

# Institutional Framework of the Social Security System in Tanzania: Challenges, Reforms and Elderly Copping Strategies

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## Abstract

This paper examines the institutional framework of the social security system in Tanzania with special focus on the critical challenges facing the system and some reforms that have been undertaken. Coping strategies of old people with inadequate support from the social security system are also highlighted. Primary data were collected from 160 elderly in Morogoro Urban and Mvomero districts. The respondents were stratified into pensioners and non-pensioners and across gender. Primary data were complemented by interview of key informants and documentary reviews. The approach was basically qualitative analysis. It was found that the formal social security system in Tanzania comprises of five social security pension institutions; each of these traditionally covering a defined category of beneficiaries as per establishment piece of legislature. The system suffers fragmented legal and regulatory framework where schemes report to different ministries. To resolve this problem and enhance efficiency, a coordinating body, the Social Security Regulatory Authority (SSRA) has been established. Most of the products offered by the schemes are similar, albeit there are some variations. Complaints revolved around the inadequacy of benefits and delays in payments. The different strategies adopted by the elderly to cope with poor social security support are outlined. It is recommended that a special pension fund for all elderly (the Elderly Pension Fund- EPF) be established; monthly pension be transferred electronically via mobile phones in order to reduce transaction costs to the elderly; and in order to maintain the purchasing power of the pension beneficiaries an element of pension indexing be considered to accommodate inflationary pressure in the economy like in the case of pension benefits for senior government officials.

**Keywords:** Pension schemes, Elder vulnerability, Social security reform, Coping strategies

## 1. Introduction

All people throughout human history have faced uncertainties brought on by unemployment, illness, disability, death, and old age. Family members and relatives as always, felt some degree of responsibility to one another especially for aged. The traditional source of socioeconomic security were assets, labor, family and charity. As society advanced in social and economic complexity, it gave rise to urbanization as a result of the decline of traditional form of social security (Oppong, 2006). The modern social security system is said to have begun in Germany between 1883 and 1889 when a series social insurance scheme was introduced. For example the sickness insurance was introduced in 1883, employment injury in 1884 and old age insurance in 1889 (Bailey and Turner, 2002). For many European countries to use the resources and organization of the state to protect their people against many of economic hazards were obvious. A limited form of social security begun in a measure of implementing social insurance during the Great Depression of the 1930s, when the poverty rate among senior citizens exceeded 50 percent (Msalang, 1994)

In Africa modern social security was introduced during colonialism when the British Empire established social welfare in her colonies following enactment of "Colonial Development Act 1940. Upon accession of independence new government of most African countries continued the existing scheme which was introduced before independence, and modified them slightly in order to fit the demand of the new society. At the same time attempts were made to establish new additional schemes in order to cover a larger number of the population (MBA, 2007). Many countries in the world are experiencing rapid increases in the proportions of elderly people. This pattern is expected to continue over the next few decades, eventually affecting the entire world (Gavrilov and Heuveline, 2003). Population aging has many important socioeconomic and health consequences, including the decrease in the old-age income security. This is because, with old age, people lose the ability to earn steady income from formal and informal employments.

In a traditional life style both older and younger people shared responsibilities. Whereas older people were custodians of customs and traditions, advisers, mediators and child careers, younger people had the responsibility of providing basic needs, including food, shelter, clothing and protection (URT, 2003). With globalization, growth of towns and the movement of people from urban to rural areas in search for jobs and a better life, the formal relationships in the family and society in general have drastically changed with consequent weakening of the traditional elderly care systems. The movement of young people from rural to urban centers has left the majority of older people lonely and unprotected (URT, 2003).

Moreover, HIV/AIDS pandemic has taken away the lives of many young people. Thus, older people are increasingly called upon to care for themselves and for their orphaned grandchildren (Ice et al., 2008). Therefore,

pension coverage is seen as an important mechanism to protect older people from falling further into poverty, even when only limited coverage is provided. Evidence shows that social pensions are used to help support the family, including purchases of food, essential services and access to health care, as well as education for grandchildren, which represent an investment in the younger generation. Social pensions also improve the quality of care of vulnerable children, especially in countries severely affected by HIV/AIDS (ILO, 2011). The International Labor Organization (ILO) also estimates that 80% of the global population is currently not adequately covered by formal social security provisions, the greatest portion of this being in developing countries.

The provision of a basic old-age pension is feasible, even in low-income countries as exemplified by Mauritius which introduced such pensions in a developing country several decades ago (Willmore, 2003). The Mauritius case not only demonstrates that sustainable policies can be put into place, but also illustrates how they could be continuously adjusted so that all segments of the population – young and old – enjoy a degree of income security, access to health care, and access to education and social justice. The spread of basic universal old-age pensions in a number of low-income countries in Africa and Latin America is also viewed as a practical solution to old age income poverty (Willmore, 2003).

