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MASTERS OF SCIENCE IN COMMUNITY ECONOMIC DEVELOPMENT (2007)

THE CONTRIBUTION OF TUMAINI TRUST FUND TOWARDS CARE AND SUPPORT OF ORPHANS

CASE STUDY OF MBAGALA KUU WARD

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CERTIFICATION

This is to certify that I have gone through the report titled "**The contribution of Tumaini Trust Fund towards care and support of orphans case study of Mbagala Kuu Ward** and found that it is complete and acceptable for partial fulfillment of the requirement for the Master of Science in Community Economic Development of the Southern New Hampshire University (USA) and the Open University of Tanzania.

.....

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Date 30/04/2007

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DECLARATION

I, Mwakajwanga Mkumbo Rachel (Mrs) declare that this report is based on my own efforts and solely done by myself. I also declare that this work has not been presented and shall not be presented at any other University for similar purpose.

RMBmwakajwange

Rachel Mkumbo Mwakajwanga(Mrs)

Date...April 30, 2007.....

DEDICATION

This work is dedicated to my beloved family who gave me unlimited encouragement and support while pursuing my MSc. Community Economic Development course.

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I am extremely grateful to the Management of the CED program for all the support they have given while undertaking my Msc(CED) studies. More Particularly I am grateful to Mr M. Adjibodou, the CED Program Director and Mr. Hamidu A.Shungu my supervisor.

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A BSTRACT

This research is aimed at reporting the activities of Tumaini Trust Fund as a local Community Based organization in offering care and support to orphans in Mbagala kuu ward as support to the community efforts in dealing with its social economic problems. The study findings reveal that so far the organization is helping to prevent and control spread of HIV / AIDS and STI'S infection by conducting HIV / AIDS and STI'S awareness raising seminars to various leaders of village's wards and community, the CBO is also providing support to orphans by identifying their needs ready for registration and Sending them to schools (primary schools ,secondary schools sheets and providing vocational training.), meeting their schools requirements e.g. School fees, stationary and uniforms, food and bed-sheets.

The results show that the local NGOs and CBO which are operating at community level are very much capable to work with the community members to address the real needs of the community and are acceptable by the community. Also the study reveals that there has been some remarkable achievement in the performance of Tumaini Trust Fund.

However, despite the good progress made by the Local NGOs and CBOs in working with the communities to address their community needs, there is an urgent need for support from Government and other stake holders so as to provide link for resources needed by the CBO so that the support of the CBO to the community is more effective.

EXECUTIVE SUMMARY

Currently, communities in African countries have been severely affected by factors such as AIDS, War and natural death in such a way that they are producing orphans in big numbers and so quickly that family structure can no longer cope. In Tanzania for example the number of orphans and vulnerable children is currently estimated to have already approached the 2.5 mark (ESAURP study quoted in Charwe et al 2004, 11). This constitutes 17% of the total population of children aged 0-14 in mainland Tanzania[1]. In such circumstances the remarkably increased number of orphans grows up without parental care and love and deprivation of their basic rights to shelter, food, health and education. Most of orphaned children have been left to grand parent to take care of or left on their own in child headed house holds. The present unprecedented problem of HIV/AIDS imposes enormous burden on the extended families, which are already overwhelmed by poverty and its addictive problems, such as ill health, poor nutrition, illiteracy, etc.

A number of efforts have been made at community level particularly to respond to this problem. For example, the community-based groups (CBO), non-government organizations (NGOs) and Faith-Based Organizations (FBO) have been at the forefront of responding innovatively to the needs of these children, their families and communities. Many have been attempting to provide a holistic response to families, including children, with the advantage of being able to offer a greater degree of support

[1] United Republic of Tanzania, 2003, "2002 Population and Housing Census, Volume II Age and Sex Distribution", National Bureau of Statistics, September 2003. Note that children age 0-14 constitute 44% of the total population 33.5million in Tanzania mainland.

to those children whom they get to know during parental illness and subsequent death. Unfortunately however, these efforts have remained fragmented, isolated and localized, with most operating within severe financial constraints. This project is aimed at evaluating of the activities performed by Tumaini Trust Fund where by the there is a discussion of the process of needs assessment, problem identification, literature review, implementation, monitoring, evaluation and sustainability.

The targeted community is the Mbagala and Mbagala kuu ward in Temeke district where there is an increasing problem of Orphan and vulnerable children. Data from Temeke district local authority indicate that there is a total number of 9649 orphan and vulnerable children in Temeke district out of which 55.3 % (5,336) are orphans. Total number of 1084 (11.23 %) children are in Mbagala and Mbagala kuu ward. These children are between the ages of 6 years to 18 years and are grouped as indicated in table 11.

The CBO and the community members are working hand in hand in addressing this problem by prevention and control spread of HIV / AIDS and STI'S infection, creation of HIV/AIDS and STI'S awareness, promotion and strengthening HIV / AIDS and STI'S peers' education, provision of life skills education for youth in schools at primary, secondary and post secondary levels. Also in promotion of behavior changes through peer education, establishing of voluntary HIV screening and counseling services.

The goal of the project is to facilitate reduction of the number of OVC and increase the lively hood of the community in Mbagala and Mbagala kuu ward.

The CED objective of the projects is to offer capacity building to the CBO which includes preparation of a project strategic plan. This is aimed at making sure that all activities aimed at addressing the problem are well known and clear to all actors / responsible persons assigning timeframe for each activity for proper implementation. Other objectives are to prepare simple financial manual to be used by the CBO, conduct training on simple accounting, report writing and preparation of project monitoring and evaluation plan. Also assist in designing strategies for mobilizing funds for project activities.

This survey has found that (i) A child is enabled through his or her own capacities to act on his/her own behalf to learn, integrate socially, and adapt to local circumstances(ii) The survival, development and well-being of a child depend primarily on the household in which they live. (iii)The community safety net can serve as overseer and counselor and can intervene at the household levels on children's behalf where urgent need such as neglect, exploitation, or abuse.

It is therefore recommended that, while a comprehensive response to the needs of OVC requires a spectrum of options, including institutional care, there is widespread agreement that the intervention of choice (wherever possible) should be home-based community-supported care. Again multi-sect oral collaborations between national and local government, NGOs and community structures appear to provide the most effective services.

Acronyms

AIDS	Acquired Immune Deficiency Syndrome
AKS	Africa Kid safe
CBO	Community Based Organization
DCOF	Displaced Children
FBO	Faith based Organization
HIV	Human Immune deficiency Virus
ICHC	Integrated Community Based Home Care
IMCI	Integrated Management of Child Illness
MLYDS	Ministry of Labour, Youth Development and Sports
NGO	Non- Government Organization
OVC PCI	Orphans and Vulnerable Children Project Concern International
PLHA	People living with Aids
RHP	Rurita Health Project
STI	Sexually Transmitted Diseases
TASAF	Tanzania Social Action Fund
VIHAC	Village HIV Aids and STI control committees

CHAPTER I

COMMUNITY NEEDS ASSESMENT

Community needs assessment (CNA) is a systematic way of identifying community needs and the issues that will impact the intervention initiative to the identified needs.

This chapter reports on the Community Needs Assessment which was done at Mbagala Kuu Ward in Temeke district in order to identify the community overall needs, with a focus on OVC problems and the efforts to address the problem which are being done by the community and the local CBO.

The reasons for conducting the Community Needs Assessment was to provide information on which will help develop the goals and objectives of the project .Also to gain support and commitment from all levels of the stake holders, to get a more accurate picture of the needs and concerns of the community and to identify the capacity gaps that needed to be addressed.

1.1 Community Profile

The Mbagala and Mbagala Kuu ward has a total population of 255,414 people with Sixteen (16) mtaa local governments. The locality is a high density area within Temeke district with a Population total 768,451 (383,364 Males, 381,087 Female).The Per Capital income is Tshs. 245,000 and the gross rate of per capita income is 4.6.The population projections by end of year 2005 is 837,263 (422,051 male and 415,212 female). The Mbagala kuu ward community is mainly composed of people from two

tribes (Ethnics) groups Wazaramo and Wandengereko with a religious background of Muslims and Christians. The influence of modernization and urbanization has highly affected the behavior of the community members and these factors together with the cultural and some religious factors contribute much to the problem of HIV/AIDS. The cultural practice of traditional dances which is widely practiced as part of entertainment among the residents.(ngoma) promotes free and unsafe sex .On the other hand, however the community has its own local ways of addressing the problems of OVC which are based on family setting. However due to poverty/ low income the families are not able to address the problems therefore collective community response is needed. The communication and relationships between people in this community is easy.

This is facilitated by the common language of Kiswahili and the government structures which are in existence to the grassroots level. Again the religious ties and family ties are also strong and form a good vehicle for communication in Mbagala Kuu ward the political leaders and religious leaders have a big social influence among the community members, the councilors, MP and Mtaa leadership, control the political power. Along the list there are also businessmen who have influence because of their capital resources and these are good catalysts in influencing the community towards participating in project activities though their financial resource contribution. In this locality information is gathered and transmitted through public announcements. Again the street local government leaders are the people who communicate information in their locality.

1.2 Community Needs Assessment

The main objective of the community Needs assessment was to undertake a situational analysis of the orphans and vulnerable children in Mbagala Kuu Ward. That is;

(a) To obtain information which will give a good understanding of the orphan care needs that were important to people in the community as well as to identify obstacles and resources for education, healthcare and basic needs for OVC such as access to education, HIV/AIDS awareness, provision of school materials to orphans, counseling services etc.

(b) Again the assessment was aimed at identifying capacity building gaps within the community and the CBO and come up with a strategy to address it.

In conducting the Community Needs Assessment the first step was getting stakeholder's commitment which was done by;

- Developing of questions for interview and focus group
- Organizing a working committee,
- Getting the committee working ,
- Developing a statement of purpose
- Planning a communication strategy
- Developing questions for interview and focus group

The second step was to come up with Community Needs Assessment work plan which was to;

- Prepare to gather information using the following survey instruments,

  Focus group method, Interview method, Questionnaire administration, Observation method and Documentation review.

- Develop the interview format
- Schedule interview and focus groups
- Conduct personal interviews & focus groups discussions
- Organize data (summarize interview and focus group responses and observations)
- Collect selected documents

The third step was the Interpreting & Reporting

- Interpret information
- Report findings - make the presentation

The fourth step was the implementation process which included

- Development of an action plan
- Decide on the next steps

The implementation of the Community Needs Assessment was done by the team of the community members, Tumaini Trust Fund staff and the selected stake holders.

