APPENDICES

Appendix 1

Improving Access to community Water Supply Tambukareli Sub Community – Geita District

Survey Instrument

A: Biodata

	1.	4	Sex		
		((a) Male	()
		((b) Female	()
	2.	M	farital status		
		(a)) Single	()
		(b)	Married	()
	(c) Widowed		Widowed	()
		(d)	Separated	()
		(e)	Other	()
		(f)	Other (specify)		
2.		Lev	el of education		
		(a)	Non formal education	()
		(b)	Madrasa	()
		(c)	Adult Literacy	()
		(d)	Primary Education	()
		(e)	Secondary	()

	(f) High learning	()						
3.	Status in the family								
	(a) Head of the family	()						
	(b) Member of the family	()						
В.	Accessibility of Water Supply								
1.	Where do you get water for household const	Where do you get water for household consumption?							
	(a) Public Shallow well	()						
	(b) Private shallow well	()						
	(c) Taped water	()						
	(d) Borehole with hand pump	()						
	(e) Private taped water	()						
	(f) Ponds	()						
2.	How long does it take to reach the water sou	ırce?							
	(a) Below 15 minutes	()						
	(b) 15 minutes	()						
	(c) 30 minutes	()						
	(d) 1 hour	()						
	(e) Above 1 hour	()						
3.	How long does it take: going, collecting wat	er and bac	k home	;					
	(a) Below 15	()						
	(b) 15 minutes	()						
	(c) 30 minutes	()						
	(d) 1 hour	()						
	(e) Above 1 hour	()						

4.			ong does water source provide water through Below 2 months	h out	t the year?
		(b)	In 6 months	()
		(c)	In 9 months	()
		(d)	Throughout the year	()
		(e)	Other (mention)	()
5.		How n	nuch does it cost per bucket of water?		
		(a) 10	shillings	()
		(b) 20	shillings	()
		(c) Oth	ner (mention)	()
6.		What a	are the uses of water in your family?		
		(a)	Selling	()
		(a)	Domestic (bathing, washing cooking etc)	()
		(b)	Gardening and farming	()
		(c)	Making bricks	()
		(d)	Other (mention)		
	7.	(a)	Are you satisfied with quality of water obta	ined	at your
		So	urce?		
		(a)	Yes	()
		(b)	No	()
8.		Do you	a think availability of water is sufficient to y	ou?	Yes/No
		(b)	Yes	()
		(c)	No	()

9.	If water is not sufficient what is the current effect at household level and					
	com	munity?				
	(a)	Increased water borne diseases	()		
	(b)	Lost of time in collecting water	()		
	(c)	Increased poverty	()		
	(d)	Other – specify	()		
C:		w to have sufficient water suppose aware of any efforts in place to have so		water supply	in your	
	com	munity?				
	(a) Y	'es	()		
	(b) N	No	()		
2.	Wha	t do you think would be a solution to adeq	uate wat	er supply?		
	(a)	More shallow well	()		
	(b)	More boreholes with hand pumps	()		
	(c)	Piped Water	()		
3.	Why	do you think that the mentioned solution i	s better	?		
	(a) D	Pistance will be reduced	()		
	(b) T	ime for collection water will be short	()		
	(c) D	Diseases will be reduced	()		
	(d) I	like this type or technology	()		
	(e) O	Other specify				

4.	Do you think other members of the community will agree and participate in your					
	suggested option?					
	(a) Yes	()			
	(b) No	()			
	If yes or no why					
D: S	Sustainability of Water Supply Project					
1.	What do you think will make this project sust	tainable?				
	(a) Good management & Leadership	()			
	(b) Kind contributions from members	()			
	(c) Cash contributions from members	()			
	(d) Regular maintenance of the system	()			
	(f) All above	()			
2.	What would be your (as individual or househ	old) contr	ibution in	the project?		
	(a) Contribution in Kind	()			
	(b) Contribution in cash	()			
	(c) Contribution in both cash and kind	()			
	(d) Other –specify					
3.	Do you think other members of the communi	ty will con	ntribute ir	the project?		
	(a) Yes	()			
	(b) No	()			
	If yes or no –why					

4.	Do you think leaders and community members have enough capacity to manage				
	water supply project.				
	(a) Yes	()		
	(b) No	()		
	If yes or no –why				
5.	What kind of the support do you think you need for sustainable water project?				
	(a) Financial Support	()		
	(b) Technical support	()		
	(c) Management Support	()		
	(d) All above	()		
	(e) Other specify				

Appendix 2

PROJECT PROPOSAL

IMPROVING COMMUNITY WATER SUPPLY IN TAMBUKARELI SUB COMMUNITY

GEITA TOWN



Submitted to: Plan International P.O. Box 448 Geita

Submitted by: Tambukareli Water Users Group C/o Ihayabuyaga Village Geita

May 2006

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1.0 Background

1.2 Community Profile

The proposed project area is located in sub urban area within the Tambukareli sub community, Ihayabuyaga Village, Kalangalala in Geita district. The community borders with Mkoani sub Community to the North, 14 Kambarage sub community in the south, Moringe sub community in the East & south and in the west it borders with Nyanza sub community. Administratively the community is under leadership of the chairperson who is selected politically by the members of the community. Sub community leadership (Mwenyekiti wa Kitongoji) has few members who form community leadership team. Sub community chairperson is a government title. According to 2002 population and housing census, the community had a total 725 households with a population of 1,783 out of which 926 are females and 856 are males. The district average annual population growth rate including Tambukareli is 3.4%. Children under 18 years as per 2002 Population and Housing Census results were 392,675 of which is equivalent to 55.4%.

