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Social Protection for Older People in Tanzania: In Search of an Alternative

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Abstract

This article examines the social security of elderly people. It argues that the majority of the elderly people in Tanzania are threatened by chronic social insecurity emanating from structural poverty. Using in-depth interviews and documentary evidence to elicit information, the study shows that modern social security schemes cover a relatively small proportion of elderly persons in Tanzania, and that pension benefits are inadequate for the necessities of life. It argues that social protection provided by the traditional and informal systems of social security to elderly persons outside the formal sectors of the economy is gradually weakening and becoming ineffective. Non-formal support from the government is also dwindling, while support from non-governmental organizations (NGOs) and community-based organizations (CBOs) is inadequate, covering only a small proportion of elderly persons. The article concludes by discussing the policy implications of the findings and suggesting alternative support mechanisms.

1. Introduction

In the past few decades attention has been drawn to the question of ageing on a massive scale and the social protection of older people. This is due to the social insecurity facing elderly people. As a result, in 1999 the United Nations Organization issued the Plan of Action on Ageing, requiring governments all over the world to formulate policies and establish programmes for improving the well-being and status of elderly people.

Various studies on the social protection of elderly people in Tanzania have shown that the majority of them are afflicted with chronic social insecurity (Bossert, 1988; Mlyansi, 1991; Tungaraza, 1995). These studies have identified the root causes of social insecurity for the elderly people as old age risk and

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inadequate or unstable income. As a consequence of social insecurity, elderly people lack the purchasing power for securing the basic necessities of life. The majority of elderly people outside formal social security schemes lack the legal protection of their right to livelihood, in addition to losing economic support from their families and close relatives (Bakari, 1988; HelpAge International, 1998). This situation has been exacerbated by economic difficulties, such as the economic crisis of the late 1970s and the subsequent introduction of structural adjustment programs in the 1980s. The need for the social protection of the poor and non-poor elderly has increased as an effect of adjustment policies as the withdrawal of subsidies, price deregulation, reduction of public spending in the social sector, and the devaluation of the Tanzanian shilling. As a result, elderly people, like the rest of the members of society, have experienced falling real incomes.

According to informed forecasts, the population that will be above the age of 60 years will increase in the next few decades, especially during the first quarter of the twenty first century (UNO, 1999:12). In Tanzania, the proportion of elderly people aged 60 years and above is likely to rise. For instance, it rose from 1.9 percent in 1957 to 4.1 percent in 1984. By 1988 the proportion had risen to 4.3 percent. Of these, 52 percent were male, while 48 percent were female. The majority of the elderly (87 percent) lived in the rural areas (Tungaraza, 1995:71). Due to their longevity, elderly women will constitute the majority of the older population in the next few decades (UNO, 1999:12). Such gender imbalances may have some impact on living arrangements, income, and support systems.

2. Methodology

This study is based on fieldwork carried out among elderly people in Mbeya, Tukuyu, Ikwiriri (Rufiji), Moshi, and Morogoro in 1999. Fieldwork consisted of the use of in-depth interviews with elderly people, as well as officials dealing with elderly people's issues in various social security institutions and NGOs. Purposive sampling was used to select respondents in the study. Altogether a total of 40 elderly people (20 males and 20 females) were interviewed. A total of three officials were interviewed: one representing the Department of Pensions in the Ministry of Finance, another from the Department of Social Welfare in the Ministry of Labour and Youth Development, and the third from MODCO, a non-governmental organization. The purpose of in-depth interviews was to complement and validate secondary data obtained in the libraries and various institutions dealing with elderly people.

3. Social Protection for Older People

Social protection for older people in Tanzania is of two types: old age pension schemes for retired elderly people, and traditional and non-formal social security measures for the elderly people outside modern social security schemes. In the following sections each of these types of social protection will be discussed.

3.1 *Old Age Pension Schemes: Nature, Magnitude and Problems*

3.1.1 *The Nature and Magnitude of Old Age Pension Schemes*

Soon after the colonization of Tanzania, first by the Germans in 1884–1918 and then by the British in 1919–1961, old age pension schemes for certain employees of European descent were set up. Such schemes were set up by, among others, the Superannuation Acts of 1887, the Master and Native Ordinance of 1923, and the European Officers' Pension Act of 1927 (Bossert, 1987). The purpose of these schemes was to attract trained European personnel to colonial government service (TNA, No. 2794/Vol.I and II).

