

Lambin, Roosa; Muangi, Winnie C.; Nyssölä, Milla

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## Social protection in humanitarian contexts: Exploring stakeholder views from Tanzania

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WIDER Working Paper 2025/4

**Social protection in humanitarian contexts:  
exploring stakeholder views from Tanzania**

Roosa Lambin,<sup>1</sup> Winnie C. Muangi,<sup>2</sup> and Milla Nyyssölä<sup>3</sup>

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**Abstract:** This working paper examines Tanzania's social protection system amidst growing humanitarian crises driven by climate change, health epidemics, and regional conflicts. It explores the social protection needs experienced in humanitarian settings, the challenges in implementation and expansion of social protection schemes, and the opportunities for future policy reform to move towards shock-responsive systems. The study underscores the importance of integrating humanitarian responses into national social protection frameworks and expanding social protection to informal sector groups. Key recommendations include anticipatory planning, increased domestic financing, strengthened legal frameworks, and leveraging technology and data for emergency preparedness, accurate targeting, and system monitoring. The paper calls for a multistakeholder approach to building a resilient social protection system for vulnerable populations that meets the diverse and evolving needs of Tanzania's population in an era of escalating shocks and polycrises.

**Key words:** social protection, humanitarian crises, Tanzania, climate change, health epidemics, vulnerable populations

**JEL classification:** I38, H53, O55, J46

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<sup>1</sup> University of Oxford, Oxford, UK, corresponding author: [roosa.lambin@open.ac.uk](mailto:roosa.lambin@open.ac.uk); <sup>2</sup> University of Reading, Reading, UK, and University of Dar es Salaam, Dar es Salaam, Tanzania; <sup>3</sup> Labour Institute for Economic Research (Labore), Helsinki, Finland

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Katajanokanlaituri 6 B, 00160 Helsinki, Finland

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## 1 Introduction

Experiences from different humanitarian contexts—such as those triggered by climate change, health pandemics and epidemics, and conflict—underscore the need for adequate and robust social protection (SP) systems, and their role in assuring basic needs and mitigating human vulnerability in crises. At the same time, policy responses to the COVID-19 pandemic showed that SP can be flexibly deployed for temporary emergency situations involving heightened health needs and income disruptions (e.g., Abdoul-Azize and El Gamil 2021; Gentilini et al. 2022; Gerard et al. 2020; ILO 2020). Similarly, in climate emergencies, SP has been associated with poverty reduction, income supplementation, livelihood transformation, and resilience building, which reduce vulnerability to shocks (e.g. Costella et al. 2023). SP can also stimulate positive climate-migration outcomes by reducing financial barriers, limiting distress migration, and supporting the livelihoods of those deciding not to migrate (e.g. Silchenko and Murray 2023). Evidence from conflict-affected regions, in turn, shows that aligning humanitarian assistance with long-term SP goals enhances social stability and reduced socio-economic inequities (as seen in Sudan; e.g. Birch et al. 2024) and tempers tensions by engaging diverse stakeholders (as under the Kenya’s Hunger Safety Net Programme—Birch and Carter 2023).

‘Shock-responsive social protection’ and ‘adaptive social protection’ have now become staple terminology for international development organizations working in the sector (e.g. Bowen et al. 2020). In parallel, the extant literature has increasingly advocated for SP as a key response mechanism to the social needs caused by shocks. The World Social Protection Report 2024–26 (WSPR), for instance, highlights the pivotal role of universal SP in addressing climate risks and supporting vulnerable populations, particularly in low-coverage regions susceptible to climate hazards (ILO 2024). As efforts to shift towards a ‘new generation’ of SP that adequately responds to shocks intensify, it is imperative to gain insight into the local experiences and needs regarding SP interventions and systems in different humanitarian contexts, where ‘traditional’ SP mechanisms (e.g. social insurance against life contingencies or targeted income-supplementing cash transfers) may not be sufficient. While the literature on SP in humanitarian contexts is rapidly growing (see Section 2 of this paper), there is an ongoing need for bottom-up analyses that address the SP landscape more broadly, beyond specific programmes. The need to generate contextually relevant and timely knowledge is particularly pressing in shock-prone contexts where SP systems are still maturing.

This study examines the challenges associated with SP delivery and expansion in humanitarian settings in Tanzania, as well as the potential opportunities for strengthening and shifting the existing SP system to better respond to shocks. This research is part of the UNU-WIDER project ‘Strengthening safety nets in post-conflict and humanitarian contexts’<sup>1</sup> and it contributes towards expanding the existing knowledge base on social protection and humanitarian crises, drawing on stakeholder views in Mainland Tanzania. The study was conducted in parallel to a sister study in Zambia (see Chikwekwe et al. 2025).

Ranked as the 45th most climate-vulnerable country in the world,<sup>2</sup> Tanzania is not currently facing an acute humanitarian crisis, yet it continues to grapple with significant challenges stemming from climate change, health emergencies, and regional instability. Over 70 per cent of disasters in

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<sup>1</sup> <https://www.wider.unu.edu/project/strengthening-safety-nets-post-conflict-and-humanitarian-contexts>

<sup>2</sup> Notre Dame Global Adaptation Initiative, <https://gain-new.crc.nd.edu/country/tanzania> (accessed 16 December 2024).

Tanzania are currently linked to droughts and heavy rainfall (CADRI 2023; FAO 2023). The effects of these climate shocks are severe, the latter manifesting in localized floods and landslides, while the former exacerbate food insecurity. Recent evidence shows that 59 per cent of Tanzanian families cannot afford a nutritious diet (WFP 2024), 40 per cent of children are affected by food insecurity (FAO 2022), and 10 per cent of the population experience very high levels of acute food insecurity (FSIN & GNFC 2024).

At the same time, the recent spread of Marburg virus disease in northern Tanzania (Mmbaga et al. 2024), adding to the widespread presence of cholera, malaria, and HIV/AIDS, underscores the prevalence of health epidemics in the region. Tanzania also has a long tradition of hosting refugees from conflict-ridden neighbouring countries such as the Democratic Republic of Congo (DRC) and Burundi. As of July 2024,<sup>3</sup> it was hosting 234,000 refugees—concentrated in the Kigoma region—putting further pressure on SP provision in a country with one of the fastest-growing populations in the region, at 67.4 million as of 2023.<sup>4</sup>

This qualitative interview study examines SP in humanitarian contexts—loosely defined to include *health* emergencies, *climate* hazards and effects, and *conflicts*—in a bottom-up manner by synthesizing stakeholder perspectives in Tanzania. The aims of the study are three-fold: (i) to identify specific SP needs (of local populations) associated with different humanitarian contexts; (ii) to elucidate key challenges for effective SP delivery and expansion in the Tanzanian context; and (iii) to explore opportunities for the development of SP systems that effectively respond to shocks and needs in humanitarian settings. The study also offers context-specific insights regarding the broader policy environment by shedding light on potential complementarities, synergies, and frictions between different existing SP and humanitarian instruments, programmes, and institutions in a multi-stakeholder environment with limited domestic resources and competing priorities. This paper presents initial findings derived from a streamlined analysis of empirical interview data and relevant literature sources, which will be refined further in the next stages of the research project. These findings provide context-specific evidence to complement the growing body of evidence on SP and humanitarian crises.

The remainder of this working paper is organized as follows. Section 2 presents an overview of key policy trends and lessons learned regarding SP in humanitarian contexts in the Global South. Section 3 explains the study design and data, and Section 4 presents the specific context of Tanzania. Section 5 delves into the analysis and presents preliminary findings on SP needs as well as challenges and opportunities for policy expansion and reform in the pursuit of adequate SP for humanitarian contexts, as perceived by stakeholders on the ground. Section 6 discusses the policy implications of the study findings and potential ways of strengthening SP for humanitarian contexts in Tanzania, and Section 7 concludes.

## **2 Literature review: social protection and humanitarian emergencies—policy trends and lessons learned**

Drawing on emerging literature from Global South countries, this section discusses the opportunities and challenges for moving towards shock-responsive SP in humanitarian contexts. Drawing on tangible, recent examples notably from sub-Saharan Africa, the section focuses

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<sup>3</sup> See <https://data.unhcr.org/en/country/tza> (last accessed 16 December 2024).

<sup>4</sup> See World Bank data at <https://data.worldbank.org/indicator/SP.POP.TOTL?locations=TZ> (last accessed 16 December 2024).

particularly on *implementation and expansion* of SP during crises, *system-level and technical factors* facilitating and/or hindering delivery, and existing opportunities for *policy reform and fine-tuning*. In so doing, this section ‘sets the scene’ for a closer examination of SP arrangements, challenges, and opportunities in humanitarian emergencies in the Tanzanian context.

To begin with, in recent years, there has been an emergence of social assistance programmes specifically aimed at cushioning shocks and building household resilience more generally. Based on the existing body of evidence, this SP expansionism has yielded largely positive outcomes. Niger’s National Safety Net programme ‘Wadata Talaka’, aimed at bolstering household resilience to climate shocks and reduce poverty, increased food security by 15 per cent within 18 months of its launch (AfricanPact 2023), and the Social Fund for Development (SFD) in conflict-affected Yemen increased beneficiaries’ investments in productive assets like seeds and equipment, also reducing food insecurity (Saad and al-Hassan 2024). In Liberia, the Recovery of Economic Activity for Liberian Informal Sector Employment (REALISE)<sup>5</sup> has promoted climate-smart innovations such as solar dryers to reduce food waste and emissions.<sup>6</sup> In the Sahel region, the World Bank-managed Sahel Adaptive Social Protection Program (SASPP)<sup>7</sup> has strengthened household resilience across six countries through a combination of strategies, including adaptive safety nets, productive inclusion, climate shock-responsive delivery systems, and institutional strengthening (World Bank 2024a). Many other countries and programmes have also incorporated shock responsive elements to ‘traditional’ SP delivery such as cash transfers (e.g. the Hunger Safety Net Programme in Kenya; see also table 3 in Chikwekwe et al. 2025 for Zambia).

Shocks not only affect human wellbeing and livelihoods but can also impact the overall *SP system and technical delivery* (e.g., through power shortages, damage to physical service infrastructure, and understaffing). Moreover, in the context of immature SP institutions, there are pre-existing gaps in the capacity for nimble reaction and flexibility required in emergencies (O’Brien et al. 2018; Sabates-Wheeler et al. 2022; Winder Rossi et al. 2017). In many countries, limitations in existing SP schemes in terms of both generosity and population coverage restrict their ability to effectively support household transitions to shock resilience (Sabates-Wheeler and Longhurst 2020; Sabates-Wheeler et al. 2022). Evidence from the Ebola crisis in Liberia, for instance, highlights that when the national capacity for SP remains nascent, there are limited opportunities for the effective use of SP programmes and institutions for acute humanitarian crises (Gentilini et al. 2018).