There is a mixture of people from all over the country and thus, beliefs, customs, behaviors are also mixed that will have positive and negative impacts of the project. There is also difference in economic status of the communities; some of the community members are well off but the majority are living in a low living standard because most the of people depend on petty business as well as agricultural production

Major occupation of the Tambukareli residents includes agriculture and petty business. Other members of the community are workers who are employed in Geita Gold Mine as well as government offices. The Geita District per capita income including the Tambukareli as calculated in 2004 amounts to 152,000/=. Per annum.

There are no education and health institutions within the community. However, those services are obtained in the neighbor Schools and district hospital located few kilometers from the community. The majority of the population in Tambukareli sub community depends on local shallow wells for their water needs. Walking for fetching water becomes longer and at this time, pollution of water sources increases dramatically and communities come to great risk of water borne diseases.

2.0 Needs Assessment

In preparation of Community Development Plans (CDP) in 2002, which was facilitated by district Community Development Department in Collaboration with **Plan Tanzania**, the need for clean and safe water closer to user home carried high rank and it was priority number one. The identification and planning process of the needs involved development of different groups within the community including children. The process involved group discussions i.e. women, men, youths, children and other groups e.g. disabled. The results from the groups were shared with all community members in the public meeting. Group members and community in general were supposed to list, prioritize and suggest and agree to solutions to various social economic problems that the community of Tambukareli is facing. Plans showed that, provision of potable water should be their first activity (*see appendices*)

The need assessment process went through the structured discussion with community members and their leaders, interview with district officials from related department e.g. Water, Health and Community Development.

Some literatures from the Internet, books and reports were also reviewed as regard to water supply with its effects to the people's health and economic well being.

Interviews were done to district health officer and in charge of the Tambukareli communities who provided some current data on prevalence of common diseases affecting communities and its sources in order to verify the priority of the community. The district water engineer was also consulted and he was the one who gave the water supply situation in the Geita town including Tambukareli community. The community Development Department staff is the one who give the support to the group in collection of water tariffs from the well and general organization of the group.

In the community, the process started with random individual and different groups interview to get the general feeling of the problem in the community. Thereafter, a structured discussion was done with Water Users Group leaders in order to analyze the situation. The group went through in defining what the problem was and what do they thought were the prevailing problems that community would like to solve.

A public meeting was organized and attended by most of the members of the community. During the general community meeting, community members confirmed that the number one problem in the community is inadequate access to water supply in their community and there is a need to organize themselves with a support from other stakeholders to use the available water source to distribute water within the communities.

According to district water department, Tambukareli community like many other communities in the district is facing acute shortage of water for both domestic and economic activities. The baseline survey done by **Plan Tanzania** in May 2003 in Kalangalala Ward including Tambukareli community revealed that only 11 % of populations have access to water supply

all year round. The district health department reports also showed that diarrhea diseases continue to cause deaths in all age groups, 8.6% of out patient's disease cases are due to diarrhea and cause for 6% of childhood deaths. ¹⁸ So, communicable diseases continue to claim children's lives due to the use of contaminated water sources.

3.0 Problem Statement

Only 11% of the population in Kalangalala Ward including Tambukareli community members has access to clean and safe water¹⁹. The burden of traveling long distances in search of water falls on women and children, spending an average of 2-5 hours a day in most of the project area²⁰. In communities especially women spend more time in fetching water instead of economic activities and thus, increase prevalence of poverty among the families.

The majority of the population of Tambukareli community depends on local shallow wells, for their water needs. Many of these sources are seasonal going dry during the dry season; towards the end of the dry season water reserves are at their lowest or non-existent. Walking for fetching water becomes longer and at this time, pollution of water sources increases dramatically and communities come to great risk of water borne diseases.

There is high prevalence of communicable diseases especially in children. Children state that they drink dirty water from the unimproved wells around the community, which increases the risk of contracting diarrhea diseases. Diarrhea diseases continue to cause deaths in all age groups, 8.6% of out patient's disease cases are due to diarrhea and

¹⁹ Plan International Tanzania, Baseline survey (May 2003)

¹⁸ Geita District Health Report 2004

²⁰ Based on community assessment Discussions

cause for 6% of childhood deaths.²¹ So, communicable diseases continue to claim children's lives due to the use of contaminated water sources.

3.1 Target Community

The expected beneficiaries of this project are Tambukareli Sub Community Members and other neighboring sub communities of Ujamaa and Mkoani sub communities. Under the leadership of the Water User Group, there will be full community participation in the implementation of the project. The nature of the project needs some technical know how during the construction. A contractor will be hired to supervise the construction work and provide technical skills to the communities. Communities are expected to participate in digging the stretches for pipes fixing, collect available local materials needed such as stones, and sand for construction of delivery points (DPs) within the community settlements.

Through the management of water user group, members of the group will be trained in the water resources and management of the system. The objective here is to build capacity of the community to manage and run the system properly. Communities will be trained specifically in operation and maintenance of the system, tariffs collection skills, simple financial book keeping and management, environmental protection as well as sanitation and hygiene issues.

3.2 Stakeholders

The implementation of this project will involve different stakeholders:

• Communities are stakeholders' number one of this project. The role of the communities as described will be implementation of the project through contribution of the resources available such as funds for payment of the local technicians and local

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²¹ Geita District Health Report 2004

available materials. Communities will also participate in monitoring, evaluation and management of the project. This will result into smooth implementation of the project, sustainability and improving health and economic well being of the community.

- Community leaders are the very important stakeholders as the ones who will coordinate between the community and other stakeholders. Their major role will be mobilization and organization of the project activities as well as leading the whole process of the project.
- The district water engineer will provide technical support in water supply related issues to the communities, especially in designing, planning, implementation as well as monitoring and evaluation of the project activities
- The community development officer will Provide technical support in community mobilization, training of the leaders, organization and project planning, implementation, monitoring and evaluation of the project
- The health officer will provide technical support in community mobilization, train especially health related issues during the project implementation
- Plan International, Geita District Council and *CopCot* are expected to provide financial assistance and other organizational and technical skill in during the project implementation
- The Community Economic Development (CED) student is expected to provide technical support to the group in management and administration, design of the project, implementation, monitoring of and evaluation of work done.

