Research Report 10/3

Poverty and the Rights of Children at Household Level:

Findings from Same and Kisarawe Districts, Tanzania

By Ophelia Mascarenhas and Huruma Sigalla

RESEARCH ON POVERTY ALLEVIATION

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P.O. Box 33223, Dar es Salaam, Tanzania
157 Mgombani Street, Regent Estate
Tel: +255(0) (22) 2700083 / 2772556
Fax: +255(0) (22) 2775738
Email: repoa@repoa.or.tz
Website: www.repoa.or.tz

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List of Abbreviations

ACRWC	African Charter on the Rights and Welfare of the Child
BEST	Basic Education Statistics Tanzania
CRC	Convention on the Rights of the Child
GDP	Gross Domestic Product
HBS	Household Budget Survey
HH	Household
HIV/AIDS	Human Immuno-deficiency Virus/Acquired Immune Deficiency Syndrome
ILFS	Integrated Labour Force Survey
ILO	International Labour Organisation
MDG	Millennium Development Goal
MKUKUTA	Mkakati Kukuza Uchumi na Kupunguza Umaskini (Swahili for National Strategy for Growth and Reduction of Poverty (NSGRP))
MoEVT	Ministry of Education and Vocational Training
MoCDGC	Ministry of Community Development, Gender and Children
MoLYDS	Ministry of Labour, Youth Development and Sports
MVC	Most vulnerable children
NGO	Non-governmental organisation
NBS	National Bureau of Statistics
NSGRP	National Strategy for Growth and Poverty Reduction
OVC	Orphans and vulnerable children
PEDP	Primary Education Development Programme
PHDR	Poverty and Human Development Report
PRSP	Poverty Reduction Strategy Paper
PSLE	Primary School Leaving Examination
RAWG	Research and Analysis Working Group (within the Ministry of Finance and Economic Affairs)
REPOA	Research on Poverty Alleviation
TDHS	Tanzania Demographic and Health Survey
TDS	Tanzania Disability Survey
TFNC	Tanzania Food and Nutrition Centre
TGNP	Tanzania Gender Networking Programme
THIS	Tanzania HIV/AIDS Indicator Survey
Tshs	Tanzanian Shillings
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
URT	United Republic of Tanzania

Executive summary

The international focus upon realising children's rights as opposed to meeting children's needs is a relatively recent development. A right implies that there are rights holders and rights providers and that the latter can be held accountable legally or socially and punished if these rights are not provided. The concept of the rights of children has evolved as part of the United Nations response to the abuse of human rights in general and children in particular.

In Tanzania, children make up about half of the population. The responsibilities for meeting the rights of the children are shared by the Government of Tanzania (GOT) and the households in which children live. The GOT has signed the *Convention on the Rights of Children (CRC)* and has used this document as the basis for defining children's rights in the *Child Development Policy 1996*. It has also put in place a limited number of initiatives for protecting children's rights but there is evidence that these measures are not adequate. At the same time there is inconsistency in definitions of a child in Tanzanian law; some statutes define the child as a person aged less than 14 years while others define a child as a person aged less than 18 years. In addition, major shifts in economic paradigms have led to the changing role of the GOT with the tendency to put more of the responsibilities for meeting children's rights on households.

Households have also been going through socio-political change that has affected the ability of some households to meet their basic rights including the rights of children. The latest Household Budget Survey in 2007 found that about a third of Tanzanian households were below the basic needs poverty line. At the same time there is increasing evidence of children under stress, living on the streets, not attending school regularly and being involved in unsuitable employment. A great deal of literature is available on poverty and some studies have examined poor and vulnerable children, but a review of major publications found little in-depth research on how poverty at the household level impacts of children's rights. This study aimed to contribute towards filling the gap.

Methodology

It was recognised that how households meet children's needs may be affected by environmental, social and cultural as well as economic factors. However, this study examined the relationship between poverty and children's rights. Although children's rights were considered at a general level, the main focus was on three of the basic rights (i) access to education, (ii) access to adequate food, and (iii) access to clean water.

Since most children live in households, the assumption was made that the level of household resources and how these were allocated affects all household members, including children. Data was collected using a household questionnaire which was administered to 317 households in Same and Kisarawe Districts. This was supplemented with information from discussions with 137 children in the two study areas. The data was analysed using SPSS and the relationship between household poverty and children's rights was assessed using correlations and cross-tabulations. After preparation of the final draft report, the researchers went back to the research sites to share the findings with study participants.

Findings

An overwhelming majority (98%) of respondents surveyed were of the opinion that children had rights and that these rights were the same for girls and boys. In general, the findings show that adult respondents were aware of the basic physical needs of the child, but there was no mention of other rights of the child, such as right to be heard or to be consulted on decisions related to their future. Data from the discussions held with children indicated that they were more aware of their rights, particularly in Kisarawe.

Only about 30% of households felt that they were able to fully meet the rights of the children, and about 5% felt they were unable to meet their children's rights at all, which is a matter of grave concern if this proportion is applied to the population of children nationally. Encouragingly, enrolment in primary schools seemed not to be affected entirely by poverty; over 90% of school age children in the households surveyed across all income groups were going to school. However, there was a statistically significant direct correlation between poverty and indicators of household school expenditure and between poverty and children's performance at school. Another notable finding was that absenteeism was prevalent across all income groups but highest for children in the poorest households.

On access to food, about 40% of the households reported experiencing food shortages in 'some months' or 'often'. Again, a statistically significant positive correlation was found between frequency of food shortages and household income. However, only 5% of households reported that children had only one meal a day.

The third right that was assessed against poverty levels was children's right to adequate water. There were significant differences in access to water across income groups reflected in a Pearson's ratio of .320 significant at the 0.01 level (2 tailed). About 30% of households also reported purchasing bottled water for drinking.

Children's perspectives on whether their rights were met concurred with data from the household survey in some areas but not others. For education, only 8.8% of children felt that their right to education was being met to a very small extent. This compared closely with the findings from the household survey in which only 8% or respondents reported that their children were not in school. However, with respect to access to food, about 60% of the children reported that they did not have full access to food whereas according to the household data only 40% did not have adequate food. On water, only 14% of the children said that water was fully available; 20% said that it was moderately available while the rest (66%) felt that their right to water was not met at all. This again reflected the general problem regarding access to water that was reported by the households. Both Kisarawe and Same Districts suffer water shortages especially during the dry season.

Conclusions and Recommendations

The results show that there were distinct economic groups in the study population delineated by income/expenditure and by assets, and wealth status affected the way the resources were allocated at household level. There was a strong relationship between household wealth status and respondents' perceptions of not being able to meet all of the needs of the household. The levels and patterns of spending to meet household needs were also clearly related to the income groups which, in turn, led to differences in the extent to which children's rights were met. The study's core assumption that poverty affects children's basic rights was confirmed, by marked differences in children's access to quality education, food and water across household income groups.

The evidence of the relationship between poverty and a household's inability to meet children's rights points to the need to disaggregate national data on the status and impact of poverty by age, and to implement national monitoring systems to measure progress in realising the rights of children enshrined in the CRC, the ACRWC or the Child Development Policy. The strategy should consider the special needs of girls and children from poor households. Findings also highlight the complexities inherent in meeting children's rights. While the government has signed both the CRC and ACRWC, it has not enacted domestic legislation to ratify the CRC, and many children's rights (and violations against children) are not covered under existing laws. The Government of Tanzania needs to harmonise the definition of a child in statutory law as well as in the other codes of law such as customary law, in accordance with the definition adopted by the Tanzania Child Development Policy, the CRC and the African Charter to avoid loopholes that allow children's rights to be neglected without legal recourse.

Parents/guardians too must understand the full scope of children's rights so as to fulfil their responsibility in ensuring the protection and well-being of children. In many cases, households do not deliberately neglect children's rights, rather the social or economic circumstances they face are beyond their control. Strategic monitoring and interventions are needed to enable households to better meet children's basic needs and rights. Findings also highlight the need for a broader definition of vulnerable children, beyond those groups which display the most obvious signs of vulnerability – orphans, abandoned children and street children. This study shows that children from "normal" Tanzanian households with both biological parents were frequently under stress.

More comprehensive research on child deprivation and vulnerability in Tanzania is required to better inform the creation of national systems to address the widespread vulnerability. For example, more discerning mechanisms of cost sharing are required to ensure that all Tanzanian children have access to basic services such as education, healthcare, water and food. For example, even in developed countries systems are in place to shield poorer households from paying the full costs of education. Education is generally accepted as essential for human development and a tool for empowering children to get out of poverty. But cost sharing may force many children to remain poor. The study also found that illness, most commonly malaria, prevented children from more than half of the households surveyed from fully attending school. Reducing the incidence of disease among school-age children is critically important if education is to be the engine of Tanzanian growth and development. Therefore, interventions such as distribution of insecticide-treated nets should be promoted for all households, and exemptions from cost sharing in health for all children should be

seriously considered. Finally, the study revealed high rates of food insecurity as reflected in the significant proportion of households in which children have less than three meals a day. Hungry children find it difficult to concentrate, and school attendance and performance suffer. Strategies with strong support from all stakeholders are clearly needed to provide supplementary meals in public primary and secondary schools. Currently, there is no official policy for school meals and as a result commendable initiatives start well but then fizzle out. A systematic approach is needed based on a thorough analysis of Tanzanian and international best practices.

1 Background to the study

1.1 Introduction

In Tanzania, children make up about half of the population (NBS, 2003), and in communities throughout the country it is generally recognised that children have special needs and require special care. The care and protection of children is primarily the responsibility of the family, typically the biological parents and other close relatives. Within families, mothers assisted by other females are the primary caregivers, but fathers and other males also fulfil roles, particularly in providing resources to meet children's needs. However, difficult family circumstances, such as the death of parents or household poverty, and rapid socio-economic changes can severely impact the care and protection of children. In situations when the survival of the household is at stake, the welfare and rights of the child may suffer.

Overall responsibility for the welfare of the children is shared between the Government of Tanzania and private households. Since political independence in 1961, major political and socio-economic changes have affected all levels of society. At the national level, the country inherited a basically capitalist economy from the colonial government at independence. The main responsibility for meeting children's rights lay with households. From the late 1960s to mid-1980s under Nyerere's socialism, households (and by inference children) were entitled to free basic services – mainly healthcare, safe drinking water and education – provided by the Government. Over this period, some progress in children's rights was achieved, especially in primary school enrolments, but gaps remained. Other rights such as access to food, water, shelter and security remained the responsibility of households.

From the mid-1980s the country has undergone major economic reforms towards a more liberalised market-based economy, including the privatisation of parastatals and cost-sharing of basic services. The Government role has increasingly become limited to formulating policies and strategies for the development of key infrastructure, such as water supply systems, and the provision of human resources, such as healthcare workers and teachers. As a result, households have been required to provide the bulk of resources for survival needs (food, shelter, water, etc.) and to share in the provision of basic services and infrastructure through systems of cost sharing.