Questionnaires were given to the beneficiaries with the aim of getting quick and enough information from the community. Focused group method was used to explore topic in

depth through discussion with community leadership, beneficiaries and leaders of the NGO/CBO. A meeting was convened which involved the community members and the different stakeholders in order to discuss and identify their community needs using participatory approach. These included key government and non-governmental officials, orphans and their caregivers, school teachers, and health providers.

Secondary information was also obtained though the documents .The observation research method was also used to get the information.

1.3 Research design

During the CNA process the both primary data and secondary data were used.

A cross-section research design was undertaken and data were collected however before carrying out a survey the pilot test was conducted so as to see if;

(a) The survey could provide the needed information, (b) The questions were appropriate for the surveyed people (c) The survey forms could administer, collect and report information using any written directions or special coding forms. (d) Information obtained was consistent and accurate. (e) The procedures were standardized; those procedures were self –administered questionnaires, structured interviews. In gathering this information, needs assessment was conducted using a self-administered questionnaires and structured interviews. Later on questionnaires were translated in Kiswahili.

However, before survey questionnaires were administered, a meeting was made with the CBO leaders' to inform them of the purpose of survey questionnaires.

Questionnaires were given to the beneficiaries with the aim of getting quick and enough information from the community. Focused group method was used to explore topic in depth through discussion with community leadership, beneficiaries and leaders of the NGO/CBO. A meeting was convened which involved the community members and the different stakeholders in order to discuss and identify their needs using participatory approach.

Eleven questions were designed for beneficiaries and ten questions for non beneficiaries. The questions were carefully designed to provide information which could answer the research question. In the survey six questions referred to the contribution of the CBO / kind of services offered to the Community. Four questions referred to the capacity/ attitude towards the services offered to support and care of the orphans in the community .The rating was 1 positive and 2 negative given to whether the answer is YES or NO.

The results of the Needs Assessment show that the community and the local CBO TUMAINI TRUST FUND have been able to start the implementation of activities aimed at giving support and care to orphans. This is a provision of an avenue to various contributions for care and welfare of the resultant orphans owing to the emergence and fast spread of HIV/AIDS in the TEMEKE district and the accompanying loss of life.

The CBO had secured financial support from WWA CONCERN organization, UNICEF, Politicians, Diplomatic Missions and Friends from USA .Though this support the following activities were being implemented;

i) Direct Support Activities

- Health and treatment

- Purchase of school uniforms and providence of school fees.
- Provision of food to the caretakers and guardians household

ii) Indirect Support Activities

This includes income generating and skills development activities.

- Life skill training
- Carpentry
- Sawing of garments.
- Counseling seminars
- HIV awareness

Despite the good efforts that were in progress there were also some gaps which were established as shown in the stake holder's analysis. Apart from that the following gaps were also established;

a) The lack of action plan to guide the CBO's implementation of the envisaged support activities to achieve its objectives.

A strategic plan however, is an indispensable step towards fulfillment of any organization's vision, mission and objectives and is one of the important monitoring tools to be used during the implementation of the project. Therefore lack of such an important instrument has reduced the effectiveness of TUMAINI TRUST FUND in the focused provision of the intended community economic development support activities. Development of TUMAINI TRUST FUND Strategic Plan is one of the activities that the CED program was facilitating. The Strategic Plan is currently been finalized.

b) Apart from lack of a work plan, the CBO had no simple Accounting Manual which would guide the financial undertakings .A simple accounting manual is an important document which contains the financial rules and regulations to be followed by the organization.

c) It was generally recognized that the care of the OVC was left in the hands of extended families, in particular the grandparents.

d) There was no orphanage in the community that provided care for OVC under the age of two years.

e) It was observed that the Temeke District is relatively poor and therefore most of the caregivers of orphans are poor. Consequently the orphans lacked essential basic needs such as educational materials, food, and clothing. Some of the orphans had been forced to drop out of schooling since the deaths of their parents.

In this study the following instruments were used

- Focus group
- Interview method
- Questionnaires method
- Observation method
- Documentation review

Questionnaires method was also used. Questionnaires were given to the Beneficiaries and Non beneficiaries for the aim of getting quick and enough information from the community.

Focus group method was used to explore a topic in depth through group discussion with community leaders, Beneficiaries and NGO leaders.

Interview method was used to the community leaders and beneficiaries in finding out whether they all had full understanding of the project, knowing their responsibility/role to play and their experience during project implementation.

Observation method was also used to gather accurate information about the project performance. Visits were done in order to have enough information about the ongoing project activities. In obtaining Secondary data documentation literature review was done to find out how the project reached its targets, how it operates in financial issues, and budgets.

Eleven questions were designed for beneficiaries and ten questions for non beneficiaries. The questions were carefully designed to provide information which could answer the research question. In the survey six questions referred to kind of services offered to the Community. Four questions referred to the attitude towards the services offered to support and care of the orphans in the community .The rating was 1 positive and 2 negative given to whether the answer is YES or NO.

1.4 Reliability and Validity

In the context of this study, stability, equivalency and homogeneity were essentially the extent to which my survey provided the same results. On the other hand, Survey instrument design has two components, deciding what to measure then designing and testing questions that will be good measures. In this case the first step was to define

survey objectives and then relevant questions which will address the survey objectives were designed.

Validity "...refers to the appropriateness, meaningfulness, and usefulness of the specific inferences made from test scores." (Standards for Psychological and Educational Testing, 1985, p. 9). In other words, if your findings need to be appropriate, meaningful and useful, they need to be valid.

The nature of this case study survey is care, support and protection of the orphans and vulnerable children. Since the OVC problems exists every where in Tanzania and a number of CBO's and NGO's have been formulated to offer support, protection and care it is assumed that the results of this survey will be very useful.

1. 5 Administration

The characteristics issue of survey administrators was given the necessary attention by looking into the educational background and experience of the survey team which comprised of the CED practitioner and the CBO staff that all possessed the basic education and knowledge required to administer a survey. A one day training session was conducted to the interviewers and data collectors who basically included all the CBO staff, counselors and awareness creation team members.

- The technical advisor (CED practitioner) explained to the team the objective of the survey so as to have every member on board aware of what is needed to be accomplished.

- . The team went though the structured questionnaires to make sure that they all understand what is in the questionnaires.
- The members were given opportunity to ask questions and even to give comments and suggestions where it was found necessary for improvement.

1.6 Characteristic of Quality Assurance Methods

In order to be having quality assurance the following was ensured;

- Wording of the questions

(i) Correct understanding of the questions by having simple wording, because understanding depends on the wording.

(ii) (ii)Professional jargon in formulating the questions was avoided since respondents are usually lay persons and are unfamiliar with the professional terms.

(iii) The questions used were short and simple. Sometimes, longer questions will need to be accompanied by explanations to ensure correct interpretation.

(iv) Usage of abbreviations was also avoided in the questions, unless expected to be known to the respondents.

- Response alternatives

(i) Response alternatives for questions were either open-ended or close-ended. Close-ended response alternatives listed the possible answers to the questioning order to make the comparison of responses easier and reduce coding errors.

- Language and translation of the questions

Questions were made in a language familiar to the respondent, preferably in his/her mother tongue.

1.7 Sampling Techniques

Random sampling technique was used to get Non beneficiaries interviewees in order to give them equal chance of selection, for the beneficiaries ,all of them were selected for the interview since their number was small. Sample for beneficiaries represent 100% of the populations of beneficiaries and the sample for Non beneficiaries represent about 0.09% percent of the population of Mbagala kuu ward. Sample for beneficiaries represents hundred percent populations of beneficiaries (25) and the sample for Non beneficiaries represents about 0.09% percent of the population of Mbagala kuu ward. Random sampling was used in choosing sample for non-beneficiaries interviewees in order to give them equal chance of selection, Because of little number of beneficiaries all of them were (45 respondents) were selected for the interview. In this regard no potential bias is expected as the sample for non-beneficiaries is homogeneous while sample for beneficiaries is hundred percent represented.

1.8 Analysis

Data analysis was done both manual and computer assistance using the SPSS software. Preliminary data analysis was undertaken as an activity simultaneous with data collection, data interpretation, and narrative report writing in the field. Qualitative data analysis continued with data reduction and interpretation after the field. Data were sorted into the following main categories

(i) Mbagala Kuu Community capacity to identify their development needs and priorities. More specifically the capacity to identify, and respond to the required care, support and protection of the orphans and most vulnerable children in the community.

(ii) The TUMAINI TRUST FUND community based organization's capacity to facilitate capacity building in the Mbagala kuu Community.

(iii) Strategies to address the capacity gaps and challenges within the community and within the TUMAINI TRUST FUND as an organization.

All the collected data are presented into tabular information showing the relationship among categories of information. Data materials belonging to each category are put in one place and analysis was done.

1.9 Sample Characteristics

Sample characteristics were defined by age, sex, and activities as follows;

Age:

The age between 5 to 60 years old were selected for the interview and 93.3% were below the age of 50 years. And the remaining percentage (6.7%) was above 50 years.

Table 1 Age of the Respondent

Valid Range	Frequency	Percent	Valid Percent	Cumulative Percent
5-9	8	17.8	17.8	17.8
10-15	9	20.0	20.0	37.8
21-25	11	24.4	24.4	62.2
26-30	5	11.1	11.1	73.3
31-40	5	11.1	11.1	84.4
46-50	4	8.9	8.9	93.3
51-55	1	2.2	2.2	95.6
56-60	2	4.4	4.4	100.0
Total	45	100.0	100.0	

Table 2 Category of the Respondent

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	beneficiary	25	55.6	55.6	55.6
	none beneficiary	20	44.4	44.4	100.0
	Total	45	100.0	100.0	

Table 3 Gender of the respondent

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	20	44.4	44.4	44.4
	Female	25	55.6	55.6	100.0
	Total	45	100.0	100.0	

Table 4 Community involvement in problem identification

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	36	80.0	80.0	80.0
	no	9	20.0	20.0	100.0
	Total	45	100.0	100.0	

Table 5 Adequacy of the support from government

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	adequate	17	37.8	37.8	37.8
	not adequate	28	62.2	62.2	100.0
	Total	45	100.0	100.0	

Table 6 Problem addressed

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	36	80.0	80.0	80.0
	No	9	20.0	20.0	100.0
	Total	45	100.0	100.0	

Table 7 Acceptance of the services

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	well accepted	40	88.9	88.9	88.9
	not accepted	5	11.1	11.1	100.0
	Total	45	100.0	100.0	

Table 8 How do you rate performance of Tumaini Trust Fund

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	good	34	75.6	75.6	75.6
	poor	11	24.4	24.4	100.0
	Total	45	100.0	100.0	

Table 9 Economic activity of the respondent

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	student	19	42.2	42.2	42.2
	employee	7	15.6	15.6	57.8
	informal business	19	42.2	42.2	100.0
	Total	45	100.0	100.0	

Table 10 Need of collective effort needed

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	41	91.1	91.1	91.1
	No	4	8.9	8.9	100.0
	Total	45	100.0	100.0	

(a) To what extent has Tumaini Trust Fund identified the problems faced by the community in responding to the needed care and support of orphans?