In contexts with more mature SP systems, existing *institutions and delivery mechanisms* can be tapped into in emergency situations. Recent findings from six Sahel countries show that economic and political stability coupled with SP systems that enjoy government ownership and funding have been able to facilitate SP responses to humanitarian needs (Kreidler et al. 2022). Similarly, evidence on conditional cash transfer (CCT) programmes with strong government backing shows that social assistance schemes can be mobilized to effectively mitigate the impacts of shocks—even if not initially designed to address humanitarian emergencies. For instance, Brazil’s Bolsa Família programme, spearheaded by the Brazilian federal government, has been instrumental in providing timely assistance to vulnerable households during crises, including the floods in Rio Grande do

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<sup>5</sup> <https://projects.worldbank.org/en/projects-operations/project-detail/P174417>

<sup>6</sup> This initiative is part of Liberia’s adaptive social protection efforts to enhance food security and resilience against climate-induced shocks. See <https://blogs.worldbank.org/en/investinpeople/unlocking-the-power-of-adaptive-social-protection-to-end-hunger-#:~:text=The%20World%20Bank%20aims%20to,cope%20with%20shocks%20by%202030>

<sup>7</sup> A multi-donor trust fund involving support from the Danish development agency DANIDA, the French Agence Française de Développement (AFD), the German BMZ, and the British FCDO.

Sul in May 2024.<sup>8</sup> Ethiopia's Productive Safety Net Program (PSNP), underpinned by robust government commitment, has been integral to support for drought-affected households, mitigating food insecurity and helping households to invest in preparedness (World Bank 2020). However, the extant literature also highlights that SP systems relying on cash transfers to cover those in the informal sector have failed to address gender inequality during shocks (see Atkins et al. 2022), drawing attention to the shortcomings of such approaches in protecting the most vulnerable populations in humanitarian emergencies.

Furthermore, the existing evidence highlights the benefits of *technical system-level improvements*, notably in bridging humanitarian response and social protection systems. Several countries have made more intentional use of data systems, early warning mechanisms, and social registries, as seen in the Dominican Republic and Chile.<sup>9</sup> Also in Kenya, national SP programmes and international humanitarian schemes have effectively connected their respective registries for information sharing. In Zimbabwe, the Vulnerability Assessment Committee received technical assistance from humanitarian actors for country diagnostics in terms of data collection and analytical and programming tools, which could be deployed for the expansion of SP (Gentilini et al. 2018). In contrast, negative experiences in Ethiopia, Malawi, and Uganda show that 'a lack of coverage of national biometric identification, or common data collection tools and data protection protocols, limit the potential of these systems to work together, and therefore [to] connect actors and programmes to achieve flexible scale and reach' (Sabates-Wheeler and Longhurst 2020). Similar evidence comes from Zambia, in the context of the research project under which this study was conducted (see Chikwekwe et al. 2025).

Moreover, SP in humanitarian contexts increasingly involves new *anticipatory mechanisms at the programme level* for the timely allocation of resources. In Somaliland, a recent experimental project provided anticipatory cash transfers ahead of forecasted flash floods. However, the floods did not occur, highlighting the challenges of technology-reliant anticipatory interventions (Swift et al. 2024). In contrast, Bangladesh's Forecast-based Financing (FbF) initiative proved successful. In July 2020, the World Food Programme (WFP) distributed cash transfers to 145,000 vulnerable individuals four days before severe flooding, allowing households to purchase essential supplies and take preparatory measures, significantly improving food security and asset protection.<sup>10</sup> Nonetheless, challenges such as forecast accuracy, coordination, and community preparedness persist in Bangladesh.

Relatedly, several examples point to the importance of *anticipatory SP financing arrangements*. For instance, strong institutional coordination enabled timely responses to COVID-19 in the Philippines,<sup>11</sup> highlighting the value of pre-arranged funding options to overcome financial hurdles in crises. Another example of financing innovations is the Caribbean Catastrophe Risk Insurance Facility (CCRIF), a parametric insurance mechanism that has enabled swift post-disaster responses through earmarked funds for SP.<sup>12</sup> This is part of a broader rise in the use of climate insurance mechanisms, which provide immediate financial alleviation and enhance resilience among vulnerable populations. Parametric (including index-based), sovereign, and microinsurance

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<sup>8</sup> See <https://blogs.worldbank.org/en/latinamerica/lecciones-practicas-proteccion-social-adaptativa-america-latina>

<sup>9</sup> See <https://blogs.worldbank.org/en/latinamerica/lecciones-practicas-proteccion-social-adaptativa-america-latina>

<sup>10</sup> See <https://www.wfp.org/publications/acting-flood-protect-most-vulnerable-independent-review-wfps-anticipatory-cash> and <https://www.anticipation-hub.org/download/file-1705>

<sup>11</sup> <https://openknowledge.fao.org/server/api/core/bitstreams/6608960d-0b48-45d6-9a0e-7bc3957c8dd0/content>

<sup>12</sup> <https://blogs.worldbank.org/en/latinamerica/lecciones-practicas-proteccion-social-adaptativa-america-latina>

mechanisms target specific needs and demographics, such as those suffering crop losses caused by droughts and floods (see examples in Table 1).<sup>13</sup> These insurance programmes illustrate the diverse applications of climate insurance to stabilize incomes, prevent negative coping mechanisms, and enhance resilience. However, climate insurance mechanisms also face challenges that limit their effectiveness. Basis risk—the mismatch between actual losses and payouts due to inadequate data—is a significant issue, as seen in Burkina Faso, where credit guarantee schemes struggle with high collateral demands and limited outreach (World Bank 2021). In many Global South countries, data gaps hinder the reliability of index-based products, affecting adoption and scalability. Additionally, financial constraints, and limited institutional support and infrastructure often lead to low uptake and sustainability of parametric and microinsurance schemes.

Furthermore, the extant literature stresses the importance of strengthened *coordination and complementarity between SP and humanitarian responses*, with clear institutional responsibilities and mandates within the broader SP ecosystem. Humanitarian aid and crisis response interventions are typically short-term, implemented and funded by international humanitarian organizations, and run with limited engagement with government (notably in the context of conflict), while SP is more typically financed (at least partially) and operationalized by government bodies, enshrined in national legislation, and delivered on a longer-term basis (e.g. Gentilini et al. 2018; Sabates-Wheeler and Longhurst 2020). Siloed operations between these two ‘social welfare approaches’ have caused resource waste, inefficiencies, and ineffective provision for the populations most in need. However, sharing technical capacities, and coordinating and aligning approaches can increase government buy-in and effective SP delivery (Sabates-Wheeler and Longhurst 2020). For instance, in Ethiopia, the PSNP and Humanitarian Food Assistance (HFA) programmes have been effectively coordinated by the National Disaster Risk Management Committee (NDRMC) at the federal level in a drive for further synergies and complementarities (Sabates-Wheeler et al. 2022). In Mali, Mauritania, Niger, Burkina Faso, and Chad, the Sahel Social Protection Joint Programme<sup>14</sup> delivers cash transfers through a ‘twin-track’ approach, prioritizing government systems for delivery (Track 1) and mobilizing UN and NGO partners (Track 2) when government capacity is limited, ensuring timely assistance while enhancing national capacities to deliver SP in humanitarian emergencies.<sup>15</sup>

At the same time, experiences from converging SP schemes and humanitarian interventions reveal important friction points. In Malawi, parallel systems with different provisions led to social tension and made the creation of a single, shock-responsive system challenging (O’Brien et al. 2018; Sabates-Wheeler and Longhurst 2020). In Ethiopia, the non-equivalence in transfer values between the PSSN and HFA hindered full convergence and caused undesired beneficiary behaviour (e.g. double-dipping, movement between benefits) and social tension (Sabates-Wheeler et al. 2022). Relatedly, evidence from Sahel countries shows that building synergy for the more technical aspects of SP and humanitarian schemes (e.g. payment mechanisms, actor collaborations) is easier and less contentious than making amendments to existing eligibility criteria and benefit transfer values (partially due to the related financing restrictions; Kreidler et al. 2022). These insights shed light on the practical challenges of shifting towards a unified, synergistic, and shock-responsive SP system.

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<sup>13</sup> <https://www.wfp.org/publications/payouts-wfp-supported-climate-risk-insurance-programmes-safeguarding-food-security>

<sup>14</sup> Implemented by UNICEF, funded by KfW/BMZ.

<sup>15</sup> See <https://blogs.worldbank.org/en/dev4peace/fragile-contexts-strong-partnership-supporting-adaptive-social-protection-in-the-sahel>