It was not until 1932 that the Pensions Ordinance for African employees, as amended in 1954 in Cap 371, was established. With this ordinance, African employees holding high positions in the public service began getting old-age pension benefits. Indeed, up to the beginning of World War II, old age pension schemes covered a relatively small population of Tanzania (Bossert, 1987:108), mainly because African labour was considered to be tied to traditional social security institutions, and was therefore not considered to have reached a stage of development that would make old-age pension schemes practical (Colonial Office, 1944).

The period between World War II and 1961 saw the introduction of two kinds of old age pension schemes. On the one hand there was an extension of old age pension schemes to European and Asian employees in the territory, and on the other provident funds were set up for African employees in the lower positions in the public services and private organizations. Up to the time of independence in 1961, about 140 provident funds based on occupational social groups were operating (ILO, 1963:44). There were, for example, provident funds for dockworkers, plantation workers, construction workers, local authority employees, and central government employees. In a way the extension of coverage was restricted to organized labour, which, according to the ILO (1963:44), covered only 6,000 members by 1962.

Among the factors influencing the above-mentioned trends in the development of old age pension schemes were the publication of the Beveridge Report in 1942; Britain's post-World War II economic depression and its need to rely on colonial territories for the mobilisation of resources; the outbreak of labour unrest in the West Indies after World War II and the collapse of the British Empire in the Far East; the accelerated tempo for self-government in colonial territories; the stepping up of nationalist struggles throughout the colonial empire, including Tanganyika; and the realisation by the British Government that granting independence to these territories was inevitable. These led to changes in the British attitude towards African labour, which now called for its stabilization in every sector of the colonial economy (Iiffe, 1971:140-142; Tungaraza, 1982; Bossert, 1987). This involved consolidating old-age pension schemes (TNA, Microfilm No.2794/Vol. I & II).

After independence in 1961, the new government inherited the colonial socio-economic structure, including old-age pension schemes. There was no attempt to restructure these schemes, since the government considered them as *tokens* to employees and not as rights deserved (Hansard Papers, 1964:975). Thus there was a rapid growth and consolidation of the existing old age pension schemes (Tungaraza, 1982). Several factors can explain this rapid growth. The first was the workers' demand for improved working conditions, higher wages, and better social protection measures in the period 1961-1978 (Lynd, 1968:54; Tanganyika Government, 1962-69). The second was the post-independence government's policy stance, which regarded old-age pension as one of the methods for stabilizing the labour force, thereby increasing labour productivity (Hansard Papers, 1964:975; Tanganyika Government, 1965:2). The third was that similar, comparable and therefore encouraging pension schemes were being established in other African countries, for example in Nigeria (Hansard Papers, 1964:975). The fourth was the need for several types of schemes necessitated by the varying and multiple employment situations brought in by nationalisations, following the Arusha Declaration of 1967, and by the establishment of parastatal organizations (Tungaraza, 1982).

Further consolidation and the proliferation of pension schemes for old age occurred in the period 1979-99. For example, The National Provident Fund (NPF) was transformed into a social security scheme based on the social insurance principle by Act No. 28 of 1997, and the non-contributory Public Pension Scheme was transformed into the contributory Public Service Retirement Benefit Scheme in 1999. Not only was the retirement age extended from 55 years to 60 years, but also pension benefits became a right to be claimed by the retirees (HelpAge International, 1998).

At present two main types of pension schemes for older people in Tanzania exist. These are contributory and non-contributory. Contributory schemes include the Public Service Pensions Fund (PSPF) of 1999, the Local Government Authority Provident Fund (LGAPF) of 1984, the Parastatal Pension Fund (PPF) of 1978, and the National Social Security Fund (NSSF) of 1998. Non-contributory pension schemes include the Teachers Service Commission of 1965, and the Defence Forces Gratuities and Pension Scheme of 1966. In 1981 a political leaders' scheme was introduced, and it was followed by a 'specified state leaders' scheme in 1999. These two schemes provide pensions and gratuities to political leaders and designated state leaders who may cease to hold a defined state position, such as the President, Vice President, and Prime Minister.