Table 6 shows that 80% of the respondents responded that Tumaini Trust Fund has been able to identify the problems faced by the community.

(b) Has Tumaini Trust Fund been able to design and implement a project capable of addressing the needed care, support and protection?

Table 8 shows that 80% of the respondents indicated that Tumaini trust Fund has been able to implement activities which were addressing the needed care and support and the performance is rated good.

Table 7 shows that 89.9% of the respondents indicated that Tumaini Trust Fund is well accepted by the community and this is a good indicator for the sustainability of the program.

(c) How was the Community involved in all stages like problem identification, strategies to address those problems, resource mobilization and the evaluation of the progress?

Again Table 4 shows that 80% of the respondents indicated that the community was well involved in the process of problem identification and project implementation. This is an indication that Tumaini Trust Fund is promoting the aspect of participation which is a one of the necessary element for success of project implementation.75.6 % of the respondents were able to rate the performance of Tumaini Trust Fund as good. Table 4

(d) How was the Local CBO's /NGO's and community as a whole supported by the Government authorities and other development partners in effectively addressing this problem. Only 37.8% of the respondents indicated that the Government support to the community to address the problems was adequate (Table 5) while 62.2% indicated that the support was not enough .

The Respondents by category:

About 56.6 % of the beneficiaries and 44.4% of non beneficiaries, and 44.4%of male and -56.6%--of female beneficiaries were interviewed and all responded to the questionnaires. Table 2

Activities of Respondents:

42.2 % of the non beneficiary respondents are doing small income generating activities while 15.6% none beneficiary respondents are employee and another 42.2% beneficiary respondents are students. This is a strong indication that there is a need for the community to be empowered economically so as to enable it to sustain their social and economic needs. The statistics shows that are more women are engaged in economic activities as compared to men. Table 2

The analysis also assessed the economic capacity development and technical capacity development of the orphans, guardians as well as the whole Mbagala kuu community as follows:

i) Child-level interventions:

A child is enabled through his or her own capacities to act on his/her own behalf to learn, integrate socially, and adapt to local circumstances. Economic-strengthening interventions directed towards children complement, rather than replace, other program such as education and psychosocial support. Economic-strengthening interventions that serve children directly include vocational training, apprenticeships, formal

education, income-generating activities, microfinance services, and legal support.

ii) Household-level Interventions

Children's survival, development, safety and well-being depend primarily on the household in which they live. The household/family safety net provides belonging and emotional support. Common economic interventions at the household level includes market-linkages, business grant, labor-saving techniques, microfinance, and legal support and advocacy

iii) Community-level Interventions

The community safety net can serve as an overseer and counselor and can intervene at the household levels on children's behalf where urgent need such as neglect, exploitation, or abuse. The community can also provide direct support such as clothing, food, and health care to vulnerable children when households cannot due to sickness or economic problems. Key interventions include community mobilization, community fundraising, income-generating activities, promoting links to development programs, and providing childcare to vulnerable households

Technical capacity development constitutes creating - where capacities are non-exiting, and enhancing - the technical capacity of households and members of the community to protect and care for the orphans. Five major

areas of intervention are vital to the technical coping capacity of families as follows:

i) Provide psychosocial counseling and support to orphaned children and their caregivers.

ii) Strengthen and support childcare capacities.

iii) Support chain planning.

iv) Prolong the lives of parents.

v) Strengthen young people's life skills.

The findings were a collected and analyzed for the purpose of getting the results of the respondent. The information which was collected was based on the objectives of the research project stated earlier. In order to come up with proper findings four different type of groups were interviewed; these were community leaders, CBO leaders, Non beneficiaries and beneficiaries

1.10 Results

The survey objectives and research study questions were based on finding out how TUMAINI TRUST FUND as one of the local community based organization has managed to provide care and support and enhanced the ability of members of the community in Mbagala kuu ward to respond to the needed care, support and protection of orphans in their community.

The CNA results revealed that;

(a) The organization was lacking a strategic plan to guide its implementation of the envisaged community economic development support activities to achieve its objectives. Having a strategic plan however, is an indispensable step towards fulfillment of any organization's vision, mission and objectives. The lack of such an important instrument has reduced the effectiveness of TUMAINI TRUST FUND in the focused provision of the intended community economic development support activities. Development of TUMAINI TRUST FUND Strategic Plan is one of the activities that the CED program was facilitating. The Strategic Plan is currently been finalized.

Despite the lack of a strategic plan, TUMAINI TRUST FUND has been able to start the implementation of activities aimed at meeting its first objective i.e. provision of an avenue to various contributions for the care and welfare of the resultant orphans owing to the emergence and fast spread of HIV/AIDS in the TEMEKE district and the accompanying loss of life.

TUMAINI TRUST FUND secured financial support from WWA CONCERN, organization, UNICEF, Politicians, Diplomatic Missions and Friends from USA to support orphans in Mbagala Kuu ward. Though this support the CBO has been able to carry a number of activities follows:

ii) Direct Support Activities

- Health and treatment
- Purchase of school uniforms and providence of school fees.

ii) Indirect Support Activities

This includes income generating and skills development activities.

- Life skill training
- Carpentry
- Sawing of garments.

Further evaluation was made in relation to research questions as follows;

Research question 1

Do you think Tumaini Trust Fund has managed to identify the problems faced by the community in responding to the need for care and support of orphans? 55% of beneficiaries felt that the CBO is responding to the needs of the orphans in Mbagala kuu ward.68% of none beneficiaries also indicated that TUMAINI Trust fund has managed to identify the problems of OVC in the community.

Research question 2

Has Tumaini Tust Fund been able to design and implement a project capable of addressing the needed care, support and protection? 75% of the non beneficiaries felt that Tumaini trust fund was doing its best to address the orphan's problem and 68% of the beneficiaries indicated that the CBO was to a great extent giving reasonable care and support to the orphans in the community however more support was needed as since the orphans problem was big.

Research question 3

How was the Community involved in all stages like problem identification, strategies to address those problems, resource mobilization and the evaluation of the

progress? 80% of all the respondents indicated that the community was involved in the whole process.

Research question 4

How were the Local CBO's /NGO's and community as a whole supported by the Government authorities and other development partners in effectively addressing this problem? 85% of the respondents felt that the government, the district authorities and other stake holders are not giving enough support to the community and local CBO's in dealing with the problem.

1.12 CNA recommendations

Following the CNA it is recommended that there is a need for;

i) Building capacity on report writing

ii) Building capacity in record keeping

iii) Building capacity on financial accounting

iv) Preparation of a strategic plan as a resource mobilizing tool.

1.13 Graphical contents

The orphans and vulnerable children Mbagala kuu ward which is in Temeke district were classified as per table below in order to have a clear understanding of which category of problem they belonged. This was important in the process of planning for the kind of the specific support they would require. The table below shows the classification.

Table 11 : Classification of OVC in Temeke area

	Group of Children									
	1	2	3	4	5	6	7	8	9	10
Temeke District	5336	2618	482	201	322	117	44	124	158	247
Mbagala + Mbagala Kuu Ward	623	226	60	39	17	24	15	40	32	48
Percentage	11.67	8.6	12.44	19.40	5.27	20.51	34.9	32.25	20.25	19.43

Key to table;

Groups

1. Opharns,2. Abandoned 3. Disabled 4. Child labour5. Mistreated 6. Commercial sex 7. Early pregnancies8. Street children 9. Children head of family 10. Displaced

CHAPTER 2

PROBLEM IDENTIFICATION

Since HIV/AIDS was discovered in 1981, more than 20 million people have lost their lives to the virus. According to the Joint United Nations Program on HIV/AIDS (UNAIDS), nearly 40 million are currently living with HIV/AIDS, including nearly 2.2 million Children under the age of 15. In 2004, 4.9 million people acquired the virus, and 3.1 million died from AIDS. Sub-Saharan Africa remains the most affected region with 25.4 million people living with V/AIDS at the end of 2004, 1.9 million of whom were children under the age of 15 The United States Agency for International Development (USAID), the United Nations Children's Fund (UNICEF), and UNAIDS estimate that at the end of 2003, 15 million children under the age of 18 had lost one or both parents to AIDS, with the majority (82%) in sub- Saharan Africa.

Further to this, children who have been orphaned by AIDS may be forced to leave school, engage in labor or prostitution, suffer from depression and anger, or engage in high-risk behavior that makes them vulnerable to contracting HIV. Children who live in homes that take in orphans may see a decline in the quantity and quality of food, education, love, nurturing, and may be stigmatized. Impoverished children living in households with one or more ill parent are also affected, as health care increasingly absorbs household funds, which frequently leads to the depletion of savings and other resources reserved for education, food, and other purposes.

The majority of children orphaned or made vulnerable by HIV/AIDS are living with a surviving parent, or within their extended family (often a grandparent). An estimated 5%

of children affected by HIV/AIDS worldwide have no support and are living on the street or in residential institutions. Although most children live with a caretaker, they face a number of challenges, including finding money for school fees, food, and clothing.

Experts contend that effective responses must strengthen the capacity of families and communities to continue providing care, protect the children, and to assist them in meeting their needs. There are thousands of localized efforts, many of them initiated by faith-based groups, to address the needs of children made vulnerable by AIDS. This chapter reports on the problem identification.

2.1 Problem Statement

Specifically over the last decade, there has been an increase in the number of civil societies i.e. NGOs, Faith Based Organizations FBOs and CBOs in the country. These non-state organizations have been addressing various community development issues in various ways. Due to the increasing of the OVC problem in our country it is important to establish the effectiveness and efficiency of the local CBO's in addressing the problem. Also to ascertain the nature and extent of capacity that needs to be built among the CBOs that is responding to the care, support and protection of the OVC in Tanzania.