Households too have undergone momentous change. Socially, there has been an increasing tendency to go from large extended multi-generational families headed by a patriarch to smaller nuclear, income-sharing families often consisting of two parents and their biological children, headed by the male parent. Several factors contributed to this change: intensification of market-oriented activities, the need for all adult family members to engage in petty commodity production to ensure the welfare of the household, and migration from rural to urban areas (Booth et al., 1993).Spatially, households have changed from scattered homesteads to concentrated settlements in villages following the Villagisation Program of the late 1970s.

Findings from the Household Budget Survey (HBS) 2007 indicate persistently high levels of poverty nationally (NBS, 2008). In terms of livelihoods, most households are moving from being largely self-provisioning to being increasingly linked to the monetary economy even in rural areas. Many households have found that they can no longer produce all that they need and, therefore, must engage in paid employment or sell services or products to meet their needs. Cost sharing of public services also requires cash.

At the same time the manifestations of children under stress have increased. A government review estimated the number of orphans and vulnerable children (OVC) at over one million (Charwe et al., 2004). In the large cities such as Dar es Salaam, Mwanza and Arusha there are many street children. Much has been written on the connection between poverty and the increasing numbers of OVC. However, few studies have examined how poverty at the household level impacts children's rights. This research aims to better understand the connection between poverty and meeting the needs and rights of Tanzanian children. While the rights of children will be considered generally, the study will focus on three specific rights contained in the 1990 *Convention on the Rights of the Child (CRC)*: access to education, access to adequate food and access to clean water.

1.2 Literature Review

1.2.1 Children's Rights: International Definitions

The international focus upon realising children's rights as opposed to meeting children's needs is a relatively recent development. A right implies that there are rights holders and rights providers and that the latter can be held accountable legally or socially for their actions and punished if the rights are not met. The concept of the rights of children evolved as part of the United Nations response to the abuse of human rights in general and children in particular.

The first international instrument to recognise the rights of the child was the 1924 *Geneva Declaration of the Rights of the Child*. Strong initiatives were taken culminating in the 1990 *Convention on the Rights of the Child (CRC)* and the World Summit for Children to call countries to sign and ratify the CRC. The CRC has the following guiding principles:

- definition of a 'child' as a person below the age 18 years;
- non-discrimination – all children have the same rights;
- the best interests of the child must be the primary concern in making decisions that affect them;
- children have the right to life, survival and development;
- respect for the views of the child; and
- indivisibility – all social, economic cultural, civil and political rights are equal; there is no hierarchy.

The rights enshrined in the CRC are comprehensive and commendable, but it does not take into account the special needs of specific regions. That aspect was recognised by the CRC; the convention is a framework rather than the last word on the rights of children.

1.2.2 Children's Rights from an African Perspective

The rights of children in the African context were discussed during the Pan African Forum for Children held in Cairo, Egypt in 1990. Subsequently, African states adopted many of the rights in the CRC into the 1999 African Charter on the Rights and Welfare of the Child (ACRWC). The main section of the Charter has 31 articles most of which reflect the rights stipulated in the CRC with one major exception on the concept of the responsibility of children which states that "every child shall have responsibilities towards his family, society, state and communities. Consistent with the CRC, the ACRWC defines a child as "every human being below the age of 18 years."

Omari and Mbilinyi (1996) and Makaramba (1998) also examined the concept of children's rights from the African perspective. They state that under customary, Islamic and Hindu law, the age of majority is determined on the basis of attaining puberty. There are rites of passage to mark this event which emphasise the individual's transition from a child to an adult. This concept of transition is also reflected in UNICEF's classification of children into (i) early childhood; (ii) the schooling years; and (iii) adolescent. Makamba (1998) described that under statutory law the definitions of the child are contextual, i.e., that in different statutes pertaining to the rights of a child the definition of a child relates to the particular purpose and context of each legislative scheme. This has led to inconsistencies in the definition of a "child" in Tanzanian law.

1.2.3 Children's Rights in Tanzania

Tanzania does not have a domestic convention or law guaranteeing the rights of the child and the Bill of Rights in the Constitution does not mention children as a special category. However, Tanzania has ratified the CRC and the ACRWC and has incorporated provisions of the two conventions into the *Child Development Policy 1996*. In the context of the CRC, which recommended a framework for national policies on the rights of children, the Child Development Policy aimed to incorporate what was appropriate for the Tanzanian situation (see Box 1).

Box 1: Children's Rights Under the Tanzania Child Development Policy 1996

Main Category	Specific Rights
• Survival	• From mother's pregnancy to childhood
• Development	• Physical, intellectual, moral, spiritual
• Protection	• Against abortion, murder, suicide, abandonment, exploitation, tasks not commensurate with age, deprivation, oppression, neglect, abuse, especially gender abuse, female genital mutilation (FGM) and early forced marriages
• Participation	• In decision making and policies relevant to their well-being

The reference to FGM and early forced marriages in the policy reflects the special needs and rights of the girl child in Tanzania which was not given due attention in the CRC or even in the African Charter.

The Government of Tanzania has also taken a number of other initiatives to protect children's rights, including establishment of the Ministry of Community Development, Gender and Children (MoCDGC) in 1990 with the mandate to protect the rights of children. In 1993, the government launched the *National Programme of Action: Achieving the Goals for Tanzanian Children by the Year 2000* to be implemented in partnership with stakeholders. In 2001, it also began implementing an action plan to protect children in the worst forms of labour, known as the *Time-Bound Programme on the Worst Forms of Child Labour in Tanzania,* with support from the International Labour Office (ILO).

In addition, the Integrated Labour Force Survey which is conducted periodically by the National Bureau of Statistics (the latest survey was in 2006) collects data on working children, including those engaged in hazardous or exploitative child labour in contravention of the ILO conventions on child work. National health policies and strategies have a strong focus on reducing child morbidity and mortality, especially among children under five years, and HIV/AIDS programmes have prioritised support to orphans and other most vulnerable children (MVCs). Nevertheless, there is evidence that the rights of many Tanzanian children are not met. For example, the *Tanzania Human Rights Report 2005* found that 2,443 children were living on the streets in Dar es Salaam alone, and over 4.2 million children in Tanzania were living away from their families, the majority working in the worst forms of child labour instead of going to school or enjoying their childhood (Legal and Human Rights Centre, 2005).

One legal complication is the definition of the child particularly in the case of the female child. In Tanzania under customary, Islamic and Hindu law the age of a child is determined on the basis of attaining puberty which is around 15 years of age. In statutory law, inconsistencies abound: definitions of a child range from a person who is under the age of 12 years (Cap 13, Penal Code) to one who is below the age of 14 years (Tanzania Evidence Act) to one who is under the age of 15 years (Employment Ordinance) to one who is 18 years and above (Majority Ordinance, Contract Ordinance).[1] The last definition is the one used by the CRC as well as the Tanzania Child Development Policy.

A few studies have looked at children's rights in Tanzania. UNICEF (1999) examined knowledge, attitudes and action on children's rights in six regions in Mainland Tanzania, while Sumra and Ennew (1999) investigated the attitudes of staff working in institutions that were taking care of children. The 2002/03 Tanzania Poverty Assessment looked at the attitudes of Tanzanian parents towards sending their children to school (RAWG, 2004), and Makaramba (1998) examined the legal and judicial aspects of children's rights. In general, these studies concluded that the culture of children's rights tends to be weak in Tanzania. As Makaramba (1998, p.76) concludes: "Although the State guarantees some basic rights for children, there are still some impediments, legal or otherwise which make the enjoyment of such rights difficult."

Children's Right to Education in Tanzania

Among children's rights, the right to education has the greatest research coverage probably due to the comprehensive data available from the Ministry of Education and Vocational Training (MoEVT), which publishes two key annual documents: *Basic Education Statistics in*

[1] According to some laws a person who is 15 years of age can be prosecuted as an adult, and under the Marriage Act a girl of 15 years can be legally married. Inconsistencies also exist in international conventions. For instance, the CRC defines a child as a person who is less than 18 years of age, while ILO Convention 138 on the minimum age for employment defines a child as a person who is less than 15 years of age.

Tanzania (BEST) – National and Basic Education Statistics in Tanzania (BEST) – Regional. These reports include data on enrolment rates, transition rates from primary to secondary school and performance in school examinations which are used to examine trends in children's rights to primary and secondary education. Generally, educational studies in Tanzania have noted significant improvements in enrolment rates, but a decline in the quality of education provided (Rajani, Mann & Ledward, 2000; Kuleana Centre for Children's Rights, 1999; Davidson, 2004). They have also found that the performance of girls to be lower than that of boys in primary and secondary schools. However, the impact of household poverty on children's education in Tanzania has been less documented, despite evidence that hunger can affect children's attendance and performance in schools.[2]

1.2.4 Poverty in Tanzania

Poverty affects a large proportion of the country's population. Despite vast natural resources and the long period of political stability, Tanzania is still ranked 159 out of 177 countries based on the Human Development Index (HDI) (UNDP, 2007). The HBS 2007 found that about one-third (33.6%) of the Mainland population was living below the basic needs poverty line, and 16.6% below the food poverty line. The Views of the People survey conducted in 2007 also found that the majority of citizens surveyed, especially rural residents, felt that the economic situation was getting worse (RAWG, 2008).

Since 2000, the government has implemented poverty reduction strategies, the latest being *the National Strategy for Growth and Poverty Reduction 2005-2010*, popularly known as MKUKUTA. Progress under MKUKUTA is monitored against a national set of indicators and reported in Annual Implementation Reports and the Poverty and Human Development Reports (PHDR) published bi-annually since 2002 (RAWG, 2003, 2005 & 2007). PHDR covers both economic and non-economic aspects of poverty. While these progress reports focus on quantitative statistics, other national studies, such as the 2002/03 Tanzania Participatory Poverty Assessment, have applied participatory approaches to examine vulnerability to poverty (RAWG, 2004). A third group of studies have focused on citizens' perceptions on socio-economic conditions in the country, such as *Views of the People 2007* (RAWG, 2008). Nevertheless, the emphasis has still been largely on adults and communities.

Beyond official government publications, a considerable number of studies examining the causes and impact of poverty have been carried out by academic and research organizations, such as the Research and Analysis Group (RAWG) with its secretariat in REPOA, the Tanzania Gender Networking Programme (TGNP) and Women's Dignity Project (WDP) (RAWG, 2004, 2005, 2007, 2008; TGNP, 2003, 2006, 2007; WDP, 2004, 2006). However, there are few studies that have analysed poverty from the perspective of children's rights. In this respect, Tanzania falls in the same category as other countries in southern Africa. A study by Robinson (2003) which examined the poverty reduction strategy papers (PRSPs) of Malawi, Zambia, Botswana, Lesotho and Mozambique found that a common feature of these PRSPs was the absence of gender or child-focused demographic and poverty information and analysis. The author concluded that PRSPs in southern African did not undertake a comprehensive review of "child poverty". This is also true in Tanzania where, apart from education and to lesser extent health, there is little focus on children within

[2] The World Food Programme (WFP) has documented how hunger can negatively affect children's attendance in primary schools.

national analysis of poverty. Even in health, the focus is on children under 5 years of age, but what about the children in primary and secondary schools and young people not in school?