3.4 Project Goals

The social economic condition of the members of the Tambukareli sub community is victimized due to inadequate sustainable water supply within the community.

It means that project is intending to improve this desired condition in order to improve both health and economic status of the communities. Thus, the major goal of the project is:

• To contribute to the improvement of health and living standard of the communities.

The communities defined the projects goals as a means and dreams that are expected to achieve after the end of the project. This is geared to improve the welfare and economic status of the Tambukareli communities. The project is likely to achieve the expected goals due to its design and nature of the project itself. The community initiated the project themselves and other stakeholders have shown interest to support. There are skilled personnel who will conduct training to the communities on project management. However, this will not be a new project to them. Before that, the CBO has been managing the available water source through collection of water tariffs and maintaining all major and minor repair and services. Thus the project fits well in with the mission of the organization.

3.5 Project objectives

In order for Tambukareli sub community members to have sustainable water supply closer to their homes as well as improve their living standards, the project need to meet the following major objectives:

- Increase the accessibility of water supply to the families of Tambukareli sub Community by January 2007.
- Build capacity of the community in management of the water supply by January
 2007

During the implementation, the project is aimed to have water schemes with at least 5 public distribution water points and individuals connecting water to their homes by January 2007.

3.6 Host Organization(s)

Tambukareli Water User's group will host this project. The major components that the group will facilitate during the project implementation including; organization of the project activities, mobilization of the human resources (communities) and materials for construction work and training of key personnel's who will work in the project.

There will be other organization and institutions, which are expected to participate in the project. These include Plan International, an NGO expected to fund the project, District Council will also expect to fund the project and provide technical assistance through district water engineer's office as well as community development and health departments.

4.0 Project Implementation

4.1 Products & outputs

In order to meet the above stated objectives by the end of this project, two major activities are expected to be accomplished:

- Construction of the water supply scheme within the community of which there will be 5 public Distribution Points (DPs) and an average 80 families will be connected to their homes
- Capacity building; training of water user committee members on water management & water supply scheme management skills

Therefore, the major expected outputs at the end of this project is to have completed and functional water scheme as well as effective and efficiently scheme management team

4.2 Project planning.

The implementation of the project will be based on the following activities; conduct preparation meetings for the project; complete, project proposal and submit to the funding stakeholders; complete, group constitution and send for approval; construction of the scheme etc.

4.3 Project Activities

4.3.1 Construction of water scheme

The project is expected to take off in August 2006 and it will last for 4 months to be fully completed and functional. In undertaking construction activity, the project is expected to use the available designs/sketches of the project. The local contractor who will be hired will do construction work. The contractor will be responsible in construction of the system as well as advise all technical issues that may arise during the implementation. The district water engineer will be overall in charge of the activity supported by donor/partner (Plan) who will use its technical personnel to support implementation of the project. The community will participate in collection of all required materials especially all local available materials such sand and stones depending on the design of the project implementation and recommendations from the contractor and the project supervisors i.e. District Water Engineer and Plan Water Consultant.

4.3.2 Water Users Committee Training

Under capacity building, training will be done to Water Users Committee on Water resources and system management. Then training will impart various skills and knowledge to the members that will be beneficial for the project sustainability. This include; simple book keeping and accounting, Water tariffs collection, Project rules, operation and maintenance, system operations, legal and institutional framework. The team of people from Water; Health and Community Development Departments will facilitate this training.

The project will also expect both human and financial resources to be successful. Human resources required include the District Water Engineer, Water Consultants, Community Development workers and Health officers who will facilitate capacity building activities during the implementation. Financial resources are also important for implementations of the project. Funds will be used for purchasing required materials and payment to contractors and all skilled labour.

5.0 Monitoring and Evaluation

Monitoring and evaluation of the project will be based on the log frame and monitoring and evaluation framework developed (figure A). Monitoring and evaluation framework contains both qualitative and quantitative verifiable indicators and means of verification. It should also be summative and formative evaluation. Monthly activity report will be used to assess project progress. All parties, communities, children, district council and **Plan** will participate in the monitoring and evaluation of the project through counterpart personnel.

The community is the grassroots institution, which will monitor the day-to-day project activities through water management and health committees and participation of entire communities during the implementation. They will have the responsibility to see if the planned activities are implemented as planned.

The District Water Department is legally mandated authority to the community. Its role will be to monitor all project activities and provide technical and consultancy support to water management committee at community level in technical and social issues in relation to the project.

All procedures will involve experts from District Water Department. Also the district Community development Department will facilitate the training of committees at the community level in technical, project and general financial management aspects.

6.0 Project Sustainability

The project is established on the felt and priority needs of the community. The project has the full support from the district authorities and other stakeholders including Plan International an NGO that showed interest to support the project

The project aims to scale up coverage in access to safe water supply, supporting the national water policy based on a demand driven strategy that implies the involvement of the communities, through their respective Water User Associations, in the management and sustainable operations of water schemes. The project is committed at developing local skills and strengthening organizational capacities resulting in more effective organization project completion. After project completion, water tariffs will be collected from the members. Therefore water points will remain operational as water committee will have to do basic maintenance as well as funds for operation and maintenance.

