CONTRIBUTION OF WORLD VISION TOWARDS IMPROVING CHILD WELFARE SERVICES: A CASE OF MAGOLE AREA DEVELOPMENT PROGRAM, MOROGORO REGION, TANZANIA

MACHA, DORIS TIMOTHY

A DISSERTATION SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN PROJECT MANAGEMENT AND EVALUATION OF THE SOKOINE UNIVERSITY OF AGRICULTURE. MOROGORO, TANZANIA.

2019

ABSTRACT

The study aimed at assessing the contribution of child welfare services provided by World Vision, Tanzania at Magole Area Development Program (ADP). Its specific objectives were to assess the types of child welfare services rendered by World Vision Tanzania at Magole ADP, to analyze the needs of the children at ADP Magole, to evaluate the contribution of WV in the program and to assess the determinants of satisfaction of the program. The study adopted multistage sampling also known as multi-stage cluster sampling technique in which structured questionnaire with open and closed ended questions and key informants interviews were used to collect primary data from a sample size of 110 respondents. Then Statistical Package for Social Sciences (SPSS) version 16 was used for analysis of data. It involved the use of logit regression modal and descriptive statistics such as frequencies and percentages which are presented in tables. The findings of the study showed that the world vision Magole ADP organization has a top- down approach when it comes to selecting and registration of sponsored children to planning the implementation of their projects. The program provides material stuffs to children such as bed sheets, mosquito nets, exercises books and soap. This created classes among participants and non-participants. There were some non-participants who really required the services, but could not receive because they were not selected or registered by the organization. There are some children who really live in poor conditions but were not selected. The study recommends the government and other NGO's to work hand in hand with world vision to serve children who missed the opportunity to be in the program by promoting and implementing sustainable development projects that will ensure promising wellbeing to the children.

DECLARATION

I **Doris Timothy Macha**, declare that this dissertation is my own original work done within the period of registration and that it has neither been submitted nor being concurrently submitted in any other institution.

_____   _____

Doris Timothy Macha   **Date**

(M.A. Candidate)

The above declaration is confirmed by

_____   _____

Prof D. G. Mhando   **Date**

(Supervisor)

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ACKNOWLEDGEMENTS

First and foremost, I would like to thank the Almighty God for His guidance throughout the entire research process till it has been successfully done. Like other scholarly works, a dissertation has involved contributions from many people who invested a great deal of time toward its success.

My deepest gratitude goes to my supervisor Prof. David G. Mhando whose academic advice, constructive criticism, resourceful guidance, encouragement during the whole writing process to its completion has helped me design and execute this research in a professional manner.

I would like to extend my sincere gratitude to the entire team of World Vision Tanzania (WVT), Magole ADP staff and all the community members who participated in my research for their valuable inputs and their time to share their experiences, perceptions and beliefs with me.

Special thanks go to my family, Prof. Joyce Lyimo-Macha (my mother) and Eric Macha (my brother) and other close family members for their prayers and support throughout my entire study period.

I would like to extend my appreciations to my entire classmates of Project Management and Evaluation (PME) who always kept in touch to make sure that everyone will successfully achieve his/her targets.

Lastly, I am also grateful for my friends who encouraged me to work hard. Without forgetting, my special thanks should go to my friend Zabron Joshua for his technical assistance during the period of data collection, analysis and writing this dissertation.

To all of them, I would like to say: Thank you very much.

DEDICATION

This dissertation is dedicated to my late Dad Timothy Macha, may his soul rest in peace. And to my lovely family, Prof. Joyce Lyimo-Macha (my mother),who laid down my foundation of education and supported me endlessly, without forgetting Eric Macha (my young brother), who assisted me in my entire period of my academic life.

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LIST OF ABREVIATIONS AND ACRONYMS

ACPF   African Child Policy Forum

ACRWC   African Charter on the Rights and Welfare of Children

ADP   Area Development Program

AIDS   Acquired Immune Deficiency Syndrome

APR   Annual Progress Report

ASPF   Adoption and Safe Families Act

CARE   Cooperative for Assistance and Relief Everywhere

CEDAW   Convention on the Elimination of All Forms of Discriminations against Women

CRC   Convention Rights of Child

FBO'S   Faith Based Organizations

HIV   Human Immunodeficiency Virus

NASW   National Association of Social Workers

NGO   Non-Governmental Organization

SDG   Sustainable Development Goals

SPSS   Statistical Package for Social Sciences

SUA   Sokoine University of Agriculture

UN   United Nations

UNICEF   United Nations International Children's Emergency Fund

URT   United Republic of Tanzania

WV   World Vision

WVT   World Vision Tanzania

CHAPTER ONE

1.0   INTRODUCTION

1.1   Background Information

In recent years, a growing awareness of child welfare has led to calls for interventions, which aimed at preventing poor wellbeing of children and increasing attention to the needs of children UNICEF (2005). The World Bank defines a vulnerable child as the one whose safety, wellbeing and development are threatened by major dangers including "lack of care and affection, adequate shelter, education, nutrition and psychological support" and that development agencies should focus on child wellbeing, and their survival (World Bank, 2004).

Child welfare is a critical state responsibility and includes protecting children from abuse and neglect, and ensuring that children have safe, stable, and permanent living situations and as a continuum of service designed to ensure that children are safe and that their families have the necessary support to care for their children successfully (Child Welfare Gateway, 2012).

Globally, Child Welfare Information Gateway (2013) argues that; the goal of having child welfare services is to promote the well-being and safety of children and their families by helping them care for their children, also through helping children find permanency with kin or adoptive families. In Africa, many child welfare organizations include poverty, as a major issue for poor child wellbeing (Lewin and Sabates, 2011), although some progress has been made in dealing with poverty such as sponsorships, grants, provision of loans and others. Furthermore, there is a number of national policies, interventions and projects dealing with poverty reduction.

However, there is still a number of other issues and cases creating poor wellbeing of children in Africa such as child trafficking, prostitution, drug abuse, alcohol addiction, illiteracy, and poor sanitation. In Tanzania, the child welfare centers are operated by both the government and non-governmental institutions. However, despite of the role of governmental organizations, there is a number of private sector institutions and/or NGO's which provide child welfare services as well, example of these organizations are such as CARE, World Vision, Vision Fund, Save the Children and many others. All these organizations collaborate with the government and the world with the same goal of implementing global sustainable goals which provide children with their needs.

Balmer Randall (2002) viewed World Vision as a global Christian, humanitarian aid and development organization; which deals with activities such as emergency relief, education, health care, economic development and promotion of justice. Such organizations help to empower children as citizens and participants in their own well-being, and to minimize any risk of harm or negative consequence (David Young Internal and External Legal, 2012). The World Vision Tanzania (WVT) services are implemented in a manner that keeps the safety of children as the top priority. In fact, their 2016-2020 strategic focus goals are to contribute to the measurable improvement in the sustained well-being of 15 million boys and girls, especially the most vulnerable ones by engaging actors dealing with children's lives and donors who sponsor them to address their living conditions. WVT mainly focuses on Livelihood, Health, Nutrition and WASH, whereas Livelihood being the primary sector; Spiritual Development and Protection of Children will be cross-cutting functions. Education is prioritized as a secondary objective and will be implemented depending on availability of funds.

The WVT principles and strategies of promoting child wellbeing are implemented in all its ADP's all over the country including Magole ADP which acts as a guide towards promoting betters services.

For instance, there are some programs from World Vision that have been helping to bring essentials like clean water, nutrition, education, and hope to children and the community to fight against poor wellbeing. In fact as this agency helps a child in need, it builds a special relationship that encourages children to thrive for the future. In addition, the donations from various individual donors and private organizations join forces to help lift the children in the community out of poverty for good despite of the apparent focus on children's interests

1.2   Problem Statement

For many years, children have been in denial of some sustaining requirements resulting to the act of irresponsible raising of children in the community especially in Africa whereas most of the researches reported by UNICEF (2005) showed that, there is a probability of 30% to 60% of families with children still facing poor welfare. The child policy of Tanzania of 1996 which was revised in 2008 views the necessity of child survival, protection and development (URT, 1996, 2008). This act requires both public and NGOs to work together to improve the welfare of children in communities in need of their services. However, there are also non-formal organizations working with WV Magole such as CBO, FBO, village community banks and others which also participate in the child welfare program.

According to NASW (2013), the joint forces of both public and private service providers tend to face crucial hindering factors to contributions of the program such as change in policies and practice approaches which places a greater demands on the child welfare organizations, example they use their roles, priorities, and practices in all aspects (economic, social, and political), to look for better effective future solutions of serving vulnerable children.