Table 1: Overview of weather insurance types

Type	Mechanisms	Examples	Issuer/provider
Parametric insurance (including 'index-based insurance')	Provides payouts to households triggered by pre-determined thresholds of measurable parameters, such as rainfall or vegetation indices	<p><b>Ethiopia:</b> The R4 Rural Resilience Initiative integrates index-based insurance with community resilience-building efforts, providing financial protection to drought-affected households and enabling investments in preparedness measures (WFP 2023).</p> <p><b>India:</b> The Weather-Based Crop Insurance Scheme (WBCIS) offers protection against adverse weather conditions like insufficient or excessive rainfall to smallholder farmers by linking payouts to weather parameters (GOI 2016).</p> <p><b>Kenya:</b> Index-Based Livestock Insurance (IBLI) uses satellite data to monitor forage conditions, providing payouts to pastoralists during droughts to sustain livestock or purchase feed (Banerjee et al. 2022; Johnson et al. 2019).</p> <p><b>Mexico:</b> A variety of advanced index-based insurance programmes since 2003 (Castillo et al. 2016) includes a recent tripartite parametric insurance initiative that addresses climate vulnerabilities such as drought and excessive rainfall, by triggering payouts based on specific climate indices (IDF and UNDP 2023).</p>	<p><b>Ethiopia:</b> Managed by WFP (Oxfam) in collaboration with local governments and private insurers (see WFP and Oxfam 2013 for a list of partners).</p> <p><b>India:</b> Administered by the Government of India (see Clarke et al. 2012).</p> <p><b>Kenya:</b> Provided by a public–private partnership in collaboration with government programmes.</p> <p><b>Mexico:</b> Government of Mexico and private sector insurers.</p>
Sovereign insurance	Provides governments with immediate financial resources for effective disaster response, facilitating timely humanitarian assistance	<p><b>Caribbean:</b> The Caribbean Catastrophe Risk Insurance Facility (CCRIF) helps governments in the Caribbean region to recover swiftly from disasters such as hurricanes and earthquakes.</p> <p><b>Ghana:</b> The first sovereign drought insurance policy was introduced in October 2024 to protect vulnerable communities and the agricultural sector against droughts (Global Shield against Climate Risks 2024).</p> <p><b>Kenya:</b> The Livestock Insurance Program (KLIP) offers macro-level protection for pastoralists, delivering payouts for livestock feed during droughts (UNFCCC 2022).</p>	<p><b>Caribbean:</b> Managed by the CCRIF, a regional initiative backed by international donors and member governments.</p> <p><b>Ghana:</b> African Risk Capacity (ARC) in partnership with the government.</p> <p><b>Kenya:</b> Managed by the Government of Kenya and supported by international partners.</p>
Microinsurance	Provides affordable coverage to low-income populations while addressing localized climate risks	<p><b>Kenya:</b> \$500,000 in payouts under the WFP's climate risk insurance programme helped 46,000 people secure food, cover school fees, and invest in essential agricultural inputs (WFP 2021).</p> <p><b>Malawi:</b> WFP's climate risk insurance programme payouts of \$1.2 million supported over 26,000 smallholder farmers after Tropical Cyclone Freddy, benefiting 131,000 people with cash assistance and agricultural reinvestment (WFP 2021).</p> <p><b>Uzbekistan:</b> A public–private partnership offers grants to smallholder farmers to access climate insurance, enhancing their resilience to disasters (IDF 2023).</p>	<p><b>Kenya:</b> WFP and private insurers.</p> <p><b>Malawi:</b> WFP in collaboration with private insurers and local governments.</p> <p><b>Uzbekistan:</b> Public–private partnership led by the government and supported by international development organizations and reinsurers.</p>

Source: authors' construction; literature provided within the table.

## 3 Research design

### 3.1 Research objectives and questions

This study employs a qualitative, forward-looking approach to examine SP within humanitarian contexts—broadly encompassing *health* emergencies, *climate* hazards and effects, and *conflict situations*—through an analysis of stakeholder perspectives in a bottom-up manner. More specifically, this report answers the following research questions:

- 1. What social protection needs are experienced by local populations in different humanitarian settings, as identified by stakeholders?**
  - a. To what extent are SP needs distinctive in different humanitarian settings (induced by health epidemics, climate change, and conflict)?
  - b. What particular needs are experienced by vulnerable groups, including women and girls?
- 2. What are the stakeholder perspectives on the most pressing challenges in the current social protection landscape in Tanzania?**
  - a. What issues hinder effective SP delivery in humanitarian contexts and under existing schemes?
  - b. What are the key barriers to SP expansion in the country?
- 3. How can social protection measures and institutions be developed to better respond to humanitarian emergencies, as viewed by stakeholders?**
  - a. What systems-level improvements are needed (technical capacity, institutions, resources, legislation, etc.)?
  - b. What policy reforms, re-configurations, and potential new instruments should be considered?

The study highlights the specific needs and vulnerabilities of women and girls, as well as those working in the informal sector, by integrating insights from the interview data into a comprehensive review of the existing literature and evidence. Moreover, the study generates additional context-specific insights regarding the broader policy environment. In so doing, it sheds light on potential complementarities, synergies, and frictions between existing SP instruments, programmes, and institutions. Drawing on stakeholder perspectives, the analysis provides fresh insights into the practical complexities of policy-making and implementation in a multi-stakeholder environment characterized by limited domestic resources and competing priorities.

### 3.2 Methodologies

This qualitative study aims to generate context-specific, empirically grounded insights into SP needs and systems, and potential pathways forward in addressing humanitarian emergencies in Mainland Tanzania. The adopted research approach therefore involves a documentary analysis of relevant policy documents, programme evaluations and statistics, and semi-structured interviews with diverse stakeholders on the ground. Crucially, interviewees were recruited purposefully to capture a wide range of perspectives from professionals working in different areas of SP and humanitarian emergencies. Additionally, the recruitment approach sought a strong representation across domestic and international actors, and professionals working in senior roles on programme implementation and delivery, as well as policy planning and coordination (Table 2). Interviewees were identified and recruited through internet searches, existing contacts, and a snowballing approach, whereby approached participants directed researchers to other relevant experts in the field.

Table 2: Research participants

Area of expertise	Organisation type	Role	Identifier
Social protection	Bilateral donor	Senior Advisor	SP Exp. 1
	International organization	Chief of Social Policy	SP Exp. 2
	National SP institution	R&D Specialist	SP Exp. 3
	National SP institution	R&D Officer	n/a
	International organization	SP Specialist	SP Exp. 5
	Government body	Senior Policy Advisor	SP Exp. 6
	Civil society organization	Project Officer	SP Exp. 7
	International organization	Senior Social Protection Specialist	SP Exp. 8
	Civil society organization	Advocate	SP Exp. 9
	National research institute	Senior Researcher	SP Exp. 10
Humanitarian assistance / Disaster response	Bilateral donor	Humanitarian Programme Manager	Humanitarian Exp. 1
	International civil society org.	Head of Office	Humanitarian Exp. 2
	International organization	M&E Specialist	Humanitarian Exp. 3
	Government body	Disaster Management Expert	Disaster Manag. Exp. 1
	Government body	Disaster Management Expert	Disaster Manag. Exp. 2
	International organization	National Program Officer	Health Exp. 1
Health	International civil society org.	Advocacy & Partnerships Manager	Health Exp. 2
	Civil society organization	Program Officer	Health Exp. 3
Climate	Bilateral donor	Climate Change and Environmental Advisor	Climate Exp.
Other	Government body	Economist	n/a

Source: authors' construction.

Overall, 20 interviews were conducted in September–November 2024. The interviews, lasting approximately 45–90 minutes, were conducted both in person and remotely via MS Teams or mobile phone. They were carried out mostly in English and partially in Kiswahili, with audio recordings transcribed for data analysis. Thematic and narrative analysis methods were employed, combining inductive and deductive approaches. Inductive analysis focused on addressing pre-identified research questions, while deductive analysis captured and explored new, emergent themes that had not been previously identified. As new themes arose during data collection, these were further probed in subsequent interviews.

#### 4 Setting the scene: social protection landscape and humanitarian response in Tanzania

In Mainland Tanzania, SP is structured around three key components: (i) formal sector insurance,<sup>16</sup> (ii) a large social safety net programme called Productive Social Safety Nets (PSSN), and (iii) emergent social insurance schemes aimed at informal sector workers. The overall population covered by SP arrangements remains low, with PSSN currently covering about 5.1 million Tanzanians. The current Five Year Development Plan (FYDP III, 2021/22–2025/26) aims to

<sup>16</sup> This is provided by separate funds for civil servants (PSSF, covering around 718,000 members) and other formal sector workers (NSSF, covering around 1.74 million members; see NAOT 2022; NSSF 2024). A separate National Health Insurance Fund (NHIF) covers around 1.36 million members; see <https://www.nhif.or.tz/uploads/publications/sw1728653792-ANNUAL%20REPORT%202022.2023.pdf>.

increase SP coverage by up to 30 per cent.<sup>17</sup> This is reflected in recent efforts to launch new SP instruments, and notably social insurance schemes, for informal sector workers. However, these schemes (e.g. NISS) have faced important challenges in terms of enrolment and overall cost-effectiveness. The NISS benefit package is undergoing revision due to budgetary constraints, while enrolment remains limited (Kilonzo et al. 2023).

The overall public SP landscape in Mainland Tanzania remains two-tiered, with rights-based, generous, and varied protections for formal-sector workers, and targeted, donor-driven social assistance or shaky contributory social insurance benefits for the vast majority in the informal sector (Lambin and Nyssölä 2024). The lack of universal systems and schemes limits the capacity for effective delivery of SP in contexts of temporary humanitarian need. Moreover, there are no shock-responsive components attached to current schemes—unlike in Zambia, as shown in the sister case study conducted under this project (Sihubwa et al. forthcoming). An overview of the predominant schemes in Tanzania’s SP landscape is presented in Table 3. Additional elements of Tanzania’s SP landscape include stand-alone social assistance projects managed by international NGOs, and a school feeding programme implemented through a partnership of external and domestic stakeholders, foreseen to be scaled up under national commitments made in 2024.<sup>18</sup>

Although the government’s budgetary allocation in the social sector (including health insurance, education, social insurance, and other related expenses) has grown from TZS 2.15 billion in FY 2022/23 to TZS 2.54 billion in FY FY2024/25 (representing a 18% increase) (MoFP budget books—see Appendix Table A1), Tanzania’s 2024/25 national budget (Figure 1) reveals critical gaps in SP funding across key social policy sectors like health, education, and agriculture. Despite an 18% increase in budgeted health sector allocations from FY22/23 to FY24/25 (MoFP budget books), for example, funding falls significantly short of the projected needs for universal health coverage (UHC), a deficit exacerbated by persistent delays in disbursements. Only 43 per cent of the population was covered by essential health services in Tanzania in 2021.<sup>19</sup> Additionally, public debt accounted for 45.7 per cent of GDP at the close of the fiscal year 2022/23,<sup>20</sup> which leaves a restricted domestic fiscal space for SP expenditure. The social welfare budget continues to be dominated by external development funds, which represented 89 per cent of SP in the financial year 2021/22—79 per cent of this being directed to the PSSN (UNICEF 2022).

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<sup>17</sup> The Social Protection Policy 2023 has been drafted and reviewed under the leadership of the Prime Minister’s Office (PMO). It is under final review and not yet available to the public.

<sup>18</sup> See [https://schoolmealscoalition.org/sites/default/files/2024-09/National%20Commitment\\_Tanzania.pdf](https://schoolmealscoalition.org/sites/default/files/2024-09/National%20Commitment_Tanzania.pdf)

<sup>19</sup> <https://data.worldbank.org/indicator/SH.UHC.SRVS.CV.XD?locations=TZ>

<sup>20</sup> Tanzania’s GDP reached \$79.87 billion in 2024; see <https://www.imf.org/external/datamapper/profile/TZA>.