According to the Aging Policy of 2003 in Tanzania, older people are among the poorest in the society (URT, 2003). Various groups of the elderly, such as peasants, herdsmen and fishermen do not belong to any formal social security system. Coverage by old-age pension schemes in Tanzania is concentrating on formal sector employees, mainly in the civil service and large enterprises. Retired older people who are members of the Social Security Schemes face problems resulting from inadequate benefits and bureaucratic bottlenecks. Furthermore, the existing poverty reduction strategies do not include older people (URT, 2003).

### ***1.1 Objective the study***

This paper is set to assess the institutional framework of the social security system in Tanzania and coping strategies among the elderly in the study area. Specifically the paper reviews the regulatory and operational aspects of the pension schemes, examines challenges facing the system, the reforms that have been undertaken and coping strategies for the elderly.

## **2. Research Methodology**

This was a cross-sectional research design in which data were collected from 160 elderly people aged 60 years and above in Morogoro Urban and Mvomero districts. Multistage sampling technique was used in the sampling process (Shah et al., 2017; Shah et al., 2018). The districts were selected purposively based on the concentration of economic activities taking rural and urban aspects. From each district two wards were randomly selected, and from each ward one village or street was chosen randomly for the study. For each village or street, the sampling frame was narrowed down to households headed by the elderly. These were households in which the elderly were the breadwinners with or without prime age adults living in the households. Street registers were used in the selection process. Respondents were stratified into men and women in order to capture the gender dimension. Stratification was also along pensioners and non-pensioners. Information collection technique included structured questionnaire, focus group discussions (FGDs) and personal interviews with key informants together with personal observations, and review of various publications. Analytical approach was basically a qualitative analysis as suggested by Becker and Havriluk (2006).

## **3. Results and Discussion:**

### ***3.1 Institutional Framework in the Pension System in Tanzania***

The security system in Tanzania can conceptually be divided into two groups, namely the formal social security pension institutions and informal or traditional protection system. Discussion with key stakeholders (including social welfare officers and management of social security Funds) and review of publications revealed that the formal social security system in Tanzania Mainland comprises of five social security pension institutions. Each of these schemes traditionally covers a defined category of people or sector, and each scheme was established by a different legislation. The schemes include the National Social Security Fund (NSSF), which covers mainly the private sector and some employees who are not covered by other schemes. The Parastatal Pension Fund (PPF) covers employees of parastatal organizations while the Local Authorities Provident Fund (LAPF) covers employees of Local Government Authorities. The Public Service Pensions Fund (PSPF) covers the Central Government employees, while the Government Employees Provident Fund (GEPF) covers non-pensionable employees in central government and the non-commissioned police and prison officers. These formal pension schemes, offer a wide range of conventional benefits such as old age pension, invalidity, survivors and withdrawal benefits. These benefits are not responsive to the social security needs of their respective members and particularly those who are vulnerable to social and economic insecurity in the informal Sector. Table 1 summarizes important features of the social security organizations in Tanzania. It could be deduced that

traditionally the existing pension schemes cover a small proportion of the population. That is, the majority of Tanzanians, which include the self employed and the informal sector employees remain without any form of social protection.

### ***3.2 Distribution of pensioners and non-pensioners in the sample***

Results indicate that pensioners accounted for 38.8% of all the respondents, whereas the remaining 61.2% were non-pensioners. The analysis further indicated that the majority of the pensioners (16.9%) were covered under PPF, followed by PSPF (9.4%), NSSF (8.1) and LAPF (3.8%). No respondent was under GEPF. The presence of many pensioners under PPF is associated with socialism policies that were followed by the government between 1967 and 1985. During this period the state controlled major means of the economy, including manufacturing and services. As a result, many employees were working with parastatals. In Morogoro, for example, there were several such organizations such as MOPROCO, Morogoro Canvas Mill, Polyester, Mtibwa Sugar Estate, Kilombero Sugar Company, Tobacco processing plants, etc. Absence of pensioners under GEPF can be explained by three reasons:

- (i) The Fund is the oldest (established in 1942) thus, probably there are no living people retired under this scheme.
- (ii) The Act establishing the Fund was repealed in 2002 to create the Fund in its current state. Thus, not many people have retired since it was re-established, and
- (iii) The Fund pays retirement benefits in a lump sum with no monthly payment after an employee has retired.