Sanders (2012), suggests that the availability of these services is uneven across communities and populations, since it leaves many of the most vulnerable children and families without adequate services. However, the agencies also miss opportunities to identify, determine, and communicate which interventions work, for whom are they most effective, and how they can be consistently implemented (Aarons and Palinkas, 2007).When services are offered, their quality and potential impacts vary greatly (Paxson and Haskins, 2009). Therefore WV as a relief organization, development and advocacy agency has a responsibility in responding to child welfare program especially to communities where children are in need. Therefore the study will examine their contribution towards child welfare services in Magole community.

1.3   Justification

When children's well-being is being researched, a comparison has to be drawn between the indicators for children in rural areas and those in urban settings and that the prevention of child negligence and parental negative actions towards children requires public education and commitment from NGOs and members of the communities to provide emotional, social and financial support systems (Domestic Violence and Child Maltreatment, 1999).

Globally, some agencies tend to experience substantial barriers in promoting services failing to develop and maintain an effective quality workforce, example: low salaries, risk of violence, limited training, insufficient resources, inconsistent supervision, disempowering leadership, excessive regulations and administrative burdens. In addition to those barriers are such as high caseloads, workloads, limited incentives and opportunities for professional growth. An effective child welfare workforce must know how to accurately assess and provide what children and families need, have the resources needed to do their work, and be connected to the families and communities. Therefore, they have to engage in partnerships and collaborations with the agencies to continue building bridges across child welfare programs. However, due to these existing challenges, hinders the agency's contribution in implementing of wellbeing to all children (ACPF 2016).

Therefore, the study focused not only on how World vision's often collaborates with other private child welfare agencies, community-based organizations, and other public agencies to ensure that families receive the services they need (such as supportive child care, parenting classes, mental health services and substance abuse treatment) but also identifies issues that jeopardizes the children's future survival, as well as aiming to improve child welfare outcomes.

Children have the right to be protected, clothed and fed, as perceived by the sustainable development goals to promote proper child livelihood. These SDGs are universal in scope, and they call to leave no one behind. It puts the world's most vulnerable and marginalized people including children as priority. For example according to UNICEF's work is structured around 5 overarching areas of well-being for every child grounded in the 2030 Agenda for Sustainable Development. These five areas are: a) every child survives and

thrives, b) learns, c) is protected from violence and exploitation, d) lives in a safe and clean environment, and e) has a fair chance in life. Some SDG's in line with the study are such as poverty reduction (Goal 1), health (Goal 3), education (Goal 4), gender equality (Goal 5), violence against children (Goal 16.), and other areas that impact children's lives. The child policy of Tanzania of 1996 which was revised in 2008 acts as a framework to provide guidance on child survival, protection and development. This policy is in line with the rights of children set by UN which are survival rights, development rights, protection rights, participation rights and the right not to be discriminated (URT, 1996).

1.4   Objectives

1.4.1   Overall objective

To assess the contribution of World Vision Tanzania, towards providing child welfare services at Magole ADP

1.4.2   Specific objectives

1.   Identify the types of child welfare services offered by WV Magole ADP.

2.   Analyze the needs of the children at Magole ADP.

3.   Evaluate the contribution of the WVT in the program at Magole ADP

4.   Assess the determinants of satisfaction of services rendered by the program at Magole ADP

1.5   Research Questions

1.   What types of child welfare services are offered by WVT Magole ADP?

2.   What are the needs required by children at Magole ADP?

3.   What is the contribution of the WVT in the program?

4.   What are the determinants of satisfaction in the program?

CHAPTER TWO

2.0   LITERATURE REVIEW

2.1   Conceptualization of Key Concepts/ Terms

2.1.1   Non-governmental organizations

The term "non-governmental organization" was first coined in 1945, when the United Nations (UN) was created (Davies, 2014).These non-profit organizations are independent of government. In some countries the term NGO is applied to an organization that in another country would be called an NPO (non-profit organization), (Vakil, 1997) and can either be domestic or international. They are often formed by citizens themselves and run by group of volunteers. The NGO's are usually active in areas of humanitarian, educational, public policy, social, human rights and others. They are funded through donations by volunteers or sometimes the government.

Most NGO's conduct wide range of activities in order to bring change based on the set objectives. They differ according to how they operate. For instance, some operate through charity, services, empowering and participatory while others through community base organization, city wide, state, national and international and by track II diplomacy, which involves the engagement of non-official members of the government such as former policy makers. There are a number of international and domestic organizations working in the area of improving child welfare example: World vision. Some NGO's may have charitable status, while others may be registered for tax exemption based on recognition of social purposes while others may be fronts for political, religious, or other interests (Werkerand, 2008).

2.1.2   Child

A child is a human being between the stages of birth and puberty also referred to as a minor, a person younger than 18years of age. Children are raised either by parents, fosterers, and guardians or partially raised in a day care center (Oxford University Press, (Accessed site on 4[th]May 2018). Many communities perceive a child as an adult after undergoing a rite of passage, which may or may not correspond to the time of puberty *Oxford English Dictionary* 397 6th ed. (2007). According to Convention on the Rights of the Child (Article 1): also refers a child as a person below the age of 18, Where as adults are responsible to ensure what is best for children and make decisions and should think about how their decisions will affect children (Convention on the Rights of the Child 1989) Accessed site on 2[nd]May 2018.

2.1.3   Child welfare services

The child welfare services system is a group of services designed to promote the well-being of children by ensuring safety, achieving permanency, and strengthening families to care for their children successfully. Child welfare agencies are expected to be respectful of a family's culture, values, customs, beliefs, and needs (Child Welfare League of America, 2005). Most families become involved with child welfare system after suspected child neglect sometimes called child maltreatment defined by CAPTA as serious harm (neglect, physical abuse, sexual abuse, and emotional abuse or neglect) caused to children by parents or primary caregivers, such as extended family members or babysitters. It includes all harm that a caregiver allows to happen or does not prevent from happening to a child.

The child welfare system is not a single entity because many organizations work together to strengthen families and keep children safe.

In Tanzania Public agencies, such as departments of social services or child and family services, often contract and collaborate with private child welfare agencies such as world vision and community-based organizations to provide services to families. Among the services offered are such as in-home family preservation services, foster care, residential treatment, mental health care, substance abuse treatment, parenting skills classes, domestic violence services, employment assistance, and financial or housing assistance. Child welfare agencies receives and investigates reports of possible child abuse and neglect that occur in the given community, then provide services to families that need assistance in the protection and care of their children. They also help to arrange for children to live with kin or with foster families when they are not safe at home.

2.2 Historical Review of Child Welfare Services in the Tanzanian Context

Child welfare services are designed to serve most vulnerable children, and to support their families whereas social workers have been playing critical roles in these services (NASW, 2005). In 2016 donations from the UK to WV transformed the lives of more than 4million children (https://www.worldvision.org/ 17th January 2018).

During mid-1990's, Tanzania developed national and sector policies to promote child welfare services to all communities whereas it ratified most major international human rights instruments on children. These included the UN Convention on the Rights of Child (CRC) which was ratified on 10thJuly, 1991, (include the 2 optional protocols) the African Charter on the Rights and Welfare of Children (ACRWC) which was ratified in 2003 and the UN Convention on the Elimination of All form of Discrimination Against Women

(CEDAW) August 1985 there has been remarkable progress in making children's issues integrated to development initiatives at global, regional and national levels. Since then, Tanzania has been working to improve the legislative and policy environment to ensure proper wellbeing of the children by considering children's rights and wellbeing in their national development agendas and reflect their needs in planning and budgets (ACPF 2016). Apart from designing and implementing specific policies that focus on the rights and welfare of children, there are sectored policies that impact on the development and survival of children. Recently, the Law of the Child Act, enacted in 2009 enhances the best interest of the child and ensures the protection of the child has also established structures to ensure the delivery of services for children and to facilitate the participation of children in development activities that concern them. The global study on Child Rights Status (Report –2013) indicated that child deprivation, whereas four out of five Tanzanian children (78%) suffered from severe shelter deprivation and over three out of five (63%) suffered from severe water deprivation. Rural children are likely to be more severely deprived than children living in urban areas; the proportion is almost three times higher. Hence children from poorer households as well as children living in such rural areas are likely to die due to deprivation of needs.