3.1.2 Problems in the Old Age Pension Schemes

The first problem facing old age pension schemes is the small coverage of the elderly population. By 1981 the above-mentioned pension schemes covered only about 360,000 employees altogether, though this was more than 90 percent of all employees in the formal sector. The National Social Security Fund had by far the greatest number of members. At the beginning of 1981 it covered about 63 percent of the regularly employed people. The Parastatal Pension Fund (PPF) and the Public Service Pension Fund (PSPF) each covered about 15 percent (or 54,000) of the regularly employed people. By December 1999, PPF had only about 35,000 retirees receiving old age pension benefits, while PSPF had approximately 30,000 retirees (Tungaraza, 1999).

The second problem is the mode of payment of pension benefits in Tanzania, which seems inequitable. One example of inequity is in the amount of benefits accrued to members of different schemes. Members of PSPF, for example, get more generous benefits than members of the PPF. Whereas the minimum pension benefits for members of PSPF is Tsh 10,000 per month, the minimum pension for members of the PPF is only Tsh 8,000 per month. The minimum pension under the National Social Security Fund (NSSF) Act of 1997 is Tsh 24,000 per month, which is equivalent to 80 percent of the current statutory minimum wage. The age at which a member can retire also differs. While the voluntary and compulsory retirement age for PPF is 50 and 55 years respectively, the voluntary and compulsory retirement age is 60 and 65 years respectively for PSPF and NSSF. Within the same schemes, members who retire with higher annual incomes get higher benefits than those with low incomes.

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The third is the problem of inflationary devaluation and the inadequacy of pension benefits *vis a vis* the basic necessities of life of the retired older people. Old age pension benefits under PPF and PSPF are fixed in relation to the last annual income of the recipient. Due to this link to actual income, old age pension benefits have a measure of security against the inflationary devaluation of benefits. However, payments are made over a long period, as is the case with the periodical payments of the PPF and PSPF, these have no built-in protection against inflation (Bossert, 1987). Many studies (Mataba, 1983; Bossert, 1988; Tungaraza, 1988; 1992; Mlyansi, 1991; Safari, 1992) have established that income obtained from pension benefits is generally not adequate for the subsistence needs of elderly people. By 1989, for example, the prices of staple food, mainly maize and rice, had risen more than 50 times over the 1974 prices. Similarly, due to inflation, in 1989 the incomes of pensioners had fallen 26-45% from the 1982 levels (Mataba, 1983:32).

The fourth problem is the time taken to get pension benefits, which is usually very long. In his study, Magangila (1976: 52-64) shows that the interval between the processing of application forms and the disbursement of pension benefits is very long. According to him, it was not unusual for the first disbursement to materialise after a long wait of nine months. Where a second disbursement was expected, the waiting time could be much longer, as the following narration of a retiree demonstrates:

I retired from the civil service in June 1986 as a mason. I was given Tsh 60,000 as part of my old age pension benefits, and I went back to my village of origin, which is Kayuki in Tukuyu district. Ever since that time I have been making a follow-up on the remaining sum but without success. It is now more than 13 years since I retired. The officials in the Ministry of Works keep on giving me appointments to collect the remaining sum. Whenever I go to ask for my benefits, they give me another appointment. Indeed, now I am tired of making further follow-up because it is time-consuming, and I have to borrow money for transport.

3.2 Public Support for Elderly People

Support from the government to elderly people is given under the principle of public assistance. It can be granted only when an elderly person is proved to lack sufficient means of livelihood and support from relatives. However, all this seems to be hypothetical; in practice the government of Tanzania no longer provides support to old people, as confirmed by interviews of several social welfare officers in Mbeya and Dar es Salaam, and by elderly people in Morogoro and Mbeya. The reason advanced by the government is a lack of funds.

Moreover, there are neither tax exemptions nor other forms of indirect benefits from the government to older people. They are treated like other age groups. For example, all able-bodied older people – with the exception of the very poor – pay development levies. Older people do not get preferential treatment in public transport, health facilities, housing, and water supply. Even the recently announced provision of free health care to vulnerable older people, usually over 60 years of age, is not working in practice as they find it impossible to access it. There are several reasons for this. First, there is a persistent shortage of drugs in local government health centres. The 'drug kit' of certain basic medications distributed every month runs out after about two weeks, leaving the health centres with no medicine for the rest of the time (Tungaraza, 1997). Secondly, health centres are too far away for the older people to walk to, especially if they are ill, and they certainly cannot afford to pay for transport of any kind.