If this is not done, there will be a growing number of orphaned children on the streets who are increasingly rootless, uneducated, under nurtured and traumatized, making them ripe for recruitment for crime, military warlords, terrorists and vulnerable to HIV.

This project therefore aims at establishing the services offered by the Tumaini Trust Fund and its effectiveness in addressing this community development need.

2.2 Government response

The Ministry of Labour, Youth Development and Sports is responsible for addressing OVC related issues. In 2001 the OVC program supported a workshop for leaders and caretakers of orphanages, social workers from the Ministry and other partners who support orphanage programs. The purpose of this workshop was to define standards and policies for OVC care in orphanages, as well as collaborative procedures and mechanisms for identifying relatives of orphaned and abandoned children who end up in orphanages. The aim is to reunite children with their relatives as soon as possible. The second workshop was held in Dodoma from 27th to 31st January 2003 to refine the draft policy document and make final recommendations. National guidelines for care and support of OVC raised in children's homes, including mechanisms for reunification of children with their family members or procedures for foster care, were finalized during this workshop.

Also with increased awareness of Tanzania's leadership (former President Mkapa's declaration of a HIV/AIDS as a national disaster in 1999/2000), the National AIDS Policy (2001) acknowledges orphans as a priority group under various categories of community interventions stressing the need for communities to take the lead in addressing the orphans issue at the local level. The Policy also acknowledges the vulnerability of orphans due to AIDS and identifies the need for increased community awareness of the inheritance rights

of orphans due to AIDS. In the case of orphan-headed households, the Policy notes that orphans should be able to access support from local as well as central government. (Country Response Rapid Analysis: Tanzania on line)

2.3 International Donor Initiatives

Many countries throughout the world have, in recent years, adopted policies aiming at addressing the children rights including the OVC.

The millennium Summit in September 2000 reaffirmed international commitment to working toward a world in which sustaining development and eliminating poverty have the highest priority. It also identified a number of millennium development goals, some of which are relevant to the rights of all children, including OVC.(United Nations State of the World forum 4-10September 2000).

The International Covenant on Economic, Social and Cultural rights (1996) is the pre-eminent international treaty dedicated to the protection of economic and social rights. The article recognizes the right to an adequate standard of living, including adequate food, clothing and housing, and to the continuous improvement of living conditions.(UN Information Service GENEVA, 10 August 1996).

2.4 Target Community

The target community is the Mbagala and Mbagala Kuu ward where the community project is being implemented through community participation and empowerment .In this process community awareness and sensitization meetings were held and a total of 29,574 people were reached, HBC, material support, supply of condoms, counseling,

Facilitation of Voluntary HIV/AID screening, vocation training and life skills education. This has contributed towards reducing the OVC problem in this locality.

2.5 Stakeholders

Both individuals and organizations including authorities at different levels have different motives and interests. It was importance at this stage to analyze these interests and expectations both early on in the planning process and later again during the implementation of the project. A fundamental requirement of all development projects is that the objectives reflect the needs of the society and the interest groups, and not merely the internal needs of institutions.

Participation analysis /stakeholder analysis was done in order to seeks to identify all persons, institutions, etc. which are involved in the project. This was in additional to the target group and the implementing agency .This analysis was important to facilitated understanding of their expected support or opposition to the program. This analysis was used at the preliminary stages of a project in order to incorporate interests and expectations of persons and groups significant to a project or program.

The table below is a summary of the stakeholder's analysis.

Table 12 Stake Holders List

S/N	Stakeholder	Roles	Expectations	Concerns
1	Mtaa government	Organization of beneficiaries meetings and follow ups	Community participation in project development activities	Lack of adequate resources

S/N	Stakeholder	Roles	Expectations	Concerns
2	Orphan children	School enrollment and participation in economic activates eg carpentry, tailoring at the center	To get good education and be equipped with life skills	Lack of adequate resources
3.	Community facilitators	Provide counseling and awareness creation to the community and peer groups	Good cooperation and collaboration with the target group and community members.	Inadequate training in counseling skills and number of facilitators
4.	Religious leaders	Provide resource support and counseling services	Community participation in the project development activities	Lack of resources and skills in planning and implementation of the project activities.
5	Municipal Development worker	Provide resource and technical support. Facilitate Linkage to other resource opportunities, influence policy	Community participation in the project development activities	Inadequate involvement of community members in planning and implementation of the activities
6	Municipal welfare officers	Provide resource and technical support. Facilitate Linkage to other resource opportunities, influence policy	Community participation in the project development activities	Inadequate of involvement of residents in planning and implementation of the activities
7	Primary and secondary School teachers	Provide resource support and counseling services	Students good performance	Inadequate involvement of residents in planning and implementation of the activities, inadequate resources

S/N	Stakeholder	Roles	Expectations	Concerns
8	Ward leaders	Provide resource and technical support. Facilitate Linkage to other resource opportunities, influence policy	Community participation in the project development activities	Inadequate involvement in planning and implementation of the activities
10	Donors	Provide resource support	Good cooperation with the CBO, community and other stake holders in the community	Lack of information, action plan, progress reports, valuation reports
11	Politicians	Motivation and influence	Community participation in the project development activities	Inadequate involvement in planning and implementation of the activities

2.6 Project goals in CED terms

The overall goal of this project is to promote community participation, economic empowerment and capacity building to the community so that the community is enabled to take an active role and lead in its own development agenda which includes giving support and care to the OVC.

In order to achieve the goal the organization strives at working with the community at Mgagala and Mbagala kuu ward to make sure that the orphans and vulnerable children in this locality are given care and support which will capacitate them to live a normal life.

My feasibility evaluation is that the project will achieve its goals. This is because the stakeholder analysis as indicated in table 12 above shows that there is good community and stakeholder's participation in the project the community and all stake holders (primary and the secondary) were involved in the whole process that is from the early stages of planning process to project implementation.

The project has also received both material and financial support from donors to support the ongoing activities Apart from this, during the project implementation as part of community empowerment; the Technical Assistant will facilitate the CBO to come up with fundraising strategies.

2.7 Objectives

The objectives of this project are as follows;

(i) To determine the contribution of TUMAINI TRUST FUND towards Support and Protection of orphan & Children in Mbagala and Mbagala kuu Ward and come up with suggestion based on the report.

(ii) To determine the capacity gaps within the Tumaini trust fund organization and offer technical support.

2.8 Host organizations

Tumaini Trust fund is a Community Based Organization formed by local Tanzanians at a community level. The objectives of the CBO are to support Orphans, Vulnerable children HIV victims.

The organization is situated in Mbagala and Mbagala kuu Ward in Temeke District.

The organization was formed in 1997 by one man an ex teacher who started by helping orphan children around Mbagala kuu ward.

Since 1997 the organization has been able to provide the following support to vulnerable children:

- Prevention and control spread of HIV / AIDS and STI'S infection by

  (i) Creation of HIV / AIDS and STI'S awareness raising seminars to various leaders of village's wards and community and promotion and

  (ii) Strengthening of HIV / AIDS and STI'S peers' education to the community ready for sexual behaviors change.

- Support for Orphans

  (i) Identify orphans and their needs ready for registration and support

  (ii) Sending the orphans to schools (primary schools and secondary schools)

  (iii) Meeting orphans schools requirements e.g School fees, stationary and uniforms

  (iv) Providing other requirements like food, bed-sheets ect to orphans

  (v) Visiting orphans care takes for strengthening relationship and identifying needs, which need immediate response.

  Visiting orphans in schools regularly to access day to day school

- Poverty alleviation through;

  (i) Formation of income generating activities groups among widows and youth.

(ii) Educating the formal groups on how to manage and operate their group successfully

(iii) Providing the formed IGA groups with revolving funds ready for productivity

My roles and responsibilities in this project were to provide technical support to the project in form of capacity building.

My job description was;

(a) To facilitate the reprocess of problems identified by the CBO in order to ascertain whether the problems identified by the CBO is responding to the community need for care, support and protection of orphans.

(b) To establish the capacity gaps in the design and implementation of the project.

(c) To address the weakness which will be identified in (a) and (b)

In order to carryout the above responsibilities was located after the Field officer as per organization chart as Technical advisor.

CHAPTER 3

LITERATURE REVIEW

Orphans and Vulnerable Children (OVC) and families affected by HIV/AIDS are especially vulnerable to economic collapse and destitution as their income and asset base gets eroded by the progression of the disease and loss of parents. At this point it is especially urgent to establish as to how the civil society, the CBO's and NGO's are working with the communities in order to address this problem .Such establishment will help to develop strategies and products that empower the communities.

In this chapter you will find theoretical, empirical and policy literature review in regard to the OVC.

3.1 Theoretical Literature review

3.2 Community Development in the Literature

Communities in developing countries generally and particularly in sub Saharan African countries are increasingly becoming vulnerable to a multiplicity development challenges. People are suffering from a list of problems including lack of employment opportunities, the erosion of public infrastructure, a drop in educational achievements, the decline of public safety, the persistence of poverty, and the increasing uncertainty among leaders about how to rectify these situations (Bradshaw 2000:133). Besides, high rates of HIV/AIDS prevalence and spread in rural and urban communities in sub Saharan African countries exacerbates the already complex 21st century development challenges. South Africa for example has the highest prevalence of HIV infection in the

world. Poverty, poor access to basic amenities and health care, limited information, and limited capacity in communities all exacerbate vulnerability to HIV. The Community Home Based Care HIV and AIDS project increases community care and support to people infected (PLHA) and affected by HIV and AIDS and support for Orphans and Vulnerable Children (OVC) in their psychosocial, economic and education needs.

The concept "community development has changed radically overtime, and implies different ideas and practices in different regional contexts (Brocklesby and Eleanor 2003:187). Community development approaches of the 1950s to 1970s focused on poverty alleviation at the community level within the context of the existing social economic structures. Community development priorities tended to be decided by people outside the community rather than by members of the community, themselves i.e. top-down community development approach. The important shortcomings of this approach were bureaucracy and wrong interpretation of participation—i.e. participation implied the efficiency and effectiveness in achieving certain national goals. Using the participation approach, the members of the community participate in identifying their problems and development priorities as well as designing strategies to address their problems. (Brocklesby and Eleanor 2003; Watt, et al. 2000). This is the approach, which has gained prominence among the development partners (the development partners in the developing countries i.e. the international and local non-state organizations (the donor community, other international and local NGOs, FBOs and the Community Based Organizations CBOs).