In terms of gender and geographical distribution of pensioners, it was observed that there were only 4 women who received pension in the entire sample; two from Mvomero and two from Morogoro Urban. The number of pensioners was higher in Mvomero District (52.5%) than in Morogoro Urban (47.5%). It was also observed that the majority of those under NSSF were in urban areas than in rural areas. This is in line with the previous observation on socialism policies and historical background of the Fund. The National Social Security Fund was established to charter for employees in private companies. It is obvious that the chance of having such companies in urban was higher than in rural areas.

### ***3.3 Challenges Facing the Public Pension System in Tanzania***

Considerable challenges face Tanzanian public pension systems. According to the views of stakeholders who were interviewed one of the critical challenges relates to inherited institutional design and the resultant governance problems. There are clear indications of excessive state intervention or interference. The government often controls the composition and appointment of members of governing boards, as well as public pension funds administrations, the management of Funds and investment decisions. In the area of investment decisions, government has several times directed these Funds to invest in specific projects or companies. Fund managers also often tend to invest in assets which may not provide the best yield, such as real estate. In some public pension funds, however, direct government control has been put at arm's length by, for example, the adoption of legislation that contains investment guidelines, and the establishment of separate investment committees. Inability of members to use their savings as collateral for personal loans is another challenge raised against the Funds. Moreover, it was claimed that the institutions get engaged in risk concentration in which too much Funds' money is put in real estate and office accommodation. Fragmented legal and regulatory framework where different schemes report to different ministries was also reported. For example, PSPF, PPF, and GEPF are accountable to the Ministry of Finance whereas NSSF falls under the Ministry of Labor Employment and Youth Development. The Local Authorities Pensions Fund (LAPF) reports to the President's Office (Regional Administration Local Governments). Because of that decision-making on issues such as investment projects and policy changes go through several levels, including the parent ministry, the board of trustees of each fund, the CEO, and employees.

**Table 1: Profile of social security institutions in Tanzania**

Institution	Legislation	Parent Ministry	Category of employee s/ Sector covered <sup>1</sup>	Contributions rates	Qualifying period for old age benefits (Months)	Benefits offered								Maternity Benefit	Injury/Sickness
						Old age	Disability/Invalidity	Death / Funeral grant	Education	Gratuity	Survivors	Withdrawal	Emigration grant		
National Social Security Fund (NSSF)	Act of Parliament No. 28 of 1997 <sup>2</sup>	The Ministry of Labour Employment and Youth Development	Private companies	20% of the salary of which the employee contributes at most 10% while the employer contribute the balance	180	✓	✓	✓	×	✓	✓	✓	✓	✓	
Parastatal Pensions Fund (PPF)	Act of Parliament no. 14 of 1978	The Ministry of Finance and Economic Affairs (MoFEA)	Parastatal organizations	20% of employee's salary: 10% or 15% from employer and 10% or 5% from employee	120	✓	✓	✓	✓	✓	✓	×	×	×	
Local Authorities Pension Fund (LAPF)	LAPF Act No 9 of 2006 <sup>3</sup>	Prime Minister's Office Regional Administration and Local Governments (PMO-RALG)	Local Government Authorities	20% of employee's salary: 15% from employer and 5% from employee	180	✓	✓	✓	✓	×	✓	✓	✓	✓	
Public Service Pension Fund (PSPF)	Public Service Retirement Benefits Act No. 2 of 1999 <sup>4</sup>	The Ministry of Finance and Economic Affairs (MoFEA)	Central Government and its Executive Agencies whose employees are eligible for pension	20% of employees' salary: 5% from employee and 15% by employer	120	✓	✓	✓	×	✓	✓	✓	×	×	
Government employees Provident Fund (GEPF)	CAP 51 of 1942 <sup>5</sup>	The Ministry of Finance and Economic Affairs (MoFEA)	Government Employees who are not eligible for pension	25% of salary: 10% from employees and 15% from employers.	-	×	×	✓	×	✓	×	✓	×	×	

1 Traditionally  
 2 Replaced the defunct National Provident Fund (NPF)  
 3 Repealed the Local Authorities Provident Fund Act No 6 of 2000  
 4 Replaced the Pension Ordinance Cap 371 of 1954  
 5 Repeated 2002

**Source:** Extracted from a range of publications and reports availed by the respective institution

Service delivery is another area of concern for public pension schemes. Most of the complaints revolve around the inadequacy of benefits, delays in payments, lack of up to date information about the schemes and the amount of individual contributions made and estimated benefits. It is also lamented that contribution records are often incomplete and apparently not always computerized. On the positive side, the use of information technology and public awareness campaigns are contributing to improving social delivery. But none of these public pension schemes are implementing this vital marketing communication strategy to improve public awareness, and if it is done, it is of course in rare cases and not impacting no their target groups and to the public in general.