1.2.5 Patterns of Allocations of Resources at the Household Level

The Changing Family

Poverty and children's rights interact within households. However, there are many variations in household structure. The principal household types are single member households, the family unit and the extended family household. The most common structure is the family unit, typically headed by a male. However, the *Household Budget Survey 2007* found that nearly 25% of *Tanzanian households were headed by females, while the Tanzania Demographic and Health Survey (TDHS) 2004/05* found that 61% of children under 18 years of age were living with both parents, 24% with either their mother or father, and 15% lived with neither of their biological parents.

Traditionally, the family has been seen as a social institution. It unites related individuals into cooperative groups that oversee the bearing and raising of children. Haralambos and Holborn (1990) argue that the family is "the cornerstone of society … a universal social institution, an inevitable part of human society." They reviewed a number of studies and concluded that some form of family unit exists even in the kibbutz. In general, the two common types of family have evolved historically, namely nuclear and extended families but these have been going through major changes in the last century due to changes in socio-economic norms and practices.

Changes in the concept of family have also occurred in Tanzania. Both the nuclear and extended family types have recently been subjected to significant structural and functional change, due to changing economic conditions, rural-urban migration and the HIV/AIDS epidemic. Hence, social scientists today are increasingly using the concept of the household (Charwe, et al., 2004).

The Emergence of the Concept of the Household

Household refers to a domestic unit consisting of the parent(s) and the biological children who live together along with other related or non-related members. According to Sullivan and Thompson (1991), the functions of the household are similar to those of the family: namely socialisation and education, regulation of sexual behavior and reproduction, economic activity, protection, and affection and companionship. However, within the same families there can also be conflict due to patriarchy, unfair division of labor by gender and age, and control over resources and inheritance and breakdown of sexual mores. Therefore, how resources are allocated within the household is critical for the welfare of the members of the household and for children's rights.

This brief review of the literature has revealed the following:

- Tanzania does not have a domestic convention or law guaranteeing the rights of the child and the Bill of Rights in the Constitution does not mention children as a special category. However, Tanzania is a signatory to both the CRC and the ACRWC and therefore obliged to observe the provisions of these conventions.

- While considerable research has been carried out on access to primary and secondary education, few studies investigate the links between poverty and children's education, particularly in terms of student retention and performance. Even less research has been carried out in Tanzania on the impact of poverty on other basic rights of children, such as the rights to adequate food and water, healthcare, and participation in decisions that affect them.

- The status of poverty nationally is well documented but analysis is largely at household level. There is very little evidence available on how children's rights are met within households at different wealth levels.

- Household characteristics and socio-cultural practices can also affect allocation of resources and exacerbate the negative impact of poverty on children's rights, but it is not clear why these aspects affect some households and not all.

1.3 Statement of the problem

There are many documented and observable manifestations that the rights of Tanzanian children are under stress: high levels of child malnutrition, morbidity and mortality; significant dropout rates in schools; poor performance in national examinations, especially among female children; high numbers of working children, including children engaged in exploitative forms of labour; growing numbers of street children; increasing incidence of child abuse; and persistently high numbers of juvenile delinquents in prisons.

The most common explanation for child deprivation is poverty. Many children who do well do indeed come from better-off families or from urban areas with greater access to basic services. However, research evidence indicates that poverty does not always correlate with children's rights not being met. For example, *the Poverty and Human Development Report (PHDR) 2005* found little correlation between levels of household poverty and net enrolment rates in primary school at district level. This study, therefore, seeks to assess to what extent children's rights are affected by poverty. To answer this question, households in two districts were surveyed on the rights of children between the ages of 5 and 17 years. The study sites included both urban and rural areas, and households of varying wealth status were sampled. While the rights of children were considered generally, the research focused on three fundamental rights articulated in the Convention on the Rights of the Child: access to education, access to adequate nutritious foods, and access to clean drinking water.

1.4 Objectives of the study

The main research objective was to assess to what extent poverty affects resource allocations within households to meet the rights of children in general, and access to education, food and water in particular. The rights examined are those contained in the CRC and the Tanzania Child Development Policy 1996.

Secondary objectives were as follows:

- To ascertain the poverty status of households in the study locations;
- To establish the relationship between poverty and the allocation of resources for household needs;
- To establish the relationship between household poverty levels and fulfilment of the rights of children to education, sufficient food and clean water; and
- To assess children's perception of their rights and the extent to which these rights are being met within their households and communities.

1.5 Research Questions

In line with the study objectives, the main research questions were:

i. What are the wealth levels of households in the study locations?

ii. How does poverty affect the pattern of allocation of resources to household needs?

iii. To what extent do poverty levels affect the fulfilment of the needs and rights of children, especially to education, food and water?

iv. What are the children's perspectives about how their rights are met?

v. What lessons can be drawn from these findings?

1.6 Conceptual Framework

The rights of many children in Tanzania are not adequately met due to a multiplicity of factors. These factors include:

- the national economic situation;
- poverty status of district;
- economic status of households with children, including principal livelihoods;
- geographic and environmental factors, such as whether they reside in urban or rural areas, and availability of natural resources;
- social factors, such as the type of family that they live in; and
- prevailing customs and traditions that affect decision making at the household level.

As illustrated in Figure 1, the welfare of the children depends on the complex inter-relationship of these factors.

Figure 1: Factors Affecting Children's Rights Within the Household

Ideally, a multi-disciplinary study that takes in all of these factors would be required to answer why children's rights in Tanzania are not adequately met. However, in a limited research study, the most feasible way to find an explanation is to isolate one of the factors and examine its impact. The focus of this study, therefore, is upon the economic status of households with children. The study makes the assumption that poverty is the most important factor that affects the way resources are allocated at the household level which, in turn, strongly influences whether the basic needs and rights of children in these households are met. The research hypothesis is that children's rights are more easily met in households with higher wealth status.

2 Methodology

2.1 Study location and sample selection

The study was carried out in two districts in Tanzania during August and September 2006: Same District in Kilimanjaro Region and Kisarawe District in Coast Region (see Appendix 1 for demographic and socio-economic data on the two districts). Within each district, two urban and two rural areas were selected, and a sample of approximately 40 households was randomly selected in each of the four areas. The total survey sample was 317 households distributed as shown in Table 1.

Table 1: Study Sample by District and Location

District	Urban locations	Rural locations	Number of households surveyed	Number of children who participated in group discussions
Kisarawe District	Kibaoni		37	
	Umatumbini		43	
		Kisanga	39	
		Kazimzumbwi	38	
Total district			157	65
Same District	Majevu		40	
	Ujamaa		40	
		Ishindi	40	
		Mwembe	40	
Total district			160	82
Total sample			**317**	**147**

2.2 Study instruments and data collection and analysis

2.2.1 Household Survey

Both quantitative and qualitative methods were used in the study. The main quantitative survey instrument was a household questionnaire which was administered to adults in the 317 households sampled. Every effort was made to interview the head of the household or their spouse. If those individuals were not available, the field assistants administered the questionnaire to another responsible adult in the household.

The following categories of data were collected:

i. Socio-economic characteristics of respondents and the demographic structure of households;
ii. Livelihoods/income of households;
iii. Household assets;
iv. Expenditure/allocation of household income;
v. Rights and responsibilities of children in general;
vi. Children's right to education;
vii. Children's right to adequate food and safe water;
viii. Children's right to rest and entertainment; and
ix. Children's right to freedom of expression.

Prior to data collection, the research teams informed and received the necessary research clearances from local leaders in each study location.

Quantitative data was analysed using SPSS software to provide frequencies, correlations and cross-tabulations. These findings were supplemented by:

i. documentary evidence from the districts and from a few institutions, such as district schools;

ii. focus group discussions and in-depth interviews with teachers, district officials, village leaders, a women's group and an international NGO (Plan International) in Kisarawe District. Similar discussions were held in Same District with the exception of the international NGO.

2.2.2 Children's views

Qualitative methods were also used to collect data on children's understanding, awareness of, and opinions about poverty, their rights and needs, and to what extent they felt that these rights were being met in their households and communities. A total of 147 children participated in participatory group discussions: 65 from Kisarawe District and 82 from Same District.

Consent Procedures for Engaging the Children in Discussions

A four-step process was followed to ensure that the discussions with children were conducted with the consent of the children's parents/guardians and the children themselves.

Step One: The household questionnaire included a question asking respondents whether they would give permission to talk with their children. The objective was to get the views of the parents about their attitude towards talking with the children. The invariable response was that the researchers were free to talk with the children.

Step Two: Local leaders in each of the research locations were informed that the study planned to have discussions with children if their parents gave their consent. The local leaders agreed to consult the parents but assured the research team that there would be no problem. However, they advised us that the best procedure would be to engage the children during school hours because some children lived far away from the school and needed to get home as soon as school was finished for the day (in urban areas) or had other obligations (in rural areas). They advised the researchers to meet with the head teachers of the relevant schools to make the necessary arrangements.

Step Three: As recommended by the local officials, the objectives of the discussions with children were discussed with head teachers (or sometimes with a group of teachers). The teachers were told of the number of children required for the discussions mindful of the need to have both sexes, and that participation was entirely voluntary. It was emphasised that any child who did not want to participate in the discussion groups should be free not to participate without fearing any disciplinary actions from anybody. The head teachers agreed but stated that they wished to exclude those children who were preparing for national examinations.

Step Four: When the children selected by the head teachers came for the group discussions the researchers began by telling them about the importance of voluntary participation. They were informed that the objective of the discussion was to collect their opinions, perceptions and experiences related to their needs and rights and their understanding of poverty and wealth. At the end of the explanation, children were given the choice to leave if they felt that they could not participate. The children showed great interest to discuss the issues that affected their lives. None of the children declined to participate but in a few cases the children were too young to participate in the discussions and were asked to leave.

Participatory Discussions with the Children

At the start of each group session, the children were encouraged to write their names on a sheet of paper which was then pinned up inside or outside the discussion room as a way of getting them to feel that they could actively participate and not merely listen. The researchers then explained the main objective of the study. In the first part of the discussion, the children were asked to give their understanding of "poverty" both verbally and through sketches. In the latter exercise, children were sub-divided into groups of 3-4 persons and encouraged to draw a rich person and a poor person.

The second part of the discussion focused on children's rights. Participants were asked to mention their rights as a child, and one of the researchers listed all the rights identified on a blackboard or a large piece of paper pinned to a tree (if the session was carried outside) so that all the children in the group could see the list. This was followed by an open discussion on the extent to which the children perceived that their rights as a whole were met in their community. To help the children make this assessment, a circle was used – a full circle meant that all the rights were met in the whole community; a half circle meant that only half of their rights were met/only half the community enjoyed all the rights, etc. A voting procedure was used to ensure different opinions were captured, and the scores were kept on the opinions expressed.

After this exercise, children were told to copy the displayed rights on a piece of paper and state the level to which they felt that each of the rights was met. The children were asked to draw circles to express their level of satisfaction: a large circle to express full satisfaction; a medium one to express fair satisfaction; or a small one to express poor or little satisfaction. No standard sizes were prescribed; each child could devise their own circles as long as they were seen to be small, medium and large. The data from these pieces of paper was recorded and frequencies calculated. The data was then analysed using SPSS Verbal, and the children's sketches of poverty were recorded.