Other reasons leading to poor access to health care by older people include the inability or unwillingness of health staff to visit sick people in their homes. This is a problem particularly for the housebound, bedridden elderly patients. Also, health personnel lack awareness of the health problems of older people in their communities (HelpAge International, 1998). Lastly, negative attitudes of health staff and the general public towards the health of older people discourage older patients from seeking treatment at government health facilities (HelpAge International, 1998).

3.3 Traditional and Non-Formal Support Mechanisms

Elderly people who are outside the formal sector of the economy rely on the support of their own children, families, communities, NGOs and CBOs. As we shall see, some are, of course, self-supporting

3.3.1 Support from Own Children

Various studies have shown that children provide considerable social support to their older parents (Bossert, 1988; Tungaraza, 1988, 1993). Children working in urban areas make regular remittances to their close relatives, including elderly parents. Bossert (1987) notes that about 60 percent of the members of formal sectors send money to their elderly in the rural areas. In Manzese, Dar es Salaam, Tungaraza (1993) found out that about 67 percent of the respondents sent money, 20 percent sent clothes, and 11 percent sent food to their elderly in the rural areas. Support from children is generally higher in rural areas than in urban areas; and in smaller and poorer communities than in richer ones. In 1988 the amount of money transferred in this way was

estimated to be Tsh 3,000 per annum (Bossert, 1988). This amount was below the minimum wage of that year, which was Tsh. 5,000 per month. Many of the elderly have confirmed in interviews in Mbeya that the continuing support by children is not adequate.

Part of the explanation for the inadequacy of children's support is the economic crisis and the adjustment policies. A study by Tungaraza (1993) in the Manzese suburb of the capital city shows that many urban people living far away from their home areas cannot visit their elderly parents in the rural areas annually. Instead, they visit their elderly parents only after two years, and spend a total of only 28 days with them. This means that there is less time available for children to take care of their rural elderly. Such a situation can in turn be explained by the high costs of travelling to rural areas. Mlyansi (1991) and Kamugisha (1992) demonstrated this by showing that transport costs on annual leave, let alone the annual leave itself, were becoming very expensive. They cited an example of transport and food costs from Dar es Salaam to Bukoba that cost approximately Tsh 30,000 in 1992 per person. They showed further that the same amount of money was needed for the upkeep of an employee, plus their rural elderly parents during the holidays.

Similarly, the transfer of goods to the rural elderly parents has been negatively affected by the economic crisis of the late 1970s and the 1980s. Mlyansi (1991) and Tungaraza (1993) have observed that the frequency of transfer of money, clothes, foods, and shoes to the rural elderly parents has declined. Bossert (1987), for example, shows that the frequency of transfer of goods to elderly parents in the rural areas was on average 6-8 times in a year. By 1991 the frequency of transfer of goods to rural elderly declined to three times in a year (Mlyansi, 1991). Interviews with some elderly people in Tukuyu and Morogoro, however, indicate that the frequency of transfer of goods to elderly parents these days has declined to between 0-1 times in a year (Tungaraza, 1999). This situation can be attributed to the financial pressure facing employees in Tanzania. In such a situation, therefore, it is very difficult to afford regular transfers of money and goods to elderly parents.

3.3.2 Support from Families or Communities

Traditionally, the family in most African countries has played a major role in providing security to the elderly people, and it continues to perform the same function today. The types of economic support given include physical care or tending, financial assistance, clothes, shoes, and food. However, the economic crisis and adjustment policies of the 1990s have negatively affected family and community support to the elderly in rural and urban areas. Tungaraza (1995)

observes that a majority of members of families are allocating less time in providing support for the elderly nowadays. This is because most members of families or communities have increasingly been drawn into market production, petty trading and other income generating activities all day long. As a result, the elderly have remained at home with very little attention from the adult members of the family or community.

3.3.3 Self-Support

Self-support mechanisms are sources of income for both rural and urban elderly people. Such sources include farming, trading, and cattle keeping (Bakengesa and Mallya, 1983; Bossert, 1988). A study by Safari (1992) shows that more than 60 percent of elderly people in Rukwa, Tanga, Mtwara, Mara, Arusha, Dodoma, Mwanza, Mbeya, Iringa and Coast regions own farms, while about 30% of the m in Kilimanjaro, Mara, and Dodoma possess cattle. A recent study by HelpAge International (1998) in Karagwe found that 90 percent of older people possess farms. Data collected from the study areas confirm the existence of the above sources of income for the elderly people. In addition, other elderly people engage in carpentry and the selling of charcoal. The reliability of incomes from such sources as a means of livelihoods is, however, poor. This is because the income is meagre and irregular (Mataba, 1983:30).