Furthermore, as of now, the rules and regulations of the social security funds make it difficult for workers to transfer their benefits to another fund in case the worker changes his/her job. It has also been noted that the pensions have different pension factors. Although all have the same contribution rate of 20%, they have different benefit packages as could be noted from Table 1.

Of serious concern is the fact that public pension funds in Tanzania, through limited coverage of those in the formal sector, contribute to social differentiation. Pension funds are therefore often seen as serving the interests of the working elite, and not reaching out those most in need of coverage. Yet it is clear that the general picture in Tanzania reveals an increase in the informal sector and in structural unemployment, while the formal sector is generally shrinking. At the same time a big number of members of the existing schemes are withdrawing their pension contributions while they are premature. Concentrating attention on beneficial reforms for that part of the pension fund system which covers a small part of the labor force at the expense of the informal sector and those who are unemployed, especially the elderly, is inherently unequal, as it directs government attention and other stakeholders away from a huge segment of the population with little social security coverage

### 3.4 Social Security Reforms in Tanzania

Discussion with key informants indicated that historic reforms in the social security system in Tanzania have been underway as manifested by transformation of the then National Provident Fund (NPF) into a comprehensive social insurance scheme that takes into consideration pensions in respect of old age, invalidity and survivorship but also maternity benefits. Likewise, the establishment of a compulsory health insurance scheme for civil servants and their families, and promotion of community and group based micro-insurance schemes are examples of reforms that have been going on in the social security system in Tanzania. Furthermore, the number of social security schemes increased since 1995 as a result of reforms. However, stakeholders felt that the reforms mentioned above were highly inadequate to address the challenges highlighted earlier on, thus the need to establish a regulatory body was conceived.

### 3.5 Establishment of the Social Security Regulatory Authority

Social Security Regulatory Authority (SSRA) was established by the Social Security (Regulatory Authority) Act, 2008, and came into effect in September 2011. The establishment of SSRA in effect plays an important role in regulating and supervising the provision of social security services in the country as an oversight organization of the parent ministries. The organization helps to supervise and regulate the functions of all social security schemes in the country. The authority has the role of ensuring that the Funds are sustainable, project interests increase coverage and reduce the burden to the government. The authority is expected to facilitate the extension of social security coverage to non-covered areas, including informal groups such as farmers, pastoralists and other rural-based populations that are currently neglected by the Funds. To operationalise the law, the authority has established a task force that draws its members from the Attorney General's Chamber, the Ministry of Finance, the Bank of Tanzania, experts on Social Security from the International Labor Organization (ILO) and the ministry of Labor, Employment and Youth Development to address key challenges ahead. The authority makes sure the schemes remain secure and sustainable, members' interests are protected, there is increased coverage and funds are invested according to rules or investment guidelines. This has created a conducive environment for institutionalizing universal pension in the country.

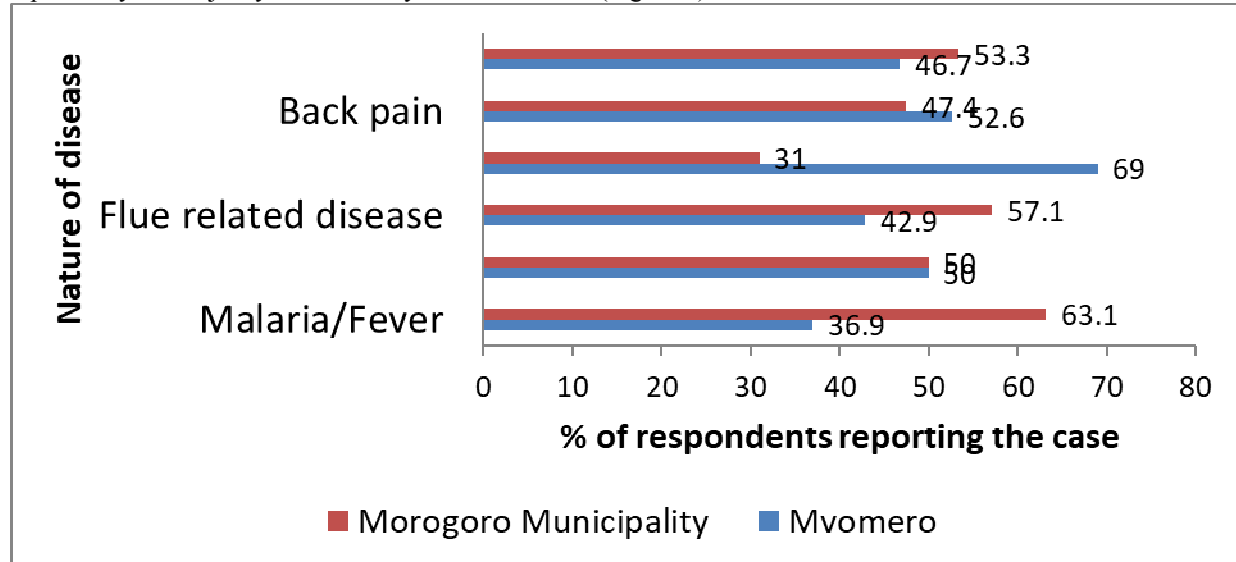
### 3.6 Informal Social Security Coping Strategies among the Elderly