2.3   The Tanzania's Child Development Policy of 2008

URT, (2008) this is a second version of the 1996 Child Development Policy. This policy aimed at providing a guide to the fulfillment of children's rights, welfare and development in Tanzania. Child development means physical, mental and spiritual growth which helps them to grow, get needs and be supported and cares for accordance with societal norms and values. The policy recognizes children as source of love and harmony in families and the society a whole and that they deserve to be protected, developed through special

programs and participate in national development, without discrimination. In order for a child to grow and develop well, s/he needs to be cared for, to be directed and influenced accordingly and be reared in the foundations which conform to the concerned community. The policy also enables an environment for stakeholders to participate fully in the implementations of various programmes that seek to provide children with their rights, welfare and raises standard of life by focusing on appropriate traditions, morals and values. They are implemented by various stakeholders who have the mandate in the development and welfare of children and their division of responsibilities includes the stakeholders, who are: the Central Government, Local Governments, the society, families, NGOs, FBOs, the media, International Organizations, extension workers, children's councils It gives vision, mission, goals and acts (laws) which provides Tanzanian children their rights, welfare and development example of Laws are such as laws the Law of Marriage Act (1971), The Adoption Act (1955); The Children and Young Persons (1937), amended 1964; The Disabled Persons (Care and Maintenance) Act (1982); The Employment and Labour Relations Act (2004); The Education Act (1978); The Sexual Offences Special Provisions Act (1998); The Succession and Inheritance Act (1953). Despite all these laws, there have been social economic factors that hindered the realization of children's welfare. Therefore, to be able to tackle these raised issues, with the guidance of the 2008 child development policy and other goals the study will work on ways to understand their duties and responsibilities, pulling together ideas which will help in making children' s lives better.

2.4   Importance of Child Welfare Services

The Adoption and Safe Families Act (ASFA) of 1997 articulated three goals for child welfare services which are safety, permanency, and wellbeing. They are promoted to

children to ensure certain necessities will deliver child safety where no child will suffer maltreatment from both in and out of their own home, permanency of children which would allow stable caring relationships and continuous family connections essential for healthy child development, and child well-being were any effects of child maltreatment on the child's physical, mental, or emotional health must be identified, prevented and treatment interventions to be provided if needed.

2.5   Types of child Welfare Services and how they Work

According to 2013 data About 124 million children and adolescents do not attend school, and 2 out of 5 leave primary school without learning how to read or write Public child welfare agencies provide four main sets of services to ensure child welfare. These welfare services are protection investigation, family-centered services and supports, foster care, and adoption so as to meet the needs of diverse population's expectations (McCroskey and Meezan, 1998).

According to UNICEF, (2005) every child has the right to health, education and protection, and every society has a stake in expanding children's opportunities in life. Around the world, children make up nearly half of the almost 900 million people living on less than US$1.90 a day. Therefore their families have to struggle to afford the basic health care and nutrition needed to provide them a strong start. Despite great progress in attaining proper child wellbeing such as in school enrolment, were number of children aged 6 to 11 who are out of school has increased since 2011.

2.6   Needs of the Children

Need is a psychological feature which arouses children to act towards a goal, giving purpose and direction towards a behavior. Children are often the most vulnerable to shocks and stresses attached to poor living conditions, malnutrition and ill health (Mamdani et al. 2009). The way parents and caregivers respond to their children's demands teaches children about the kind of world they live in. However, the progress globally has been uneven whereas many of the most pressing issues such as addressing to inequalities, promoting inclusive economic growth, protecting children from violence and combating climate change were not adequately covered in the MDGs. But the adoption of the 17 Sustainable Development Goals in September of 2015, many people especially the child welfare service agencies have committed to achieve them by 2030 but they can't be successful unless accelerated efforts are made, by 2030.

2.7.   Conceptual Framework

In this section, the conceptual framework shows that to achieve the dependent variable which is the improved child welfare services in Magole community, the following independent variables are to be considered. The independent variable of this study are the social needs such as Trainings and awareness campaigns, Education, Legal and spiritual support and Form of support provided by world vision with the contribution from the (can be internal or external) donors. When these independent variables are subjected to interventions such as sex, age, marital status, level of education, occupation and household size will be able to improve child welfare services. Example: Education services which enables success in school, Legal and spiritual support, which ensures child safety priorities from abuse and neglect and religious teachings to create awareness on good morals and safe environments from various existing abuses such as domestic violence. Form of support, ensures access to resources and other basic necessities. And lastly, trainings and

awareness campaigns, such as health services and others, which provides awareness and campaign's on various issues which involves child welfare, example; nutrition importance, awareness on proper sanitation and prevention against diseases. Therefore every project or program for child welfare services under NGO's such as WV requires engagement of these social needs aspects to create improved child welfare services in Magole community.

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│  WORLD VISION   │
│  Magole, ADP.   │
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WORLD VISION Magole, ADP.

**INDEPENDENT VARIABLES
Social needs**
Trainings and awareness campaign
Education
Legal and spiritual support
Form of support

INTERVENING VARIABLES

Parents/Care giver

Sex
Age
Level of education
Marital status
Occupation
Household size

DEPENDENT VARIABLE
Improved child welfare services

DONOR
Financial assistance
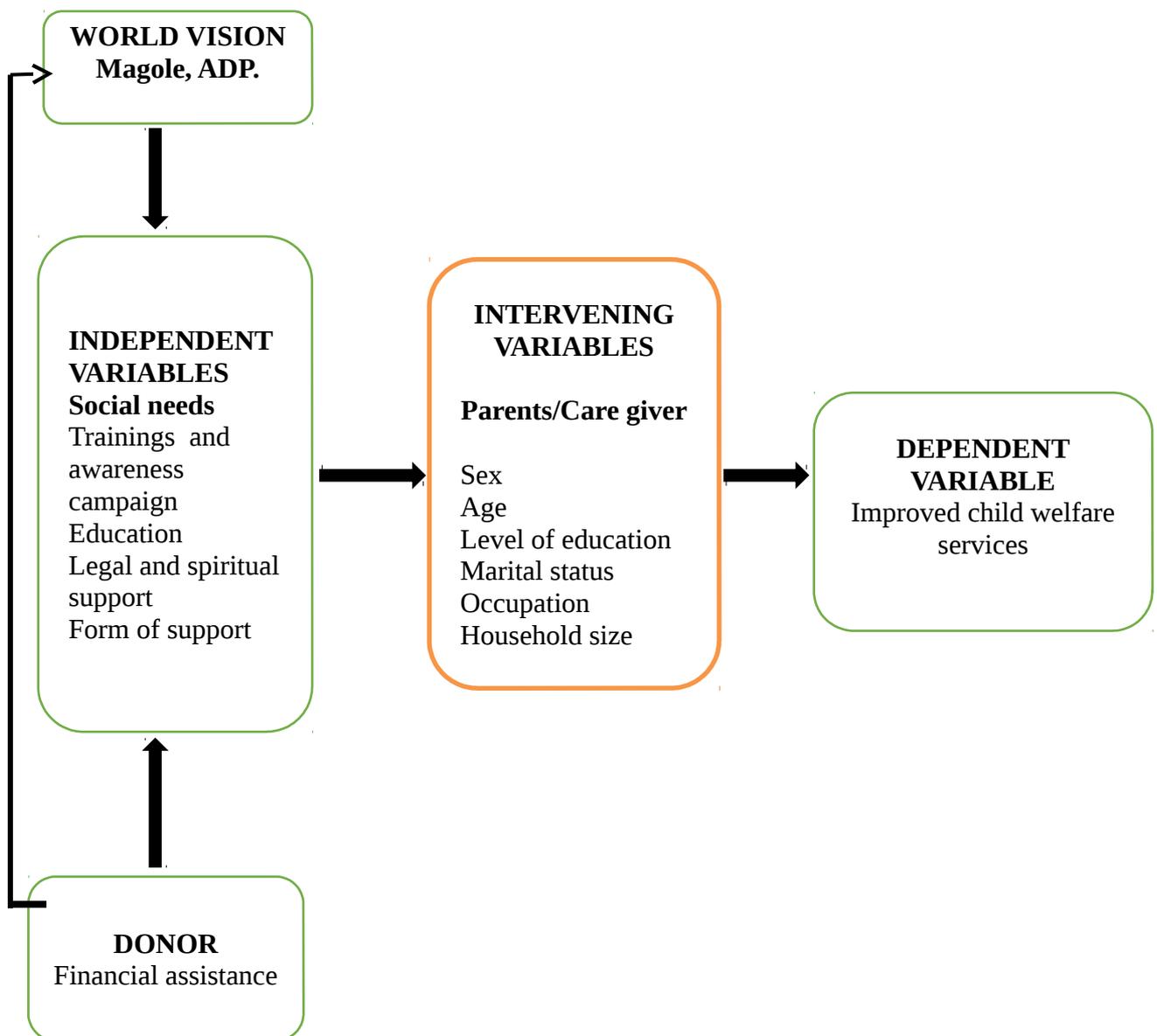
Figure 1: Conceptual framework on World vision promotes child welfare services