Table 3: Current social protection programmes in Tanzania

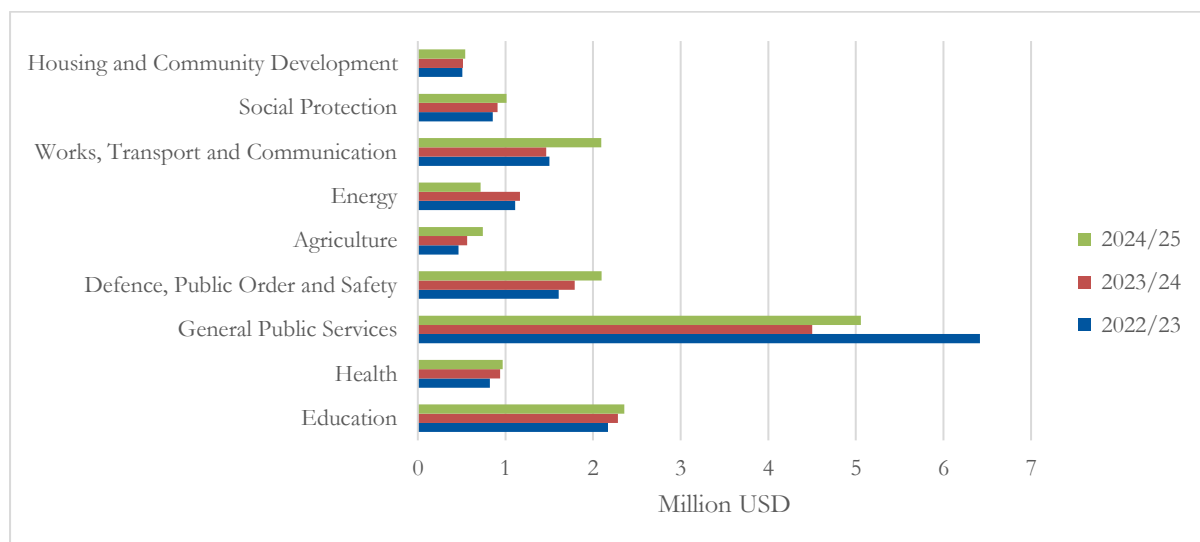
Social insurance for formal sector employees	Targeted social assistance / social safety net (PSSN) <sup>21</sup>	Social insurance for informal-sector workers
<p>The Public Service Social Security Fund (PSSSF) is the main insurer for civil servants. The National Social Security Fund (NSSF) insures other formal sector employees (and voluntary informal worker enrollees) against old age, death, sickness, maternity, and unemployment.</p> <p><u>Note:</u> As of 2014, the NSSF offers voluntary enrolment to informal workers at the contribution rate of TZS20,000 (USD8.50) per month.</p> <p>The Worker's Compensation Fund, established in 2015, provides work injury insurance for formal-sector employees.</p>	<p>The Productive Social Safety Net programme (PSSN,<sup>22</sup> introduced in 2012) provides social assistance to impoverished households through three components: conditional cash transfers (CCT), livelihood enhancement (LE), and a public works programme (PWP) (World Bank 2024b). The CCT component entitles households to an average conditional transfer of TZS31,844 (USD12), up to a maximum of TZS55,000 (USD20), per month (as of 10/2023).</p> <p>The public works component offers work for one adult per household for up to 60 days per year, mainly during the annual lean season, for a daily wage of TZS3,000 (USD1). A minimum of 40% of employment is reserved for women. Flexible working arrangements and lighter tasks are made available for pregnant, lactating, disabled, and older women. Projects are intended to ease women's regular workload (e.g. water fetching), and households can designate a subsidiary worker to replace women who are pregnant or with young children.</p>	<p>The National Informal Sector Scheme (NISS, launched in 2021) offers social insurance to everyone outside traditional formal employment, with a (minimum) contribution rate of TZS20,000 (USD8.50) per month. The benefit package is undergoing revision: while the old-age pension segment is progressing well, other benefits such as soft bank loans and health insurance are currently stopped.</p> <p>Insurance packages for 'difficult-to-reach' populations include the Wakulima Scheme (for farmers), the Madini Scheme (for miners), and the Wavuvi Scheme (for fishermen). These specialized schemes provide access to credit and financial borrowing; and low-interest loans for agriculture and fishing inputs. Contribution rates vary between TZS20,000 and TZS50,000 (USD8.50–21) per month.</p>
<p>The National Health Insurance Fund (NHIF) provides public health insurance; it is mandatory for public sector employees and available on a voluntary basis to others that can afford to contribute. The scheme covers the principal member, their spouse, their parents, and up to four legal dependants.</p>	<p>The livelihoods enhancement component includes savings groups and livelihood activities to enable beneficiaries to accrue funds for future business investments and implement income-generating activities (e.g., skills training in savings group operation, record-keeping, agri-business, and livestock rearing).</p>	<p>The Community Health Fund (CHF) and Tiba kwa Kadi (TIKA) are voluntary health insurance schemes for the informal sector. Members pay an annual premium of at least TZS30,000 (USD13; the premium for Dar es Salaam members is TZS150,000/USD65) and receive benefits packages including referral to regional-level in-patient services.</p>

Source: authors' compilation.

<sup>21</sup> Information from <https://transfer.cpc.unc.edu/countries/tanzania/>.

<sup>22</sup> [https://docs.wfp.org/api/documents/WFP-0000149313/download/?\\_ga=2.120014728.1602725490.1737546109-417064433.1732708865](https://docs.wfp.org/api/documents/WFP-0000149313/download/?_ga=2.120014728.1602725490.1737546109-417064433.1732708865)

Figure 1: Priority sectors in national budgets from 2022/2023 to 2024/25



Note: SP category in budget books includes Elderly, Children and Disabilities, Pension Funds (including Social Security Benefits in Cash) and NHIF.

Source: authors' construction using MoFP budget books (budgeted estimates of public expenditure). USD1 ≈ TZS2,617.81 on 9 December 2024.

On the other hand, Tanzania's risk management frameworks have been significantly strengthened in recent years, in line with the policy elucidated in the Tanzania Development Vision 2025. The National Disaster Management Strategy 2022–2027<sup>23</sup> pays particular attention to climate change-induced impacts on poorer communities and to disproportionately affected rural populations that rely on agriculture. The National Climate Change Response Strategy 2021–2026 connects disaster risk management to SP, emphasizing the importance of reducing vulnerability by developing early warning systems, increasing livelihood protection (through food security and poverty reduction programmes), and building community resilience. Additional funding is provided by international climate financing mechanisms and private companies.

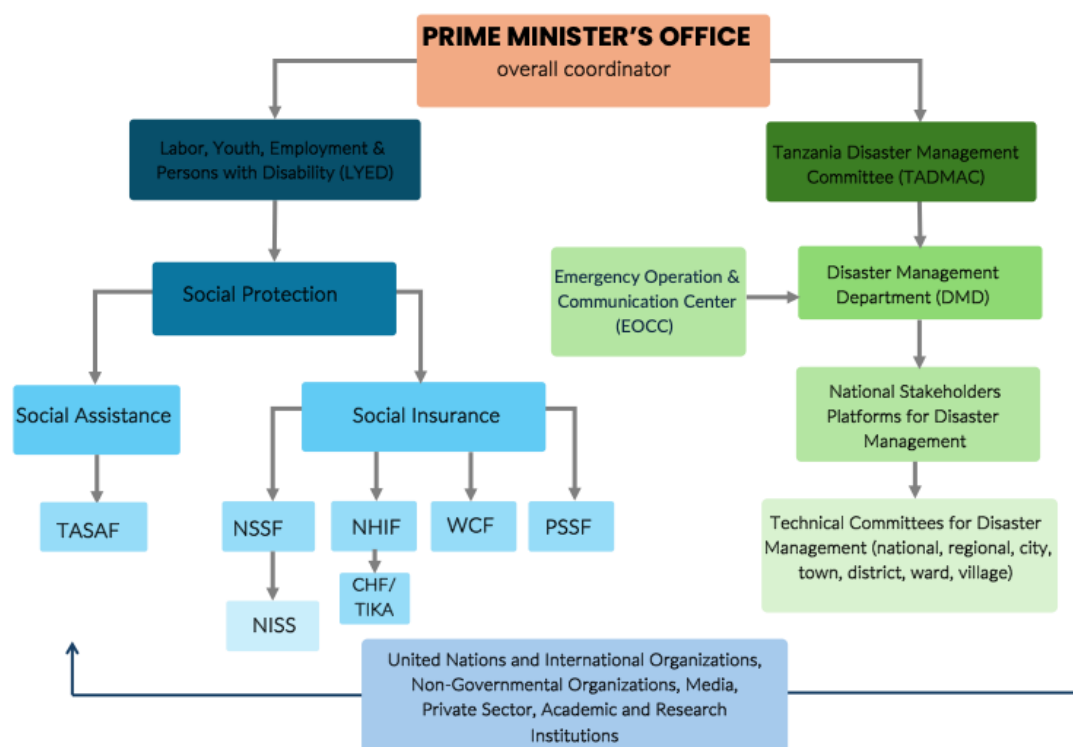
Moreover, Tanzania's National Five Year Development Plan's key interventions include strengthening national capacity for climate change adaptation and mitigation (URT 2021a: 95), and Tanzania's Nationally Determined Contribution (NDC 2021) outlines various adaptation and mitigation strategies aimed at enhancing the country's resilience to climate change impacts. These interventions are designed to address vulnerabilities and foster sustainable development across multiple sectors, thereby strengthening overall national capacity to cope with climate challenges (URT 2021b). However, a recent evaluation of the government's Disaster Risk Management policies and plans shows that SP is not mainstreamed in disaster preparedness training in the country (CADRI 2023: 103).

It is important to note that the institutional set-up for SP and disaster response relies on separate governance structures without a coordinating body to link the two (Figure 2). The Disaster Management Department of the Prime Minister's Office leads disaster response in the country, while the Prime Minister's Office for Labour, Youth, Employment and Persons with Disabilities

<sup>23</sup> Other relevant frameworks include The National Disaster Management Policy of 2004, Disaster Management Act No. 6 of 2022 (defining roles and responsibilities within the government and across levels of governance), National Disaster Preparedness and Response Plan (NDPRP) 2022, National Disaster Communication Strategy 2022, and National Operational Guidelines for Disaster Management 2014.