2.3 Feedback sessions

Two types of feedback sessions were held to discuss the research findings:

i. Peer review workshops with researchers and other stakeholders during REPOA's Annual Research Workshops in 2007 and 2008. The first draft of the study was presented at the 2007 Workshop and the completed research at the 2008 Workshop. Comments and recommendations for improvement were valuable in shaping the present report.

ii. Feedback sessions with study participants. Key findings from the final draft were discussed with both adult and child respondents involved in the study. This was carried out in May 2008 in Kisarawe District and June 2008 in Same District mainly through group discussions. Parents, teachers and district staff were involved in the sessions for adults. The aim was to confirm the findings and to elicit suggestions on how to resolve the issues raised. For children, every attempt was made to seek feedback from the children who had participated in the original group discussions but some children were unavailable for various reasons: they had completed their primary education, been transferred to other schools, or had decided to opt out of school. Those that were available and did participate showed even greater willingness to actively participate in the feedback sessions than in the original discussions.

2.4 Study Limitations

In Same District, the study was unable to secure the participation of selected wealthier households, as judged from their property and housing. Therefore, data for Same District may not be fully representative of the wealth status of the population in that district.

With respect to the qualitative discussions with children, the study did not always recruit children from the households that were involved in the quantitative survey. As described above, local leaders informed the research team that it was difficult to host discussions with children after school hours. In urban areas many students commute and are anxious to get home as soon as possible after school. In rural areas, children have other needs and responsibilities after school. Secondly, the researchers did not want to give the impression to the children that they did not believe their parents and expected the children to share a different story. Therefore, the responses of the children were not correlated with the wealth status of their households. Instead, the discussions focused on gathering children's perspectives on poverty and on the extent to which children's rights in general and their own rights were being met.

A further limitation was that the study was not able to obtain the opinions of children who were not currently in school or who had completed or left school. The opinions of this population of children would have been valuable in examining children's rights, especially access to education.

Apart from these limitations, the study achieved its objectives in engaging sufficient samples of adults and children, and collecting the data to show the relationship between household poverty and children's rights.

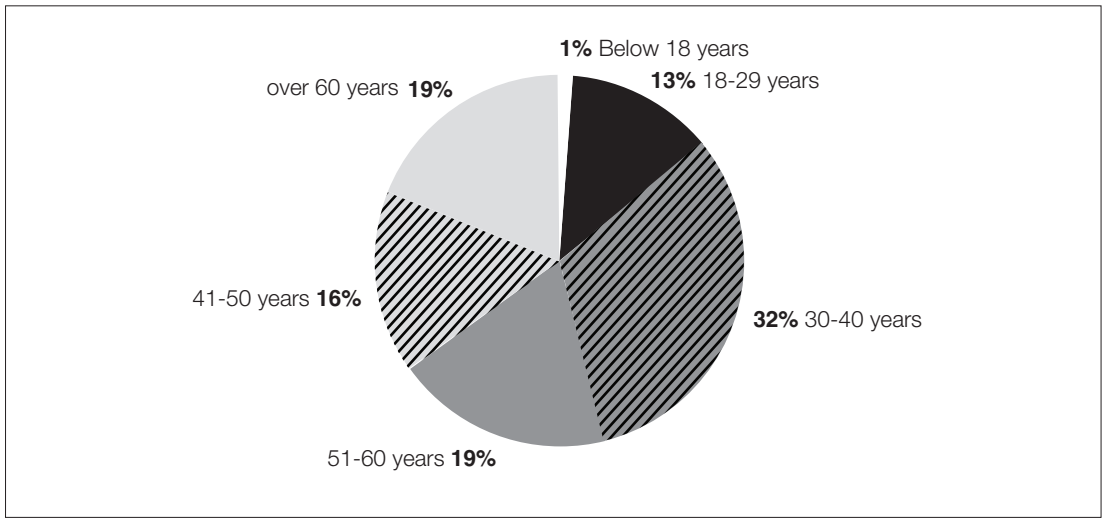
3 Study Findings[3]

3.1 Socio-economic characteristics of the respondents

The total sample consisted of 317 households. The total population in the surveyed households was 2,040 persons of which 43% were adults and 57% were children below the age of 18 years. Most households (67%) had four to seven persons. The number of children per household ranged from one to seven. Most households had between two to four children (see Appendix 8 for details). Overall, there were 1,060 children in the 317 households surveyed. Of these, 265 children were below the age of 5 years and 795 were aged 5-17 years.

Among the survey respondents, two were below the age of 18 years; the rest were adults ranging from 18-75 years. The average age of respondents was 46 years. By individual age groups, the largest number of participants were in the 30-40 years age group (32%), but the majority of respondents overall were aged over 40 years (see Figure 2).

Figure 2: Age of Respondents



The analysis of the respondents by gender and their relationship to the head of the household is summarised in Table 2.

Table 2: Respondents by Gender and Relationship to the Head of Household (n=305)[4]

	Head of Household		Spouse		Son		Daughter		Other		Total Respondents	
	Kis.	Same	Kis.	Same	Kis.	Same	Kis.	Same	Kis.	Same	Kis.	Same
Male	71	41	1	1	1	0	0	0	0	0	73	42
Female	38	40	38	68	0	0	1	4	0	1	77	113
Total	**109**	**81**	**39**	**69**	**1**	**0**	**1**	**4**	**0**	**1**	**150**	**155**

[3] Unless otherwise indicated, study respondents refer to the representatives from households who completed the survey questionnaire.

[4] Twelve respondents did not answer the question.

Out of the 305 respondents for whom valid data was available, 190 (62%) were females. In Same District, an equal number of male and female heads of households were interviewed but in Kisarawe District males outnumbered females by a ratio of almost two to one.

Table 3: Education Status of the Respondents

Education level	By District		By Residence		Total
	Kisarawe	Same	Rural	Urban	
Primary not completed	21.1	17.5	22.6	17.9	20.1
Primary completed	53.1	67.6	67.7	54.3	60.8
Lower secondary	10.9	9.0	2.3	17.1	9.9
Upper secondary	4.7	2.8	2.3	5.0	3.7
Certificate	3.1	---	0.8	2.1	1.5
Diploma	1.6	0.7	0.7	0.7	1.1
Not attended school	5.5	0.7	3.9	2.9	2.9

As shown in Table 3, the number of respondents overall who had not attended school was small (2.9%), but a much higher proportion of respondents in Kisarawe (5.5%) reported no formal schooling compared with Same (0.7%). Overall, the majority had completed primary school (60.8%), but the completion rate was higher among respondents in Same (67.6%) compared with Kisarawe (53.1%). However, a higher proportion of respondents in Kisarawe (20.3%) had completed lower secondary school or above compared with Same (12.5%).[5]

Findings on respondents' employment are presented in Table 4. As expected the majority of respondents overall were engaged in agriculture.

Table 4: Respondents' Main Source of Employment by District (% of respondents)[6]

Main Employment			Secondary Employment		
Source	**Same**	**Kisarawe**	**Source**	**Same**	**Kisarawe**
Farming	74%	46%	Farming	62%	62%
Employment	3%	2%	Business	29%	30%
Business	2%	5%	Craft (carpentry)	9%	8%
Technician	12%	33%			
Housewife	9%	14%			
Total	**100%**	**100%**		**100%**	**100%**

Notes: Same: Main employment n=117; Secondary n= 34; Kisarawe: Main employment, n=109; Secondary: n=89;

The main occupation, however, was not necessarily the main source of income. For instance in Kisarawe more than 70% of respondents reported that agriculture was their main occupation but only 51% reported that it was their main source of income. It was apparent that income derived from agriculture alone was not adequate to meet the needs of many households.[7]

[5] This may in part reflect that the study was not able to interview several respondents from wealthier households who were obviously in the study's 'better off' or even 'best off' categories judging by their housing and property.

[6] Percentages are based on those who responded.

[7] This was also found by the *Household Budget Survey 2007* and the Integrated Labour Force Survey 2006. The latter found that secondary employment rates had increased between 2001 and 2006.

Nearly 30% of respondents in each district did not report their main occupation; for secondary employment the non-response proportions were even higher: 79% for Same and 42% for Kisarawe. The interviewers did not delve further into this at the time of data collection. This omission in the data was only discovered during data analysis but it was not feasible to go back to the field to examine the reasons behind the non-responses. Possible explanations could be that respondents were unemployed or engaged in study.

3.2 Decision making at the household level

Decision making at the household level is a critical aspect in the allocation of resources to meet household needs, including children's needs. The study, therefore, examined who took part in making key decisions within the household that affected children. Table 5 presents the findings.

Table 5: Decision Making at the Household Level

Type of Decision	Father		Mother		Children		Others	
	Kisar.	Same	Kisar.	Same	Kisar.	Same	Kisar.	Same
Purchase of food	40%	44%	35%	34%	20%	21%	6%	2%
Type of food eaten	14%	21%	65%	59%	15%	16%	6%	4%
Number of meals eaten	17%	18%	60%	59%	19%	21%	6%	2%
Purchase children's clothes	34%	27%	28%	41%	31%	30%	7%	2%
Purchase of water	18%	27%	52%	49%	21%	22%	8%	1%
Sending children to primary school	34%	37%	29%	31%	30%	30%	6%	2%
Sending children to secondary schools	33%	40%	30%	27%	30%	31%	7%	3%
Taking children ou of school	23%	30%	22%	27%	34%	28%	21%	15%
Marriage of girls	15%	22%	25%	26%	35%	43%	25%	9%
Marriage of boys	14%	26%	27%	26%	32%	43%	27%	5%
Medical care for children	19%	26%	25%	29%	44%	40%	12%	4%

Analysis of the data shows that:

- Adults had a greater role than children in making all key household decisions;
- By gender, the responsibility for decisions varied depending on the type of decision. Females for instance had a much greater role in the number of meals eaten per day, the type of food eaten and the purchase of water. They also had a bigger role in the marriage of girls and boys. In addition, fathers tended to have a greater role in decisions on children's schooling.
- Children were involved in decision making but to a much lesser extent than their parents taken together.

The data seems to challenge the common assumptions that women and children have little or no voice in household decision making. Findings indicate that both have a lesser role but they do have a role.

3.3 Wealth status of households surveyed

3.3.1 Operational Definition of Poverty

The level of poverty is typically measured by income/consumption based indicators, for example, per capita income or the proportion of people living below the basic needs poverty line, which are calculated in monetary terms. However, to provide a more comprehensive and accurate assessment of poverty, current definitions also incorporate non-income indicators of household well-being, such as good health, clean water and access to education.[8]

This multi-faceted nature of poverty was underscored by children's perceptions of what poverty meant to them. As described in the methodology, children were asked to express their understanding of poverty both verbally and in pictures. Children's responses are summarised in Box 2. The participants' drawings of poor and well-off families supported their verbal descriptions.

Box 2: Children's Perceptions of Poverty

Children's Descriptions of Poverty	Type of Poverty
• To have problems (for example, illness)	Non-income
• To lack assets *(kutokuwa na mali)*	Income-related
• Situation where one lives without assets	Income-related
• Time of difficulties	Non-income
• Not to have happiness *(kutokuwa na furaha)*	Non-Income
• Be destitute *(kuwa mnyonge)*	Income
• Be without food, morning, noon and night	Income
• Not to go to look for work	Income
• To be without income the whole day	Income
• Be poorly dressed	Income-related
• Live in a poor house (thatch roof, no electricity)	Income-related

The main indicator for assessing the poverty levels of the household was the level of household income and expenditure as well the pattern of expenditure, using as a proxy the expenditure item on which the household spent more than half its monthly income.

