

TUWALINDE WATOTO II (2020-2024) BASELINE SURVEY REPORT

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Prepared by

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CHILDFUND KOREA

Contents

I . Background -----	p.2
II. Analysis-----	p.7
III. Photos-----	p.14
Attachement1. 2020 SAWA baseline_analysis data	
Attachement2. Baseline tools	
Attachement3. photos	

I. Background

1. Introductory information of SAWA and ChildFund Korea(CFK)

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SAFINA WOMEN'S ASSOCIATION (SAWA) is a Non-Governmental Organization that was initially registered under the civil society ordinance of 1954 Rule No 5 with registration No SO.9351. However in 2019, SAWA underwent re-registration process following government's compulsory registration of NGOs in which SAWA was granted a new name of SAWA WANAWAKE TANZANIA and a certificate of registration No 00NGO/R/0221. The organization is committed to achieving its vision through provision of various interventions such as advocacy, training, and awareness creation among children, women and community members through collaboration with Local and Central government to improve the well-being of women, young girls and children. SAWA also strives to improve Early Childhood Development (ECD) Basic Education as well as Community Based Child Protection systems.

ChildFund Korea was established in 1948. ChildFund Korea, as one of the leading child advocacy organization, works to create opportunities for children and youth, their families and communities. Not only in domestic programs but also in international development programs and humanitarian assistance, ChildFund Korea works with various partners in around 30 countries. It is a member of the ChildFund Alliance – one of the world's oldest and most experienced child-focused development agencies. With a global network of 11 organizations, the ChildFund Alliance assists more than 13 million children and families in over 60 countries.

2. Project description (Summary)

Primary Sector	Education and Child Protection					
Project Title	TUWALINDE WATOTO PROJECT II					
Project Location	Dakawa, Mvomero and Dibamba villages in Mvomero District – Morogoro Region					
Project Duration	2020 April - 2023 December (45 months)					
Target Population			D/Beneficiaries		Ind/Beneficiaries	
	Village	Life Stage	Male	Female	Male	Female
	Dibamba (397 HH)	1 (0- 5 yrs)	1012	1,157	0	0
		2 (6-16 yrs)	1,220	1,318	0	0
		3(17- 24 yrs)	0	0	2,201	1,298

	4 (25 + yrs)	0	0	1,110	1,951
	Sub Total	2,232	2,475	3,311	3,249
Mvomero (2882 HH)	1 (0- 5 yrs)	1,412	1,732	0	0
	2 (6 – 16 yrs)	1,959	1,867	0	0
	3 (17- 24 yrs)	0	0	3111	4252
	4 (25+ yrs)	0	0	2542	2745
	Sub Total	3,371	3,599	5,653	6,997
Dakawa (HH)	1 (0 - 5 yrs)	1,216	1,314	0	0
	2 (6 -16 yrs)	1,457	1,498	0	0
	3 (17 – 24 yrs)	0	0	2,741	2,972
	4 (25+ yrs)	0	0	2,670	2,712
	Sub Total	2,673	2,812	5,411	5,684
	TOTAL	8,276	8,886	14,375	14,375
Project Goal	Children aged 0-16 years at Dakawa, Mvomeroi and Dibamba Villages are grown healthy, educated and protected				
Project Outcomes	1) 85% of the children aged 0- -6 years at Dakawa, Mvomero and Dibamba Villages have accessed quality community and center based ECD services by end of 2022 2) 90% of the children aged 7 – 16 years at Dakawa, Mvomero and Dibamba have accessed equitable and quality basic education by end of 2022 3) 60% of the children aged 0 -16 years at Dakawa, Mvomero and Dibamba Villages have accessed effective community based child protection services by end of 2022				

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3. Justification for baseline survey

A. Purpose of the Survey

- To Assess the initial status before implementing the project and bring about recommendation for further plan

B. Catchment areas

SAWA WANAWAKE TANZANIA (SAWA) and CHILD FUND KOREA (CFK) entered into agreement to implement TUWALINDE WATOTO Project at Mvomero District in Morogoro Region. Phase 1 of this project has been implemented at Mtale, Msongozi, Mtipule and Doma Villages in which 9

communities have been targeted. The project is focused in the sectors of Early childhood development, Basic Education and child Protection.