(PMOLYED) acts in a key role in addressing governance issues related to disaster and climate risk in Tanzania's SP sector. The SP division, in turn, is located within the Department of Labour. (CADRI 2023). At the same time, a host of international agencies engaging in humanitarian work operate in the country, including OCHA, IOM, UNHCR, and the Médecins Sans Frontières (MSF).

Figure 2: Institutional set-up for SP (excluding financial protection for health) and disaster response/management



Source: authors' construction.

## 5 Findings: examining social protection needs, challenges, and opportunities in humanitarian contexts in Tanzania

Tanzania faces important vulnerabilities in terms of public health provision, energy supply, infrastructure, water resources, and agricultural production, while being at risk from extreme weather events, such as excessive rainfall and temperature variability, as well as frequent and prolonged droughts and floods.<sup>24</sup> Climate variability influences the geographical distribution and reproduction of vectors responsible for many communicable diseases, adding to existing health needs and pressures for health systems (The National Climate Change Response Strategy 2021–2026). Extreme climate events can also significantly disrupt service delivery and destroy important grey and social infrastructure, such as schools, hospitals, and points for social assistance services (e.g. Ebi et al. 2021), which are vital for overall SP delivery. At the same time, the country grapples

<sup>24</sup> <https://climateknowledgeportal.worldbank.org/country/tanzania>

with frequent epidemical disease outbreaks (e.g. Marburg virus and Monkeypox) and a steady influx of refugees from neighbouring countries with multidimensional vulnerabilities.

This section draws on interviews with a broad range of SP experts on the ground in Mainland Tanzania to explore their views and experiences on SP needs in different humanitarian settings, the challenges in expanding and adapting SP provision to cover these needs, and opportunities for future shock-responsive SP systems.

## **5.1 Understanding social protection needs in different humanitarian settings**

### *Distinctive social protection needs in different humanitarian settings*

The interviews highlight the devastating impact of humanitarian emergencies on the wellbeing of local populations, including severe disruptions in income-generating activities and education, and the destruction of housing and assets that people depend on for their livelihoods. Interviewees highlighted an urgent need for targeted SP measures that address (i) basic needs including food, (ii) health services, and (iii) resilience infrastructure for vulnerable populations affected by crises.

Interviewees repeatedly emphasized the urgent need for critical basic needs, such as food, shelter, and clothing, by those affected by a crisis. Drawing on the examples of the landslide in Hanang district in December 2023 and the Rufiji floods of April 2024, amongst others, interviewees argued that such rapid-onset emergencies necessitate support for those affected to meet their immediate basic needs, especially for (temporary) shelter, food, and water. The need for psychosocial trauma support was also stressed by officials from various organizations, who pointed out that specific provisions for women, children, and those with disabilities are essential if their needs in emergencies—which extend beyond physical needs—are to be adequately addressed.

At the same time, the interview data highlighted some issues with in-kind support. Specifically, examples were shared of beneficiaries trading the in-kind assistance they received for basic needs such as food or mattresses within informal markets in affected communities (see quotation below). This practice not only diverted resources from their intended purpose but also raised concerns about inefficiencies and misuse. To address these challenges, voucher systems and cash transfers were recommended as more effective solutions. These approaches allow beneficiaries to obtain the exact support they need by redeeming vouchers at shops or centres, while ensuring value for money and reducing the risk of resource mismanagement.

Sometimes you may provide educational materials to children who are not schooling. So, it is a misuse of those resources. Likewise, sometimes in the community when you provide something, they exchange it as barter trade. Maybe someone can take a mattress to a shop and be given 1 kg of sugar. After we discovered that, we drafted a second programme called cash and voucher assistance. We now integrate them together. (Humanitarian Exp. 3)

Moreover, interviewees stressed that re-occurring health crises reveal significant shortcomings in Tanzania's SP and health insurance systems. Interviewees stressed the need for flexible cash transfers during health crises to support households in quarantine or unable to work due to illness. This approach was piloted during the COVID-19 pandemic in the context of a rapid response coordinated by UNICEF, NGOs, and TASAF, which provided cash assistance for health, education, water, sanitation, and communication in an integrated benefit 'bundle' (UNICEF

2020).<sup>25</sup> It was also noted how the pandemic exacerbated the vulnerability of impoverished individuals, who were unable to access their transfers under the PSSN programme due to limited access to cash points: ‘During the COVID-19 pandemic, it was a critical time when the need for support was even greater than before [...] restrictions on gatherings meant beneficiaries couldn’t meet to receive their funds, making it difficult for those already in need’ (SP Exp. 10).

In humanitarian crises, where income and resource-generating activities are disrupted, populations often depend entirely on cash transfers. This contrasts with normal circumstances, when such transfers serve as a supplement to household income. Some interviewees stressed that, in these situations, financial support must be sufficient to meet existing needs, as the affected populations are unable to rely on their usual productive activities during events like seasonal droughts, lean seasons, and other crises with humanitarian implications.

Similarly, in the context of health epidemics, access to healthcare services such as medication, treatments, and vaccinations to manage both the epidemic and pre-existing health conditions was stressed as an important need, heightened by the conflict-induced refugee influx from neighbouring countries into Tanzania, given that displaced people are often at higher risk of health issues due to lack of access to facilities. Interviewees highlighted that, even when health services are available, marginalized populations and the millions of those living in poverty are often unable to access them due to prohibitive costs.<sup>26</sup> ‘Almost 75 per cent do not have health insurance to access healthcare services [...] our goal is health insurance for all, but without adequate funding and awareness, many still cannot access basic healthcare’ (Health Exp. 3).

In addition to direct support for individuals, some interviewees highlighted the need for community infrastructure that can withstand environmental hazards. Several external and domestic SP experts advocated for preventive infrastructure measures, like flood-resistant housing, to protect at-risk communities. Additionally, community-driven public works projects, within the PSSN programme, such as water wells and afforestation, were suggested as means to mitigate climate impacts while supporting local economies, but also as crucial for rebuilding some of the destroyed physical environment. Anticipatory infrastructure protection ensuring that houses and sanitation facilities can withstand climate shocks, especially floods, was raised as another important SP need related to housing. ‘Programme implementations, especially public works, indirectly respond to shocks because they have projects like afforestation and construction of water wells, which help to mitigate climate change effects’ (SP Exp. 3).

However, study participants also raised some concerns about two separate issues regarding the public works component of the PSSN programme. First the suitability of work for individuals with limited physical capability, such as the elderly, was questioned. Requiring physically demanding labour from vulnerable individuals, particularly those living on low calorie intake, was considered potentially inappropriate. Second, concerns were voiced about the replacement arrangements allowed under the programme, where beneficiaries unable to perform the work themselves (e.g. due to pregnancy) can send substitutes. These informal arrangements cause friction within the community, as disagreements arise about how the small payments should be divided between the designated beneficiary and the substitute who performed the work. Together these insights draw

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<sup>25</sup> UNICEF supported healthcare systems by providing vaccines, personal protective equipment, smartphones for data collection, training for healthcare workers, support for distance learning, and safe school re-openings, reaching millions with prevention messages.

<sup>26</sup> In 2018, the date of the last household budget survey, about 26 million Tanzanians lived below the USD1.90 international poverty line (World Bank 2019).

attention to the more contentious aspects of public works as a policy instrument—also highlighted in other recent research on SP arrangements in Tanzania (Lambin and Muangi forthcoming).

There are many people, including myself, who feel that older women and men, and persons with disabilities, should not be obliged to come to the public works sites, to carry stones and so on [...] universal schemes should categorically be based on you being at an old age, or severely disabled, unable to work and so on, or with a child lactating, and we should not see women in their late pregnancies or breastfeeding women in the public works sites. (SP Exp. 3)

### *Social protection needs experienced by vulnerable groups*

Vulnerable population groups including women, children, people with disabilities, and ethnic minorities are disproportionately affected by poverty and climate shocks as well as conflicts and health crises. Therefore, understanding their particular needs and vulnerabilities is critical for effective policy solutions.

As reported by the United Nations Population Fund (UNFPA), refugees reaching Tanzania reside in overcrowded conditions and struggle to meet their basic needs, including food, healthcare, and hygiene. Women and girls are particularly vulnerable, facing heightened risks of gender-based violence, early marriage, and unintended pregnancies.<sup>27</sup> The collected evidence, in line with previous work (Shrivastava and Shrivastava 2022; Standing et al. 2016; Tanyag 2018), shows that women and girls need extra protection and social support measures in different humanitarian contexts, as described in the citations below. Safe spaces and shelters with gender-segregated facilities (e.g. latrines) were considered crucial to ensure their safety and dignity. Interviewees also raised women's and girls' health needs related to their reproductive system, including access to sanitary products (e.g. pads and other hygiene materials). Yet challenges in effectively delivering support in response to these identified needs were also recognized, including women's and girls' limited awareness of available services and how to access them, as well as social stigma and cultural barriers, which may prevent women from fully benefiting from SP initiatives.

Women and girls are especially vulnerable in crises, as they require sanitary products and face higher risks of gender-based violence. Our social protection programmes need to prioritize these specific needs to make a real impact. (Disaster Manag. Exp. 2)

When you distribute sanitary pads, sometimes their husbands beat them or chase you away because they don't understand where the support is coming from. (Humanitarian Exp. 3)

There are special needs for women, such as health support for menstruation and hygiene management, which often go unmet during emergencies. This need is intensified in disaster settings where access to basic hygiene products is limited. (Health Exp. 2)

Cash transfers and livelihood programmes tailored to the specific needs of women-headed households were also highlighted as a key need by interviewed experts. For example, cash-plus

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<sup>27</sup> <https://www.unfpa.org/data/emergencies/tanzania-humanitarian-emergency#:~:text=Refugees%20live%20in%20crowded%20conditions,early%20marriage%20and%20early%20pregnancy>

programmes such as the LE component of the PSSN (jointly coordinated by TASAF, TACAIDS, UNAIDS, and UNICEF), which aims to strengthen adolescents' capacity to engage in livelihood activities and access reproductive health services, and SP through a combination of cash and training, were considered necessary. 'We were able to integrate cash transfers and livelihood programmes for vulnerable adolescent girls and young women in regions highly impacted by HIV' (Health Exp. 1).

Disabled people and the elderly constitute other vulnerable groups that often suffer from a limited ability to react and adapt to humanitarian emergencies—in making repairs to damaged assets, for instance (see citations below). Some interviewees drew attention to the coverage gaps for the disabled and the elderly poor under the PSSN programme, given that there is no social pension programme in Mainland Tanzania, highlighting their existing vulnerabilities and lack of income support.

