



**Permanent Mission of the United Republic of Tanzania
to the United Nations**

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STATEMENT BY

**MR. MODEST J. MERO,
MINISTER PLENIPOTENTIARY, OF THE PERMANENT
MISSION OF THE UNITED REPUBLIC OF TANZANIA**

**ON THE CONTRIBUTION OF THE PROGRAMME OF ACTION
(PoA) OF THE INTERNATIONAL CONFERENCE ON
POPULATION AND DEVELOPMENT TO THE
INTERNATIONALLY AGREED DEVELOPMENT GOALS,
INCLUDING THE MILLENNIUM DEVELOPMENT GOALS**

**AT THE 42ND SESSION OF THE UN COMMISSION ON
POPULATION AND DEVELOPMENT**

NEW YORK, 31 MARCH 2009

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Madam Chairperson,
Distinguished Delegates,
Ladies and Gentlemen

I have the honour to deliver a statement to 42nd session of the UN Commission on Population and Development. Let me also take this opportunity to extend my sincere appreciation to the UN Commission for Population and Development for organizing this important session. We feel honoured to be part of the process in the implementation of ICPD- PoA. I wish to assure you that Tanzania is fully committed to the implementation of the ICPD Programme of action.

There has been an increase of population in developing countries while in developed countries the population has been declining. The growth of population in least developing countries while economic growth is below double digit is creating a huge challenge. Tanzania is experiencing a challenge of population dynamics. The population projection show that Tanzania had a population of 40.7 million in 2002 and is expected to reach 63.5 million in 2025, at an estimated population growth rate of 2.9%. The average life expectancy at birth is estimated to be 48 years (47 years for men and 49 years for women). The population is characterized by young age (44% is aged below 15 years).

Chairperson,

The National Development Vision 2025 and Strategy for Growth and Reduction of Poverty are in line with the MDGs Goals 2015. The country has made significant achievements with regard to primary education, promoting gender equity, empowerment of women and improving environmental sustainability through access to water and sanitation. There has been a significant reduction in child mortality. However, special attention needs to be focused on health related MDGs including improving maternal health and combating HIV/AIDS, malaria and other diseases.

Chairperson,

Poverty remains as one of the serious challenges to achieve the national and international goals. The 2007 Tanzania Household Budget Survey (THBS) indicates that 34% of Tanzanians fell below the basic needs poverty line and 17% below food poverty line. The absolute number of people living in poverty line has increased since the last 2000/01 THBS due to population growth. Poverty remains overwhelmingly rural, with 83% of individuals below the basic needs poverty line being resident in rural areas. However, the general increase in the urban share of the population has also been accompanied by rise in the share of the poor living in the urban areas. The government is taking every possible intervention to address the challenge of poverty and in some cases we have seen positive results.

Chairperson,

In addressing the challenge of education, performance of primary education has registered improvement overtime. The 2002 Population and Housing Census indicated that the literacy rate was 70.5%. The Ministry of Education statistics shows that Net Enrolment Ratio was 97.3 in 2007 for both boys and girls. Tanzania has achieved significant success in gender equality in primary schools (0.97 ratio of girls to boys) and secondary schools (0.88 ratios of girls to boy's education. The success

has been contributed by deliberate government efforts to allocate resources and sensitize the community on the importance of educating girls. It is expected that gender equity is likely to be achieved by 2015. In other areas, the representation of women at policy (Ministers and Members of Parliament) and decision making levels is steadily increasing.

Chairperson,

Tanzania has also made a good progress in reduction of infant and child mortality rates, suggesting the possibility of achieving the target of reducing child mortality by 2015. The infant mortality rate is 68 and under-five mortality rate is 112 (Tanzania Demographic and Health Survey (TDHS), 2004/05). The most significant contribution to the reduction of under – five mortality is improved control of malaria. Acute respiratory infections, diarrhea, improved personal hygiene, environmental sanitation and preventive as well as curative health services.

Maternal mortality situation has not improved and remain at 578 (TDHS) 2004/05). Overall, there is little change in the proportion of births attended by skilled personnel only 46% and births handled in health centers are still low at 47% (TDHS 2004/05). The negative trend in maternal mortality is compounded by the impact of HIV/AIDS epidemic, inadequate health facilities and poor health due to malnutrition.

Chairperson,

The prevalence rate of HIV/AIDS since the outbreak of the first case has been fluctuating above 12% in 1990s. Todate, with interventions, the prevalence rate has decreased in all age groups, to less than 7% (2007/08 Tanzania HIV/AIDS and Malaria Indicator Survey). We are now scaling up HIV/AIDS prevention, care and treatment interventions to reduce prevalence by 50%, from the current rate of 7%, and provide AIDS patients with ARVs.

Currently, the Government is encouraging people to have voluntary tests to know their HIV status, through the National Campaign, launched by His Excellency President Jakaya Mrisho Kikwete on 14 July, 2007. HIV/AIDS still remains the number one national disaster, Malaria which is number one killer disease accounts for 30% of the national disease burden and is a threat to 94% of the population. The National Malaria Medium Term Strategic Plan (2002-2007) aims to reduce malaria mortality and morbidity by 50% by 2010. Tuberculosis (TB) disease has rapidly increased in Tanzania due to primarily the HIV/AIDS epidemic. The strategy to reduce Tuberculosis (TB) coordinate HIV/AIDS and TB programme by sharing resources and using voluntary counseling and testing as an entry point.

Chairperson,

The environmental concerns have been mainstreamed in the National Strategy for Growth and Reduction of Poverty (2005-2010) and Zanzibar Strategy for Growth and Reduction of Poverty (2007-2010). Sectoral policies have been reviewed to incorporate the concerns and management of biodiversity. Strategy for urgent action on land degradation and water catchments that also covers the issues of tree cutting for firewood, charcoal and livestock keeping is in place. The high urbanization has continued to put pressure on the urban environments and resources. Tanzania is as well on track to achieve the target of access to clean water as to the access to drinking water, urban household's access to drink water was 73% and rural households were 53% (TDHS 2004/05).

Chairperson,

In concluding my statement, Tanzania would like the session to address two important issues that need to be considered in facilitating countries to strategize and how best to:

- 1) Implement and achieve the ICPD and related MDG's goals; and

2) Mobilize resources for implementation of ICPD and related MDG's goals.

My expectations to this session are that, we will continue to support each other in articulating policies strategies and programmes, to address population needs that will as well accelerate the growth of our economy and allow us to attain both national and MDGs including IADGs.

Thank you very much.