[8] This is clearly explained in the *National Strategy for Growth and Reduction of Poverty (NSGRP) 2005-2010* (Vice President's Office, 2005).

3.3.2 Household Income and Expenditure

In 2006, the annual per capita income for Tanzania was estimated at $US 250 or approximately Tanzanian shillings (Tshs) 300,000. For the average household of two adults and four children, per capita income is estimated at Tshs 1,200,000 per year or Tshs 100,000 per month.[9] The questionnaire was pre-coded into four income levels. The same levels were used to categorise households by expenditure.

Table 6: Household Income/Expenditure Categories Used by the Study

Wealth status	Income level
Poor	< Tshs 50,000 per month
Medium	Tshs 50,000-100,000 per month
Better Off	Tshs 101,000-250,000 per month
Best Off	> Tshs 250,000 per month

Using these criteria, Table 7 describes the distribution of households by income and expenditure overall and by district.

Table 7: Distribution of Households by Income and Expenditure Levels (% of households)

Income Category	Overall		Same District		Kisarawe District	
	Income	Expend.	Income	Expend.	Income	Expend.
Poor	53.5%	59.0%	50%	52.9%	57.1%	65.1%
Medium	30.9%	24.8%	40.3%	32.3%	21.1%	17.1%
Better off	8.3%	9.1%	8.4%	9.7%	8.2%	8.6%
Best off	7.3%	7.2%	1.3%	5.2%	13.6%	9.2%

Note: Same District: n = 160; Kisarawe District: n = 153

The data show that more than half of the households in the study sample had incomes of less than Tshs 50,000. By district, Same District was generally better off than Kisarawe District, except Kisarawe had a higher proportion of households in the wealthiest category.[10] Overall, a high correlation was found between income and expenditure. The Pearson Correlation Coefficient[11] was 0.771 which was significant at 0.01 levels.

3.3.3 Relationship between Income Poverty Levels and Perception of Adequacy of Income

Households were asked whether they felt their resources were adequate to meet household needs. Three categories of responses were pre-coded in the questionnaires:

i. Adequate all the time
ii. Adequate most of the time
iii. Not adequate sometimes

[9] For this estimate, a child is considered to be equivalent to half of one adult, therefore, the average household would comprise four adults.

[10] In Same, however, it was difficult to interview wealthier households for a variety of reasons, including the owners were away or not willing to be interviewed.

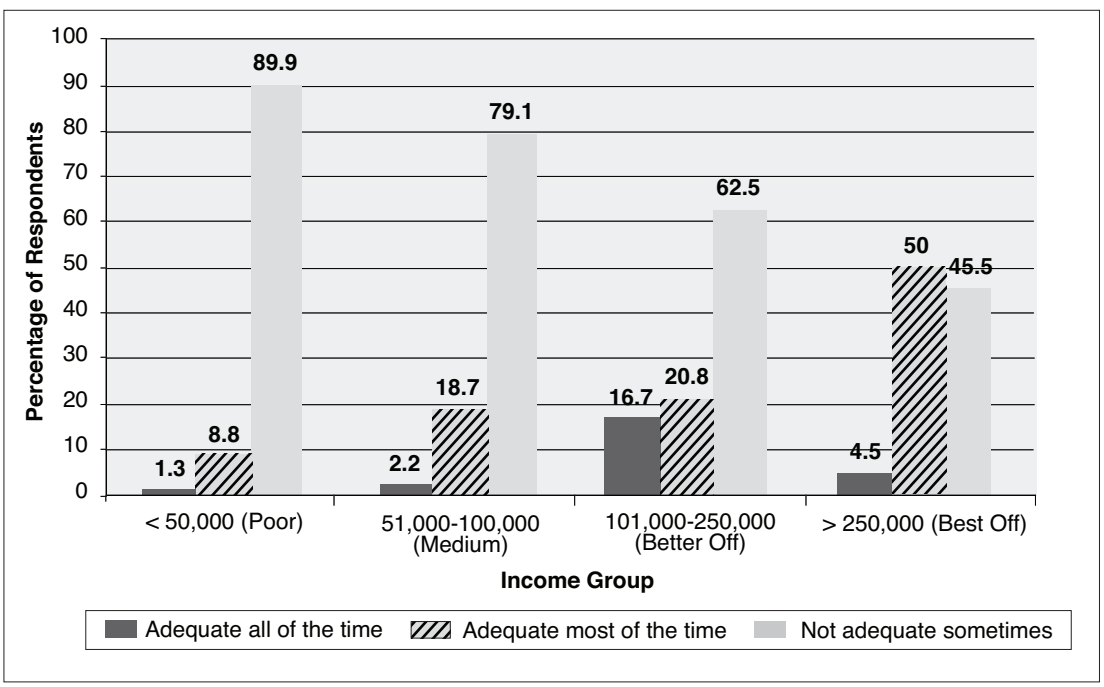
[11] The Pearson Correlation is a statistical measure used to indicate the strength of the linear relationship between two variables, in this case household income and household expenditure. The closer the value of the coefficient is to either –1 or 1, the stronger the correlation between the variables. In this case, the coefficient is close to 1 which indicates an increasing linear relationship between income and expenditure, i.e., as household income rises so too does household expenditure.

Findings by district are presented in Table 8 and overall results are illustrated in Figure 3. Both present responses by income category.

Table 8: Perception of Adequacy of Resources by Income Category by District

Income Group	Adequate all the time		Adequate most of the time		Not adequate sometimes	
	Same	Kisarawe	Same	Kisarawe	Same	Kisarawe
< Tshs 50,000	2%	1%	4%	13%	94%	85%
Tshs 50,000-100,000	3%	0	10%	37%	87%	63%
Tshs 101,000-250,000	31%	0	8%	36%	61%	64%
> Tshs 250,000	50%	0	0	55%	50%	45%

Figure 3: Perception of Adequacy of Resources by Income Group

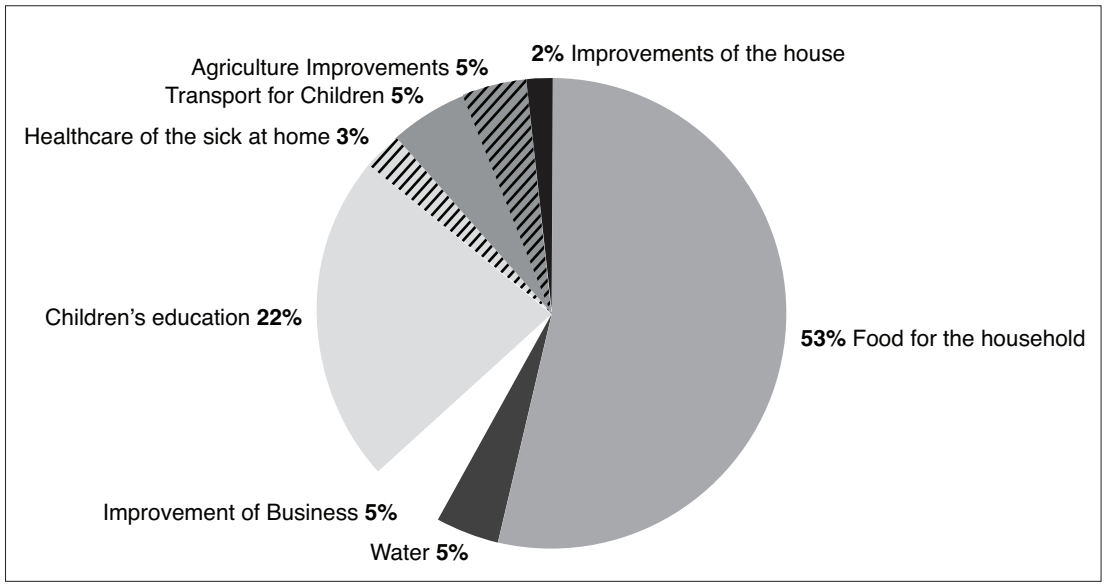


As expected, respondents' perceptions of the adequacy of household resources corresponded with levels of household income; the higher the income, the higher the proportion of respondents who felt that their resources were adequate for their needs. Results show that some households in all income groups experienced a lack of resources, but the proportions were highest among the lowest income groups in both districts (94% in Same and 85% in Kisarawe). This suggests that the poor were the most vulnerable group. Surprisingly, only half of the best-off households felt that they had adequate resources to meet their needs most of the time. Obviously perceptions of needs differ by income category. The best off had higher levels of needs that went beyond immediate needs for survival. Nevertheless, it is significant that even among the better-off and best-of households, resources were not considered to be fully adequate.

3.3.4 Budgeting of Household Resources

When resources are scarce, households must prioritise their needs and the allocation of resources. Typically, the poorer a household the greater the proportion of their income will be spent on food. Therefore, instead of absolute figures of expenditure, households were asked on what they had spent over half of their income during the previous month.[12] Overall results are illustrated in Figure 4.

Figure 4: Categories of Expenditure on Which Households had Spent More than Half of Their Income in the Previous Month



Slightly more than half (53%) of the households reported spending more than half of their income on food. Among other priorities, about a fifth of the households spent more than half their monthly incomes on children's education. Similar expenditure patterns were recorded for food in both districts (Same 52%; Kisarawe 55%) but a higher proportion of households in Kisarawe than in Same spent half of their income on education, 26% and 17% respectively (see Appendices 3 and 4 for all expenditure categories for both districts).[13]

The assumption of the study was that allocation of household resources was associated with household poverty levels. In order to assess this relationship household expenditure patterns by income group were compared. The overall results are shown in Table 9 (see Appendices 5 and 6 for analysis by district).

[12] The rationale for taking this measure was the fact that many studies have found that the poor spend more than half their income on food

[13] Education data did not separate the households with children in primary schools only from those with children in secondary schools.

Table 9: Expenditure Categories on Which Households Spent More Than Half of Their Income, by Income Group

Expenditure Category	Income Group							
	Poor (n=142)		Medium (n=73)		Better off (n=20)		Best off (n=17)	
	No.	%	No.	%	No.	%	No.	%
Food	86	61%	37	50%	11	55%	7	41%
Education	27	19%	19	26%	4	20%	7	41%
Water	8	6%	3	4%	0	0	1	6%
Health	6	4%	2	3%	0	0	0	0
Agric. improvement	8	6%	2	3%	0	0	0	0
Business improvement	3	2%	6	8%	3	15%	2	12%
House improvement	2	1%	2	3%	2	10%	0	0
Other household needs	2	1%	2	3%	0	0	0	0
Total	142	100%	73	100	20	100%	17	100%

Analysis of the data reveals some very striking features:

- Slightly more than sixty percent of households in the lowest income group spent more than half their monthly income on food compared with slightly more than 40% of the best-off households.