I remember there was an issue with housing accommodation, especially for very old people and people with disabilities. When it rains a lot, their houses are damaged, making them more disadvantaged compared to male-headed households in terms of resilience to issues like flooding and keeping their families safe. (Humanitarian Exp. 1)

[T]he PSSN does not target [beneficiaries] based on that criterion [disability] specifically, but if households in PSSN are found to have a person with extreme disabilities, they receive an additional top-up. (SP Exp. 8)

As for children, they were noted to suffer particularly from restricted access to school following a disaster. As interviewees highlighted, many schools were destroyed in the recent landslide in Hanang and floods in Rufiji, displacing thousands of pupils and students in the affected areas. In Rufiji for example, some students in classes with national exams had to be relocated to schools in neighbouring districts, which added a new set of challenges to the affected children, including travel distance and time. These effects have both short- and long-term impacts on children's welfare: 'During crises, children's education is also interrupted, which not only affects their immediate safety but limits their future opportunities. Their needs are often put aside as priorities go to immediate physical needs' (SP Exp. 9).

Similarly, evidence from the COVID-19 pandemic, during which most schools were closed for up to three months and e-learning was accessible only to a minority of children, points to the important implications of health crises for children's learning. It has been estimated that, in a country like Tanzania, COVID-related learning deficits for a child in Grade 3 will cause a 'learning gap' worth 2.8 years by grade 10 (Angrist et al. 2021).

## **5.2 Mapping key challenges in current social protection arrangements**

As evidenced in the literature (see Section 2), the maturity and extent of existing SP institutions and arrangements preconditions the delivery of SP in the context of humanitarian emergencies. In this section, we take a closer look at stakeholder perspectives on the challenges hindering the effective implementation of SP under normal circumstances and in specific disaster situations, as well as barriers to expansion during abrupt emergencies.

### *Challenges hindering effective social protection delivery under normal circumstances*

The study uncovered many challenges that hinder the delivery of effective SP programmes under normal circumstances, as well as during crises. Interviewees highlighted in particular the limited

financing for SP, limited amount of resources at the local level, poor coordination between government bodies and international organizations, corruption, and data gaps.

Much of the discussion with study participants focused on delivery challenges in the context of the PSSN. Unsurprisingly, one of the repeatedly mentioned key issues was limited financing for SP delivery, particularly from domestic sources, which was perceived to hinder effective implementation of the PSSN programme. Naturally, this limited reliance on the programme in humanitarian emergencies. At the same time, interviewees stressed the lack of buffer funds to alleviate need during health crises and climate shocks, even when the systems are prepared to respond:

[T]he health sector is adequately set up to respond to health shocks [...but...] the money is not there. There are no contingency plans to address Marburg outbreaks or M-pox. The systems are there, but then the financial resources are not and that's where the donors are pouring in money for COVID, for Marburg or whatever. Now, is the national system set up to support communities that are affected by landslide? The answer is the same. The answer is yes, but the money is not there. Are these response mechanisms delivered through the social protection infrastructure? Absolutely not. (SP Exp. 2)

In terms of the refugee influx, the evidence suggests that the financing of refugee camps—primarily by external partners (UN agencies and international NGOs) with limited contributions from the Tanzanian government—is insufficient. Refugees require targeted interventions, including livelihood programmes, education, health services access, and integration support to enable them to move out of camps (Wardeh and Marques 2021). However, national policy does not allow refugees to access support through the PSSN, for instance. Therefore, collaborative efforts by both domestic and international stakeholders are essential to create long-term solutions for refugees and ensure smooth integration into host communities as well as the fostering of self-reliance and dignity.

Tanzania is a co-signer of the Global Compact on Refugees but is not of Sustainable Development Goal (SDG) 2, which promotes self-sufficiency. As a result, programmes like PSSN are extended to support refugees, as no cash assistance is provided to them. These refugees remain entirely dependent on external aid for everything, from the food they eat to the clothing they wear. (Humanitarian Exp. 1, translated from Kiswahili)

The big issue is financial constraint, because sometimes people stay in camps for two weeks, three, or even a month [...] These people need much attention, nutrition, and so on. (Disaster Manag. Exp. 2)

Another particular aspect mentioned by some interviewees around the financing issue was the limited resources available at the village and community level, where localized shocks are most acutely felt. Even though Tanzania has a largely decentralized administration, it was highlighted that resources were lacked at the local level to deliver SP interventions effectively. Others highlighted pre-existing challenges in more remote communities, where disruptions to already limited transport infrastructure hinder the ability to provide services.

It's exactly the same as developing a very extensive and a very effective network of social protection. I almost even think of it as a social protection army. But they are not fully capacitated. They are not fully in power. They lack resources. (SP Exp. 2, translated from Kiswahili)

There is poor preparedness, and limited access to services is a challenge, especially in remote areas where roads are broken or disrupted. (Health Exp. 1)

Coordination at the local level faces significant challenges, especially in terms of access to accurate information, due to the top-down approach. Interviewees argue that, while there may be overarching plans and structures at national or regional levels, these do not adequately translate to coordinated actions on the ground. Specifically, there is a lack of integration and support at the community level, which often results in delays and miscommunication, hindering timely response to local needs during crises.

Coordination at the local level is a big problem [...] because the instructions from higher levels are not straightforward and take longer to reach people at lower levels. For example, two years after a ministerial directive on implementing GBV [gender-based violence] guidelines, many local actors did not have the information [...] This is why some institutions provide capacity building on policy and guidelines, which might not be known to them even three years after being launched. (SP Exp. 7)

While coordination structures exist, the flow of communication from higher levels to local authorities is slow. This delays implementation and leaves communities uncertain about what support is available. (SP Exp. 6)

Another identified challenge to the effective implementation of SP measures within humanitarian interventions was corruption and the mismanagement of resources. For instance, favouritism in the distribution of PSSN transfers and aid/relief to those with preferred political allegiances or members of agents' extended family, leading to misallocation of resources that should go to the most vulnerable, was acknowledged by several interviewees. This was considered not only to divert critical resources away from the most vulnerable populations but also to erode trust in the SP systems, making it harder to earn public support for such programmes.

There is favouritism, where some leaders take advantage of their positions to ensure their relatives benefit from aid. (Humanitarian Exp. 3)

For example, NSSF sometimes make wrong investment decisions and also sometimes have some sort of corruption. In terms of TASAF, there has been very much corruption. In recent years I have heard that individuals have to be members of CCM to receive funds. (Climate Exp.)

There are cases where aid distribution is heavily influenced by connections and favouritism. Resources end up in the hands of those who may not need it, while the most vulnerable are left behind. This makes it very difficult for social protection programmes to achieve their intended impact. (Humanitarian Exp. 3)

Inadequate government capacity and access to sufficient technology and data to manage SP programmes, including lack of trained personnel and limited technological infrastructure, were seen to undermine effective SP delivery. One particular example mentioned was that of targeting in the context of the PSSN, which was seen to be compromised by outdated data, leading to exclusion errors at the expense of marginalized communities and vulnerable groups living in remote areas. This issue was particularly highlighted by TASAF and the President's Office as an area requiring immediate attention to ensure that robust data systems were in place. While not explicitly mentioned by the interviewees, adequate data systems are also key to facilitating timely

and equitable relief distribution. Effective data management could improve accountability and enable better tracking of beneficiaries, enhancing the overall impact of SP programmes.

There is no data backbone to drive decisions and policy implementation, and capacity within the government is not as sophisticated as we would hope. (Humanitarian Exp. 1)

There should be data that show well those beneficiaries and track them [...] but there is no good system to store the data. This creates challenges in ensuring that resources reach the right people. (SP Exp. 3)

Crucially, the evidence from this study also points to inconsistent political will to expand SP programmes, and especially universal schemes. The Universal Health Insurance Act (UHA) of 2023 mandates all citizens to have at least a minimum level of health insurance coverage, from either the NHIF or other approved providers. Tax revenue is expected to be used to insure those who are unable to pay contributions. However, on the one hand, instances of political interference in implementation of the PSSN programme were reported, whereby the Magufuli Administration had instructed TASAF to roll back rather than expand cash transfer coverage, and instead expand the public works component. On the other hand, interviewees reported nonchalance within the political leadership when it came to encouraging beneficiaries to graduate from the PSSN programme, notably during elections. They explained that, since PSSN recipients constitute an important part of the electorate, politicians did not encourage them to graduate from the programme, which would allow new beneficiaries to enter the scheme, out of fear of causing disgruntlement. ‘Political will or regime changes sometimes led to design changes, such as shifting able beneficiaries from cash transfers to public works, which disrupted the original intent of the programmes.’ (SP Exp. 3)

Moreover, interviewees pointed to significant gender disparities in health insurance enrolment—a pressing challenge for effective expansion. Women’s access to health insurance was seen to be hindered by cultural norms, economic limitations, and policy design features that revolve around a male breadwinner, as exemplified below (see also Lambin and Nyssölä 2022).

Last year we did some research and found that most of the women had not joined social schemes like health schemes or even saved their money [...] once they get sick, the money they use at the hospital depletes their capital. As the organization we started initiatives to go and speak with them and [persuade them to] join in schemes like NHIF and NPPF and find ways that we can help women in social protection so that we can protect them and their businesses. (SP Exp. 9).

There is another question that we asked ourselves with regard to a man with two wives: In what way can he be covered because our systems are directly talking about a husband and wife? And what about one with four wives? [...] the woman is disadvantaged here, because the man is already covered but those women’s rights are compromised [...] the man is given a responsibility to select the wife who gets covered and cut insurance to the remaining wives (Health Exp. 2)

At the same time, it is noteworthy that the interview respondents did not reflect on expansion of the NISS scheme aimed at the informal sector on a contributory basis, or consider the introduction of social pensions or child grants, for instance. This can be partially explained by the existing gaps in NSSF accountability and gaps in general awareness:

Accountability is not there yet in terms of NSSF, or if you look at PSSN, where there are multiple corruptions scandals [...] Awareness—for instance, NSSF has this voluntary scheme, but many people are not aware that they can join NSSF voluntarily because there is also a question of trust. (Climate Exp.)