CHAPTER THREE

3.0   METHODOLOGY

3.1.   Description of the Study Area

This study was conducted at World Vision Magole Area of Development Program (ADP), found at Berega village, Kilosa District, Morogoro Region. It lies between latitude $50^0 55'$ and $7^0 53'$ South, and between latitude 36^0 and $70^o 35$ East and its 120km west of Morogoro Municipality, 115 km North of Kilosa District and 720 km from Arusha Headquarters (WVT National Office) through Arusha – Chalinze – Morogoro road.
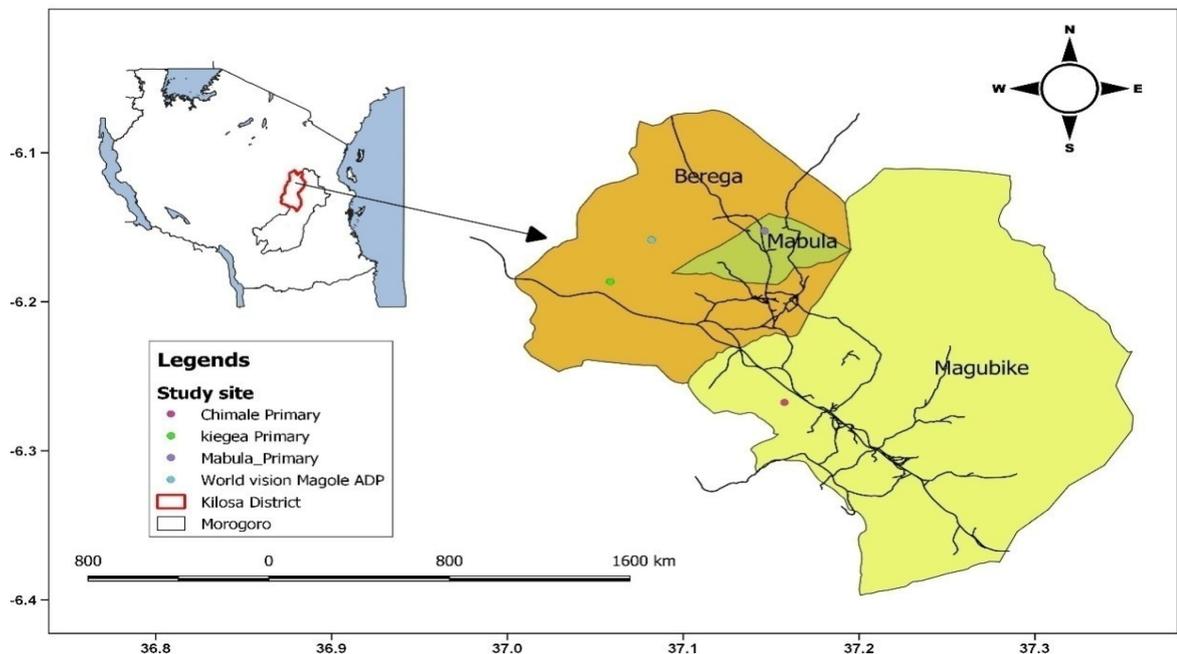
Figure 2: Study area map of World Vision Magole ADP.

Magole ADP is located in East of Morogoro Region, Kilosa District. The study area was selected because it is the nearest location where WV operates its program on child welfare services. The ADP is operating in three wards of Magole Division namely Berega, Mabula and Magubike wards. The three wards have a total of 21 villages, whereby two villages of Mamboya ward i.e. Mwisini and Uponela are out of the programme interventions due to their inaccessibility. The Programme area is bordered by Mvomero District to the East, Gairo District to the North-west, and Rubeho, Msowero and Dumila wards to the South.

3.2   Research Design

The study used a cross-sectional research design, because it acquired data at one specific point in time from selected individuals (Babbie, 1990; Kothari, 2004). Besides, it was

assumed that, by using this design, the information gathered represented the current situation at that point of the time (Chris and Diane, 2004, Rockinson, 2010).

3.3   Ethical considerations

The study has considered ethical consideration when it came to collecting data from the children were also guided by their parent where a request to participate was made and an option to participate was given. The children were not forced to respond to the questions. They were assured of the confidentiality of their responses and assured that it would be used solely for academic purpose.

3.4   Sampling Frame

The sample frame involved children aged about 6-17 years old who benefit from the child welfare services program under the world vision. The study covered three villages which are Kiegea in Berega ward, Mabula in Mabula ward and Chimale in Magubike ward found in Magole division. These children were the primary respondents of the study because the program is mainly focused on them, so the unit of analysis of the study was children who benefit from the program (guided by their parents or guardians).

Second the study sampled Magole community members, who were the key informants of the study. Key informants were used in the checklist to assess about the contribution of the program and its benefits.

3.5   Sampling Procedure

A multistage sampling also known as multi-stage cluster sampling technique which selects respondent from large clusters of population and divides them into smaller clusters in order to make primary data collection more manageable (Dudovskiy, 2018). As for this

study, multistage sampling, the study was done within three wards whereas; one village was randomly selected from each ward in Magole division. The selected villages were Kiegea, Mabula and Magubike. A survey was done in two villages where 66 children were obtained, 33 children from each village. Then 34 children were obtained from the third village making a total of 100 children who benefit from the program and involved in the study sample (assisted by their parents/guardians).

Table 1: Distribution of Children who are beneficiaries in Magole ADP

Ward	Village	Frequency (f)	Percentage%
Berega	Kiegea	33	33.0
Mabula	Mabula	33	33.0
Magubike	Chimale	34	34.0
Total		100	100.0

In addition, 10 key informants from Kiegea, Mabula, and Chimale villages within Magole community (WV employees, village leaders, Primary school teachers, community development officers at village level), were randomly selected. This made a total sample of 10 key informants as shown in Table 2.

Table 2: Distribution of key informants in Magole ADP

Ward	Village	Frequency(f)	Percentage%
Berega	Kiegea	2	20.0
	Berega	4	40.0
Mabula	Mabula	2	20.0
Magubike	Chimale	1	10.0
	Magubike	1	10.0
Total		10	100.0

3.6 Sample Size

The sample size was obtained through involving ethical considerations as explained in (section 3.3). It involved a sample size of 100 children who are benefiting from the

program, whereas 33 children from two villages and 34 from one village of about 7-16 years old (assisted by guardians/parents) were covered in the questionnaires and 10 key informants were covered in the interview both from the three selected villages within Magole ADP.

3.7   Data Collection

3.7.1   Primary data collection

The primary data were collected through a household survey method by using structured questionnaire formulated of closed and open ended questions which was administered to the respondents. A checklist was used to collect data from key informants of the WV Magole ADP.

3.7.2   Secondary data collection

Secondary data involved information from the Magole ADP office such as annual reports, governmental documents; electronic materials other journals which contributed to the study. The qualitative information obtained was analyzed in the content analysis approach.

3.8   Data Collection Methods

3.8.1   Data collection method for quantitative variables

3.8.1.1 Household Survey

A structured questionnaire was used to collect information from the children (under the guidance of their parents/guardian). Information gathered included background

information of the respondents, their participation in the programme, types of services received, benefits and challenges.

3.8.2 Data collection methods for qualitative variables

The checklist was used to guide the researcher when interviewing key informants. Information gathered included programme activities, performance, benefits, challenges and other views from the informants that supplemented data from the household survey. In addition, information on service provision was also obtained. Most of the information was in qualitative nature.

3.9 Data Analysis

3.9.1 Data analysis for qualitative variables

Content analysis was done for qualitative data mostly from key informants and such findings were obtained to respond to objective one, two and three.

3.9.2 Data analysis for quantitative variables

The quantitative data were analyzed by using Statistical Package for Social Sciences (SPSS) version 16.0 computer software where logistic regression was used for objective four while descriptive analysis was carried out and the results were presented in the tables in form of frequencies and percentages for all objectives. The logistic regression model showing how marginal effects can produces probability to the results of the study (Marcelo Coca Perraillion, 2019). Marginal effect is a way of presenting results as differences in probabilities.