Currently, SAWA is implementing Phase II of TUWALINDE WATOTO II Project at Wami Dakawa, Mvomero and Dibamba Villages to improve the same sectors. The Purpose of this Baseline is to set up benchmark data on Community based ECD services, Basic Education and child Protection system in order to be able to measure the impact of the project at the end of four (4) years of implementation in 10 targeted communities. These communities include Mvomero (Kikando, Chambika, Kijoja and Kipogolo), Dibamba (Minazi, Dibamba A) and Wami Dakawa (Magengeni, CCM, Fungafunga and Zaire).

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Region	District	Ward	Village	Community
Morogoro	Mvomero	Mvomero	Dakawa	✓ KIKAMBO
				✓ CHAMBIKO
				✓ KIJOGA
				✓ KIPOGOLO
		Dibamba	Dibamba	✓ MINAZINI
				✓ DIBAMBA A
		Mvomero	WAMI DAKAWA	✓ MAGENGENI
				✓ CCM
				✓ ZAIRE
				✓ FUNGAFUNGA

Country Map of Tanzania, Region of Morogoro and District of Mvomero

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C. Baseline period

: 00th June 2020 ~ 00th June 2020 (00 days)

D. Baseline survey team

Organization	Name (Title)	Responsibility
SAWA		
ChildFund Kroea	Namhee Yoon (Project coordinator)	Review the tools Data Analysis Report
	Hyojung Ko (MEL specialist)	Review the indicators Review the tools

4. Assessment Methodologies

The Methodologies adopted for the baseline survey mainly focused on current situation on community based services, basic education and child protection through different level stakeholders' engagement, such as children, parents-/caregivers and teachers. The target object groups of interview were decided according to the information that was required based on the stakeholders' analysis that had been previously conducted. Mostly, Knowledge Attitude and Practice (KAP), Zambia Child Assessment (ZAMCAT) and UWEZO Assessment Tools were used to collect this data. These Tools were selected based on the geographical context of the target areas and level of the community understanding.

TABLE 1. OF RESPONDENTS INTERVIEWED

VILLAGE	KAP		ZAMCAT		UWEZO		NUMBER OF RESPONDENT
	M	F	M	F	M	F	
MVOMERO	13	57	25	29	8	12	144
DIBAMBA	10	49	4	7	10	10	90
WAMI DAKAWA	17	63	14	18	10	10	132
Total of Respondents	40	169	43	54	28	32	366

5. Achievement and Challenges

This is the second time of baselinesurvey conducted by SAWA-is conducting Baseline Survey. The first baseline was conducted in 2018 (Mat Mtipule, Msongozi, Matale and Doma Villages) by consultant in partnership with SAWA staff under the guidance of ChildFund Korea which had

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given enormous experience to SAWA Staff. All the challenges which SAWA experienced in the previous ~~B~~baseline ~~S~~survey have been taken on board to improve Dibamba, Dakawa and Mvomero—~~B~~baseline exercise. ~~Based~~ on the previous experience, we have managed to utilize both the time and resources in a more efficient way, prepare the KAP, ZAMCAT and UWEZO tools in a more improved manner.

~~Some of Encountering~~ the ~~l~~imitations and challenges ~~encountered were~~was associated with COVID—~~19~~19 ~~P~~pandemic in which no big gathering ~~were~~was allowed ~~but also~~and social distance was insisted throughout the exercise. ~~However~~However, the team managed to complete the ~~B~~baseline in time with positive response from the ~~l~~local government officials as well as the ~~r~~respondeneets.

II. Analysis

1. Results

A. Baseline Scorecard

OUTCOME	INDICATOR	DEFINITION	BASE LINE	TARGET
Outcome 1 85% of the children aged 0-6 years at Dakawa, Mvomero and Dibamba Villages have accessed quality community and center based ECD services by end of 2022	a	% of parents and caregivers who have appropriate parenting practices [Parents] -Mother, father, grandmother of 0-6 years children [caregiver] -Uncle and aunt of 0-6years children [Appropriate parenting] - Parents and caregiver who practice child early stimulation, Health and Nutrition	46%	70%
	b	% of children in Std. 1 who have attended ECD center or/and Pre-primary school [Attended] - Standard 1 children who have experienced more than 6 months/12months either to ECD center or/and Pre-Primary school	97% ¹	50%
	c	% of children in appropriate development stage according to their age [Appropriate development stage] - Percentage of children age 36-59 months who score 50% or above on ZAMCAT Tool tests	42%	70%
Outcome 2. 90% of the children aged 7 – 16 years at Dakawa, Mvomero and Dibamba have accessed equitable and quality basic	a	% of children attending Primary school [Attending] - Attendance of at least 17 days out of 20 days per month	77%	95%
	b	% of children who dropped out in primary schools [Drop out] - Percentage of children of primary schools who were enrolled but dropped out due to different barriers	0% ²	5%