7.0 COST ESTIMATION

PIPE ARRANGEMENTS

No	LINE	LENGH (m)	DIAMETER (mm)	TYPE				
	RISING MAIN							
1	B _h -ST ₂	352	62.5	GS				
2	B _h -TS ₁	123	75	GS				
3	C-ST ₃	828	40	GS				
		DISTRIBUTION	ON LINES					
4	ST ₂ -DP ₃	73	62.5	Polythene				
5	ST ₂ -DP ₁	242.5	87.5	Polythene				
6	DP ₁ -DP ₂	387	62.5	Polythene				
7	ST ₁ -DP ₄	17	62.5	Polythene				
8	ST ₁ -DP ₅	160	100	Polythene				
9	DP 5-DP6	198	75	Polythene				
· · · · · · · · · · · · · · · · · · ·	SMALL PIPES BEFORE STORAGE TANKS							
11	For ST ₂ and ST ₃	13.1	32.5	GS				
12	For ST ₃ and C	16.2	32.5	GS				

PROJECT COST ESTIMATION

No	PROJECT COMPONENT		COST	ESTIMATION	*	REMARKS
		QNTY	RATE	AMOUNT (TSH)	AMOUNT (USD)	
1	Excavation and Backfilling of trench	2510	1000	2,510,000	2,182.61	Conversion rate used for TSH to USD is
2	Supply and installation of pipes for Rising main					USD 1 =Tsh.1150
•	75mm Diameter GS Pipes	21	90,000	1,890,000	1,643.48	
	62.5mm Diameter GS Pipes	62	66,000	4,092,000	3,558.26	
	40mm Diameter GS Pipes	139	48,000	6,672,000	5,801.74	
	32mm Diameter GS Pipes	7	43,000	301,000	261.74	
	SUBTOTAL			12,955,000	11,265.22	
3	Supply and installation of pipes for Distribution lines					
	100mm Diameter, Class B UPVC Pipes	27	66,000	1,782,000	1,549.56	
	75mm Diameter, Class C UPVC Pipes	156	54,000	8,424,000	7,325.22	
	SUBTOTAL	· · · · · · · · · · · · · · · · · · ·		10,206,000	8,874.78	
4	Fittings	Item	2,500,000	2,500,000	2,173.91	
5	Supply and Installation of Electrical Submersible Pump	1	7,582,500	7,582,500	6,593.48	
6	Supply and Installation of Elevated Water tanks	3	6,958,600	20,875,800	18,152.87	
7	Construction of Pump House	1	3,048,600	3,048,600	2,650.96	
8	Concreting DPs Surface and Fencing	6	973,400	5,840,400	5,078.61	
9	Electrical Installation	Item	12,500,000	13,000,000	10,869.56	
10	Capacity Building	10 50	00,000	500,000	434.78	
	TOTAL ESTIMATED PROJECT (COST		78,518,300	68,276.79	

LOGICAL FRAMEWORK IMPROVING COMMUNITY WATER SUPPLY PROJECT-TAMBUKARELI SUB VILLAGE-GEITA

Interventions logic	Objectively Verifiable indicators	Means of Verification	Assumptions /Risks
Overall Objective			
Improve health status and living standards of Tambukareli communities	 Incidence of water and faucal borne diseases reduced Child mortality rate reduced 	 End of term evaluation report Health operation surveys 	There will be cooperation among the communities, staff and other district officials
Project Purpose			T
 To have sustainable access to water supply closer to the user homes 	 Increased number of inhabitants using clean and safe water Reduced incidence of hygiene related illness. 	 End of term evaluation report Health operation surveys 	There will be cooperation among the communities, staff and other district officials
Specific Objectives			
 Increase the accessibility of water supply to the families of Tambukareli sub Community by December 2006. Build capacity of the community in management of the water supply by December 2006 	 Number/percentage of families access to safe and clean water throughout the year Number of communities trained in water sources and management skills 	 Family surveys End of the project evaluation Training report End of the term evaluation 	Families will cooperate
Project Activities			
Construction of community water system	 Number of scheme completed Activities completed 	ObservationProgress reportsEvaluation report	Increase of price of materials against estimated price

Training to Water users Group on water sources and management skills • A five days non residential training	 Number of leaders trained Contents of the training 	 Training report End evaluation report 	Leaders will participate effectively in the training Trained communities function well and do not leave the community.
Means (inputs)		1	
 Personnel Project staff, Water consulting Engineer, Civil Consulting Engineer other program staff and trainers. Training equipment Stationeries 	 Number of staff involved in the project Availability of office stationeries 	 Final assessment report Physical check up Community leaders are well organized and they make follow up of activities implemented. 	 Communities and staff will play their part in the project Project staff and other partners will be committed to the project
• Finance Funds from the donor	Timely disbursement of the funds from the donor	 Effectively and efficiently implementation of the project Smooth execution of the project activities 	Donor will continue with funds disbursement

MONITORING AND EVALUATION FRAME WORK IMPROVING COMMUNITY WATER SUPPLY PROJECT-TAMBUKARELI SUB VILLAGE-GEITA

Narrative	M& E Objectives	M & E Indicators	Information to be collected	Methods for Information Collection
 Overall Objectives To improve health and living standard of the Tambukareli communities 	To assess the extent to which the health and living standards of the targeted communities has been improved	 Availability of water supply closer to the user homes. Incidences of water borne diseases 	 What is the rate of incidences of water borne diseases? What level of families incomes 	 Review of existing documents Semi structures interviews Observations
 Specific Objectives Increase the accessibility of water supply to the families of Tambukareli sub Community by December 2006. Build capacity of the community in management of the water supply scheme that will be constructed by December 2006 	 To assess the extent to which the families have access to clean and safe water To assess the extent to which communities have the capacity to manage their project. 	 The number of families with access to water supply closer to their homes The number of communities/leaders trained in project management The use of project management tools e.g. record book. Number of meetings conducted Issues Discussed and agreement made in the meetings 	 How many households with access to water supply? Is the water sufficient for human consumption? How are the leaders utilizing the knowledge given through training For how long does the community enjoy water per day/week or month What is the average distance and time used by the community to collect water 	 Focus group discussions Observations Water quality testing
Activities Construction of water scheme	To make sure that water scheme is effectively and efficiently constructed	Number of scheme activities completed	 What activities completed as planned Is there any problems observed during the implementation? Is the construction followed required standards? 	Semi structured interviewObservation
Conduct Water management training to water user's group committee.	To assess the progress and effectiveness of training activity	 Number of committee members trained Topics covered 	 Content of the training package Experience and qualifications of the trainers Facilitation skills of the trainers Participant's feelings on training relevance 	 Review Training reports Interview training participants