To model the relationship between the welfare outcome of the world vision program and the socio-economic variables of the beneficiaries which could influence their welfare benefits, the logit model was employed. For the welfare outcome, the dependent variable which was used with logit model is the perceived satisfaction of the respondents about the welfare outcomes, taking the values 1 if the respondents are satisfied or 0 if otherwise. Therefore, the logistic cumulative probability function is represented by

$$P_i = \frac{1}{1+e^{-z}}$$.   ..   .   (1)

Where;

P_i = the probability that the ith beneficiary is satisfied with the welfare outcome

$Z = \beta_0 + \beta_{i1}X_{i1} + \beta_{i2}X_{i2} + \beta_{i3}X_{i3} + \beta_{i4}X_{i4} + \beta_{i5}X_{i5} + \ldots\ldots\ldots + \beta_n X_n$

β_0 = Constant term of the model

$\beta_1, \beta_2 \ldots \beta_5$ = the parameters to be estimated

$X_1, X_2, \ldots X_n$ = covariates or independent variables and

e = the base of natural logarithms.

CHAPTER FOUR

4.0   RESULTS AND DISCUSSIONS

This chapter presents findings from a study conducted at the World Vision Magole ADP. It is organized into five major sections. The first section presents demographic characteristics of the respondents while the second section explained the types of child

welfare services offered by WVT. Section three analyzed the needs of the children at ADP Magole while section four explained how it has contributed in the program at Magole ADP and the last fifth section presented the determinants of satisfaction in the program.

4.1 Demographic Characteristics of the Respondents

This section presents demographic characteristic of the Respondents such as age, sex, marital status of the care giver, level of education, source of income of the care givers and household size.

4.1.1 Age of the respondents

Convention on the Rights of the Child (1989), a child is a person below the age of 18. CWIG (2013), child welfare services are offered to children aged between 0 and 18, because these are ages which depend on their caregivers while the ones with 18 years and above are considered by the government and the organization to be adults since they are at the age of either being employed or self-employed to be able to provide for themselves. This research covered 10 key informants whose age ranged from 20-40 years old. A key informant from world vision Magole staff explained during an interview that:

 "The WV Magole ADP child welfare program is focused on children of 6 and 17 years old and those with 18 years and above are considered to be adults and are not included in the program because they are expected to depend on themselves and help their families" (At Berega ward, Magole. 19th February 2019).

Therefore, children between 6 and 17years old were picked as respondents because of their participation in the program. From the study findings, the age group of 5-9 years old were18%, 10-13years old were 71% and those of age 14-17years old were 11%

4.1.2 Sex of the respondents

The sex variable was used in the study to show if the program involved both female and male participants so as to compare their needs and thoughts about the program. Table 3 shows that 50% of the children were females and 50% of the children were males. They all responded to the same questionnaires under the guidance of care givers. Moreover, for the Key informants, 3 were females and 7 were males.

4.1.3 Marital status of the care givers

Marital status of care givers or guardians shows what kind of family children are raised in. Study findings show that 82% of the care givers were married and are farming families as shown in Table 3. FAO (2014), farming families includes family based agricultural activities which are managed and operated by a family and predominantly reliant on family labour including both women and men, they have very important socio-economic, environmental and cultural roles. However, the remaining children are raised in families where 9% are divorced, 4% are single parents, 2% raised by widow 1% by widower and 2% raised by separated guardian.

4.1.4 Economic activities of the caregivers

The study findings show that there were mixed economic activities and that the households in that community were to have the ability to earn income that enabled them to

cover some of their daily needs. From the three surveyed villages which are Kiegea, Chimale and Mabula, care givers participated in various activities such as farming, food vending, employment in either NGOs or governmental sectors and other economic activities. Table 3 shows that 74% of the respondents are engaged in agriculture (food crops and livestock keeping), while 9% of the respondents were engaged in food vending places such as in markets and hospitals, 15% engaged in business and 2% were employed in the local government. The respondents are employed by government and private sectors to take up positions such as child monitors, education project facilitators, facilitators, primary headmistress, primary teachers, village executive officers and village persons who were either in salary or wage system.

4.1.5   Household size

The study shows that household size was used to determine the number of children to be supported in the household. A child monitor of Berega stated that:

"Children are under the adults care, and have other family members who take care of them, therefore we are required to establish the household size to see if the members can support the children if not then they have to be included in the program. The program tends to support not only one but also two or more children from each household."(At Berega ward, Magole. 18th February, 2019.)

That is why it is important for the program to establish the number of members in the household. Table 3 shows that 62% of the households had 2-6 members and that most benefited children in the program are found in those small sized families while 37.0% of the households had 7-11 members, and 12-16 of household members had 1%through these findings it shows that most caregivers of the children under WV child welfare program are

provided with awareness on proper child raising and ensures that the assistance from the organization as instructed.

4.1.6 Academic qualification of the respondents

The ADP reports indicate that the child welfare offered by World Vision Magole is only offered to children who are in primary schools as showed in the Table 3. However, the key informants had different academic qualifications or levels, some were college graduates and others were high school graduates. The education level variable for, key informant is important because it can determine whether actors can educate and promote services that are rendered by the program. For example, one of the key informants reported that:

"The facilitators of the program are college graduates with skills on monitoring, leadership, and project management." (At Berega, Magole. 19th February, 2019.)

Table 3: Demographic characteristics of the respondents (n=100)

Age (years)	Frequency (f)	Percent (%)
5-9	18	18.0
10-13	71	71.0
14-17	11	11.0
Total	100	100
Sex (n=100)	Frequency	Percent
Male	50	50
Female	50	50
Total	100	100
Marital status of the care givers (n=100)	Frequency	Percent
Married	82	82.0
Divorced	9	9.0
Separated	2	2.0
Single parent	4	4.0
Widow	2	2.0
Widower	1	1.0
Total	100	100.0
Source of Income of the respondents (n=100)	Frequency	Percent
Farming	74	74.0
Food vendor	9	9.0
Employed	2	2.0
Business	15	15.0
Total	100	100.0
Household size (n=100)	Frequency	Percent
2-6	62	62.0
7-11	37	37.0
12-16	1	1.0
Total	100	100.0

Academic level of children (n=100)	Kiegea		Mabula		Magubike	
	Frequency (n=33)	**Percent**	**Frequency (n=33)**	**Percent**	**Frequency (n=34)**	**Percent**
Primary	33	100	33	100	34	100
Total	33	100	33	100	34	100

4.2   Types of child welfare services offered by WV Magole ADP.

Sanders (2012) described that there is a need for further study on child welfare system that will response to impact child needs. An understanding of these needs can illustrate what happens to children after their risk for child neglect. The organization provides social needs as a type of child welfare services, example education, school necessities, health opportunity and awareness, and others. They provide these items to help children to have a proper wellbeing. As viewed from an interview with the facilitator of world vision at Magole ADP explained that:

> *"The program involves external donors sending gifts and other stuffs to assist*
>
> *children in need, and therefore it's our duty as staff to ensure that they are*
>
> *delivered at the right child, at the right time. The organization provides them*
>
> *with stuffs such as uniforms, bed sheets, soaps, mosquito nets, exercise books*
>
> *and iron sheets to some households."* (At Kiegea village, Magole. 18th February,
>
> 2019).

The WV Magole ADP acts as a mediator between the children and their donors who sponsor them with their needs inform of money. The WV organizations staff takes up the duty of ensuring that the money donated covers the needs of the children by delivering them in material form unless instructed to provide the donation inform of cash. However, the facilitator explained the issue on poor infrastructures and communication as a major problem hindering them to reach all the communities they serve In addition to that, some households tend to migrate with or without informing them. Hence fail to ensure if proper welfare is provided to the children. According to the interview with the Berega Facilitator explained that:

"The main challenge facing the organization is poor infrastructure and communication

and migration of families with or without informing them *which led to failure in keeping*

track of children progress in which it becomes tough to find the households in time, as a

result, it delays information to staffs that monitor the children." (At Berega ward, Magole. 18th February, 2019.)

4.3   Needs of the Children at ADP Magole

The needs of the children provided life sustaining items which includes water, food, first aid, transportation and others (FEMA, 2017). They are important but to some children they don't meet their interests. The children participate as beneficiaries of the program whereas they are part of the sponsorship program which provides them with donations or gifts from donors. One among the children benefiting in the child welfare services by WV had this to say:

"I receive social needs services such as school and home essentials from WV as among the sponsored group of children in my village, whereas the child monitors delivers them in our school."(At Mabula village, Magole. 18th February, 2019.)

4.3.1   Preferred needs of the respondents

These preferred needs are the ones that are preferred by children to be mostly required than the ones provided by the organization as shown in Table 4. These needs are in line with the physiological needs by Maslow however the relationship between the physiological needs and the preferred needs required by children under Magole ADP program, is that, they are both very necessary especially to children but they are hardly available at the point of time in the community hence require developmental progress in the community to reduce deprivation and increase its accessibility.