#### *Key barriers to social protection expansion during humanitarian crises*

With regard to SP expansion during humanitarian crises, interviewees asserted the need for more inclusive schemes catering notably to informal workers outside the agricultural sector, including small traders and those living in informal settlements in urban areas, who are particularly vulnerable to climate impacts and health epidemics. Indeed, study respondents stressed the significant exclusion of the informal sector from existing SP arrangements (see Section 3).

Interviewees also stressed that the low overall population coverage of existing national protection mechanisms limits SP delivery to many that are affected by climate impacts, as evidenced by the recent floods in the Rufiji and Morogoro regions. Some interviewees proposed the introduction of universal SP programmes—particularly for the most vulnerable groups, such as the elderly and people with disabilities—as a more reliable safety net, especially during crises. ‘We should consider replicating universal old-age pensions and support for persons with disabilities, ensuring that these vulnerable groups receive consistent support year in, year out’ (SP Exp. 1).

The evidence suggests that current SP mechanisms do not allow the incorporation of ‘new’ beneficiaries—i.e. those that become vulnerable due to crises, such as floods. Contrary to a recent report by CADRI, which argues that the PSSN is ‘a robust delivery mechanism’ with the ‘systems capacity to expand vertically and horizontally during disasters’ (CADRI 2023: 102), the collected evidence points to TASAF’s lack of adequate financial and human resources as a significant barrier to expanding the PSSN programme horizontally to cover population groups affected by such events (see quotations below). Given the general lack of resources and a specific shock response plan, it may be argued that adequate vertical expansion in terms of type and generosity of benefits is equally challenging—unless heavily driven by development partners such as the World Bank.

There is a big question about resources—both human resources and finances. The government has not set aside sufficient funds to reach the most vulnerable populations, making it difficult to expand services when a crisis hits. [...] For example, all the people that were hit by recent disasters in Rufiji, Lindi, Hanang [...] those people have not been able to be incorporated in the national protection mechanisms, just because of the way these mechanisms are set up. (Humanitarian Exp. 1)

The current social protection programme does not have a well structured system to respond to climate change and shocks. Once people become vulnerable, like after floods, there is no flexibility to add them to the programme; the mechanisms are too rigid. (SP Exp. 3)

Furthermore, poor coordination between government agencies, donors, and stakeholders was noted as a key driver of inefficiencies in service delivery, especially in humanitarian contexts. While there are clear guidelines and mechanisms within the Prime Minister’s Office (PMO) for responding to emergencies using existing SP structures (such as the National Disaster Management Strategy, Disaster Risks Reduction (DRR) guideline, and Disaster Management Act 2015), most interviewees argued that their implementation is continually challenged by coordination issues. It was also noted that SP is not currently integrated into the country’s disaster management and emergency response systems, translating into a lack of clear institutional arrangements, decision-

making processes, and financing mechanisms to enable SP programmes to respond to shocks and emergencies.

In fact, some interviewees stressed that Tanzania's SP system is not designed to be shock-responsive and lacks the capacity to quickly identify affected populations and deliver appropriate assistance, whether cash, in-kind, or a combination. This weakness was seen to require 'more analysis' of the drivers of food insecurity and vulnerability patterns during different types of shocks, as well as 'vulnerability mapping and forecasting capabilities' to inform shock-responsive programming, and timely interventions.

Well, the PSSN doesn't respond to shocks. The programme was not designed to be that kind of programme. And while there is some flexibility possible in the way that it is currently managed and operated, there needs to be some significant work done to get the systems in place to enable these types of responses. [...] We just have to do more analysis, such as improved vulnerability mapping [...] and forecasting capabilities are required to inform shock-responsive programming. (SP Exp. 8)

### **5.3 Exploring opportunities for strengthening social protection delivery for humanitarian contexts**

The findings of this study point to limited adaptability and shock response plans within existing SP programmes to address abrupt humanitarian emergencies. While some efforts were made during COVID-19, these remained isolated initiatives and were not part of a robust system, interviewees stressed. At the same time, interviewees highlighted shock responsiveness as an important component introduced in the next phase of the PSSN 2026–2030, demonstrating an increasing awareness regarding the social protection–humanitarian crisis nexus. In this section, we delve into their views on opportunities and ways forward for strengthened SP in humanitarian settings.

*System-level improvements (technical capacity, institutions, resources, legislation, etc.)*

Strengthening technical capacity within government institutions was identified as critical to improving the delivery of SP in humanitarian settings. For instance, building the skills and capacity of social workers, healthcare providers, and disaster response teams was considered an important investment.

Generally, I think we are not well prepared for emergencies or some of these shocks, like climate crisis [...] just take an example of the flooding that happened [...] across East Africa. Though it did not come out clearly, and the government did not declare it [...] we know that there was significant damage, some of the facilities were not functional, and probably access to some of the medicines by the community members who are in the remote areas was challenging for a long period of time, and this is because of the poor preparedness. (Health Exp. 1)

We don't have experience handling emergencies. That's the major pinpoint for the government and people of Tanzania. (Humanitarian Exp. 2)

Relatedly, interviewees suggested expanding technology and data systems use—notably for targeting, monitoring, and information dissemination regarding climate-related strategies and threats. Digital systems can streamline beneficiary identification and ensure that resources are distributed more effectively and transparently. Some interviewees also mentioned the

opportunities arising from the use of forecasting systems to effectively plan and respond notably to climate-related shocks. Moreover, they proposed using real-time messaging systems for alerts on such emergencies, which could be synchronized with cash transfer notifications.

Bringing an element of technology into the whole mechanism gives a guarantee that beneficiaries are accurately identified, and the frequency and amount of support are transparent and reliable. (Humanitarian Exp. 1)

Leveraging the bulk messages platform to send messages on climate issues and mitigation strategies [...] can be done at the same time as beneficiaries receive messages about their transfers. But this requires collaboration with the training department. (SP Exp. 6)

In the disaster aspect, in order to conduct intervention, there should be indicators like those in meteorological data. In Tanzania, we have those that the TMA [Tanzania Meteorological Authority] conduct [...] these systems help us anticipate and prepare for natural disasters [...] for health disasters, we can do interventions like protection for people who are on the borders of an epidemic that occurred in a neighbouring country; or it can happen that it occurs in Tanzania but through these systems they can do early interventions before it spreads to a wide area (Disaster Manag. Exp. 2)

Furthermore, as the citations below highlight, better institutional coordination among government agencies and between national and local authorities was deemed important for strengthening the shock responsiveness of existing SP measures and humanitarian responses. Strengthened communication lines between levels of governance and adequate resources for local-level implementation can significantly improve crisis response. It was also stressed that international humanitarian agencies and NGOs should be included in national coordination efforts.

There needs to be proper planning at national and village levels, with preparation for shocks like epidemics, drought, and conflicts. Budgeting within different layers of government is a problem because there isn't enough capacity at the local level. (SP Exp. 2)

Strengthening this mechanism begins with improving the conversation and quality of engagement between the Prime Minister's Office and other stakeholders. (SP Exp. 5)

By involving both government and NGOs in a structured way, social protection could expand more effectively, ensuring that there is no duplication of efforts and that resources reach targeted people. (Senior SP researcher)

Leveraging public–private partnerships (PPPs) emerged as a key recommendation among interviewees both for enhancing emergency relief efforts and for advancing UHC. By fostering collaboration among international agencies, religious leaders, private sector actors, and government entities (among others), PPPs create platforms to share strategies, align goals, and pool resources effectively. For example, revenues from natural resources can be directed through PPPs to establish emergency funds or build health infrastructure, enabling rapid and coordinated responses during crises. These partnerships were also viewed as playing a critical role in supporting the implementation of UHC by combining the financial resources and innovation of the private sector with the regulatory capacity and reach of the government. This collaboration could help

subsidize premiums for underserved populations, such as women, children, and the elderly, ensuring broader access to care.

Finally, the data highlight the importance of increasing community awareness and education to enhance SP delivery, as this will empower individuals to engage with and benefit from available programmes. When people understand their rights and obligations, the benefits of SP, and how to access these services, they are more likely to participate in programmes and advocate for improvements. This is particularly vital in rural areas and informal sectors, as well as among women, whose lack of information often leads to missed opportunities for support. Educating these communities will encourage proactive engagement, which will not only increase programme reach but also enable communities to push for more inclusive policies that address the needs of vulnerable groups, ultimately strengthening the SP system. Moreover, awareness of response measures during crises is important to reduce and mitigate further impacts.

There is a need for education and awareness campaigns, especially in marketplaces. These markets are big and have many people; some leave their home as early as 4 a.m. and don't listen to the radio; they don't watch television. So they don't get most of the information [...] there is a need to design an education campaign to reach these target populations in the market [...] or create training tenants [community or peer educators or on-site trainers] who will be available in the markets [...] to educate others on ways to persuade people to join in schemes. (SP Exp. 7)

Disaster management education should reach every individual, family, and institution, enabling people to act independently in emergencies. Preparedness isn't just personal; if a disaster strikes a neighbour, they too must know how to respond. For example, with El Niño warnings from TMA, people should assess and prepare their homes proactively. Widespread disaster education empowers communities to minimize impacts collectively. (Disaster Manag. Exp. 1)

#### *Opportunities for policy reforms, re-configurations, and potential new instruments*

As mentioned above, several interviewees suggested the introduction of universalist SP schemes (e.g. UHC, social pensions) that can effectively expand overall population coverage and offer a platform for additional measures during crises. In addition to new schemes, interviewees agreed on the need to integrate humanitarian response mechanisms, such as cash transfers and livelihood support, directly into existing national SP systems to ensure that they are quickly activated during emergencies.

We are working with the government to develop national guidelines to integrate humanitarian cash transfers into the national social protection structures. (SP Exp. 2)

If we had a dedicated emergency fund within social protection, we could respond more effectively to disasters and temporarily expand our coverage for those impacted by events like droughts or floods. (SP Exp. 3)

In the same line of thinking, stakeholders emphasized the need to shift towards adaptive SP approaches and anticipatory planning that would allow systems to adjust and scale up in response to evolving risks and emergencies. One specific measure suggested was reconfiguration of the PSSN programme to make it more flexible in responding to crises: "The programme design should

change to allow beneficiaries to receive cash transfers even while doing public works, especially during shocks like COVID-19, to ensure they maintain consumption' (SP Exp. 3).