¹This baseline data has already over than target. It is recommended to revise the target indicator.

² The number of children who drop out is 4. (total number of children is 1,532) The number of drop out children is very few. It is also recommended to revise the indicator.

education by end of 2022	c	Pass(test) rate(%) of STD4	[Pass rate] - Percentage of children who pass district, region or National examination based on appropriate standard.	100%	100%
	d	Pass(test) rate(%) of STD7	[Pass rate] - Percentage of children who pass district, region or National examination based on appropriate standard.	98%	70%
	e	% of children who achieving the minimum proficiency level in 3Rs	[Minimum standard] - Pass the average score of 50 or above [3Rs] - Reading(Kiswahili, English), writing, and Simple Arithmetic	42%	75%
Outcome 3. 60% of the children aged 0 -16 years at Dakawa, Mvomero and Dibamba Villages have accessed effective community based child protection services by end of 2022	a	# of Community Based Child Protection Mechanisms functioning	[Functioning] - Child abuse cases referred by CP committee and community members to social service (social welfare, police, health services) in a year	N/A ³	3
	b	# of early child deliveries	[Pregnant students] - Children in Primary and Secondary school who have proved and reported as pregnant student	N/A ⁴	40
	c	# of drop-out due to pregnancy cases in the target schools	Drop out due to pregnancy: Means # of girls who drop out of primary or secondary schools due to pregnancy cases	1	0
	d	% of community Members who are aware of CRs	[Aware] - Score 50% or above on CRs awareness survey check list	0%	55%

³ This baseline data will be collected after the activities start. In further explanation, SAWA has a specific activity for mapping CBCPM (community-based child protection mechanisms) which will be implemented 2021. During the implementation of this activity SAWA will be in a position to know the exact number of existing and functioning CBCPM.

⁴ The data could be collected from ward dispensary. However, it wasn't allowed to visit the dispensaries during COVID-19. This data will be collected after COVID-19.

2. Status of respondents (# of respondents=209)

Questions	Results				
1) Sex of respondents	Male 40				
	Female 169				
2) Age		Ages	Frequency	percent	Valid percent
	Valid	10s	2	1.0%	1.0%
		20s	75	35.9%	36.2%
		30s	67	32.1%	32.4%
		40s	31	14.8%	15.0%
		50s	22	10.5%	10.6%
		60s	7	3.3%	3.4%
		70s	2	1.0%	1.0%
		80s	1	0.5%	0.5%
	invalid	under 10	2	1.0%	
	Total		209	100%	100%
	- Age group of 20s and 30s made up the greatest portion (68.6%)				
	- The youngest: 19(2)				
	- The oldest: 80(1)				
3) Relationship with children		Relationship	Frequency	percent	Valid percent
	Valid	Mother	83	39.7%	40.3%
		Father	20	9.6%	9.7%
		Sibling(brother/sister)	65	31.1%	31.6%
		Aunt/Uncle	26	12.4%	12.6%
		Cousin	2	1.0%	1.0%
		Grandmother	6	2.9%	2.9%
		Grandfather	4	1.9%	1.9%
		Guardian	0	0.0%	0.0%
		Neighbor	0	0.0%	0.0%
		Other(specify)	0	0.0%	0.0%
	invalid	Female=Father	3	1.4%	
	Total		209	100%	100%
	- Mother group made up the greatest portion(40.3%)				

4) Education		Education	Frequency	Valid percent
	Valid	Never attended school	74	35%
		Preprimary	18	9%
		Primary	50	24%
		Secondary	19	9%
		High school	19	9%
		College education	19	9%
		University education	9	4%
		Vocational education	1	0%
		Adult literacy	0	0%
		Other(specify)	0	0%
	Total		209	100%
	- Never attended school group made up to greatest portion (35%)			
	- No invalid data.			
5) Income activities		Income activity	Frequency	Valid percent
	Valid	No labour(do not engage in any economic activity)	55	26%
		Farming	75	36%
		Fishing	22	11%
		Livestock	13	6%
		Hunting	13	6%
		Employed	5	2%
		Retired(pension)	2	1%
		Business and trade(self-employed)	23	11%
		Other(specify)	1	0%
	Total		209	100%
	- Farming group made up to greatest portion (36%)			
	- No invalid data.			