Therefore, preferred needs are considered to be like physiological need that concur with the Maslow's hierarchy of needs in which categorizes them as deficiency needs (D-needs) in the (Mcleod, 2018).

One of children expressed his views that:

"He would like to receive a bicycle because it will assist him avoid long walking distance and arrive at school early". (At Mabula village, Magole. 18th February, 2019.)

The children identified these preferred needs such as provision of food at schools during break times, to receive bicycles especially for children who live very far from schools, however school bags, shoes and equipment's such mathematical sets for the others who have not received yet while other have already received. Other needs are such as proper housing condition which includes provision of iron sheets, cement, proper sanitation facilities and power (solar panels), they are described in Table No 4.

4.3.2   Received Needs

The participants shared what they have received so far and then compared to their preferred needs as shown in Table 5.These received stuffs are as mosquito nets, bed sheets, uniforms, iron sheets, soaps, mattresses, and exercise books.

Maslow, (1943) says that basic needs is the first stage of the motivation hierarchy whereas an individual requires them after been deprived to access them as a result he/she is motivate to fulfill the physical survival hence if it has to be satisfied it would lower level of deficit. For example, a student must eat food and drink water (physiological needs) to overcome hunger and be able to concentrate in class. Therefore, these needs were to be considered by the organization as very important to maintain their welfare in the community. The issue for its availability can be solved if the organization acknowledges the need of them to children and work hand in hand with the community on how to make it available to children at the moment of need.

4.3.3. Forms of Needs

The respondents preferred these needs from the child welfare services to be provided in form of materials rather than cash. Because they know that with cash form might create conflicts and extra expenses and fail to attend at the child's needs.
One child shared her experience:
"There was once when her parents had a fight after a donor sent money to cover the child's expenses whereas, the father mismanaged the money and the mother wasn't pleased with that. That fight had to be solved at the Magole ADP where a warning was issued that any caregiver who mismanages the gift from donor will face legal actions." (At Mabula village, Magole. 18th February, 2019.)

However, the regulation of the organization strictly requires the ADP to provide the welfare services in form of materials since cash is not an effective method of service. Therefore, material form of providing service is better and it allows the child to receive his or her need quicker, also avoids all unnecessary expenses and conflicts.

However, some few shared their thoughts on cash form of services.
A child shared his thought that:
"I prefer the services to be offered in form of money so as to create a budget that will be used to cover other expenses such as hospital bills." (At Chimale village, Magole. 19th February, 2019.)
Hence as shown in Table 6, all of the children in the three villages responded to similar answers that they prefer materials rather than cash form of services since it will help avoid unnecessary expenses and conflicts within the household. However, these existed conflicts caused after received cash form service in some households, had been resolved through creating a material form and making it as their only way to promote services without causing conflicts in some communities that they served. The preferred needs such as food at school, school bags & shoes and others are not

met since there are no follows ups of the program in the community conducted to assess the needs of the children despite the ones delivered to them.

Table 4: Distribution of respondents by preferred needs (n=100)

Categories	Kiegea		Mabula		Chimale	
	Frequency	**Percent**	**Frequency**	**Percent**	**Frequency**	**Percent**
Bicycles	5	15.1	5	15.2	10	29.4
School bags and equipment	4	12.1	5	15.2	4	11.8
Food and water	15	45.5	15	45.4	10	29.4
housing and sanitation	5	15.2	5	15.2	4	11.8
Clothes and shoes	4	12.1	3	9.0	6	17.6
Total	33	100	33	100	34	100

Table 5: Received needs (n=100)

Categories	Kiegea	Mabula	Chimale

	Frequency	Percent	Frequency	Percent	Frequency	Percent
Soaps	5	15.2	10	30.3	5	14.7
School uniform and exercise books	10	30.3	10	30.3	15	44.1
Mosquito nets	10	30.3	4	12.1	5	14.7
Iron sheets and mattress	3	9.0	3	9.1	4	11.7
Bed sheets	5	15.2	5	15.2	5	14.7
Total	33	100	33	100.	34	100

Table 6: Form of needs (n=100)

Categories	Kiegea		Mabula		Chimale	
	Frequency	Percent	Frequency	Percent	Frequency	Percent
Cash form	3	9.1	4	12.1	4	11.8

Material form	30	90.9	29	87.8	30	88.2
Total	33	100	33	100	34	100

**4.4	Contribution of the WVT, at Magole ADP.**

Werkerand, (2008) reported that NGOs operate and provide services through charity, empowerment and participatory approach. The WV Magole ADP has contributed services inform to awareness campaigns, material supports and project trainings. Among the campaigns provided within the villages were sanitation and malaria awareness, where they educated people on how to keep their surroundings clean, prevention and cure for malaria and proper waste disposal. The Kiegea primary school headmistress reported that:

"The organization usually sets awareness campaigns to educate us on issues such as sanitations through proper waste disposal and importance of portable water supply at home and schools so as to conserve environments and avoid the spread of diseases such as malaria."(At Kiegea village, Magole. 18th February, 2019.)

Moreover, the materials support provided to the community by WV Magole ADP was always in cash or material such as water Storage tanks in schools where they assist in preserving water to be used by the students during the needs has helped children access to water in school even during the time of critical needs. Despite of the material support, they also provide spiritual and legal support as ways of promoting good moral growth to children. The facilitator explained that:

"Sometimes we create spiritual seminars and friendly sport games with the children and educate them about good morals and cooperation. Also provide financial assistance and legal assistance when necessary needed" (At Berega ward, Magole. 19th February, 2019.)

The world vision Magole ADP is among the NGO's that operates to provide child welfare services that engages the key informants, the parents and other volunteers such as child monitors. These volunteers and non-contracted staff from the organization are not

compensated or paid for their contributions but are provided with per diems after every organized seminar in their communities. A child monitor from Chimale village explained that:

"Other communities members who participated in the study as key informants are legally employed and registered in the organization management were compensated for the work done. They remaining employees worked on voluntary basis." (At Chimale village, Magole. 19th February, 2019).

However, Magole ADP organization has a top down approach when it comes to selecting and legislation of sponsored children to planning the implementation of their projects. Some children who really live in poor conditions are not selected hence creating unevenness in both school and communities surrounding them. The workers perform all objectives set by their superior to ensure effective provision of welfare services to children without sharing or contributing any views. They have to bind to every regulations, policies, and rules on how to work with the resources and time given to achieve the organization's main goal. Example: trainings on how to conduct an APR (Annual Progress Report) in the village. This activity enables the organization to create a bond between the sponsored child and the sponsor and it's conducted annually. The assigned workers have to a bind to the procedures without any option; but to some occasions it has been viewed that they do not follow all procedures as instructed as a result the organization receives results without analyzing occurred errors or getting feedback from the workers believing all information are correct. The WV Magole ADP facilitator explained that

"The training helps us to know how to assist the sponsored child in filling the provided worksheet, also how to record and take pictures using the digital equipment provided. But

to some cases, we face a challenge of resources being in adequate or malfunction of devices." (At Berega ward, Magole. 18th February 2019.)

The headmistress from Kiegea primary school shared that:

"Some assigned WV workers tend to ignore important stakeholders in some communities they provide services to, such as Teachers. They conduct their activities poorly at times even without gathering information from important stakeholders that would have assisted them in their work. As a result they end up documenting errors and false results."(At Kiegea village, Magole. 18th February, 2019.)

Therefore, such contribution from the WV has somehow showed progress in some families and communities members in which led them to some improvement in some economic activities and establishment of very few sustainable projects in their communities but still facing the cases of some stakeholders who have not received or provided with their expected interests.

4.4.1   Duration for welfare service provision to respondents

The welfare services are usually provided after every 3-4 months as shown in table 7. In some cases a donor may feel the need to provide more assistance to the sponsored child whereas the donor and the organization communicate to know what kind of assistance is required by the child at the time. Other more services are provided to the community such as awareness campaigns and trainings which helps the community members to overcome poor livelihood to their children for example Malaria campaigns which educates them on

how to prevent and get necessary treatment. These services are offered at any time with a year.

4.4.2   Where Services are offered

The services are often given at schools and churches as shown on the Table 7 at each village; Mabula had 100%, followed by Kiegea 90.9% then Chimale with 85.3%. Day before the provision of the service, an announcement is delivered by the child monitor of that village while there are some others who receive a visit at their home and for few individuals who weren't available are to report at the Magole ADP to receive their items. As shown in the Table 7 participants in Chimale about 85.3% shared that they receive services at the ADP and sometimes at home followed by Kiegea with 9.1% and Mabula with 0%.