Older people are often likely to be poorer, susceptible to chronic illness and disability and more likely to experience social exclusion, denial of basic rights, abuse and discrimination (Kang and Ridgway, 1996). In a situation where there is no reliable source of income because of lack of social pension, it is imperative to examine the different coping strategies among the elderly in the study area. This is preceded by examining common problems facing the elderly. Respondents were asked to rank problems they face in their old age. It was noted that the interviewed elderly do not face most of the problems cited in literature such as alienation, stigma, and lack of participation in social issues. None of the respondents mentioned any of these problems. The main problem that seems to inflict the elderly in the study area is diseases. One hundred twenty five respondents equivalent to 78.1% claimed to suffer frequently from various diseases (Table 2). Comparison was also made between the elderly who received pension and those who didn't in respect of whether the respondents had suffered from any illness during the previous 4 weeks before the survey was conducted. Analysis indicated that frequency of illness was higher in non-pensioners in both cases of men and women. For example, 75.0% of women receiving no pension reported to have fallen sick recently as compared to only 50.0% for those who received a pension. The situation was similar for men. These differences could partially be explained by lack of reliable income to access medical services as pensioners.

**Table 2: Incidences of illness between pensioners and non-pensioners**

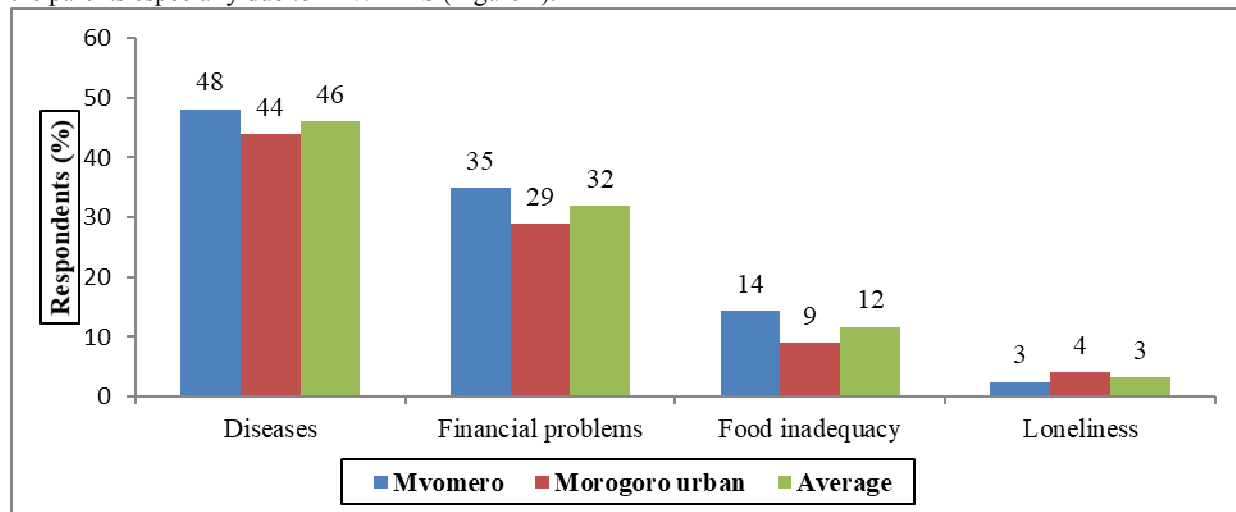
Gender	Whether the respondent suffered from any illness during the previous 4 weeks	Pension status		Total
		Pension recipients	Non-pension recipients	
Male	Yes	29	35	64
		50.0%	56.5%	53.3%
	No	29	27	56
		50.0%	43.5%	46.7%
Total		58	62	120
		100.0%	100.0%	100.0%
Female	Yes	2	27	29
		50.0%	75.0%	72.5%
	No	2	9	11
		50.0%	25.0%	27.5%
<b>Total</b>		<b>4</b>	<b>36</b>	<b>40</b>
		<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

The common diseases that the respondents had suffered from in the previous three months prior to this study included malaria/fever, flu, back pain and sight related problems that were reported by 100% of all the respondents. Other diseases included diarrhea reported by 88.9% and high blood pressure reported by 93.5% of the elderly. Comparative analysis of rural (Mvomero District) and urban (Morogoro Municipality) indicated that sight problems, flu and malaria were more prevalent in urban whereas back pain and high blood pressure were reported by the majority of the elderly in the rural area (Figure 1).