3. Baseline results

Part 1) Positive parenting practice(n=10) -Outcome 1-a

	Q1(#)	Q1(%)	Q2(#)	Q2(%)	Q3(#)	Q3(%)	Q4(#)	Q4(%)	Q5(#)	Q5(%)
don't know	17	8%	22	11%	20	10%	23	11%	30	14%
Incorrect	47	22%	39	19%	31	15%	51	24%	39	19%
Correct	145	69%	148	71%	158	76%	135	65%	140	67%
	Q6(#)	Q6(%)	Q7(#)	Q7(%)	Q8(#)	Q8(%)	Q9(#)	Q9(%)	Q10(#)	Q10(%)
don't know	16	8%	11	5%	10	5%	10	5%	10	5%
Incorrect	58	28%	56	27%	39	19%	46	22%	27	13%
Correct	135	65%	142	68%	159	76%	153	73%	172	82%

■ Analysis

- 'Q4 I draw things(forms, objects, animals etc) with child/children' who replied 'no' or 'don't know' accounted for 35%.
- 'Q6 I read books(including ones with pictures) to my child/children' who replied 'no' or 'don't know' accounted for 35%.

Part 2) Hygiene, Health & Nutrition Practice(n=8) – Outcome1-a

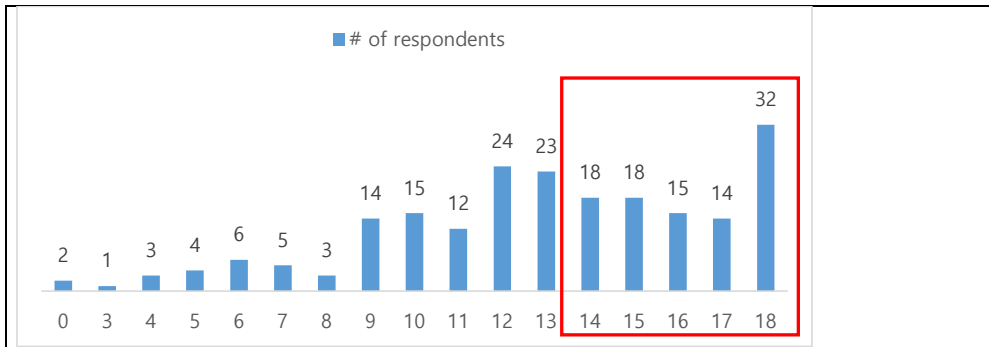
	Q1(#)	Q1(%)	Q2(#)	Q2(%)	Q3(#)	Q3(%)	Q4(#)	Q4(%)	Q5(#)	Q5(%)	Q6(#)	Q6(%)	Q7(#)	Q7(%)	Q8(#)	Q8(%)
don't know	7	3%	5	2%	9	4%	3	1%	1	0%	6	3%	8	4%	10	5%
Incorrect	32	15%	33	16%	27	13%	66	32%	47	22%	57	27%	86	41%	61	29%
Correct	170	81%	171	82%	173	83%	140	67%	161	77%	146	70%	115	55%	138	66%

■ Analysis

- 'Q7 I force(make) my child/children to eat more because I think he/she/they needed for his/her/their health' who replied 'no' or 'don't know' accounted for 45%.