- Overall, 15% of better-off households and 12% of the best-off households spent more than half of their monthly income on business improvements, compared with less than 2% of the poor households. This strongly indicates that the poor have significantly less opportunities to improve their livelihoods and get out of poverty thus entrenching their vulnerability and hopelessness, two characteristics of the poor according to a well-known analyst of poverty (Chambers, 1985, pp.109-110). The lack of opportunities for poor families was further confirmed by results from the analysis of household assets.

3.3.5 Household Assets

Ownership of selected household assets was examined to more comprehensively assess household well-being:

- materials used in house construction (roof, walls, floor);

- means of transportation;

- means of communications (telephone, radio, television); and

- type of cooking stoves (as proxy for energy source used).

There are a few rich people…

A composite index was created with scores ranging from 1 to 28. Using the division of the income groups, households were categorised into four groups based on the relationship to the mean. The groups were named on an ascending score scale as poor, medium, better off and well off. The scores were then compared with the income groups. The relationship between households grouped by income and households grouped by assets was tested using Pearson's Correlation which was found to be high at 0.610 significant at the 0.01 level. Cross-tabulations also indicated that category of asset ownership improved on an ascending scale from poor to medium to better off to best off as household income increased. The relationship was very clear for the lowest income group and the highest income group. The proportion of households in the lowest income group decreased steadily as one went up the asset scale. The opposite was observed for the best-off households; the proportion of households increased as one went up the asset scale. For the other two wealth categories, there was a sudden rise for the medium asset group and then tapering off for the better-off and best-off asset categories. Nevertheless, the general pattern still reflected the Pearson's correlation – the higher income level the higher the category of assets. (see Appendix 10).

…but the reality is that there are very many poor people

In conclusion, the findings in the above section show that income and asset ownership have a potentially significant impact on the majority of the children in Kisarawe and Same Districts. Respondents' perceptions of whether resources were adequate to meet household needs and the way monthly income was allocated both varied markedly based on household wealth status. The next section looks at the extent to which children's rights were met in the households surveyed.

3.4 Children's rights and poverty levels

Data were collected on the realisation of children's rights generally and for several specific child rights. Of these, three rights – access to education, adequate food and clean water are discussed in detail.

3.4.1 Findings on the Rights of Children Generally

An overwhelming proportion (98%) of respondents held the opinion that children had rights and that these rights were the same for girls and boys. Respondents' knowledge of children's rights was also examined. Findings are reported in Table 10. The study used the following system to rank the knowledge of children's rights in the two districts surveyed:

- > 80% = very high
- 61-80% = high
- 40-60% = average
- 20-40% = low
- < 20% = very low

The percentages were based on the number of respondents who mentioned the specific rights.

Table 10: Respondents' Knowledge of Children's Rights

Rights	Overall	Same District	Kisarawe District	Ranking Overall
Adequate food	84%	82%	87%	Very high
Clothes	67%	68%	70%	High
Quality education	61%	59%	67%	High
Shelter	40%	38%	44%	Average
Good health	18%	13%	25%	Low to very low
Safe water	0.6%	0.6%	0.6%	Very low
Others	0.6%	0.6%	0.6%	Very low

Respondents were also asked what rights children had under traditional customs and beliefs. The responses revealed interesting differences with the rights contained in the CRC or the African Charter (see Table 11).

Table 11: Children's Rights Under Traditional Customs

Rights	No.	%
To be taken care of	97	34.5%
To be taught traditional virtues	80	28.5%
Male circumcision	46	16.4%
Male children to be given land	22	7.8%
No tradition	18	6.4%
All children are equal	18	6.4%

In general, the data indicated that respondents had awareness of the basic physical needs of the child, but there was no mention of other rights of the child, such as the right to be heard, or to be consulted on decisions related to the child's future. Indeed, the data on decision making within the households surveyed showed that few children participated in decisions that affected them. Socio-cultural traditions were still affecting children's right to participation.

The analysis also found that policies such as mandatory primary school enrolment had a positive effect in raising parents' awareness of children's rights. In both districts, after 'food for the household', 'children's education' was the most common household expenditure category and this cut across all income groups. Unfortunately, no data is available on the reasons why households gave priority to education over other critical needs such as healthcare and water. This is particularly surprising since most of the absences of children from school were attributed to ill-health and water is a major problem in both districts. One could argue that water from rivers and streams is free (and hence does not require expenditure of household income). However, significant opportunity costs were borne by the children. As related in the section below, participants in the feedback sessions related that children were needed by households to collect water from distant sources, especially during the dry season. As a result they were late for school or did not attend.

Other children's rights, such as to be loved and to be taken care of did not seem to be part of the thinking of the adults, which indicates that caregivers may not be sufficiently aware of or may not be adequately attending to the psychological needs of children which are critically important for human development. Poverty is too often only associated with meeting basic physical needs. However, poverty has many other dimensions, such as isolation/loneliness and social exclusion (Chambers, 1985). The pre-occupation with accumulating income and assets in order to ensure that one is "developing" can easily blind parents to the other real needs of children.

Data from the participatory discussion groups with children also found that children were aware of their rights, particularly in Kisarawe where Plan International had worked with schools in disseminating the concept of children's rights (see Appendix 9).

3.4.2 Perception of the Level to Which Children's Rights are Met Generally

As a follow-up question, respondents' were asked to what extent they felt that children's rights were met in their households. The responses were pre-coded as:

- High/fully met
- Met to a moderate level
- Not met at all

Findings by gender are presented in Table 12.

Table 12: Respondents' Perceptions about the Extent to Which Children's Rights were Met, by Gender

Level Met	Girls	Boys
Fully met	26.9%	29.7%
Met to a moderate level	66.8%	67.3%
Not met at all	4.2%	3.0%
	100%	100%

The findings shows that only about 30% of respondents felt that they fully met the rights of the children in their households, while approximately 5% felt that were not able to meet children's rights at all, which is a matter of grave concern if this proportion is applied to the population of children nationally. Moreover, little difference was found in how households met the rights of girls and those of boys.

To explore this issue further, the children who participated in the group discussions were asked to what extent they felt their rights were met. The study asked the children to give their views on ten rights encompassed in the CRC and the Tanzania Child Development Policy 1996 by drawing circles of different sizes against each right: large for fully met, middle-sized for moderately met, and small for met to a very little extent. Of note, relatively high proportions of children did not grade some rights. This was probably due to the fact that children's level of understanding of their rights generally and of individual rights varied. In turn, this may indicate that many children had not been informed of their rights. Awareness of rights was found to be much lower in Same than in Kisarawe District. Therefore, for some participating children, the current study introduced specific rights for the first time. Not surprisingly, the children may not have been able to immediately assimilate knowledge of these 'new' rights and then provide their response as to the level to which they felt these rights were being met (especially during an exercise which had a time limit). The results are thus indicative rather than statistically significant.

Table 13: Children's Perspectives of the Extent to Which Their Rights Were Met

Rights	Fully Met	Moderately Met	Very Little Met	Not graded / answered
Right to education	74%	16%	9%	1%
Right to food	37%	30%	14%	19%
Right to be respected	31%	18%	16%	35%
Right to play	29%	31%	26%	14%
Right to be loved	27%	18%	5%	50%
Right to shelter	22%	17%	5%	57%
Right to rest	22%	27%	10%	42%
Right to be heard	14%	18%	12%	57%
Right to clean water	14%	21%	35%	31%
Right to be protected	12%	8%	9%	71%

Note: n=137

Nevertheless, the children's testimony reveals a stark picture. The proportion of children who felt that their rights had been met to a very little extent ranged from 5% to 35%. One wonders what the proportions would have been if all the children had provided responses for all ten rights listed. The only right that was perceived to be met fully by a majority of the children was education (74%), but even here 9% felt that it was poorly met. The right to be protected was graded by less than 30% which indicates either that children did not understand the right or really felt that they were not protected. The results showed clearly that more research is needed to better understand children's perspectives about their rights. Education on children's rights should be part of the curriculum in all schools and not left to an NGO to take on this responsibility as was done by Plan International in Kisarawe.

Children's right to play is too often forgotten

3.4.3 Children's Right to Education

Overall Situation

A total of 757 children from 289 households (out of the total sample of 317 households) were reported as currently enrolled in educational institutions at various levels (see Table 14). About 8% of households reported that their school-age children were not going to school.

Table 14: Children Currently Enrolled in Educational Facilities

Level of education	Girls		Boys		Total	
	No.	%	No.	%	No.	%
Pre-primary	39	57%	30	43%	69	100%
Primary	281	49%	293	51%	574	100%
Secondary	44	43%	58	57%	102	100%
Other	5	42%	7	58%	12	100%
Total	**369**		**388**		**757**	

However, it was also reported that about 54% of children did not attend school regularly. Illness was the main reason given for absenteeism (92% of respondents), of which the primary cause was malaria (89%). However, about 8% of respondents cited other reasons, of which the most important was that the children were working full time in the family business, on the family farm or in the household. This would apply to the children who were reported to be not going to school.

Respondents were also asked about the performance of their children in the previous year's examination results. The pre-coding in the questionnaire was as follows:

- > 70% = very well
- 50-70% = average
- 35-49% = not very well
- < 35% = very badly

Table 15: Performance Levels of Children in School

Level of performance	Overall	Kisarawe	Same
Very well	31.4%	32.4%	29.3%
Average	44.9%	45.0%	44.8%
Not very well	16.5%	13.7%	20.4%
Very badly	7.2%	8.9%	5.5%

There were few differences in the findings on children's performance in school between the two districts with one exception: the proportion of children doing very badly in Kisarawe was nearly double the proportion in Same.

Expenditure data indicates that households were making substantial contributions towards the education of their children. About 65% of households were spending up to Tshs 20,000 per year on school fees. If household income is Tshs 50,000 per month, this expenditure on education would represent a little over 3% of annual income, but if household income was

only Tshs 5,000 per month this means 30% of income! One-fifth of households (20%) were spending more than Tshs 150,000 per year. Significantly, about three-quarters of respondents reported having difficulties in meeting the costs of education. Furthermore, some respondents volunteered information on the time of the year when they had difficulties. Nearly half reported that the difficult period was the cultivation period; one-fifth found June the most difficult month, and almost a quarter found difficulties during all months. Yet only 12% of respondents said that children were withdrawn from school if the household cannot meet the cost.

Relationship between Poverty and Children's Access to Education

Over 90% of school-age children in the households surveyed were going to school across all income groups. Poverty, therefore, did not appear to significantly impact enrolment rates. However, due to (i) the high rate (54%) of non-attendance throughout the year; (ii) the concern of parents about their ability to meet school costs; and (iii) the wide disparities in school performance, several indicators were analysed using correlations and cross-tabulations to assess the relationship between poverty and access to quality education.

Correlation coefficients were calculated to show the association between:

- Household income and school expenditure. Coefficients were calculated for the amount spent per child on three categories of school expenses: (i) school fees, (ii) children's clothes, and (iii) other costs;

- Expenditure on education and children's performance in school for three indicators: overall performance and the top two performance levels in Table 15 (very well (> 70%) and average (50-70%)).

The results are shown in Table 16.