**Figure 1: Prevalence of diseases in urban and rural areas**

Different hypotheses could be put forward to explain some of these observations. High frequency of malaria cases in urban areas could be associated congestion of people which simplifies disease transmission. It could also be associated with by water logging problems due to the poor sewage collection system. High incidences of flue in urban areas might be related to air pollution as a result of gaseous emissions from cars and factories. Back pain for the rural elderly might be associated with backbreaking labor on farming activities. Conceivably, one expects that frequency of high blood pressure would be more prevalent in urban areas than in the rural areas because of feeding habits that involve oily meals as compared to their counterparts living in the rural areas. The higher cases of high blood pressure in the rural areas may be related to farming stresses, eating unhealthy food and lack of awareness of health hazards. Other problems experienced by the elderly who were interviewed included financial problems, food inadequacy, and the burden of having to care for grandchildren after death of the parents especially due to HIV/AIDS (Figure 2).



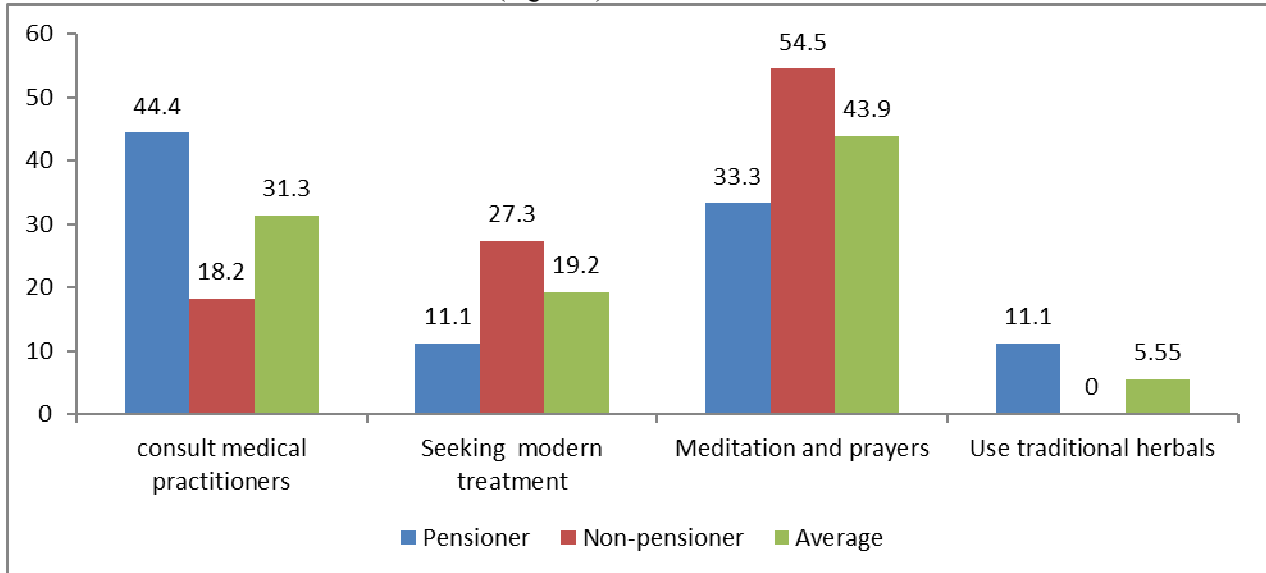
**Figure 2: Challenges faced in life as old persons**

### 3.7 Coping strategies for the elderly in the study area

Examination of coping strategies was made to establish how the elderly, especially those who do not receive pension survive. Respondents were asked how they coped with different challenges in everyday life. The preceding subsections present some of the responses.