Appendix 3

Needs Assessment

The following is the summary of the issues identified by the communities and in its priority in October 20th, 2005

- 1. Inadequate and unreliable clean water is caused by few wells and drought. Also increase of population and poor planning of the same by the concerned authorities. Problem of water causes communities to use contaminated sources of water, which causes outbreak break of water borne diseases such as cholera and other abdominal illness.
- 2. Inadequate classrooms, teacher's houses and teaching materials is caused by absence of holistic school planning and meager income of the village's government. Present buildings and teaching materials do not cope with the increased enrollment of pupils particularly after abolition of the mandatory contributions in education by the Government. Schools have inadequate facilities, understaffed and this lead to poor standard of education provided.
- 3. Absence of pre-school is caused by inadequate classrooms in the primary schools and inadequate nursery school teachers. Because of absence of nursery schools pupils begins primary education without ability of to read, write and cannot even count. This is a bad beginning that takes too long to get corrected in mastery of the required primary education lessons.
- 4. Inadequate secondary schools affect the numbers of pupils who proceed with secondary education. Many do not get access to secondary school and therefore remain with primary education. This problem intensifies the level of poverty of the communities in the ward.
- 5. Inadequate primary schools and classrooms lead to overcrowding of the enrolled pupils in existing schools. This affects both the quantity and quality of education provided. Teachers fail to give quality lessons as a result. This also makes the schools not to become friendly to pupils and causes increase of drop out rates and failures in national examinations.
- 6. Lack of dispensary and health centers in the villages' affects the accessibility to quality primary health and reproductive health care and services. Mothers and children walk long distances to attend clinics.
- 7. Lack of dams for domestic animals affects the health of animals. Farmers use distant watering points and animals lose weight also time is wasted in the to and fro movements by farmers.
- 8. Lack of modern latrines leads community to get endemic diseases such as cholera. Thus community needs health officials to teach them the importance of having modern latrines.
- 9. Lack of cattle dip and crushes, it affects the provision of cattle vaccination and spraying accuracies to combat tick borne diseases to animals.
- 10. Lack of village government office is due to poverty, thus community does not have an office for official duties and also no facility for storing village documents.

- 11. Absence of conference centre affects the community gatherings for various development issues particularly during the rainy and sunny days.
- 12. Lack of entrepreneurship attitude and culture affects the initiation of income generating activities at household's levels. This intensifies the level of income poverty to the families.
- 13. Environmental degradation caused particularly by charcoal making, burning of bushes for agricultural purposes have affected the environment. Community needs to be educated on the better practices for conserving the environment.
- 14. Absence of playing grounds and sports facilities leads community especially youths to engage in unlawful acts such as drug abuse, unprotected sex. Robbery etc. Also sports assist in making the body and mind healthy.
- 15. HIV/AIDS pandemic affects the families and aggravates the poverty to the community; education on the pandemic is needed to make community cope with the problem.
- 16. Absence of traditional midwives and birth attendants in the community affects children and mothers particularly during birth. Many deaths of children and mothers could have been avoided.
- 17. Lack of agriculture inputs leads to low harvests and as the result there is no food security at household levels. Also it contributes to poor diet.
- 18. Problem of credit for gainful economic activities has lead to families not to initiate incomegenerating projects. As the result families have remained poor and dependants.
- 19. Unavailability of market places affects the families in getting fresh household requirements particularly food but also makes difficult exchange of goods and services to the communities. It also leads to the problem of families buying food items at a filthy environment as the food is placed on the floor.
- 20. Problem of electricity affects children who are in schools in doing homework's and self study; use of traditional lamps affects eyes of children. Also it makes preparation of food and use of modern facilities at households impossible. Women use long hours for preparation of meals and in collecting firewood, which leads to the clearance of the bushes and trees.
- 21. Absence of good roads makes difficult transportation of goods and people. It is also risky during emergency cases and above all it turns the township into slums making difficulty the provision of other social services.
- 22. Malaria disease kills many families both children and adults, low income of families contribute to the problem as they fail to buy the treated netts, also families lack knowledge of dealing with the problem by keeping their environment tidy.
- 23. Absence of bus stand is caused by poor planning by leaders and the town-planning department. Also community lacks skills to make their leaders accountable. Much time is wated by communities in getting to the bus terminals.
- 24. Absence of Plan offices in the villages makes communities to walk long distance to communicate with Plan office, which is in town.

25. Special groups and disadvantaged such as disabled, deafs and orphans require moral and material support and assistance. Lack of preferential treatment to them by the community discriminate them further..

2.2 Which group of people is most affected by each problem?

- 1. Youth at primary school age are more affected for not getting good primary school education
- 2. Children at pre-school age are most affected for missing foundation of good primary education.
- 3. School leavers are the most affected for they fail to join alternative career development in case they are not selected for further secondary school education.
- 4. Youths of primary school age are the most affected for missing primary education
- 5. Women are the most affected due to importance of water to the domestic uses.
- 6. Affects the whole community especially women and infants who need close care during pregnancy period and infant stage.
- 7. The community is affected especially farmers who do not get access to water for their livestock's and irrigation purposes.
- 8. Affects the whole community for unsanitary environment and outbreak of epidermis diseases e.g. cholera.
- 9. Affects the whole community because both the quality and quantity of the livestock by products that they get is poor and low.
- 10. Affects all community members as their leaders become unreliable and is difficult to maintain and keep the village official documents.
- 11. All members of the community are affected for not having the center whereby their development issues can be discussed.
- 12. All members of the community are affected but pupils are the most affected during the school opening when they require new uniforms.
- 13. The whole community is most hit as their living hardly depends on weather for cultivation of food and cash crops.
- 14. Community members are affected especially youth group.
- 15. All members in the community are affected due to an increase of death rate and orphans HIV/AIDS education is essential to the community.
- 16. Women and children are the most affected by inadequacy of the traditional birth attendants and midwives.