◆ Part 1-2 Comprehensive Analysis

Outcome1-a. % of parents and caregivers who have appropriate parenting practice: Those who scored 14 points and above are considered to be caregivers who have appropriate parenting practice. (Total 18 questions, part 1 and 2) **(97 respondents / 209 *100 = 46.4%)**



Part3) Child Right (Knowledge, Attitude) (n=15) – Outcome3-d

	Q1 (#)	Q1 (%)	Q2 (#)	Q2 (%)	Q3 (#)	Q3 (%)	Q4 (#)	Q4 (%)	Q5 (#)	Q5 (%)	Q6 (#)	Q6 (%)	Q7 (#)	Q7 (%)
don't know	2	1%	0	0%	2	1%	0	0%	1	0%	1	0%	1	0%
Incorrect	19	9%	18	9%	169	81%	21	10%	175	84%	168	80%	57	27%
Correct	188	90%	191	91%	38	18%	188	90%	33	16%	40	19%	151	72%

	Q8(#)	Q8(%)	Q9(#)	Q9(%)	Q10(#)	Q10(%)	Q11(#)	Q11(%)
Incorrect	128	61%	132	63%	141	67%	130	62%
Correct	80	38%	75	36%	66	32%	76	36%
don't know	1	0%	2	1%	2	1%	3	1%
	Q12(#)	Q12(%)	Q13(#)	Q13(%)	Q14(3)	Q14(%)	Q15(#)	Q15(%)
Incorrect	133	64%	138	66%	135	65%	144	69%
Correct	74	35%	69	33%	73	35%	65	31%
don't know	2	1%	2	1%	1	0%	0	0%

■ Analysis

- 'Q3 It is allowed that child works to contribute to family income' who replied 'True' or 'don't know' accounted for 82%.
- 'Q5 Child care is the responsibility of parents only' who replied 'True' or 'don't know' accounted for 84%.
- 'Q6 Parents know the best thinks for their children so they do not always need to listen to

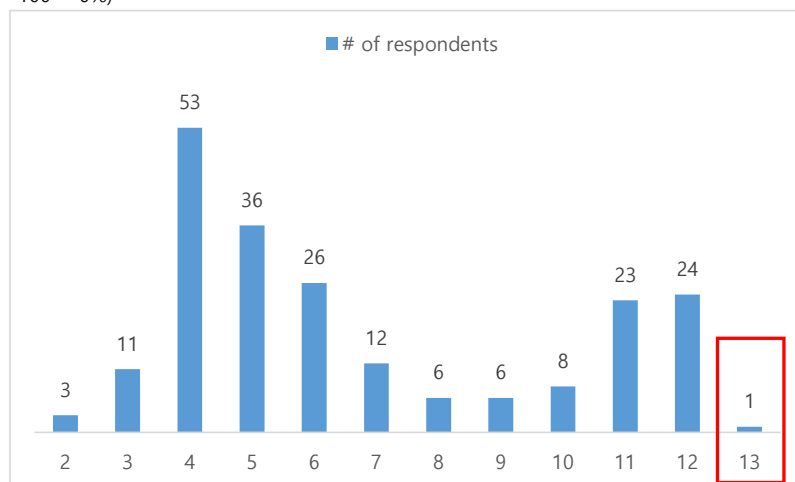
their children' who replied 'True' or 'don't know' accounted for 80%.

- 'Q10 Parents have rights to beat their children if the child does not want to go to school' who replied 'Agree' or 'don't know' accounted for 68%.

- 'Q15 Parents have rights to beat their children if the child steals' who replied 'Agree' or 'don't know' accounted for 69%.

◆ Part 3 Comprehensive Analysis

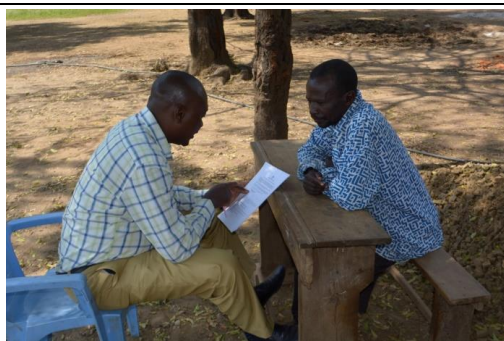
Outcome 3-d. % of community Members who are aware of CRs: Those who scored 13 points and above are considered to be community members aware of CRs. (Total 15 questions) (1 respondents / 209 *100 = 0%)



III. Photos



SAWA and District officials agreed on Baseline Implementation modalities at Dakawa Ward Office



District Officials administering KAP at Wami Dakawa



SAWA Staff administering UWEZO and ZAMCAT tools at Dibaba and Mvomero Villages