However, the Village Executive Officer of Mabula village reported that:

"I had to solve number of cases concerning a family mismanaging the child's stuffs. Therefore the organization should reinforce their staffs in the program so as to avoid family conflicts since the staffs ensure that the child receives his or her items and makes follow up if utilized accordingly" (At Mabula village, Magole. 18th February 2019)

4.4.3   Key challenges on utilization of services

The participants of Magole ADP child welfare program also shared that there are no challenges when it came to utilization of the services because so far the organization has been strict to parents and keeps track on the children and their wellbeing as shown in Table 7. Villages with the highest percent in reporting to have no challenge in the utilization of the resources are Chimale with 97.1%, Mabula with 97.0% and Kiegea

village which scored 87.9%. But the only challenge reported on utilization of services was parents who mismanage and misuse the child's items for other personal purposes. Table 7 shows that 12.1% of the respondents in Kiegea village claimed that misutilization of the services received. Only few (3%) were from Mabula and 2.9% from Chimale villages who claimed misutilization of the received services.

Table 7: Contribution of the WV in the Program (n=100)

Duration	Kiegea		Mabula		Chimale	
Categories	Frequency	Percent	Frequency	Percent	Frequency	Percent
After 3-4 months	33	100	33	100	34	100
Total	33	100	33	100	34	100
Where its offered						
At school and church	30	90.9	33	100	29	85.3
At home and Magole ADP	3	9.1	0	0	5	14.7
Total	33	100.0	33	100.0	34	100.0
Key challenges on utilization of services						
No challenge	29	87.9	32	97.0	33	97.1
Misutilization	4	12.1	1	3.0	1	2.9
Total	33	100.0	33	100.0	34	100.0

4.5   Determinants of Satisfaction in the Program

As explain in (section 3.8.2) the logit model was analyzed to determine satisfaction of the stakeholders in the program whereas the results of the analysis are presented in Table 7. Test statistics for the goodness of fit of the model shows a χ^2 value of 16.88 with p < 0.01 which implies that the overall model is statistically significant and the independent variables with some of the intervening variables are well explained by the model. These estimates of the model tells us about the relationship between the independent variable and the dependent variable, where the dependent variable is on the logit scale. The parameter estimates of age of the beneficiaries, marital status of the parent/caregiver, the training received, the household size and the form of support received were found to be statistically significant determinants of the beneficiaries' satisfaction with the world vision

program while the parameter estimates of sex of the beneficiaries and education level of the beneficiaries were not statistically significant. The parameter estimates that are statistically significant are further explained while the parameter estimates that are not significant are not plausible for further interpretation.

Table 8: Determinants of satisfaction in the program

Variable	Coefficient	P value	Marginal effects
Sex	-0.853	0.891	-0.019
	(0.624)		
Age	-0.372	0.030**	-0.085
	(0.171)		
Marital	-3.177	0.009**	-0.455
	(1.212)		
Household size	-0.491	0.023**	0.11
	(0.215)		
Education	0.024	0.843	0.005
	(0.124)		
Form	-1.852	0.043	-0.419
	(0.917)		
Training	0.465	0.037**	0.105
	(0.222)		
Number of observations	100		
LR chi2	16.88		
Probability > chi2	0.001		

*Numbers in parenthesis are standard errors. Significant at ** P<0.05*

Table 8 revealed that the parameter estimate for age is -0.372 (P<0.03) with a marginal effect of -0.085, this simply implies that for every one-unit increase in age of the beneficiary, the probability of satisfaction with the welfare outcome of the world vision program decreases 0.085. The marital status of the parent/caregiver has a coefficient estimate of -3.177 (p<0.01) with a marginal effect of -0.455. This suggest that the probability of being satisfied with the welfare outcome of the world vision program for the male beneficiaries decreases by 0.455 when compared to the female beneficiaries holding all other independent variables constant. Another significant determinant of satisfaction with the welfare outcome of the world vision program is the household size of the beneficiaries with a parameter estimate of -0.491 (p<0.02) and a marginal effect of 0.11.

This implies that under *ceteris paribus* condition, a unit increase in the household size of the beneficiaries decreases the probability of been satisfied with the welfare outcome of the world vision program by 0.11. Moreover, the parameter estimates for training is 0.456 (p<0.03) with a marginal effect of 0.105, implying that training significantly influenced the welfare outcome of the program and increases the probability of satisfaction with the outcome of the program by 0.105 *ceteris paribus*. The form of support received by the beneficiaries equally influenced their satisfaction. This is explained by the parameter estimate of -1.852 (p<0.04) with a marginal effect of -0.419. This implies that the probability of being satisfied with cash form of support from the world vision program decreases by 0.419, meaning that the beneficiaries were more satisfied with the material support than the cash support.

This program is aimed to address the welfare of children thus cooperating with every stakeholder to create satisfaction of the program and suitable environment for children to live in. Every member of the community had a role to play whereas, they are often insisted on attending school meetings, engaging school toilet constructions, attending seminars on proper child health, nutrition and sanitation and others. Some key informant contributed that there are other non-formal groups such as CBO's who are currently receiving training on how to assist children in their communities. This helps world vision to achieve their targets but only when they access resources. According to the key informants declared that due to poor participation and cooperation among them, the organization fail to consult primary and secondary stakeholders who mostly play part in their projects. Most projects are implemented according to the orders and instructions given by the top management. Moreover, the results also shows that there is only one NGO that is currently on process to begin but aims at promoting the same services and it located in Mabula as revealed by

90,9% of the participants. While the rest of the participants from Kiegea and Chimale with 100% claim that there are no other NGO's in their communities.

Example; the village executive of Mabula village shared that:

"There is another NGO's which at times supports the world vision's work. For instance: the CAMFED which is an NGO that supports the welfare of secondary children. It is a new organization which hasn't begun but it is current spreading awareness to the people. But currently it's working with children under world vision Magole ADP. Also other non-formal groups with local names are created and currently trained by the WV on how to ensure child welfare exists in their communities." (At Mabula village, Magole. 19th February 2019.)

The child monitor for Chimale village stated that:

"Despite the non-formal groups, there has been no any other NGO's before or after the establishment of WV child welfare program to assist our children as the result world vision becomes overloaded with responsibility of many children who required to be served. But if there was an existence of another NGO's it would have help to reduce the work load of covering children who missed the opportunity of receiving them". (At Chimale village, Magole. 19th February 2019.)

CHAPTER FIVE

5.0 SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This chapter consists of three sections which are the summary of the study, conclusions and recommendations.

5.1 Summary of the Findings

Generally, study findings showed that World Vision Magole ADP is the only NGO that operates in many villages of Magole ADP and covers a lot of children in their welfare program. A village may have 300-5000 children even more. The world vision staffs are the ones selecting and registering children who participate in the program. The program provides material stuffs to children such as bed sheets, mosquito nets, exercises books and soap. They declared that the children who participated are the ones who mostly require welfare services due to poor living conditions they face in the household. But this only created class among participants and non-participants since there are some non-participants who really require the services but cannot receive because they are not selected or registered by the organization. The study has revealed a number of issues that has been noted during the study findings data collection which led to unstable child welfare services in Magole ADP.

However, despite the noted issues, the study has revealed that the activities implemented by WV workers has also helped some community in many ways such as provision of material stuffs that has somehow improved their livelihood. Material stuffs such as iron sheets, cements, to some households with poor housing conditions, they created projects that built schools and sanitation facilities, provide uniforms, soaps, bed sheets, mosquito

nets every after 3-4 months to sustain their lives this has led to improvement of the communities so far.

5.2 Conclusions

5.2.1 Types of child welfare services offered by WVT Magole ADP

On the issue of the type of child welfare services, the government and other non-formal institute have shown efforts of collaboration with the WV to promote and implement sustainable development projects such as food programs in school, health checkups and others so as to solve issues that weren't address to the children. Most of their efforts have been seen as not adequate enough to promote social needs and very little contribution in the program, also existence of dependency on solely to WV have been noticed, hence creating a belief that the organization receives a lot of donation or resources and that it does not need other governmental assistance resulting to poor partnership in the child welfare projects in Magole ADP. Also it is concluded that, the strategy used by the organization cannot cover all children in need within their community. The strategies tend to limit their work since they have to a bind to the policies and objectives of the organization's headquarters and country in general. In addition to that these projects uses top-down approaches to promote activities which does not take in consideration the concerns and thoughts of the people and be able to address them accordingly.