Focusing on Tanzania, different stakeholders in different parts of the country have been providing responses to the needed care, support and protection of the MVC in a fragmented manner. The stakeholders have often used different approaches in MVC identification process; responding to their needs for care, support and protection; community mobilization and involvement and in the monitoring and evaluation of their interventions (Mhamba 2004).

The government of Tanzania puts more emphasis on strengthening community based care and assistance mechanisms facilitated through a process of community dialogue. This is out of the recognition that effective response to the support, care, and protection of the MVC requires a decentralized strategy focused on empowerment of local communities in decision-making, resource mobilization and utilization as well as monitoring and evaluation of the program implementation process and outcome.

In 1999, data obtained from Tanzania Reproductive and Child Health Survey revealed that close to 9% of all Tanzanian children under the age of 15 are orphans, having lost either one or both parents, mostly, as a consequence of HIV/AIDS pandemic and about 48% of the orphaned children are left by their grand parents

(K. Subaro et al; Social protection of Africa's Orphans and other children pg vii)

The number of orphans under the age of 15 was projected to reach more than 1.2 million children in the year 2000.

An evaluation study on families, which was carried out in 1992 by then Ministry of labour, Youth Development and Sports MoCDGCA revealed that orphaned children were faced with the following problems.

- Inadequate nutrition
- Inadequate health services
- Lack of access to education
- Lack of basic needs
- Lack of parental care and attention at very tender age
- Lack of economic base
- Inadequate housing which led some of them to run into the streets.

Different effort has been done by various International and National organizations, Governments and individuals to support orphans.

The World bank recently published Africa Regional Social Protection Strategy addresses the burden of social and economic shocks on the poor and underscore the importance of reducing vulnerability.

Various NGOs were established, especially in Kagera Region, to curb the rising number and needs of Orphans and vulnerable children. In 1994 the Government through the Ministry of labour, Youth Development and Sports (Social Welfare Department) developed guidelines and strategies for care and support of orphans. This document outlined the direction, roles and responsibilities of different stakeholders involved in the provision of care and support to orphans.

Support and provision of basic services in the areas of social counseling, education, health, and nutrition.

Formation of community based groups "Mama Mkubwa model" practiced in Makete and Rufiji Districts, and childcare groups to support the care of children who need special protection.

3.3 Empirical Literature review

Various NGOs and Community based organization are actively involved with development activities. Large number of CBOs and NGOs representing villages or specific targets group provides services to the community by participating in various development initiatives.

NGOs and CBOs are being recognized by the government as powerful forces for social and economic development. Donors play a key role in expanding the services for orphans and most vulnerable children through various NGOs and CBOs such as KIWOHEDE (support Orphans and street children). ANGONET Mission supports various NGOs and CBOs in Arusha region like Arusha Children's Trust, Women and Children Development Project (WCDP) in development issues. (Arusha NGO Net Work)

International NGOs and FBOs and bilateral donors have been at the forefront of establishing orphan centers, and providing assistance to community based responses. Efforts to address the central government's response have been supported by bilateral and multilateral donor. These activities have included development of HIV/AIDS awareness and prevention programs for the Ministry of Education, amongst others. Proposal includes a large program to scale up the Most Vulnerable Children (MVC)

Committees and to support expanded activities in various districts. These anticipated funds, along with donor support and technical assistance provided in response to the crisis of orphans, can set the stage for rapid expansion of OVC/MVC services to all districts in Tanzania. (Country Response Rapid Analysis 2002)

There is growing consensus that the percentage of orphans due to AIDS, as a share of all orphans, or most vulnerable children, is increasing. In the absence of official estimates or registration mechanisms, there are data from highly impacted parts of Tanzania (Kagera and Makete) that note substantial increases in number of AIDS related orphans. In Makete alone, the estimates range in the area of 20 percent of the total District's population of 100,000, or 40 percent of the children in the District are orphans due to AIDS (UNICEF, 2002). At the end of 2003, UNAIDS has estimated that there were between 1.2 and 2.3 million Tanzanians living with HIV, 85,000 to 230,000 children (0-14) living with HIV, and 660,000 to 1.4 million orphans due to AIDS. (UNAIDS, 2004). Together with International and Government effort to support orphans, the communities also with the little they have contribute much on supporting orphans.

In Tanzania for example many CBOs and NGOs have been open for the objectives of supporting orphans and TUMAINI Trust Fund is one of those. In Pwani region many villages have been supporting orphans through their Community based organization such as Mpiji Village, Maili Moja Village and Mlandizi village. In Kagera Region there is Byentemba Orphans' Centre, Itahya Day Care Centre, and Cimondo Bay Orphans. Some of these CBOs have been successful in addressing the problem but some are not due to lack of fund, and technical support.

The community people seem to be more concern with the orphans issue because the problem affects them than any other people in the society.

"World vision" organization has been working with communities, families, and individuals in mobilizing them to support orphans in their midst as well as increasing awareness on prevention and control of sexually transmitted infections including HIV which is the major cause of orphaned children.

"Children's rehabilitation Centre" orphan support project has been established in Tanzania for the aim of supporting orphans whose parents are deceased as a result of the war in the country and parents who left their homes due to the permanent threat and surveillance from military.

The project is providing various social supports by sharing the responsibility with the community who live with orphans.

MESSA education centre is another organization based in Mwanza region which support orphans in provision of education.

On the other hand, we can see the same efforts are being done in other African countries. Some of these examples are like the Mothers Welfare group which was formed in Uganda as a community based organization to support HIV/AIDS orphans and vulnerable children and their families. The organization has been successfully supported the community in addressing the orphan problems by providing social support like education, food, health services and shelters.

Literature from other African countries includes that of Nigeria Mother's Welfare group which is based in Kaduna area. This group has been able to support 30 community schools, run 12 health posts and three in-patient clinics.

In Kenya, we have the Kivuli Centre founded in 1997 and this a success story in its own right.

Initially it intended to rehabilitate the neighborhood street children, the Centre has since greatly expanded in scope. With funding from Catholic organizations, Kivuli provides school, clothing, counseling, social and nutritional support to street children and rising numbers of orphans and vulnerable children (OVC), as well as vocational training and links to employment for young adults at risk. The OVC efforts are complemented by two drop-in centers, separate boys' and girls' centers, an artisan's cooperative that sells products internationally through Fair Trade distributors, and a community water project. In order to address the growing toll of the HIV/AIDS among parents and community members, the Centre initiated the Riruta Health Project, which consists of a small clinic providing preventive and curative services, a laboratory and a cadre of community volunteers. The RHP aims to reduce incidence of HIV/AIDS; support PLWHA, their caregivers and dependents; and combat stigma and discrimination. The Kivuli partnership serves as an impressive example of increased impact resulting from building upon an existing foundation.

In Zambia we have AFRICA KIDSAFE (AKS) Program which was a three–year programme (2004-2006).

This program was implemented by Project Concern International (PCI) in Zambia. The primary purpose of this program was to consolidate and expand a safety net of Non-Governmental Organizations (NGOs) and Community-Based Organizations (CBOs) that work with communities and families to effectively meet the immediate and long-term needs of street and at-risk children throughout Zambia. Funding for this program was provided by Displaced Children and Orphan Fund (DCOF) in Washington, DC. Activities include: (1) building the capacity of local NGOs and CBOs to design, implement, evaluate, and sustain effective programs meeting the needs of street children and those at risk of ending up on streets; (2) reducing the movement of at-risk children to the streets by increasing the care-giving capacity of families; (3) reducing the number of children on the streets, through outreach, family tracing and re-integration; and (4) meeting the basic needs of street children through on-going service provision on the streets and at AKS centers.

3.4 Policy Review

There are number of international conventions, goals, and other instruments that define the framework for action for orphans and vulnerable children. Some examples are listed below:

- The millennium Summit in September 2000 reaffirmed international commitment to working toward a world in which sustaining development and eliminating poverty have the highest priority. It also identified a number of millennium development goals, some of which are relevant to the rights of all

children, including OVC.(United Nations State of the World forum 4-10September 2000).

- The International Covenant on Economic, Social and Cultural rights (1996) is the pre- eminent international treaty dedicated to the protection of economic and social rights. The article recognizes the right to an adequate standard of living, including adequate food, clothing and housing, and to the continuous improvement of living conditions.(UN Information Service GENEVA, 10 August 1996).

Many countries have child-focused legislation, such as a Children's Act (Kenya) or children's Statute (Uganda) that regulates protection of and services for children. The statistics show that few countries have specific national orphan policies like Botswana, Malawi, Rwanda and Zimbabwe. (R. Smart; policies for Orphans and Vulnerable Children).

Tanzania has not yet endorses a new legal framework specifically related to orphans and other children made vulnerable by HIV/AIDS. A draft Children's Bill/Act is pending public discussions and debate before being resubmitted to the cabinet. Tanzania has several social policies focusing on various aspects of importance to the society and sector ministries but yet it does not have a specifically policy on orphans, though it is the view of the government that the needs of orphans and other children made vulnerable by HIV/AIDS are not adequately covered by the existing policies. The government however has made

a decision to establish a policy on orphans and other children made vulnerable by HIV/AIDS.

In 1996 the Child Development Policy was released by the Ministry of Community Development, Gender and Children. The Policy included OVC in a general manner, as part of the Country's articulation of the UN Convention on Rights of the Child (1990), and the OAU Charter on the Rights and Welfare of the Child (1990). Previous to the Child Development Policy, the GOT developed a National Programme of Action on Child Survival, Protection and Development in 1992.

With increased awareness of Tanzania's leadership (President Mkapa's declaration of a HIV/AIDS as a national disaster in 1999/2000), the National AIDS Policy (2001) acknowledges orphans as a priority group under various categories of community interventions stressing the need for communities to take the lead in addressing the orphans issue at the local level. The Policy also acknowledges the vulnerability of orphans due to AIDS and identifies the need for increased community awareness of the inheritance rights of orphans due to AIDS. In the case of orphan-headed households, the Policy notes that orphans should be able to access support from local as well as central government. (Country Response Rapid Analysis:Tanzania on line).