### 3.7.1 Coping strategies with diseases

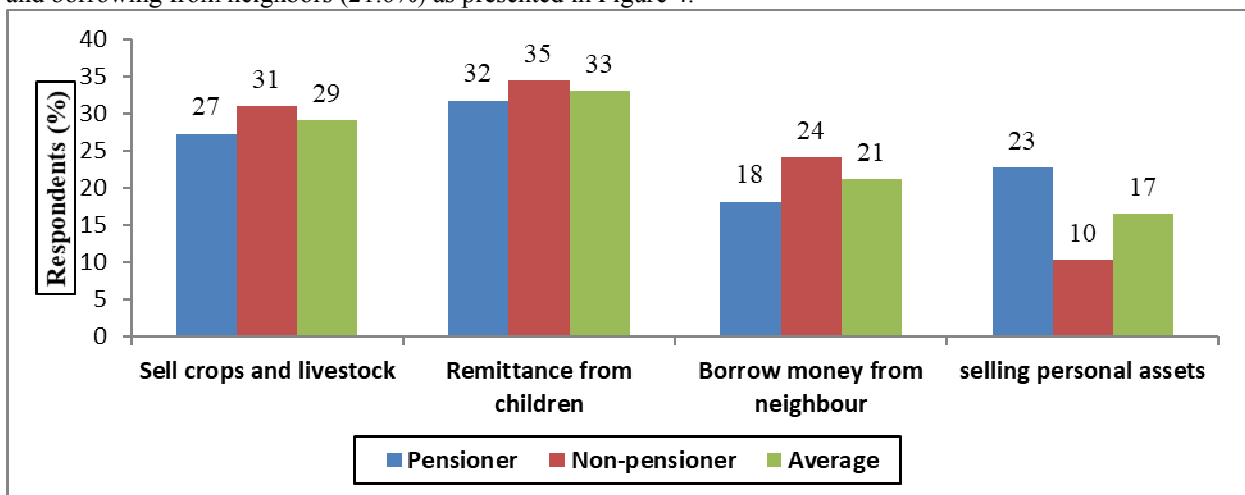
The majority (61.7%) of the elderly who mentioned diseases as the main challenge claimed to consult medical practitioners whenever they fell sick. Seeking modern treatment was followed by meditation and prayers (16.2%), use of traditional herbs (1.9%) and ‘do nothing’ (1.2%). The ‘consult medical practitioner’ response was almost equal to pensioners and non-pensioners at 60.7% and 62.3% respectively. The same applied to ‘meditation and prayers’ in which 32.1% for each category consulted medical doctors. However, the ‘use of traditional herbs’ response was the strategy used exclusively by non-pensioners. This might be a result of low level of education and low household income (Figure 3).



**Figure 3: Coping strategies with diseases**

### 3.7.2 Coping with financial problems

A number of strategies are adopted to cope with financial problems among the elderly who were interviewed. The leading strategy was observed to be remittances from children and relatives that accounted for 33.3%. Analysis indicated that for the study period (2010/11), remittances amounted to TSh. 39,238,000 to 62.7%, equivalent to TZS. 24,618,000 accounted for by non-pensioners. This is an indication that the majority of non-pensioners depended on remittances. Remittance was followed by selling crop products and livestock (29.4%) and borrowing from neighbors (21.6%) as presented in Figure 4.



**Figure 4: Coping with financial problems**

It could be noted that remittances were more prevalent in non-pensioners than in pensioners by 34.5% and 31.8% respectively. This difference was expected because of lack of pension. The same reason could explain the predominance of borrowing money from neighbors and selling crops and livestock to non-pensioners than for pensioners.

### 3.7.3 Coping strategies with food inadequacy

Like in the case of coping with financial problems, the majority of the elderly (45.0%) dealt with food shortage by depending on support for children and neighbors. Eating one meal a day accounted 30.0%, and begging food

from good Samaritans ranked third (20.0%). However, there was clear variation among pensioners and non-pensioners (Figure 4).