5.2.2 Needs of the children at Magole ADP.

The organization has shown efforts in ensuring every sponsored child is provided the offered services, but only some services were addressed due to the fact that there are no follows ups of the program made at the communities served. As a result it created poor assessment on child welfare and poor reports at the ADP office. Services such as Proper

sanitation facilities projects, transportation facilities, and water supply projects are still the major concerned issues in the community that requires frequent assessment so as to ensure the welfare of the children in the village are progressing.

5.2.3 Contribution of the WVT in the program

The organization has provided awareness campaigns, trainings and material support but all these services have not covered all children in need within the community. Their strategies of providing such services tend to limit their work since they have to a bind to the given policies and regulations. In addition to that it has been revealed that the program uses top-bottom approach to promote its activities in which it's an approach which doesn't take in to consideration the concerns and thoughts of the people that needs to addressed. Also the issue of dependency is still major problem especially within the non-governmental sector such as WVT who depends on donations or grants from external donors or sponsors to implement and operate its program.

5.2.4 Determinants of satisfaction in the program

Awareness about the program in the Magole community is very important factor especially to stakeholders so as they can be satisfied with the offered services, but despite of such provided awareness, some services have not reached the stakeholder's expectations. It has been discovered that to some services are not implemented accordingly or bring up positive result. Instead causing either conflicts and resulting to poor welfare of the children in the community.

5.3 Recommendations

5.3.1   Recommendations of WVT, Magole ADP Management.

The organization (WV Magole) needs to expand its provision of social needs to other areas by improving their strategies of promoting child welfare services to children. Also to come up with new welfare programs despite the one they have to cover all the stakeholder's expectations in Magole ADP. Program such as School food supply and portable drinking water to students a school, is highly needed to solve the problem of students studying with hunger. Also program monitoring and evaluation by world vision Magole ADP is required after every implementation of their services so as to assess the performance, outcomes and sustainability of what has been implemented, this will help to ensure that the budget of the project is efficiently used to address issues.

5.3.2   Recommendations for Policy Makers

The study has discovered that organization's report known as Annual Progress Report (APR) assist children in showing/expressing gratitude to their sponsors who sends them money to attain their needs. It also includes the needs of the children to be included in the next donation. It is recommended that in order to meet the needs of the children at Magole ADP, annual progress reports should be taken seriously and delivered to their sponsors so as to inform them of the necessities required by the child they are donating for. These will help children to receive the preferred needs. Proper documentation and sharing information is required to be to keep track of the required needs and the child's progress in the community.

5.3.3   Recommendations on Areas for Further Research

The organization should use a bottom up approach in their program of providing welfare service to the children so as to allow contributions of various views from both stakeholders and the staffs. Also the issue of dependency has to be addressed to avoid other NGO's, non-formal groups, and the government from depending on external grants and donations funding in implementing or operating the program, but instead they should establish and set proper agreements and clear roles when it comes to delivery of public interests because the program has to be a joint effort of different parties trying to reach a common goal of ensuring proper welfare to children.

In addition to that, the organization should ensure proper storage of documents to be used for further information. Sharing information on welfare services is required to help ensure effective track of any raised situations or problems especially on the issue of migrated families were WV workers will be to keep track and provide feedbacks on how to reach those children and what further actions needs to be done.

5.3.4   Recommendations for satisfaction of the program

Project participation and cooperation should be highly encouraged by world vision Tanzania Magole ADP. Team work will ensure effective implementation of activities and positive results. It will allow the staffs to be able to work hand in hand with not only the government but also the community stakeholders and be able to assess their interest address their problem and most of all maintain sustainable development in their communities.

Public Private Partnership's awareness is required so as to create standards, cooperation between the government and world vision Magole ADP in implementing activities. This will avoid much dependency on NGO's by creating room for the government to take part in the projects which will ensure positive sustainable welfare of children in the communities. The PPP will involve contracts and agreement that will state who, where, when, how the projects will be conducted.

Parents are encouraged to make follow ups on their children progress in school and after school so as make sure that they are living in a proper well being, progresses that needs to followed up are such: school progress, healthy life, and most of all to protect them from harm. Positive motivation on good parenting will make them raise children properly by ensuring that children get their daily needs. This can be done via creating frequent awareness program on good parenting to care givers and ensuring that the donation from sponsors are used for the children and for not for other purposes as instructed by the world vision staffs.

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APPENDCIES

Appendix 1: Household questionnaire

TITLE: CONTRIBUTION OF WORLD VISION TOWARDS IMPROVING CHILD WELFARE SERVICES; A CASE OF MAGOLE AREA OF DEVELOPMENT PROGRAM, MOROGORO REGION, TANZANIA

District name: ……………………..

Name of the village: ………………………… Ward: …………………….

Date of interview: …………….

Questionnaire number: ………………….

Section A: General information

1. Sex

    A. Male

    B. Female

2. Age of the child (years) ………………Care giver; ……………………

3. Marital status of the guardian/ care giver ……………………..

4. What is source of income of the care giver/parent?

    a) Farming

    b) Food vendor

    c) Employed

    d) None

    e) Others (specify): ……………………………..

5. What is the Level of education of the

    i. Child: …………………………………

    ii. Guardian: ………………………………….

6. What is the Household size …………

Male: ……………

Female: ………

Section B:

7. How do you participate in the program?

8. What type of child welfare service do you participate?

……………………………………………………………………………………………

……………………………………………………………………………………………

…………………………………………………………………………………

9. How do they offer child welfare services in your area?

……………………………………………………………………………………………

………………………………………………………………………………………

10.   What are the most preferred needs in your area?

……………………………………………………………………………………………

………………………………………………………………………………………..

11. What do you receive from the child welfare program?

……………………………………………………………………………………………

………………………………………………………………………………………..

12. How long does it take for you to receive such services?

……………………………………………………………………………………………

………………………………………………………………………………….......

13. Which of the two forms of child welfare services is effective?

  A. Cash form, If so why?

……………………………………………………………………………………………

……………………………………………………………………………………………

Material form, If so why?

……………………………………………………………………………………………………

……………………………………………………………………..

14.   What are key challenges on utilization of resources (cash and material form)?

    …………………………………………………………………………………………

    ………………………………………………………………………………

15.   Are you satisfied with the services offered by WV Magole ADP?

    Yes ………

    No ………..

    If Yes, why?

    ………………………………………………………………………………….

    If No, why?

    …………………………………………………………………………………..

16. Are they any other NGO's that offers you child welfare service in your area?

    ………………………………………………………………………………………

Appendix 2:   Checklist for key Informants Interview

TITLE: CONTRIBUTION OF WORLD VISION TOWARDS IMPROVING CHILD WELFARE   SERVICES;   A   CASE   OF   MAGOLE   AREA   OF DEVELOPMENT PROGRAM, MOROGORO REGION, TANZANIA

Ward name: ……………………………

Village name: ………………………………………………….

Respondent occupation: ……………………………

Role of respondent: ……………………………………………..

Academic qualification: …………………………….....................

1. Do you participate in the provision process of child welfare services in your area?

 i). If Yes, which ones? ………………………………………………………..

 ………………………………………………………………………………..

 ii). If No why?

 …………………………………………………………….....

 ……………………………………………………………………………………………

 …………

 2. How do you offer child welfare services in your area?

 ……………………………………………………………………………………

 …………………………………………………………………………

 3.   How many household members do you offer such services?

 ……………………………………………………………………………………

 …………………………………………………………………………

 4.   What are the most preferred needs of the children in your area?

 ……………………………………………………………………………………

 …………………………………………………………………………

 5.   Which of the two forms of child welfare services is effective?

 A.   Cash form, If so why?

…………………………………………………………………………………………………
…………………………………………………………………………

B. Material form, If so why?

…………………………………………………………………………………………………
………………………………………………………………………………

6. Do you get compensated /paid for the participation of the program?
    A. If yes, how?

    …………………………………………………………………………………………
    …………………………………………………………………………………

    B. If No why?

    …………………………………………………………………………………………
    …………………………………………………………………………………………

7. Are there any other group of people responsible in providing child welfare services?
……
……

8. If the children are not satisfied with the services how do you address the issue?
……
……

9. Are there any other NGO's offering child welfare services in your area?
 A. YES (which ones) …………………………………………………………….
 B. No

10. How do you compare the services offered by WV Magole ADP from the ones offered from other NGO's in your area?
……
……

11. What are the key challenges faced during providing child welfare services to children?

……………………………………………………………………………….………

……………………………………………………………………………………….