- 17. It affects the whole community as lack of agricultural inputs leads to low yields from the farms, which affects household food security.
- 18. The whole community is affected for limited access to finance for working capital.
- 19. Inadequate market points for exchange of the goods and services affect the whole community.
- 20. All members of the community are hit by environmental degradation caused by cutting of trees.
- 21. Inadequate roads and outlets in the streets and hamlets affect the communication and increase the costs for transport and transportation of produces.
- 22. Malaria affects the whole community but children are the most affected.
- 23. All members of the community are affected for walking a long distances to a bus stand.
- 24. Lack of Plan offices in the areas of the community makes difficult communication between the community and Plan particularly sponsorship issues..
- 25. The marginalized section of the community children, disabled and orphans are the most affected for they require assistance.

2.3 How have they been affected?

- 1. They are missing better and quality primary education
- 2. They are missing good foundation for standard one.
- 3. They are missing secondary education, which is important for their career development.
- 4. Teachers fail to provide quality primary education because of overcrowding in classes.
- 5. Water fetching sources is distant and it is risky for young girls who are sometimes raped. Women taking much of their time in fetching water instead of economic activities
- 6. Women and children are not getting close check up during the period of pregnancy and infancy.
- 7. Livestock's are contracting water borne diseases and quantity of milk produced is low.
- 8. Unsanitary manner in excreta contaminates the environment and causes epidemic diseases.
- 9. Skin diseases affect livestock's.
- 10. All community members are affected by lacking official working premises.
- 11. Community development, governmental and non-governmental issues don't have proper place to be discussed at.

- 12. Tailoring groups are affected, as it is part of their income generating activity.
- 13. Community is facing environmental destruction and drought stricken.
- 14. Community members especially youth are not having enough sport practices.
- 15. The community is affected by missing the working group; increase number of death rate and orphans.
- 16. Lack of close assistance during birth
- 17. Farmers get low yields, which is not proportional to their efforts.
- 18. Community fails to establish income-generating activities.
- 19. Much time is consumed for searching domestic needs at distant markets.
- 20. Community fails to utilize modern facilities, such as computers, electric cookers, and light for home use..
- 21. Food and cash crops transportation is hindered and leads to economic instability among community members.
- 22. Death rate among pregnant women and infants is increased.
- 23. Much time is wasted in accessing bus stops/terminals.
- 24. Communication between community and Plan becomes difficult.
- 25. They require special attention and preferential treatment; therefore the lack of assistance discriminates them further and affects them socially and economically.

2.4 Why are they most affected?

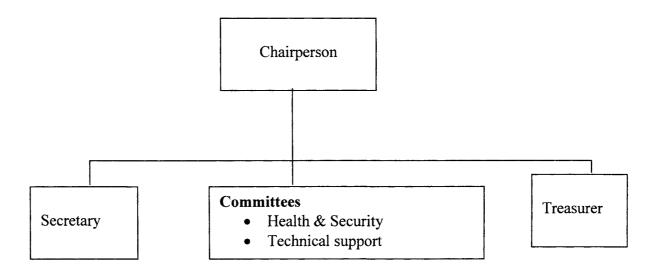
- 1. Youth are most affected because it is their constitutional right to receive right education
- 2. Children are most affected for missing good foundation for primary education.
- 3. Youth are most affected for missing secondary education.
- 4. Youth are most affected because it is a proper age group for primary education.
- 5. Women and children are most affected, as they are concerned with domestic and economic activities.

- 6. Women and children are most affected because they need close check up during pregnancy and infancy.
- 7. Farmers are most affected, as they need water for watering gardens and for animals.
- 8. The whole community is most affected due to unsanitary environment and several epidemic diseases.
- 9. Farmers are most affected due to several skin diseases to their livestock's.
- 10. The whole community is affected most because of poor leadership system.
- 11. The whole community is affected most due to lack of place for discussions of several community development issues.
- 12. Tailoring groups are most affected because of lack of facilities.
- 13. The whole community is affected most due to environmental destruction and drought.
- 14. Youth are most affected because their age is tempting and as the result they end up involving into unlawful acts..
- 15. All community members are affected by lack of HIV/AIDS awareness and its outcome.
- 16. Women and infants are most affected by lack of close care at the stage of birth giving and infancy.
- 17. Farmers are most affected due to insufficient yields in their plantations.
- 18. All community members are most affected due to lack of capital for their business.
- 19. Farmers are most affected as they lack outlets to sell their produces.
- 20. Women and children are most affected for lack of power for cooking and lighting.
- 21. All community members are affected for lack of communication and transportation.
- 22. Pregnant women and infants are most affected as they need close care at this stage.
- 23. All community members are most affected for long distance walk to bus stand.
- 24. All community members are most affected for long distance walk from Kalangalala ward to Plan office for official purposes.
- 25. Disabled are most affected as they highly need such assistance

Appendix 4

Tambukareli water user group

Organizational Chart



Appendix 5

Project Implementation Gant Chart

Objectives: 1. To increase access to clean and safe water to the community of Tambukareli sub community