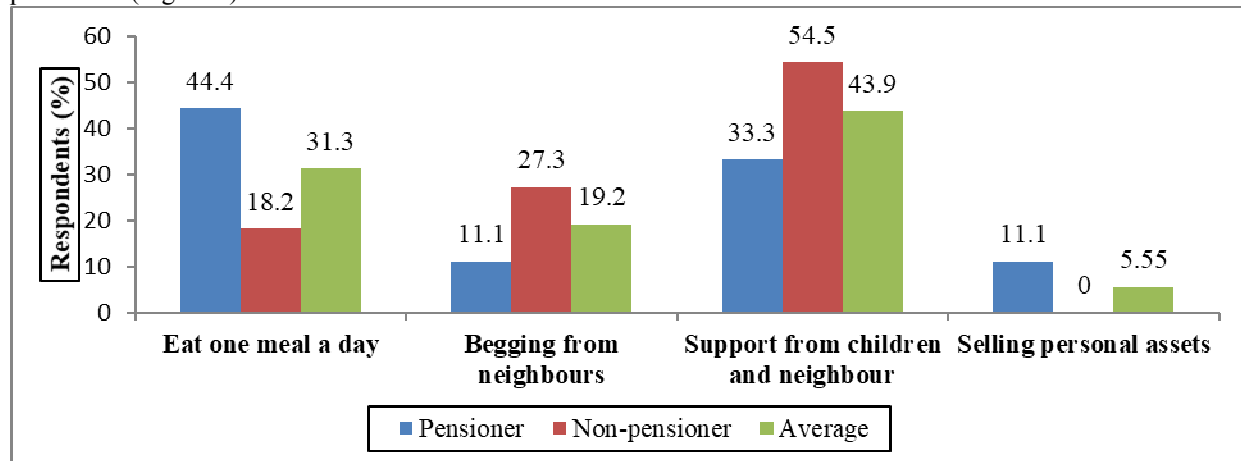


Figure 4: Coping strategy with food inadequacy

### 3.7.4 Coping Strategy with Loneliness

Thirty five percent (35%) of the elderly mentioned loneliness as their biggest problem. In the study area the problem of living alone occurs more in women (65%) than men because women in most cases they live longer than men and men who are widowed do remarry. As reported by Kibuga & Dianga, (2000), remarrying is less common in elderly women than men. These observations are supported by Oponng (2006) who observed that loneliness increases elderly vulnerability. Coping strategies with loneliness among elderly included joint family members (30.5%), involvement in politics (42.7%), remarrying (18.2%) and involvement in religious activities (8.9%) (Figure 5).

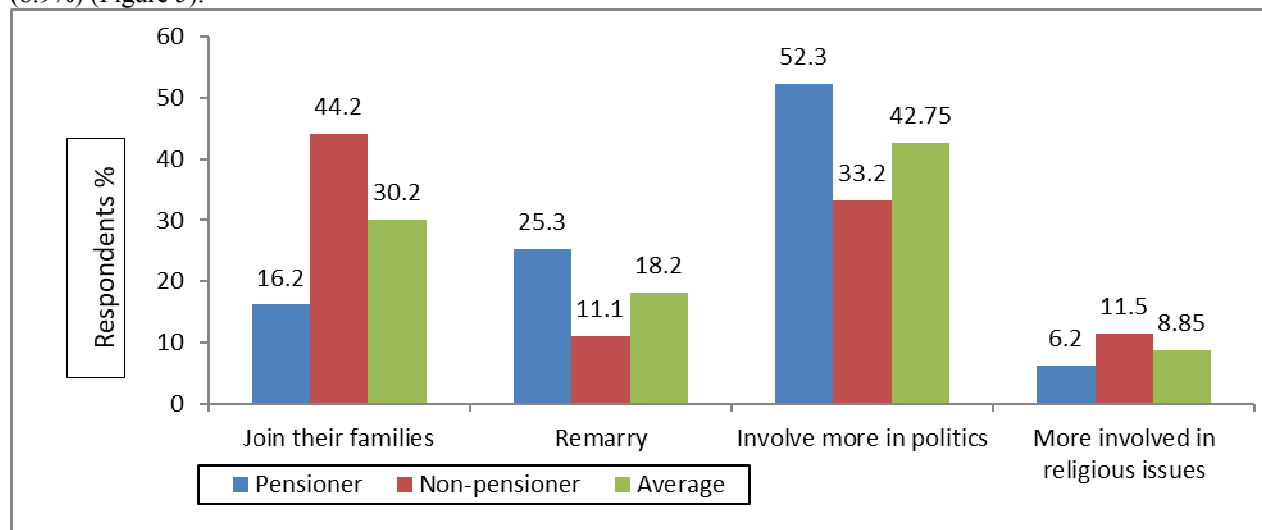


Figure 5: Coping strategy with loneliness

## 4. Conclusions and Recommendations

The study concludes that Tanzania is now at an optimal juncture to design and implement a long-term, sustainable system of social protection for the elderly, before the aging issue becomes a crisis and when the size of the elderly population and the current financial cost of the reforms are relatively small. It has been revealed that generally the livelihood of pensioners was better than non-pensioners. Provision of social pension should go hand in hand with improving the current pension system by resolving the constraints and challenges in the existing system such as high transaction costs in collecting monthly payments. This paper recommends the following:

- Social security reforms underway should introduce a basic social protection package consisting of mechanism providing affordable access to basic minimum income support for disadvantaged groups of citizens such as the elderly. It is thus recommended that a special pension Fund be established to provide social pension for all the elderly in Tanzania. The new pension Fund could be named the “Elderly Pension Fund (EPF)”.
- Collection of pension dues is associated with high transaction costs as the elderly have to travel to the



district or zone headquarters to collect a pension. In this way they spend money on transport and meals while away from home. It is thus recommended that arrangement be made by mobile phone companies so that the elderly receive monthly dues by electronic money transfer via mobile phones.

- Usually the amount of pension paid to the retired elderly in Tanzania remains fixed for the remaining time of their lives. This implies that the effect of inflation is not considered. As a result, the purchasing power of the elderly gets eroded over time. It is recommended that policy reforms should include an element of pension indexing in which pension benefits would increase each new financial year to take into account increases in the Consumer Price Index (CPI) as in the case of pension benefits for senior government officials.

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