The National Policy on HIV/AIDS defines orphans due to HIV/AIDS as children 15 and under who have lost one or both parents. The draft Guidelines for Community Based Care, Support, and Protection of Orphans and Vulnerable Children, developed by the

Department of Social Welfare, defines most vulnerable children as those below 18 years of age that have either lost parents, and/or are experiencing a lack of care and protection. Given the level of poverty affecting most/all children in Tanzania and the definitions of Orphans and Vulnerable Children/ Most Vulnerable Children (OVC/MVC), there is a suggestion to identify and include a broad orphan population as beneficiaries during finalization of both the draft National OVC Policy and Guidelines. Achieving this will necessitate improvements in establishing systems to define school registration status, housing status, poverty indicators, and birth registration of all children in Tanzania

In the process through Government efforts, various development policies have been responding to the issue of Orphans support at different levels and strategies as follows

Options for the protection of orphaned and vulnerable children

It is believed that, meeting the needs of orphaned children will be a massive challenge, clearly overwhelming the *formal* (statutory) systems such as orphan, foster and residential care. It is widely acknowledged that *informal* systems are likely to shoulder the biggest share of the burden of orphan care. Most com monly, orphans will be cared for by their older siblings, grandparents or extended families. Various additional models of community-based orphan care have emerged in recent years and include:

(i.) Community Child Care Committees, community structures set up to identify orphaned and vulnerable children and to safeguard their rights, e.g. assisting them and their families to obtain child welfare grants, access health care, education, protecting them from abuse etc.

(ii.) 'Create a family' or 'cluster foster care' programmes where substitute mothers are identified and hired to look after a number of orphans in homes in the community.

Creating an enabling environment

Various measures have been taken by the Government to ensure that the emotional and physical needs of orphaned children are met by expanding and encouraging all efforts done by the communities to support orphans. Other steps taken include ratification of the UN Convention on the Rights of the Child, signing the OAU Charter on the Rights of Children; the enactment and review of laws aimed at promoting and protecting the rights and interests of children; the preparation and implementation of the National Programme of Action concerning child survival, protection and development in the 1990s. Furthermore, the Government has created a special Ministry to coordinate child development programmes and encourage non-governmental organizations, individuals etc to establish centers for children in difficult circumstances; to set up special schools and institutions to cater for children with particular problems; to set up voluntary associations to serve and defend children; and to establish juvenile courts so that those suspected of breaking the law are dealt with in such a way that their status as children is not violated. (Child development policy October 1996: Tanzania on Line) The evidence to date is that the children most in need are least likely to receive this support, and mechanisms to address this have been recognized as a national priority. Promote community based systems of orphan support and care by providing support and funding

for non-governmental and community-based organizations undertaking this work. The current government initiatives around home-based care could be extended to include a focus on children.

CHAPTER 4

IMPLEMENTATION

The following chapter is going to reports on the implementation of the project which begun in October 2005.

Soon after the completion of the early project planning stages which involved CNA where by the situational analysis of the orphans and vulnerable children in Mbagala kuu ward was undertaken so as to obtain information which was needed to give a good understanding of the orphan care needs that were important to people in the community and to identifying capacity building gaps within the community and the CBO, an implementation plan was prepared in order to address some of the capacity gaps which were identified.

4.1 Products and Output

During the preparation of the implementation plan a list of in put indicators which describes of what goes into the project and output indicators describing project activities and impact indicators were also developed (Table 13).Such list of indicators was important in the process of measuring the desired change.

Table 13 Products and Outputs

Activity	Input indicator	Output indicator	Impact/product indicator
1.Preparation of work	TTF staff 5 Technical advisor-1 3Days of planning Stationary	Project work plan	Project activities implemented according to plan

Activity	Input indicator	Output indicator	Impact/product indicator
	Budget of Tsh 200,000.00		
2.Prepare simple accounting manual	Technical advisor-1 4 weeks Budget of 120,000.00	Simple Accounting manual	Project using proper accounting guidelines
3.Conduct training on simple accounting and report writing	TTF staff Technical advisor-1 2days of planning of planning Stationary Budget of 240,000.00	2 TTF staff trained	Proper record keeping
4.Prepare monitoring and evaluation plan	TTF staff 5 4days Technical advisor 1 Budget of Tsh 240,000.00	Report	Availability of information on project implementation activities
5.Facilitate Fundraising strategies	Technical advisor 1 TTF staff 5 Technical advisor 1 Budget 100,000.00	Pledges and Funds raised	Available finance to cover project activities
6.Prepare project progress reports	TTF staff 5 Technical advisor 1 Monthly &quarterly reports	Reports	Availability of information on project implementation activities.

4.2 Project Planning

During the implementation process, a project planning table was developed (table 14) which assigns the individuals responsible for each activity, the resource required and the delivery time. This was necessary for the purpose of proper tracking of the

implementation. The staff pattern table was also developed (table 15) as an outline of staff pattern identifying details such as their supervisory roles and training needs which were identified during the planning process.

Table 14 Project planning table

Activity	Actor	Delivery time	Inputs	Product/Output	Budget
1.Prepare strategic plan	TTF staff & stakeholders	3 days	Stationary Project documents	Action plan	200,000.00
2.Identify resource persons to train in simple accounting and report writing	TTF staff	5 days	Terms of reference		200,000.00
3.Conduct training on simple financial accounting and report writing	Technical person s	2 days	Personnel to be trained	Number of trained personnel	240,0000.00

Activity	Actor	Delivery time	Inputs	Product/Output	Budget
Prepare implementation progress reports	TTF staff	Monthly, quarterly and annual	TTF staff	Report on activities implemented	100,000
4.Prepare Simple accounting manual	Technical Advisor and TTF staff	Two weeks	Stationary, Project document	Financial report formats	120,000
5.Prepare monitoring and evaluation plan	Technical Advisor and TTF staff	5 days	Stationary Project workplan,Work plan Staff	Monitoring and evaluation plan	100,000
5.Organize fund raising activities mobilize funds	TTF management	Throughout	Project proposal, Stationary	Funds mobilization requests	80,000

Activity	Actor	Delivery time	Inputs	Product/Output	Budget
6.Prepare Completion implementation report.	Technical advisor, Tumaini trust fund staff and community members	Four weeks	Stationary, Quarterly and annual reports	Final report	240,000
Total					1,280,000

4.3 Project Implementation

Project implementation begun in October 2005.This was done soon after the completion of the initial planning stages.

Table 16 below shows the original implementation plan indicating planned activities which were done according to the planned schedule and the following was achieved;

- An Simple accounting manual was produced for financial matters guide
- A work plan was prepared for the CBO
- 7 CBO staff were trained on report writing
- 3 CBO staff were trained on simple accounting
- 2 Fund raising events were conducted.

- Monitoring and evaluation plan was prepared

15. Staffing Pattern Table

Position	**Responsibility**	**Supervisory role**	**Specialty**	**Training needs**
1. Project director	Overall in charge of the program	Supervises the Field officer and the technical advisor	Project management	
2. Field officer	In charge of the field operations	Supervises all the staff under him	Project management	
3. Technical advisor	Technical support and capacity building	None	Project management	Strategic planning
4. Bursar	In charge of the accounts unit	None	Financial accounting	Financial Management

Position	Responsibility	Supervisory role	Specialty	Training needs
5. Administrative officer	In charge of administration Project management	Driver	Personnel management	Human Resource management
6. Educators	Communication	None	Communication techniques	
7.Orphanage supervisor	Orphanage services	None	Communication techniques	

Table 16. Project Implementation Gantt chart

S/N	Activity	Implementation Period October 2005 to April (2007)																						
		S	O	N	D	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J	J
1.	Prepare strategic plan		—	—																				
2.	Prepare simple accounting Manual				—	—																		
3.	Identify resource persons to train on simple accounting and report writing						—																	

4.	Train on simple accounting and report writing																						
5	Facilitate mobilization of resources																						
6	Prepare monitoring and evaluation plan																						
6.	Conduct Monitoring and evaluation of the project activities																						
7.	Prepare Project report																						

CHAPTER 5

MONITORING AND EVALUATION

Monitoring can be defined as a regular observation and recording of activities taking place in a project or programme. It is a process of routinely gathering information on all aspects of the project. Monitoring also involves giving feedback about the progress of the project to the donors, implementers and beneficiaries of the project. To monitor is to check on how project activities are progressing. It is observation; — systematic and purposeful observation. Reporting enables the gathered information to be used in making decisions for improving project performance. (UNPD M&E handbook 2005). Monitoring is very important in project planning and implementation. It is like watching where you are going while riding a bicycle; you can adjust as you go along and ensure that you are on the right track.

Monitoring provides information that will be useful in:

- Analyzing the situation in the community and its project;
- Determining whether the inputs in the project are well utilized;
- Identifying problems facing the community or project and finding solutions;
- Ensuring all activities are carried out properly by the right people and in time;

5.2 Monitoring

In this study, monitoring of project activities was done to assess whether the project activities were conducted as planned and also to assess if the available human resources and other non-human resources were used efficiently during project implementation. Monitoring provides the management with information needed to analyze current situation, identify problems and find solutions, discover trends and patterns, keep project activities on schedule, measure progress towards objectives and formulate/revise future goals and objectives and finally make decisions about human, financial, and material resources.

Monitoring is a continuous process and the first level of monitoring is done by project staff. Supervisors are responsible for monitoring the staff and tasks under them, and the project advisor is responsible for monitoring all aspects of the project. The second level of monitoring is done by the donor. Through field visits and routine reports from the supervisors, the donor monitors progress and measures performance.

Monitoring was done through, field visits, review of service delivery and commodity records, management information system (CEDPA, pp 57-59).

Information which was planned to be collected includes; the use of time, people, money, and other material resources, results, staff supervision, budget/expenditure , commodities and service delivery and training needs.

In order to ensure timely delivery of services there was a need to establish a management information system which was designed to collect information on project activities, to plan, monitor, and evaluate the operations and performance of the project

Monitoring of project activities was done monthly were the team members would meet and discuss on the progress of the project.

5.3 Monitoring questions:

- Are the planned meetings conducted as planned and at the right time?

  eg - Awareness creation seminars

  -counseling seminars etc

- Are the set of resources (Staff, resource persons, funds, project beneficiaries, chickens) brought together to accomplish project activities

  -Are the OVC receiving school material?

  -Are the OVC receiving life skills training at the centre?

