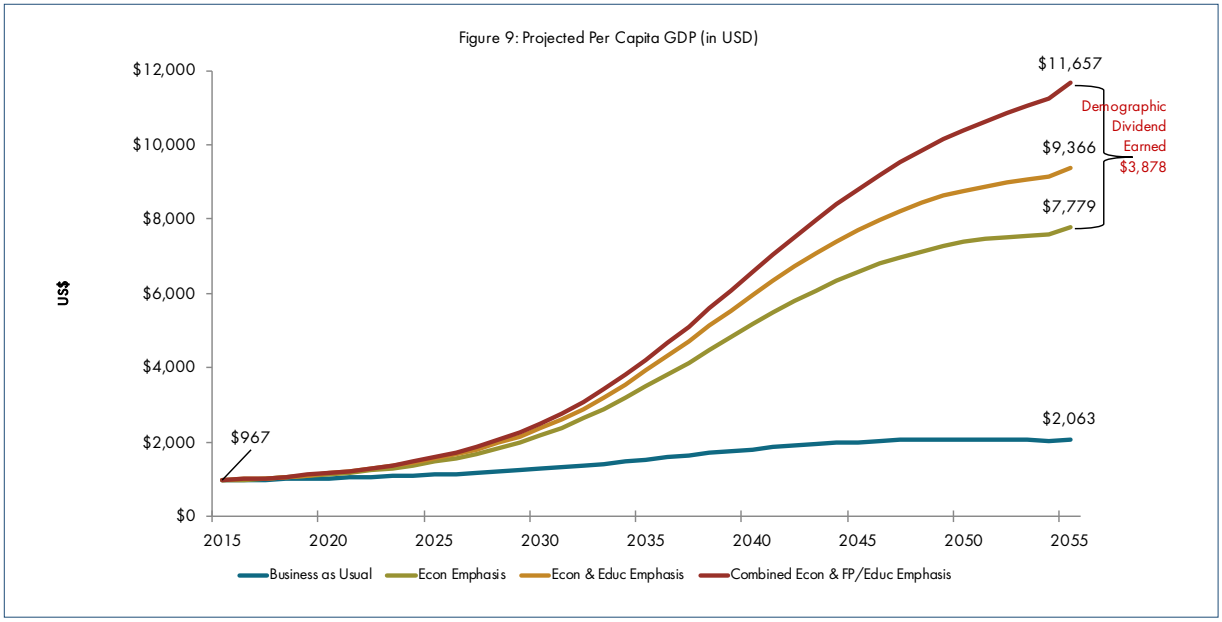
but without simultaneous focus on investing in education and family planning; (iii) Economic and Education emphasis, where investments are made to enhance both economic competitiveness and education levels but not on family planning; and iv) Combined emphasis, where optimal investments are made in family planning in addition to economic competitiveness and education. The benchmark countries are Malaysia, South Korea, South Africa and Mauritius, countries that have attained economic development that Tanzania aspires to meet or surpass by 2055. Full explanations of the rationales for these scenarios are reported in the country's Demographic Dividend report.[8]

The Combined scenario, which follows an integrated (economic, social and demographic factors) investment framework, will produce a youth bulge by 2055, and a dependency burden of only 58 dependents for every 100 persons of working age. The population will be much smaller at 129 million compared to 154.7 million under the "Business as Usual" scenario, and the total fertility rate will be close to replacement level, at 2.4 births per woman. Per capita GDP could increase to USD 11,656.6 (see Figure 9). Thus, if Tanzania unleashes its full potential and simultaneously prioritises reforms and investments in economic, demographic and human capital development and facilitate a rapid fertility reduction, it would earn a much larger demographic dividend (the difference of income earned under the Combined and Economic Emphasis scenarios) of USD 3,877.2 per person (Figure 9). Tanzanians will have higher living standards with an HDI score of 0.775 and life expectancy would increase to 74 years by 2055.

What is the risk of "business as usual"?

The projected growth of the youth population in Tanzania will place significant strain on the country since these youths will have to be educated, housed, and be provided with healthcare. As the population grows in rural areas and land for growing food becomes scarce, there is likely to be increased migration from rural to urban areas in search of livelihoods. International migration is also likely to increase as young people seek livelihood opportunities in neighbouring countries and beyond. Estimates from the United Nations migration statistics suggest that roughly 2.5 million inhabitants from Kenya, Tanzania, Rwanda, and Uganda emigrated in 2015 alone and about 35% were youth between 15-34 years. Men and women were equally likely to migrate. Finally, the inactivity in addressing

Figure 9: Projected Per Capita GDP (in USD)



[31] Moreland, S., E. L. Madsen, B. Kuang, M. Hamilton, K. Jurczynska, & P. Brodish. (2014). Modeling the Demographic Dividend: Technical Guide to the DemDiv Model. Washington, DC.

youth demographics may threaten the country's security since unemployed, disenchanted youth can react by causing civil unrest.[33, 34]

Recommendations

For Tanzania to be able to harness the potential of its youthful population, the country should follow an integrated investment framework to ensure a favourable dependency ratio, high quality human capital and adequate jobs for its growing labour force. Our review of the literature leads us to offer the following recommendations to the **government:**

- **Improve health and wellbeing of the population:** Improve public health and general healthcare to lower childhood mortality, prevent new HIV infections and address chronic and degenerative diseases. Fulfil commitments to making access to modern methods of contraception universal and abolishing child marriages.
- **Enhance access and quality of education and skills development:** Improve the quality of basic education and promote progression to secondary and tertiary education. Increase access to technical and vocational institutions for skills development
- **Accelerate economic reforms:** Create a conducive and attractive business environment for the private sector by improving infrastructure (energy, transport and communication); support youth enterprises by promoting innovation hubs and tax incentives for youths' businesses. Modernise agriculture to increase productivity and enhance value-addition to increase competitiveness in the international markets.
- **Strengthen good governance, efficiency and accountability:** Develop a culture of evidence-based planning and programme design. This should be coupled with strengthening monitoring and accountability systems and promoting a culture of openness, ethics and transparency, and including youth in decision-making spaces.
- **Enhance women and girls' empowerment:** Enforce anti-discrimination policies and laws to increase female participation in the development process; legislate against early marriage and mobilise communities to encourage girls to progress to secondary and tertiary education.
- **Promote sustainable environment and climate:** Raise awareness of environmental issues and good stewardship of natural resources among youth.

The **development partners** and **private sector** can support Tanzania to harness a demographic dividend by:

- Building capacity for policy implementation into actionable interventions with clear indicators of progress to enable tracking and to foster accountability.
- Providing funding to support promising programmes which address identified challenges among youth.

Acknowledgements

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[33] Cramer, C. World Development Report (2011). Unemployment and Participation in Violence. London

[34] Azeng, Therese F. and Yogo, Thierry U. (2013), Youth Unemployment And Political Instability In Selected Developing Countries, Working Paper Series N° 171 African Development Bank, Tunis, Tunisia.

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