As stressed by the interviewee cited below, new ways of combining SP and disaster response measures, as well as technology and climate adaptation interventions, should be considered:

For social protection generally, it is necessary to give a person a foundation that they would not have if social protection was not there. But it is a bigger challenge for the government to ensure that at school, people are taught methods that help them develop in technology like improved seeds and irrigation. This is too much for social protection to do alone, but it has potential to be innovative and inform people about using channels like SMS during cash transfers. (SP Exp. 6)

Furthermore, interviewees suggested that reforming existing legal and policy frameworks to enable nimble reaction to crises is necessary to ensure that SP systems can be quickly adapted during humanitarian emergencies. The current legal frameworks were perceived to hinder the rapid disbursement of funds, leading to slow responses. Relatedly, one interviewee highlighted that, for a long time, there was no clear policy to guide and ground SP arrangements in Tanzania, and the recently approved SP policy has not been accompanied by a clear budget or medium-term expenditure framework, hindering its implementation.

Legal frameworks that hinder quick disbursement of funds or limit rapid response mechanisms need to be reformed to facilitate better coordination and faster action. (Humanitarian Exp. 1)

If we had stronger legal support, funds could be disbursed faster, and assistance would reach those affected by crises more efficiently. Legal reforms are essential to make this possible. (Health Exp. 3)

Finally, interviewees discuss climate insurance as a promising yet challenging means to protect vulnerable populations in Tanzania from climate-related events like droughts and floods. Climate insurance could serve as a critical safety net, especially for those in the agricultural sector, helping individuals recover from losses and avoid falling into poverty. However, significant challenges remain in terms of affordability and accessibility. High premiums and limited awareness restrict participation, particularly among low-income and rural populations. Some interviewees suggest that government support, through subsidies or targeted programmes, may be necessary to make climate insurance viable for those most at risk. This support could help lower premiums and increase accessibility, making climate insurance a practical tool for resilience against climate impacts.

[W]e also know insurance sometimes can be very challenging to people who are on a low income [...] We should look at how the products in place can help low-income people afford them from organizations or private institutions. (Disaster Manag. Exp. 2)

Climate insurance has strongly advocated for crop insurance, but success has been limited. The high risk involved scares people away from investing. (Health Exp. 2)

## 6 Discussion: strengthening social protection for humanitarian context in Tanzania

Social protection, as a policy practice, has traditionally revolved around universally experienced, ‘guaranteed’ life cycle contingencies. Today, climate effects, health epidemics, global economic shocks, and polycrises create new and continually evolving SP needs. The results of this study suggest that, while strong welfare service institutions and systems are paramount to ensure ongoing service delivery in such contexts, there is also a need to rethink SP through a new lens that accounts for these shocks, which are expected to increasingly affect our lives.

Literature on climate change and SP describes SP as a risk management strategy that can act as (i) an ex-ante, shock prevention mechanism (e.g. social insurance); (ii) an ex-post protection mechanism against disasters (e.g. cash transfers, public works, services); and (iii) a mechanism fostering adaptive capacity in the long term (e.g. livelihood strengthening and diversification) (Aleksandrova 2020; Davies et al. 2013; Kuriakose et al. 2013; Roberts and Pelling 2020; Ulrichs et al. 2019). Another common conceptual framework highlights the potential of SP to increase resilience by enhancing *preparation* for shocks (mitigating impacts, informing on adaptation), *coping* with shocks (minimizing immediate impacts), and *adaptation* (reducing vulnerability and exposure in the long term) (Bowen et al. 2020).

Given the increasing frequency and intensity of climate shocks and the concomitant impacts on human wellbeing, considering their implications for SP provision is particularly important. Whilst the potential to leverage synergies between SP and disaster response has been well conceptualized, it is important to consider practical steps for mainstreaming ‘climate’ into SP policies and programmes, and to integrate SP into national policy frameworks on climate change (Aleksandrova 2020). One key aspect of climate-responsive SP is *incorporating climate risk into policy-making around social protection*. This implies a greater use of population data, climate metrics and risk assessments, hydro-meteorological forecasting, early warning systems, forecast-based financing, and other existing tools to create policy approaches that effectively prepare for and address ongoing and future SP needs—a key policy recommendation furthered by stakeholders on the ground in Tanzania. However, such technological tools should not be used only to protect farmers and rural populations against climate risks, but also be deployed to develop new SP interventions for informal-sector workers in urban settings and those living in informal settlements.<sup>28</sup>

When SP needs vary by season, population group, geographical location, and other factors, tailored, flexible approaches to delivery are necessary. The findings of this study warrant an anticipatory, multi-stakeholder approach to policy planning, design, and implementation that builds bridges between actors operating in a narrower ‘humanitarian’ space and those leading cash transfer programmes and contributory schemes, as well as other actors furthering climate adaptation. Comparative advantages and the specific expertise of diverse actors can be leveraged for holistic, coordinated, and synergistic SP systems and interventions.

Table 4 provides an indicative (and non-exhaustive) list of relevant solutions and policy responses to SP needs and challenges related to the implementation and expansion of SP, as described by interviewees.

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<sup>28</sup> For emerging initiatives, see <https://www.undrr.org/node/79473>.

Table 4: Challenges and opportunities for social protection for humanitarian contexts in Mainland Tanzania

Issue category	Issue definition	System-level & technical solutions	Policy solutions (fine-tuning & reforms)
Social protection needs	Basic needs (food, water, shelter)	Data and forecasting to anticipate and plan for SP responses	Designing targeted SP 'packages' for vulnerable groups to address their specific needs during crises (including hygiene and sanitary materials for women and girls)
	Psychosocial needs		
	Financial protection for healthcare	Improving analysis of the drivers of vulnerability and the relationships between shocks and their impacts, and developing vulnerability mapping	Incorporating shock-responsive elements into the PSSN and NISS schemes
	Flexible cash provisions		
	School interventions		
	Strengthened housing infrastructure	Building a comprehensive social registry linked to national ID systems to improve the identification and targeting of vulnerable populations	Expanding the coverage of existing SP schemes among vulnerable groups
	Security		
	Gender equality	Prioritizing mobile money for cash transfers to strengthen access	
Implementation & expansion challenges	Resource limitations	Defining clear response parameters and triggers that activate SP responses to different types of shocks	Enacting legislation to support rapid disbursement of funds in emergencies
	Corruption & mismanagement of funds		
	Poor coordination	Establishment of a shock response planning and coordination unit within the PMO	Expanding overall access to SP within the informal economy: subsidized access to existing schemes, social pensions, new schemes, and provisions for the urban informal sector
	Data gaps		
	Low coverage of existing social protection schemes	Strengthened training and capacity building across sectors (health, social work, education)	Establishing a purpose-made fund
	Lack of political will		
	Limited public awareness		

## 7 Conclusion

The findings of this study underline the critical importance of adapting SP systems to address the complex and intersecting vulnerabilities arising from climate change, public health crises, economic shocks, and regional instability. While Tanzania has made commendable progress through initiatives such as the PSSN and nascent social insurance schemes for informal sector workers, these programmes remain limited in coverage, flexibility, and funding. The absence of shock-responsive components in current schemes leaves many vulnerable populations—particularly women, children, and informal workers—without adequate support during crises such as floods or public health emergencies.

Stakeholders in the qualitative analysis emphasized the urgent need for reforms to enable anticipatory and adaptive SP systems. Key recommendations include integrating humanitarian cash transfers into national frameworks, leveraging public–private partnerships, and introducing universal schemes like social pensions and health insurance to address systemic gaps. Targeted measures for vulnerable groups, especially women and girls, along with strengthened data systems, institutional capacity, and community engagement, were identified as essential for creating more inclusive and resilient frameworks.

In sum, Tanzania's social protection systems provide a critical foundation but require significant enhancements to meet the growing and diverse demands of a rapidly changing world. Strengthening coordination, fostering domestic fiscal space, and embedding shock-responsive

elements are not only imperative for building resilience but also essential for advancing the Sustainable Development Goals. These lessons from Tanzania highlight the broader global need for inclusive, adaptive, and anticipatory social protection systems capable of addressing humanitarian challenges effectively and equitably.

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## Appendix

Table A1: MoFP budget book estimates of public expenditure (billion TZS)

Sector / Sub-sector	Estimates 2022/23	Estimates 2023/24	Estimates 2024/25
Education	5.68	5.98	6.17
Basic Education	4.37	4.49	4.40
Education Administration	0.10	0.12	0.16
Higher Education	1.01	1.17	1.35
Science and Technology	0.07	0.06	0.07
Technical & Vocational Education and Training	0.15	0.14	0.20
Health	2.15	2.46	2.54
Curative Services	0.86	0.98	1.06
Dispensaries	0.10	0.09	0.06
District Hospitals	0.69	0.82	0.90
Health Administration	0.09	0.11	0.10
Health Centres	0.15	0.16	0.11
Preventive Services	0.26	0.31	0.31
General Public Services	16.8	11.79	13.24
Executive and Legislative Organs	3.81	4.19	5.07
External Affairs	0.21	0.25	0.24
Financial and Fiscal Affairs	3.69	3.19	2.35
Debt Service	9.09	4.16	5.58
Defence, Public Order, and Safety	4.21	4.69	5.49
Defence	2.71	2.99	3.32
Law Courts	0.29	0.41	0.47
Public Safety	1.21	1.29	1.70
Economic Development	9.06	9.47	10.29
Agriculture	1.22	1.47	1.94
Minerals	0.08	0.09	0.23
Energy	2.91	3.05	1.88
Works, Transport, and Communication	3.93	3.84	5.48
Natural Resources, Environment, and Tourism	0.62	0.65	0.34
Industry	0.10	0.11	0.11
Trade	0.18	0.24	0.27
Labour and Youth Skills Development (Job Creation)	0.03	0.02	0.03
Social Protection	2.24	2.38	2.65
Elderly, Children, and Disabilities	0.04	0.05	0.05
Pension Funds (including Social Security Benefits in Cash)	1.76	1.85	2.16
National Health Insurance Fund (NHIF)	0.45	0.45	0.45
Housing and Community Development	1.33	1.35	1.42
Community Development	0.46	0.37	0.32
Information, Sports and Culture	0.04	0.04	0.03
Lands, Housing, and Human Settlement	0.12	0.18	0.17
Water	0.77	0.64	0.64
<b>Total Sector</b>	<b>41.48</b>	<b>38.08</b>	<b>41.81</b>
Debt Service (Principal Repayment)	N/A	6.31	7.54
<b>Grand Total</b>	<b>N/A</b>	<b>44.39</b>	<b>49.35</b>

Source: authors' compilation using MoF budget books 2022–2025.