To augment their low incomes, the elderly participate in money exchange networks under formal social schemes popularly known as upatu (Tungaraza, 1993; Victor, 1997). The amount of income raised through money exchange networks ranges from Tsh 20,000 to 40,000 per month. This amount, however, is not adequate for the subsistence needs of elderly people for a number of reasons. First, the expenditure on the basic necessities of life far exceeds the amount (Victor, 1997). Secondly, sometimes the elderly people look after their grandchildren, and the children's parents may not send any money to help with expenses. In other cases the children themselves become ill and come home with their families, forcing the elderly people to support them (HelpAge, 1998).

3.3.4 Support from NGOs and Community-Based Organizations (CBOs)

A study by HelpAge International (1998) has shown that NGOs and CBOs provide considerable support to older people. Taking the case of religious institutions, for example, the study revealed that older people ranked them positively as far as support is concerned. It is no wonder that when older people were asked to rank religious institutions in the Venn diagrams they usually

located them at the centre to indicate that these institutions were close to the older people. When asked to explain why religious institutions were at the centre, the older people said that these institutions supported them with clothes, food, accommodation, house repair or rebuilding, and health care services. An informal interview with the Assistant Commissioner, Department of Social Welfare, confirmed the role played by religious institutions in supporting older people. According to the Assistant Commissioner, religious institutions run a total of 24 home care centres for older people in the country. Despite the support given to older people by religious institutions, HelpAge International (1998) found that not all older people availed themselves of such support.

HelpAge International (1998) shows that many CBOs provided support of different kinds, including helping older people rebuild their houses; setting up milling machines and bio-gas projects; establishing a common fishing kitty; and setting up souvenir shops or cafes. However, it is argued that the existing CBOs, have failed to improve the standard of living for most elderly people because of their weak administrative structures, lack of finance, and poor communication systems.

4. Alternative Support Mechanisms

In looking at alternative support mechanisms, the first and most important task is to identify sustainable sources of livelihoods in old age, followed by the promotion of income-generation activities for older people, such as small-scale agricultural, trading, and manufacturing enterprises. NGOs can then take up these tasks as service providers and as advocates. Their activities can be supplemented by local or community-based mutual aid groups run by and for old people.

Various studies (Tungaraza, 1993), however, show that most of the community-based mutual aid groups experience a number of limitations.

- (a) Such groups provide only short-term social security.
- (b) Support given is usually inadequate for the subsistence needs of members, and hence it solves only the immediate problems.
- (c) Members who fail to participate in group activities without good reasons are automatically excluded.
- (d) Community-based mutual aid groups are unstable and short-lived.
- (e) The protection they afford their members covers only a small number of contingencies.

Despite the above-mentioned shortcomings, community-based mutual aid groups, if well managed, could generate the much needed funds for providing loans to elderly people who would like to start their own income-generating activities, as well as set aside funds for local welfare. Such funds could be used for supporting the most vulnerable older community members who are unable to participate in income-earning activities, as well as older members faced with various contingencies such as sickness and invalidity. As argued by Randel and others (1999), such social assistance funds in Mozambique have not only provided material support for vulnerable older community members, but they have also created peer pressure for the prompt repayment of loans to support the welfare funds.

The likely problems of social welfare funds in Tanzania are the identification of the most vulnerable older people, the type of contingencies to be covered since old age and sickness risks face all elderly people, the scattered nature of the elderly population, the high illiteracy rate of the elderly population, the nature and low income level of agricultural income, and the difficulty of collecting contributions. Parts of the above mentioned difficulties could be overcome by encouraging the elderly themselves to participate in management committees of social welfare funds. The elderly people, together with community committees and leadership, could identify the most vulnerable older persons in the communities, determine the amount of money to be contributed to the social welfare funds, and the amount of social assistance to be provided to those who deserve such support.

Despite the gradual weakening of family support for elderly people, there is a strong agreement among scholars that the family institution still plays an important role in supporting older people. However, the capacity of the family to provide adequate support, and therefore guarantee old age social protection, depends on the extent to which it is trapped in endemic poverty. A family living in a state of poverty will definitely not provide adequate support to its older people. This calls for policies that keep family support systems afloat. In the short-term, therefore, it is necessary for the government to support traditional systems in which families pool work, risk, and resources. Such policies help preserve informal networks, social sanctions, and long-term residential stability.