Table 16: Correlations between Monetary Indicators and Children's Access to Quality Education

Variables correlated	Pearson's correlation coefficient	Significance
Household income and School expenditure		
(i) School fees per child	.407**	000
(ii) Children's clothes	.297**	000
(iii) Other costs	.127	.070
Expenditure and Performance in school		
(i) Overall performance	.123*	0.41
(ii) Above 70%	.061	0.517
(iii) 50-70%	.169*	0.32

* Correlation is significant at the 0.05 level

** Correlation is significant at the 0.01 (2 tailed) level

The analysis found a positive relationship between household income and the amount spent on children's education and between household expenditure and children's performance at school for all indicators, and correlations were significant for four out of the six indicators. Therefore, it can be concluded that household poverty affects the right of children to quality education. That the correlation was not significant for those children who passed above 70% was also interesting. Even in poor households, the study found children with passes above 70%. This indicates that while the relationship between poverty and access to quality education was positive overall and significant for several indicators, there are obviously some other factors that can mitigate the impact of poverty on children's education, such as children's natural aptitude and capability to learn, acquire and assimilate new knowledge. The study did not explore this aspect further as the main focus was on the relationship between poverty and education. However, it is an interesting aspect to explore in future in-depth research.

The cross-tabulations were made between monthly household income:

(i) school attendance all year around; and

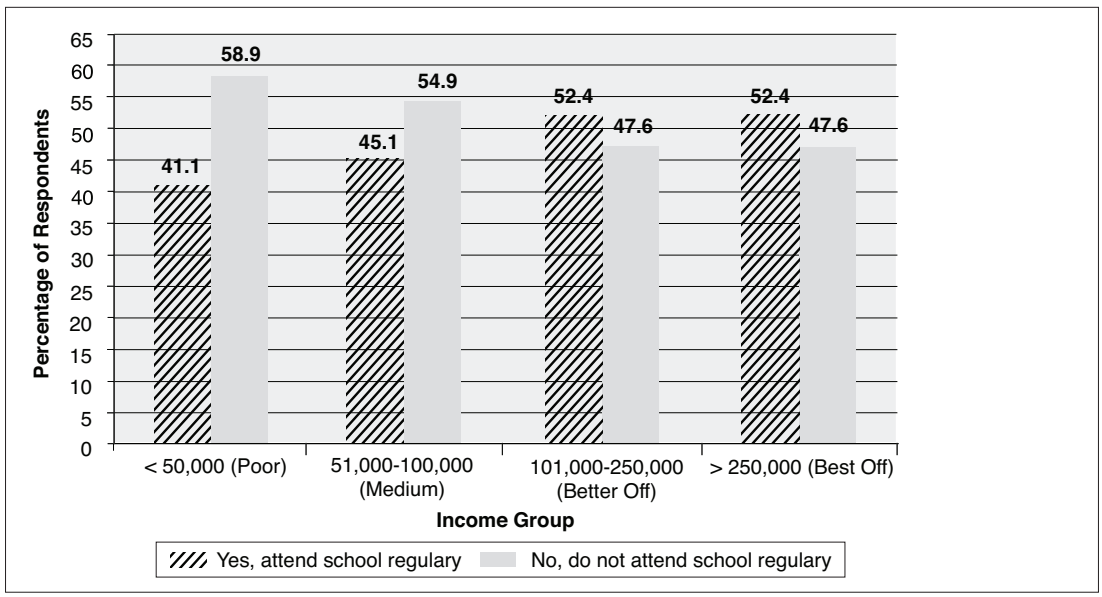
(ii) difficulties in meeting educational costs.

With respect to attendance, the study's attention was drawn to the fact that respondents reported high enrolment levels (only 8% of school-age children were not going to school), but 54% of households reported that their children were not able to attend school all year round. High levels of absenteeism were found for all income levels but the highest level was among poor households (see Table 17 and Figure 5).

Table 17: School Attendance by Income Group

Monthly income	**Attend school regularly**		**Total**
	Yes	**No**	
< Tshs 50,000 (Poor)	60 41.1%	86 58.9%	146 100%
Tshs 51,000-100,000 (Medium)	41 45.1%	50 54.9%	91 100%
Tshs 101,000-250,000 (Better off)	11 52.4%	10 47.6%	21 100%
> Tshs 250,000 (Best off)	11 52.4%	10 47.6%	21 100%
Total	**123 44.1%**	**156 55.9%**	**279 100%**

Figure 5: Children's School Attendance by Income Group



Although most households attributed their children's absenteeism to illness, the inability to pay school costs was the predominant reason for those households who did not send their children at all.[14] This appears to be inconsistent with the response to the question about enrolment where 8% of the respondents stated that their children did not go to school because they were needed to work in the family business, farm or the household. However, the inconsistency becomes less when it is realised that working children are usually associated with households that experience financial constraints. Therefore, the data on the ability of households to pay for the educational costs was also compared with household income levels. The results of the comparison are shown in Table 18.

Table 18: Households' Ability to Meet Educational Costs by Household Income Level

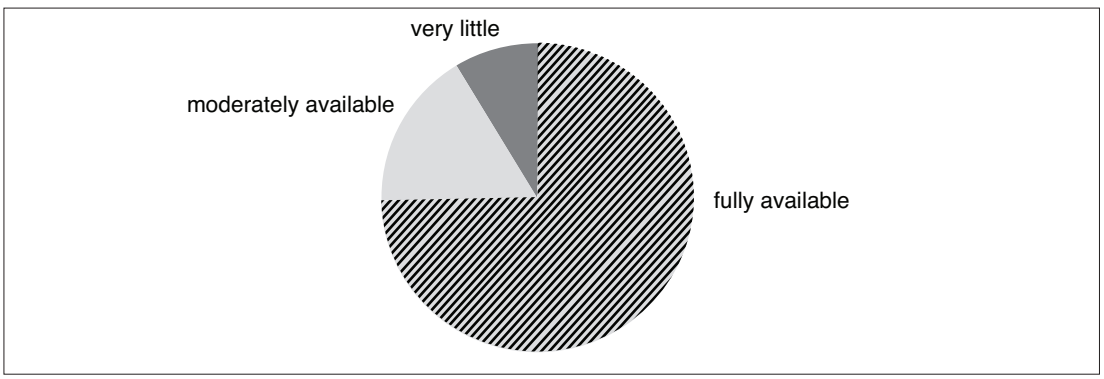
Monthly income	**Do you have difficulties in meeting educational costs?**		**Total**
	No	**Yes**	
< Tshs 50,000 (Poor)	32 21.2%	119 78.8%	151 100%
Tshs 51,000-100,000 (Medium)	27 30.0%	63 70.0%	90 100%
Tshs 101,000-250,000 (Better off)	7 35.0%	13 65.0%	20 100%
> Tshs 250,000 (Best off)	5 22.7%	17 77.3%	22 100%
Total	**71** **25.1%**	**212** **74.9%**	**283** **100%**

[14] This was verified by adults and children in the feedback sessions conducted in May and June 2008

A majority of households in all income groups reported having difficulties in meeting educational expenses for their children, but the highest proportion was recorded among poor households. Some of the best-off households had children in post-secondary institutions and this probably explains why these households frequently reported difficulties in meeting educational costs. Although the government has abolished school fees for primary schools, fees are still charged for secondary schools. Households also have to meet the cost of school uniforms and other costs, such as contributions of one type or another.

In the participatory discussions, children were also asked whether they felt that their right to education had been met. Out of the 147 children who shared their opinion, 73.5% felt their right to education was met fully, 16.3% thought that it was met moderately, and 8.8% thought it was met to a very small extent. (see Figure 6 and Appendix 11). It is important to note here that all children who were engaged in the group discussions were attending school. Therefore, enrolment in school does not ensure access to quality education.

Figure 6: Children's Perceptions on Whether Their Right to Education was Met



3.4.4 Children's Rights to Adequate Food and Water

Overall Situation

The impact of poverty on children's rights to adequate food and clean water was als examined in detail. Food was selected because it was the most frequently cited right by both adults and children, and water was chosen because access to water access was a problem in both districts.

Adequate nutrition is essential for children's physical and cognitive health and development. Children who are not hungry are able to concentrate better in class which, in turn, enhances their performance. It has been shown that children who get snacks or meals in school do much better at their studies than before they got that assistance.

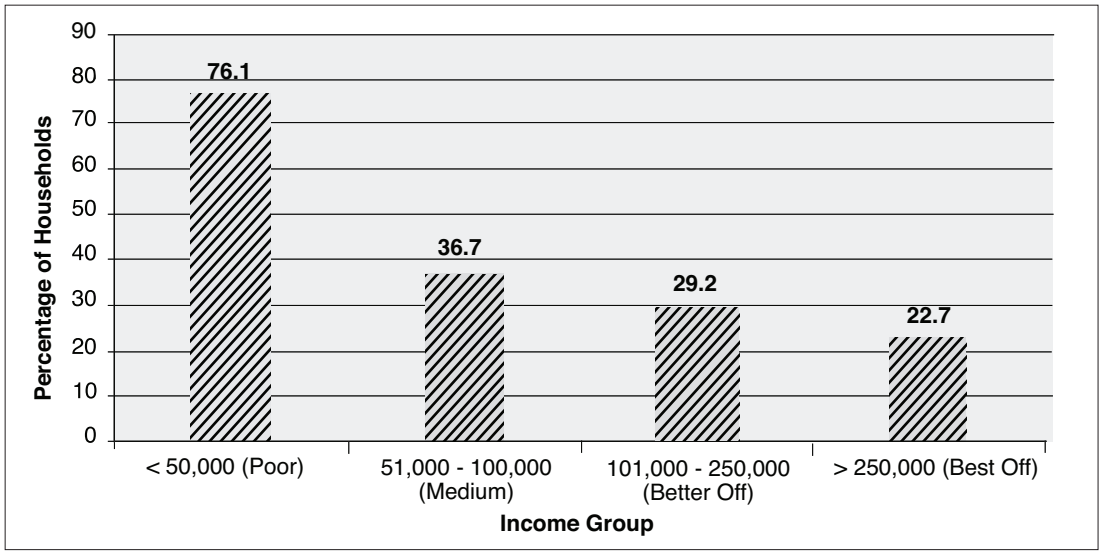
The lack of a reliable piped water supply system can also impact children's development and education. In rural Same District, respondents reported that boys often missed school because they had to fetch water using bicycles. The distances were too long for the women and girls to fetch the water. By the time, they had fetched the water, the boys were too tired or afraid to go to school because they were late. In Kisanga village, one of the villages in rural Kisarawe, respondents similarly reported that fetching water during the dry season took

a long time. There were long queues at the few water sources that were available and often everyone in the household had participate in collection to ensure that the household had sufficient water for its needs. As a result, children often missed out on school.

Food shortages and income poverty

Respondents were asked if their households had experienced food shortages. Out of the 303 households who answered this question, 133 respondents or about 44% of the households reported experiencing food shortages. The frequency of food shortages described by respondents ranged from 'rarely' to 'in some months' to 'often'. The correlation coefficient between the frequency of food shortages reported and household income was calculated. The result was a positive Pearson's correlation of 0.204 with a significance rate of 0.016 which was significant at 0.05 levels. Figure 7 confirms the relationship very dramatically.