2. To build capacity of the community in management of the water supply scheme

<u> </u>	Months 2006										Resources Needed	Responsible
Activities												
	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec		
Conduct preparations meeting with communities and leaders	1	V	V	1	1						Public address system Venue Stationeries	-Community development officer -Group leaders
Proceed with project proposal writing with the CBO	1	1									Computer Stationeries	CED student
Complete and submit project proposal to Plan International and District Council			7								Computer Stationeries	CED student Group leaders
Complete Group constitution and submit to authorities for registration		1									Computer Stationeries	Community Development officer CED student
Training of water committee on Water sources and Water schemes management					V						Venue Facilitator Stationeries &training materials	Comm.Dev.Officer Health Officer District Engineer
Advertise and hiring of the water schemes construction contractors/technicians				V							Stationeries Fund for advert	Group leaders Water Engineer
Construction of the scheme						٧	7	7	V	1	 Technicians/contractor Funds Construction materials 	Group leaders Water Engineer
Monitoring of the activities	1	V	1	V	1	1	7	V	1	1		Group leaders CED student
Evaluation of the project										1	Note books Computer	All stakeholders

APPENDIX 6

STAFF JOB DESCRIPTIONS

(1) Job Description - CED Student

Provide required technical assistance for the development of the CBO through:

- a) Support in the registration and organization of the CBO
- b) Support the CBO in organizing possible and required panning meetings for project implementation
- c) Support the CBO in preparation of work plans of the project
- d) Support the CBO in coordination and network with other stakeholders
- **e)** Support the CBO in organizing required training for the CBO and project management.

Responsibilities

- a) Facilitate in the process of preparation constitution and registration of the CBO
- b) Facilitated preparation of project work plan
- c) Facilitate preparation of the monitoring and evaluation tools of the project
- d) Facilitate project implementation as per work plan

- e) Facilitate documentation of the project implementation process including reporting
- f) Facilitate liaison between the CBO and other stakeholders

(2) Job Description –District Water Engineer

- a) Provide overall technical assistance to the project
- b) Facilitate organization of the construction work plan
- c) Ensure that all required materials for construction are in good quality and standard
- d) Ensure that contractors and other technical personnel have required skills and experience
- e) Ensure that construction work is within the required specifications
- f) Facilitate training of water committee training especially scheme attendants
- g) Link technically between the community, district council and other technical personnel's
- h) Participate in monitoring and evaluation of the project

(4) Job Description. Community Development Workers

- a) Organize planning and implementation meetings
- b) Prepare Organization constitution
- c) Mobilize communities to participate in the implementation of the project i.e. collection of the local materials, funds etc
- d) Conduct water users committee training on water sources and management
- e) Link between communities, leaders and the other stakeholders
- f) Facilitate design of the implementation strategy
- g) Facilitate writing of the project progress report
- h) Participate in the monitoring and evaluation of the project

(5) Job Description – Health Officer

- a) Facilitate health related training within the community
- b) Attend community planning and implementation meetings
- c) Conduct training on health related to water committee members
- d) Conduct training on health related to water committee members

- e) Provide health related advise o the community and other implementing partners in the project
- f) Participate in monitoring and evaluation of the project

(6) Job Description – Chairperson - Water Committee

- a) Overall in charge of the committee
- b) Lead and facilitate the committee meetings
- c) Mobilization of the committee members and the community towards the project
- d) Approve payment of the group
- e) Link between the committee, communities and other stakeholders of the project

(7) Job Description -Secretary to the water User Group Committee

- a) Prepare all agenda of meetings and members meetings
- b) Take notes of the meetings proceedings
- c) Prepare reports of the projects
- d) Facilitate communication between the committee, communities and other project stakeholders
- e) Keep project and committee documents/file.

PROJECT REPORT

Host organization: Tambukareli Water Users Group Location: Tambukareli Sub Community – Geita District

Project: Improving Access to Community Water Supply

Implementation Period: October 2005– January 2007

Author: Mr. Mbuniu B.A - CED Student - Intake 2005

Presentation Date: January 2007

Contents

- Abstract
- Needs Assessment
- Problem Identification
- Literature Review
- Research Methodology
- Findings
- Implementation
- Conclusion
- Recommendations

Abstract

- The main aim of this project was to construct water supply scheme for improving accessibility to water supply.
- With clean and safe water closer to their homes, communities will have assurance of reducing water borne diseases and improve economic status.
- So far, the project proposal has successfully completed and the donor, Plan International have managed to disburse funds amounting to Tshs. 70 million for the purpose of completing the project.

Needs Assessment

- During the Focus group, individuals and public meetings with group leaders and the communities, insufficient water supply services in the community was ranked as problem number one
- To get the insight of the identified issue (s), other stakeholders were consulted. i.e. district officials from related department e.g. Water, Health and Community Development
- <u>Desired condition</u>: Sufficient water supply throughout the year and closer to their homes for both domestic and economic purposes

Problem Identification

- It is only 11% of the population in Kalangalala Ward including Tambukareli community members has access to clean and safe water (Plan Int. baseline survey 2003)
- Women and children spend an average of 2-5 hours a day fetching water instead of economic activities and thus, increase prevalence of poverty among the families.

Problem Identification

- Youths and women are involved in brick making and gardening as one of their income generating projects. Thus, water is one of the major resource in this kind of business
- Diarrhea diseases continue to cause deaths in all age groups, 8.6% of out patient's disease cases are due to diarrhea and cause for 6% of childhood deaths. In general, water borne diseases are at 36% (CHMT Report 2005)

...Problem Identification

Project Goal:

 To improve health and living standards of the families of Tambukareli sub community.