There is need to establish government programs that provide goods and services complementing rather than substituting for those provided by families and other voluntary sources of support. For example, adult children who live with their

elderly parents could receive a tax rebate, and an additional tax deduction could be available to help them cover medical expenses and supporting equipment for disabled parents. Such arrangements could supplement the support given to elderly people by families.

The alternative of government-community partnership support mechanisms may succeed in increasing social security for older persons only if there is good governance and democracy in local governments. According to Lerise (1998), this requires all parties affected by the old age contingency to be included in the planning and implementation discussions. Secondly, there should be a suitable forum for facilitating local negotiations. This means, therefore, that local governments should make sure that all stakeholders are encouraged to participate in and negotiate on issues of social protection for older people as equal members of the community. Decisions related to the social security of older people, therefore, should be the concern of all citizens.

5. Concluding Remarks

This article has shown that the majority of the elderly people in Tanzania are afflicted by poverty. Such a situation is not conducive to the social, political, and economic development of the country. Secondly, it is contrary to the International Plan of Action on Ageing and the United Nations Principles for Older Persons, adopted by the United Nations General Assembly (Resolution 46/91) on 16 December 1991. In order to increase the lifespan of older persons and enhance their independence, participation, care, self-fulfilment and dignity, efforts are needed to fill these extra years with a sense of purpose and accomplishment. Older people should not be relegated to a marginal and passive role after a certain age level - they still have needs, capacities, and potentials. Improving the quality of life of older people, therefore, enhances their capacity to continue interacting with society.

Furthermore, there is need for individuals, policy makers, and the general public at large to be made aware of the preparation for retirement as a lifelong consideration as opposed to the current thinking, which sees it as a last-minute adaptation. This means a policy on ageing and for older people is an important society-wide concern, and not merely a question of caring for a vulnerable minority. Such a policy should be directed at promoting opportunities for self-expression and participation as informed citizens in the family, in local organizations, in organizations of older people, and in political processes. The rationale for such a policy on ageing is providing older people with a secure existence that is compatible with human dignity.

The government should ensure that the health and nutritional status of the older people is improved to reduce the risk factors associated with old age. In addition, it should ensure that food and household products, installations and equipments conform to standards of safety. The elderly should be assisted in building their own houses in the communities. The family should be recognised as a fundamental unit for taking care of the older people. This requires, therefore, efforts by government, NGOs, and CBOs to encourage, support, protect and strengthen families to respond to the needs of its ageing members. In addition, it requires that social welfare services be community-based and provide a broad range of preventive, remedial, and developmental services for older people. Lastly, there is need to establish government programs that provide goods and services that complement, rather than substitute, those provided by families and other voluntary sources of support. For example, adult children who live with their elderly parents should receive a tax rebate, and additional tax deductions should be available to help them cover medical expenses and support equipment for disabled parents.

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Meeting the Donor: Challenges to the Decentralization Strategy in Environmental Management in Tanzania

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Introduction

For some years now, those who offer much needed aid for development have been urging developing countries to make fundamental changes in the management of their economic and political affairs. This call first came at a time of deteriorating living standards in the developing world, despite massive injections of aid by the developed countries. The desired changes moved two areas in development aid politics to centre stage. These were good governance and the management of the environment. Donors maintained that developing countries needed good governance or a more conducive and open policy-making environment so that resources could be utilised more efficiently and sustainable development achieved. The basic assumption was that without good governance aid was likely to be misused. Indeed, aid has been misused in many developing countries, but it is often not recognized that this was sometimes due to the politics of foreign nations.

With the call for good governance in developing countries, there has been a worldwide awakening about the need to pay more attention to the environment. Development and the environment have come to be inseparable sides of the same coin. As such, development aid has come to be so environmentally sensitive that a good part of aid today is directly channelled to causes aimed at sustaining the environment. Finland, for example, has made it clear that aid will be directed at achieving three main objectives: reducing widespread poverty; combating global threats to the environment; and promoting social equality, democracy and human rights (GoF, 1996).

Tanzania has tried to 'meet the donor' in pursuing the dual, and at times contradictory, challenges of increasing economic production and protecting the environment. This article, therefore, examines in detail the concept of

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