- Are the set of activities by which resources are used in pursuit of expected results e.g.;

Table 17 Information for Monitoring Project Operations

Category of information	**What to monitor**	**What records to keep**	**Who collects data**	**Who uses data**	**How to use information**	**What decision can be made**
1.Work plan activities	Timing of activities Availability of personnel and resources	Monthly/quarterly work plans -work schedules	Project coordinator Technical assistant. Project officers	Project coordinator Technical assistant Donor	Ensure staff and other resources are available	Reschedule activities and deployment of resources as needed

Category of information	What to monitor	What records to keep	Who collects data	Who uses data	How to use information	What decision can be made
2.Cost and expenditure	Budgeted amounts and Expenditure Balance	Ledger of expenditure Receipts Bank transaction Reports to donor	Project officer	Project coordinator Technical assistant. Donor Auditor	Ensure funds are available Ensure compliance with funding regulations	Authorize expenditure determine need for other funding Source.
3. Staff and supervision	Knowledge & skills of staff, educational level and job performance	Performance review Job description Feedback from training attended	Supervisors Technical assistance Trainers	Supervisors Project advisor Project coordinator	Advice staff on career	Training needs Placement
4. Receipt and distribution of materials to OVC	Books Uniforms	Store register Field worker reports	Field officer	Technical assistance Project coordinator Donor	Secure materials for distribution process	Quantity to required
5. Results	No and type of services provided	Attendance register Fieldworker reports	CBO leaders Technical assistance Field officer	Field officer Project coordinator Donor Technical assistance	Ensure objectives are realistic Assess quality and appropriateness of services provided	Revise objectives Retrain staff Revise project strategy and approach

5.4 Monitoring Methodology

During the monitoring, different methods to conduct monitoring exercise were used. These methods included focus group discussion, observation, and review of participant's record books, attendance register and quarterly reports.

(i) Focus group discussion

Focus group discussion was done using the checklist prepared by the researcher before the interview. The discussion was conducted with members and leaders of the organization in order to understanding the progress of the activities aimed at achieving the goal of giving care and support to the vulnerable children.

(ii) Observation

Observation was done in a participatory process by attending group activities. This was aimed at seeing as to how the community members actively participated in the activities. This was also to observe as to how the members participated in the decision making process, for example participation of group members in training and practice. Observation method was used for the purpose of getting direct information about behavior of individual and groups.

(iii) Review of records

Record review was useful for determining the understanding of trainees, content and usefulness of the material offered during training and trainee's ability to understand the contents. Attendance register helps monitoring team to monitor number of participant's attending each training session and those who received counseling at the TTF centre.

Quarterly reports assist all stakeholders and donors to understand what decision to be made in order to achieve the desired goal.

5.5 Monitoring results

Monitoring of project activities was done on weekly basis using qualitative method. Data was manually analyzed and the results showed that about 90 % of all the planned activities were timely done.

- 25 OVC received training in tailoring (85%)
- 45 OVC received school materials (100)%
- 10 OVC received health services (75%)
- 4 seminars on HIV/AIDS awareness were conducted (100%)
- Simple accounting manual was produced

5.6 Evaluation

Evaluation can be defined as a selective exercise that attempts to systematically and objectively asses progress toward the achievement of an out come .Evaluation is not a one time event but an exercise involving assessment of different scope and depth carried out at several points in time in response to evolving needs for evaluative

knowledge& learning during the effort to achieve an outcome. All evaluations –even project evaluations that assess relevance, performance and other criteria need to be linked to outcomes as opposed to only implementation and immediate output. (UNPD M&E handbook 2005).

In this study evaluation was done to assess the achievement of immediate objectives, output and activities. A team comprising of a CED technical adviser, CBO leaders and members, village extension officer and development partner from SIDO were involved in the mid term and end term evaluation of the project. The evaluation process was done through interviews, review of progress report, existing group records and community financial accounts. The technical advisor formulated an evaluation plan which consisted of both formative and summative evaluation. The purpose of the evaluation was to evaluate the successful accomplishment of project objectives.

In this study both the two types of evaluation were used. These are the formative and summative evaluation.

Formative evaluation is used to assess the current, ongoing program activities, it provides an internal process that compares the planned program with the actual program, and measures the progress made toward meeting the program goals. This evaluation type helps identify problems threatening the program's viability, enabling the program manager and planning group to make mid-course corrections.

5.7 Formative Evaluation

Formative evaluation is a valuable tool that informs project coordinators the status of the project and provides the basis for a future summative evaluation of the project.

This was conducted four month after the start of the project to assess the ongoing project activities and provide information that could be used to improve the project performance.

During the formative evaluation the important aspects which were assessed were

- How the project was being implemented, was it operating according to how it was intended?
- How the progress was made toward reaching the project goal.
- Evaluation questions were as follows:

(1) To what extent has Tumaini Trust Fund has managed to support the community in responding to the need for care and support of orphans?

(2) To what extent Has Tumaini Tust Fund been able carryout its activities aimed at addressing the needs of the OVC in the locality.

(3) To what extent was the Community participated in the project activities.

(4) To what extent was the Local CBO's /NGO's and community as a whole supported by the Government authorities and other development partners in effectively addressing this problem?.

5.8 Instruments and Data Sources

Evaluation plan was prepared prior the implementation of the project activities so as to determine as for example what kinds of questions to be asked, how data will be collected, etc.

Timeline for the evaluation was developed before the startup of the project to ensure timely data collection and smooth running of the project.

In selecting the method for collecting data for formative evaluation it was necessary to consider the strengths and weaknesses of each method. During the process a multiple sources of data collection method was used in order to answer each evaluation question.

The formative evaluation focused on implementation rather than outcomes, evaluators focused on the trained women rather than having a comparison or control group. The method used to collect information, were interviews, observations of the training sessions and review of training manuals.

18. Table for Formative Analysis Plan

Evaluation question	**Indicators**	**Data sources**	**Who collect data**	**Sampling approach**	**Analysis**
1. To what ex tent does the project implementation plan being followed as documented in the work plan?	Number of activities conducted and accomplished. Number of resources available	Trainees and CBO leaders surveys Document review Training session	Project coordinator Project technical adviser Supervisors	Random and Purposive sampling	Descriptive statistics Training observation

Evaluation question	Indicators	Data sources	Who collect data	Sampling approach	Analysis
	Number of trainees and trainees available	observations Attendance register			
2. To what extent the OVC received material support.	Number of training sessions Content of the training material Change in knowledge and practice	Trainees , project staff and CBO leaders surveys Document review Training session observations Attendance register Farmer record book review	Project coordinator Project technical adviser Supervisors	Random and purposive sampling	Descriptive statistics Observation of training session
3. To what extent did the OVC receive training in life skill to increase their income?	Number of trained OVC coming up with Income generating activities.	Trainees , project staff and CBO leaders surveys Document review Field visit Observations	Project coordinator Project technical adviser Supervisors	Random and Purposive sampling	Descriptive statistics Training session, field visit
4. Are the resources being appropriately directed to fulfill the goals of the project?	Number of available resources Number of participants	Trainees , project staff and CBO leaders surveys	Project coordinator Project technical adviser	Random and Purposive sampling	Descriptive statistics Training session observation

Evaluation question	Indicators	Data sources	Who collect data	Sampling approach	Analysis
	benefit from available resources	Document /ledger review Observations	Supervisors		

5.9 Timeline for Implementation

Project activities which included training session and preparation of simple manual for the project were done from October 2005 to April 2006 . Observation was done on monthly basis in order to observe changes over the course of the training period. A review of document was also done during the process.

5.10 Findings

Findings of the formative evaluation were discussed during the meeting. Planning meetings were conducted after every three months. A formal report was prepared for project staff and other stakeholders, which combined survey analysis using frequencies and percentages, qualitative data from training session's observations, and information gathered from the document review was done throughout the year.

(1) To what extent has Tumaini Trust Fund has managed to support the community in responding to the need for care and support of orphans?

Results show that ninety five percent of the respondents indicated that Tumaini Trust Fund has managed to support the community in responding to the need for care and support of orphans?

(2) To what extent Has Tumaini Tust Fund been able carryout its activities aimed at addressing the needs of the OVC in the locality.

Ninety percent of the respondents indicated that Tumaini Tust Fund been able carryout properly its activities aimed at addressing the needs of the OVC in the locality.

(3) To what extent was the Community participated in the project activities.

Ninety five percent of the respondents indicated community participation was high in implementing the project activities.

(4) To what extent was the Local CBO's /NGO's and community as a whole supported by the Government authorities and other development partners in effectively addressing this problem?.

Only forty percent of the respondents were satisfied with what the government was doing to support the communities and the CBO.

5.11 Discussion of the formative evaluation

The above results show that the project is being implemented well within track, the activities are timely done. There is a high level of community participation and that guarantees ownership.

5.12 Summative Evaluation

Summative evaluation measures the success of the completed project. The result of summative evaluation can be used to recruit new host sites, funding sources, and

participants, and to publicize the project. The summative evaluation often turns up unanticipated outcomes, identifying aspects of the project that would be otherwise overlooked. The evaluation issues considered in this project were: Relevance, Project Design and Delivery, Program Success and Program Cost-effectiveness.

5.13 Instruments and Data Sources

Data collection was a continuous process throughout the project period. Baseline data was collected in the beginning of the project in order to have a reference point from which to judge a project's impact.

Both qualitative and quantitative methods were used in gathering information.

Table 19 Summative Evaluations Questions

Summative evaluation issues	**Evaluation Questions**
Rationale/relevance	• How does the Project reflect current priorities and objectives of the Mbagala kuu ward OVC needs? • Does the Program continue to produce results that reflect the Mbagala kuu ward OVC needs priorities and the current needs of community? • Is the Program operating within its mandate? Is the Program the most appropriate response to this need? • Should the Program's objectives and/or the expected results be either expanded or restricted?
Design, delivery and management	• Do the project's activities reflect the principles of effective program delivery? • Are activities logically related to required outputs? Do all activities and outputs contribute to meeting the Projects objectives? Are any current activities or outputs not needed? • Are the community satisfied with the services and support offered by the project?

Summative evaluation issues	Evaluation Questions
Success/impact	• To what extent is the project achieving its expected results?
Cost-effectiveness/ alternatives	• Is the current project design the most effective and efficient way to achieve outcomes? • Are the resources that have been allocated being used in the most efficient and effective way to deliver appropriate results? • How does the government contribute to assisting the project?

5.14 Study Design and analysis for Summative Evaluation

The study used observational descriptive design so as to get as much information for the evaluation purposes. The summative evaluation focused on concrete measurable CED outcomes that derive directly from the project. This includes process objective such as trainings, number of business started, income increase and economic empowerment. However, it should be noted that the process of data collection was not a single day act but it was a continuous process throughout the program period. The collected data were compared with the baseline data collected before the startup of the project.

An analysis plan for the summative evaluation was developed in order to guide the evaluation process.