Project Objectives

- To increase the accessibility of water supply to the families of Tambukareli sub community by January 2007
- To build capacity of the community in management of the water supply scheme. By January 2007

Literature Review

Theoretical literature

- Effect of unsafe and insufficient water supply to community economic development linked to MDGs
- e.g. Eradicate extreme poverty and hunger, Achieve Universal Primary Education, Promote gender equality and empower women; Reduce Child Mortality etc. Achievement of all 8 MDGs linked to availability to Water

Literature Review

Empirical Literature

- "Evidence of the impacts of water supply projects on people's social economic development.
- Examples of HESAWA programme in Lake Zone, WAMMA Dodoma, Rural Water Supply in Shinyanga, and Morogoro etc

Policy Review

Tanzania National Water Policy (2002);
 Water and the Tanzania 2025 Development
 Vision; (NSGRP – MKUKUTA), MDGs etc

Research Methodology

Objective of the Research

 The objective of the research was to determine the extent of insufficient water supply, its effects and how this problem can be solved

Research Questions

- What are the effects of insufficient water supply in Tambukareli sub community
- What are the actions to be taken to overcome the problem?
- What are the barriers of sustainable water management, and how can they be intervened.

..Research Methodology

Data Collection Methods

- In person interview
- Self-Administered Questionnaires
- Review of Secondary Data
- Observation
- In total, there were 20 questions asked All questions were divided into three main scales and each scale contained 6 –8 questions. Scales were based on the research questions.

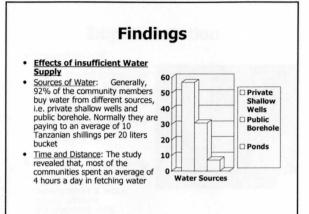
.....Research Methodology

Sample:

- Statistical method was used to determine sample size
- A sample size of 38 households, 5 district officials and 4 village leaders were used
- Simple random and purposive sampling methods applied

Data Analysis

- Analysis was conducted manually and by using computer
- SPSS software version 12.0 was the main tool used during the data analysis. Other tools used include word processing for analysis of qualitative data and spreadsheets for entering figures for simple statistics
- Descriptive Statistical analysis method was used. E.g. percentages, pie charts and bar charts.



....Findings

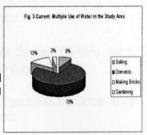
- · Water Quality:
- 71.1% of the respondents feels that water from shallow wells and ponds are not clean and safe while 28.9% feels that water from the boreholes are safe for human consumption

Prevalence of water borne Diseases

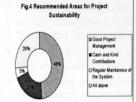
 The study revealed that water borne diseases is at 36%[

.....Findings

 The survey revealed that the multiple use of water in the area comprises of; domestic i.e. cooking, washing drinking etc (76%), gardening and farming (3%), making bricks (13%) and selling (8%)



...Findings

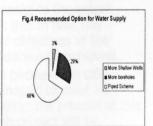


 The study revealed that, communities believed that, Good management of the project will lead to the sustainability of the project.

.....Findings

Recommended Solution to the Problem

 Most of respondents preferred a piped scheme project rather than other options like boreholes and shallow wells



Conclusion

- The need to improve accessibility to water supply in Tambukareli community is there
- Insufficient water supply has caused various effects to the majority.
- Most of the communities believes that piped scheme is the best alternative to overcome the existing problem
- Skilled and committed personnel and leaders of the project will uplift sustainability of the project.

Implementation

- Preparation and submission of the water supply project proposal to the donor. The proposal was accepted by the donor and later the funds equivalent to Tshs.
 70,000,000 was approved for project implementation
- Capacity building; training of water users committee members on water management & water supply scheme management skills



Implementation



- Construction of the water supply scheme:
- Various Sizes of pipes and other associated materials have already purchased and delivered to the site. Construction of the scheme is expected to start immediately after the all required preparation completed

Monitoring and Evaluation

- Project logical Framework and M & E Framework were used for day to day monitoring
- Monitoring indicators developed was used as a basis for day to day activities monitoring
- Evaluation of the project will be done after the end of the project

Project Sustainability

- The project established on the felt and priority need of the community.
- Capacity building have been imparted to the water users group leaders for the sake of increasing knowledge and skills for the leaders
- Water tariffs will be collected, thus operations and maintenance will be maintained
- The project has the full support from the government authorities and other stakeholders including NGOs.

Conclusion

- The work done for one and a half years has been very successful to the extent that, it creates hope that in next few months the goal and objectives of the communities & Project will be achieved.
- It is successful work because the CED student has also managed to meet his objectives for facilitating the process at this point where the main project will be completed soon.

Recommendations

- Regular capacity building Program on water management and project management skills to Tambukareli Water Users Group leaders is needed
- Community mobilization to participate in the whole process of project implementation should be strengthened in order to meet the intended objectives
- There is a need to emphasize the multiple use of water of which communities can use water available for both domestic and economic activities

•Thank you for your attention

C/o

Plan International

P.O.Box 448

Geita

5 October 2005

Mwenyekiti.

Kitongoji cha Tambukareli

Kijiji cha Ihayabuyaga

Geita

Yah. Maombi ya kufanya sehemu ya mafunzo yangu katika kitongoji chako.

Mimi ni mwanafunzi wa kozi ya uchumi na maendeleo ya jamii kutoka chuo kikuu huria cha Tanzania kwa kushirikiana na na chuo kikuu cha New Hampshire (New

Hampshire University) kutoka Uingereza.

Katika sehemu ya mafunzo yangu, nahitajika kujiunga na asasi yeyote ya kijamii ili

kuweza kusaidiana nao katika kutoa ushauri kulingana na mafunzo ninayo chukua na

mahitaji ya asasi husika. Nimevutiwa na jumuia ya watumia maji katika kitongoji

chako, hivyo napenda nifanye nao kazi katika kipindi hiki cha mafunzo cha miezi 18

kuanzia sasa.

Kama ombi langu litakubalika, tutazungumza mambo mengi yanayohusu mafunzo

yangu na mchango wangu kwenu.

Asante

Boniface A. Mbunju