Table 20. Summative Evaluation Analysis Plan

Evaluation issues	Indicators	Data sources	Who collect data	Sampling approach	Analysis
1. **Rationale/relevance**	The extent to which project activities	Trainees and CBO leaders surveys, key	Project coordinator	Random and Purposive	Descriptive statistics

Evaluation issues	Indicators	Data sources	Who collect data	Sampling approach	Analysis
	address OVC needs	informants Document review Training session observations	Technical Assistant adviser Field officers	sampling	Training observation
Design, delivery and management	- Number of trained OVC receive life skills - Number of training tools used and the extent to its relevancy	Trainees , project staff and CBO leaders surveys Document review Training session observations	Project coordinator Technical Assistant adviser Supervisors	Random and purposive sampling	Descriptive statistics Observation of training session
Success/impact	-Change in skills and knowledge - Changes in practice	Trainees , interview, key informants	Project coordinator Technical Assistant	Random and Purposive sampling	Descriptive statistics

5.15 Methodology for Evaluation

Evaluation was done as planned (table 20) whereby the data collection process was done as a continuous process. The process involved a number of activities which included; Review of documents, face to face discussion with key informants like the OVC and the guardians to evaluate changes which occurred during the stated period, also observation of training sessions was done.

In a span of 18 months project life, the project has been successful in achieving its goal of promoting community participation, economic empowerment and capacity building to the CBO and the community.

Table 21 Summative Evaluation Outcomes

Indicators	**Summative evaluation results, January 2007**	
Project Goal: To promote community participation, economic empowerment and capacity building to CBO and the community	Expected outcome	Actual outcome
Impact: Number CBO staff who received training report writing training	7	7
Outcome: Number CBO staff empowered through increase in knowledge	13	13
Objective 1: To facilitate capacity building to the CB o (a) training on simple accounting	3	3
Impact: Improved record keeping	3	3
Outcome: CBO staff increased knowledge in simple accounting.	3	3
Output: Number of CBO staff trained in simple accounting	3	3
Objective I (b) ; Prepare a simple accounting manual for the CBO	1	1
Impact: Availability of operating accounting guidelines manual	1	1
Outcome: - Improved recode keeping	1	1

Indicators	Summative evaluation results, January 2007	
Output: - Proper Accountability and use of financial resources	3	3
Objective I© : To train CBO staff in report writing	7	7
Impact : Improved project reports	7	7
Outcome: - : Increased number trained CBO staff in report writing	7	7
Output: Number of CBO staff with increased knowledge in report writing	7	7

5.16 Findings

This section of the report presents the findings from the evaluation survey.

1. Is the Project operating within its mandate? Is the Project the most appropriate response to this need?

   Following findings from observation, document review and structured discussion with key people and selected trained women revealed that the project is operating within its mandate.

2. Should the Program's objectives and/or the expected results be either expanded or restricted?

   According to the results from interviewed respondents the project can be extended to other Wards but Government support and other stake holders should be increased.

3. Are activities logically related to required outputs? Do all activities and outputs contribute to meeting the Projects objectives? Are any current activities or outputs not needed?

   From observation and results of the document review it showed the itemized project activities all contributed to the achievement of the project objectives.

4. Are the community satisfied with the services and support offered by the project?

   Survey results from focus discussion with key informants and review of documents revealed that the community is satisfied with the services provided by the project.

6.17 Sustainability

Sustainability of any project is an essential and crucial aspect in the development process. The social, political and financial factors are the important elements to be considered when looking into the projects sustainability.

In this case , socially this project is ensured of sustainability through the capacity building given to the CBO staff and the community as a whole in the identification of the social problems faced by the community and coming up with the solutions using participatory approach. This therefore has created a good social environment which makes the project to be well accepted among the community members.

The capacity enhancement was also given through training in project planning and management using participatory approach whereby all stakeholders (primary and secondary) are involved.

According to the research results, Tumaini trust Fund is well accepted in the community and it has been working hand in hand with the community members hence there is a sense of ownership of the activities implemented and this guarantees sustainability.

Financially, the CBO is receiving support from both community members and other donors. Members of the community and other stakeholders are also ready to offer their material and financial support to make sure that planned activities are implemented. During the implementation period TUMAINI Trust fund had received funds from CONCERN organization and the CBO board members. The CBO also had received training and school materials from friends in USA and the neighboring Roman Catholic Church. The fund mobilization activities also were done and the CBO has received some financial support pledges.

On political aspect, The Tumaini Trust Fund is well supported by the political local leaders and the government as a whole. Again Tumaini trust Fund being a local CBO it enjoys good political and social support of the Government and the civil society. This is evidenced by the release of the Child Development Policy by the Ministry of Community Development, Gender and Children which included OVC in 1999 , as part of the Country's articulation of the UN Convention on Rights of the Child (1990), and the OAU Charter on the Rights and Welfare of the Child (1990). Previous to the

Child Development Policy, the GOT developed a National Programme of Action on Child Survival, Protection and Development in 1992.

CHAPTER 6

CONCLUSION AND RECOMMENDATIONS

Like most Sub-Sahara African countries, Tanzania is also experiencing an unprecedented rise in the number of orphans and vulnerable children (OVC). Statistics show that the number of orphans and vulnerable children in Tanzania is increasing exponentially and is currently estimated to have already approached the 2.5 mark (ESAURP study quoted in Charwe et al 2004, 11). The rise in the number of OVCs is emerging at a time when the capacity of families to respond to the crisis is increasingly compromised by the breakdown and or weakening of the social system that traditionally offered social protection to these children. (Lessons from the OVC programme in Tanzania Suma Kaare 2005).

On the other hand how ever, in response to this challenge, it has been noticed that a lot of CBO's have come up with different programmes to support the communities to cope up with this situation.

This chapter gives a conclusion of a study undertaken to ascertain the contribution of Tumaini Trust Fund as one of the local Community Based Organization towards the care and support of orphans.

The impact of parental death on children is complex and affects the child's mental health, and social energy. Living as orphans might further results in little development of the emotional intelligence and life skills such as communication, decision making, and negotiations skills etc. Added to this orphans often have the lack of hope for a future and a low self-esteem. Emotional intelligence, life skills and a healthy self-esteem are an

integral part of once personality development but as well form the foundation for the development of a family, community and nation.

There is therefore a need for the society to know the extent of the problem, be able to respond to the severity of the crisis and at the same time it is important to ascertain the efforts which are already being done by the community and the local CBO's /NGO's in addressing this issue.

6.1 Results

The results of this study and the practical working with Tumaini Trust Fund Organization for eighteen moths with the aim of providing capacity building to the CBO by (i)Preparation of a project action plan(ii) Preparation of simple financial manual to be used by the CBO(iii) Conducting training on simple accounting(iv) Conduct training on report writing (v) Preparation of project monitoring and evaluation plan(vi) Assist in coming up with strategies for funds mobilization show that about 90 % of all the planned activities were timely done.

25 OVC received training in tailoring (85%),45 OVC received school materials (100)%,10 OVC received health services (75%),4 seminars on HIV/AIDS awareness were conducted (100%),Simple accounting manual was produced (100%).

These results have been very positive following the use of participatory approach where by all actors were involved in all the stages of the project implementation and decision making.

However, from the above results it can be also noted that for example only 75% of the OVC received health services as compared to the target. This implies that more follow up is needed from the caretakers and CBO staff in terms of making sure that all the OVC who needed healthcare services were linked to the health care centers as planned.

6.2 Strengths and Opportunities

The research analysis reveals that local NGOs or CBO's are very capable to reach the community needs, and are acceptable by the community.

By using community based support it covered the needs of a large number of orphans and vulnerable children for relatively low cost in a culturally appropriate way. It is based on sound development principles targeted for the needs of families in crisis.

When it is done well, it uses strong community participation to identify the needs of the orphans and to develop long-term solutions to their problems. Generally by using Local NGO it is flexible enough for each orphan family to choose what activity is most appropriate for them to address their needs. Examples of this might include establishing an income generating activity .The principal objective of this model is to empower the family unit to function effectively. In times of extreme hardship, the community structure of these programs can provide a safety net for relief assistance to be distributed more equitably.

The strength of this type of support (Community based support) also is that, it is the most culturally appropriate. The children are raised as a family and are more likely to receive love and affection when kept with siblings and relatives than those who are

institutionalized or separated. This security is critical to the development of life skills that are needed to support themselves and to enter into marriage and future family relations

6.3 Summarized important points

The findings have clearly shown that there has been good success of the project implemented for the aim of supporting orphans.

The following are the key elements which contributed to the success of the project of Mbagala kuu ward

- Strong community participation
- Clear and simple management structure of the organization that includes the guardians in decision making
- Clear, measurable, goals
- Flexibility of the NGOs leader on various changes during project implementation

Finally, with right support and commitment from government and other partners, the community based organization and the communities will have the potential to give to millions of children the chance to live decent lives and create decent future.

6.4 Recommendations (Next steps)

Although the main activities which were conducted during this period were aimed at addressing the capacity gaps which were identified during the CAN however, it was also

generally found during the study that, in order to respond to the issues facing orphans and other vulnerable children there should be a guidance to be followed especially by those who would want to take similar undertaking of giving care and support to the OVC.

The following is recommended as guidance;

(i). Strengthen the capacity of families to protect and care for orphans and vulnerable children by providing economic, psychosocial and other support. This may be done in a number of ways including economic strengthening, providing psychosocial support, supporting care takers, supporting succession planning, prolonging the lives of HIV positive parents and strengthening young people's own life skills.

(ii). Mobilize and support community-based responses by outlines the key elements of community mobilization including engaging local leaders, enabling local communities to talk more openly about HIV/AIDS, organizing and supporting cooperative activities and providing and supporting community care for children and young people without any family support.

(iii). Ensure access for orphans and vulnerable children to essential services, including education, health care, birth registration and others. Key services for orphans and other vulnerable children include education, birth registration, health, nutrition, water and sanitation, judicial protection and placement services for children and young people without family care.

(iv). Ensure that governments protect the most vulnerable children through improved policy and legislation and by channeling resources to communities. This includes a wide

range of provisions such as, ensuring that governments develop policies, strategies and action plans to guide national responses, enhancing government capacity, ensuring that resources reach local communities, ensuring that each country has a supportive legal framework and establishing mechanisms to ensure information exchange.

(v) Raise awareness to create a supportive environment for children affected by HIV/AIDS. This includes conducting a situation analysis, tackling stigma, silence and discrimination and strengthening and supporting community mobilization efforts at community level.

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