Figure 7: Proportion of Households That Experience Food Shortages, by Income Group



Another indicator of food adequacy that is often used is the number of meals consumed within the household. The conventional view is that having less than three meals a day is inadequate. This study looked at this aspect for various age groups of children: 1 to 5 years, 6 to 10 years, and 11 to 18 years. Significant differences were found between the income groups. The analysis for the age group 11 to 18 years is shown in Table 19.

Table 19: Number of Meals Eaten Per Day by Children Aged 11-18 Years, by Income Group (% of respondents)

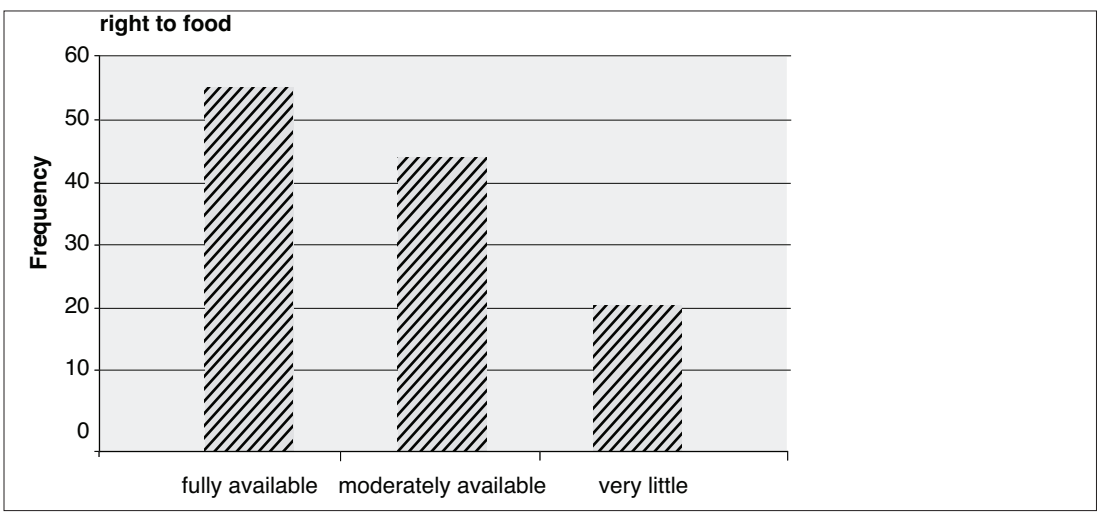
Income Group	3 meals everyday	3 meals mostly	2 meals/day	One meal only
Poor	53%	28%	14%	5%
Medium	63%	22%	15%	0
Better off	53%	27%	20%	0
Best off	67%	33%	0	0
Overall	**57%**	**26%**	**23%**	**5%**

Note: n=182

The data show that children in households in the three lower income groups are more food insecure: 19% of children in poor households, 15% in medium and 20% in better-off households ate less than 3 meals per day. The data on food shortages presented in Figure 7 above showed that even some of the best-off households experienced food shortages. The analysis of the data on meals indicates the same trend –some children in the best-off households had less than three meals per day on occasion, but the findings indicate that children in this income group typically had an adequate number of meals. None of them had only one or two meals a day all the time, suggesting that the shortage was most likely to reflect not having the kind of food that the household would have liked to eat rather than outright lack of food.

Of the 147 children who participated in group discussions, 119 children gave their opinion on the availability of food within their households. Less than half of the respondents (46%) reported that food was fully available, 37% said that it was moderately available while about 17% reported that they had very little food, which is considerably higher than the 5% of households that reported children had only one meal a day.[15] About 19% of the children did not volunteer their opinion (see Figure 8).

Figure 8: Children's Perspectives on Their Access to Food (number of respondents)



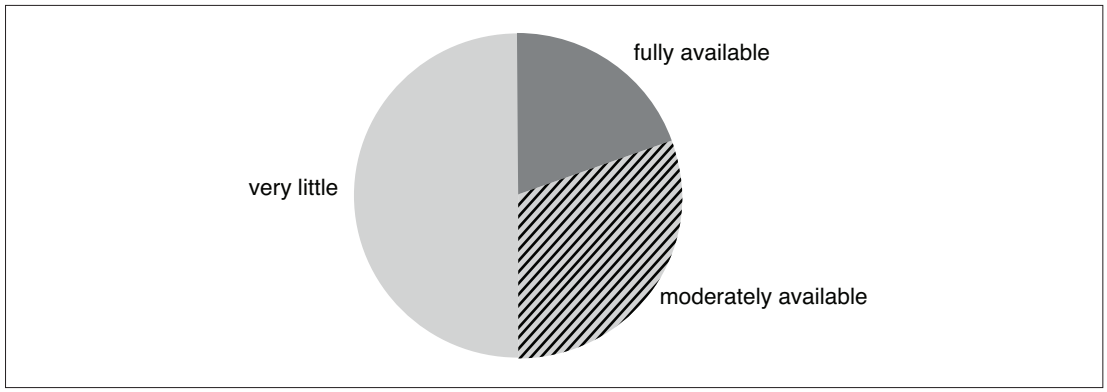
Access to Water and Income Poverty

The third right that was assessed against poverty levels was children's right to adequate water. There were significant differences in water access across income groups as reflected in the positive Pearson's correlation ratio of 0.320 between household income per month and daily household water use. Children's perspectives on their access to water is shown in Figure 9 below. However, the data on water consumption must be viewed cautiously as the study assumes that reported water usage was only for drinking and household tasks. Some of it may have been used for livestock especially in Same which had substantial numbers of livestock. Households also spent a considerable amount of money on water in general and for drinking to ensure access to safe water, with the data showing that 30% of households purchased bottled water.

[15] The percentages reported here are different from those in Table 13 as they are based on the number of respondents to the question. In Table 13, the proportions are based on the total number of children involved in the study, which was done to show how many children did not give their opinion on particular rights.

In spite of these efforts, a large number of children in the group discussions reported a lack of access to adequate water. Out of 102 respondents, only 14% said that water was fully available, while another 20% held the view that it was moderately available. The rest felt that their right to adequate water was not met at all. Access to adequate water was even less than access to food.

Figure 9: Children's Perspective of Their Access to Water



3.5 Data from feedback sessions with study participants

Feedback sessions were conducted at study locations approximately 18 months after data collection. The purpose of this exercise was to:

i. Share the findings with study participants;

ii. Confirm that the findings were correct and elicit the views of community stakeholders on how to address some of the issues that arose from the findings.

The discussions were centered on the following issues:

i. Knowledge of children's rights among the adults and the children;

ii. Poverty levels and how these affect the rights of children;

iii. The high incidence of school absenteeism;

iv. High incidences of food shortages and the impact on children's access to education;

v. Possible recommendations.

The information from the feedback sessions clarified some findings and enriched the study's recommendations. It was a valuable exercise especially with respect to the children. At the time of data collection, the children had been reluctant to give their views on many of the research questions. For the feedback session, however, they were very responsive and gave useful insights on the findings as well as recommendations on how to address problems.

Clarification of the Findings

The discussions confirmed the study findings with three significant additions : (i) the extent of periodic absenteeism from school; (ii) reasons for absenteeism; (iii) impact of water availability on access to education.

The data from the quantitative study had indicated that absenteeism was about 54% overall over a school year or an average of about 6% assuming a school year of about 9 months. In both Kisarawe District and Same District, the feedback sessions revealed that the problem was quite serious during certain seasons. In Kisarawe District, some of the teachers in the rural areas put the absenteeism rate at 30% during some seasons. One of the children's groups stated that the classroom can be half empty in some months.

The reasons for absenteeism also differed. The data from the questionnaires showed that the major reason for absenteeism was illness. This was denied by both the adults and the children. They provided the following reasons:

- Children were sent home because they had gone to school without the appropriate school uniform, exercise books or gardening tools. These reasons were poverty-related but also showed a lack of understanding about school needs or the value of education among children's caregivers. As one child put it, his grandmother had not gone to school herself and therefore could not understand why the exercise books purchased at the start of school were not enough for the whole year.

- Children had to work in order to help the family meets its needs and therefore had to forgo school.

- Children were hungry at school and could not concentrate and therefore left school in search of food from kind strangers. Many children came to school without eating breakfast. This was especially hard on children who lived far from their school and could not return home during the lunch break. Even where school lunches were available, a fee was charged and those who could not pay still went hungry.

- Parents were too busy working and did not have time to check on the school attendance of their children which then affected their performance in national examinations. The teachers were especially bitter about this since they were usually blamed for poor examination results of the children.

The discussions validated our findings about the pivotal role of poverty in children's ability to access education, but the feedback sessions highlighted other factors which exacerbated the situation. One such issue was the lack of water in both districts. During the dry season children were called upon to collect water from distant sources because the parents could not afford to purchase water, resulting in children being late to school and incurring punishment for lateness. Therefore, children opted to stay out of school. The study data showed a positive correlation between the amount of water used and income levels, and the data from the feedback sessions verified the impact of poverty on children's access to water.

Finally, two additional recommendations emerged from the feedback sessions. The first pertains to the need to educate children's caregivers, especially in Kisarawe, about children's educational needs so that they are not constantly sent home because of lack of school requirements. Although parents are keen to get their children enrolled, there is no continuing interest to ensure that children stay in school. All four groups – children, parents, teachers and district officials – suggested that better ways should be found than the current parent-teacher meetings which do not work because the parents do not find them useful and therefore their participation in these meetings is very low. The researchers made some suggestions, such as having some activities like music or plays that would attract parents to attend the meetings, and the parents and the district officials agreed to work together to put them in force.

On the question of school lunches, parents suggested that the Government offer an annual subsidy in the form of an increase to the annual capitation grant. The researchers pointed out that the request for the government to subsidise school lunches through an increase in the capitation grant could be best handled through the district education office.

4 Discussion and Conclusions

This research set out to look at the impact of poverty on the rights of children. The study was based on the assumption that poverty determines the way that resources are allocated at household level which, in turn, affects allocations to meet children's basic needs. The rights of children examined by the study were rights set down in the 1990 Convention on the Rights of the Child and the Tanzania Child Development Policy 1996. The study analysed the extent to which children's rights in general as well as the influence of poverty on three rights in particular – the right to education, the right to adequate food and the right to clean water. The study found that most of the adults and children who participated in the research were aware of children's rights that were associated with basic needs such as food, shelter, health, education, but were less aware of other needs enshrined in the CRC such as children's rights to be heard or to participate in decision making on matters related to their development and welfare.

Poverty levels were assessed in terms of household income, expenditure and ownership of assets. The study found household wealth status varied markedly within the study locations: at one extreme there were a few households with relatively substantial income/expenditure and assets while, at the other end, over half the households sampled had significantly less income and fewer assets. There was a strong relationship between household wealth status and respondents' perceptions of not being able to meet all the needs of the household. This perception was common to all income groups but it was particularly strong among respondents from poorer households, especially those in the lowest income group. The feeling of vulnerability arising from inadequate income was reinforced by low levels of household assets. Household income levels also affected the way the resources were allocated by households. Most of the income in poor households was used to purchase food in order to survive, and even then there were times when households experienced food and water shortages which negatively affected children's school attendance and performance.

The inverse relationship between poverty and meeting children's rights points to the need to disaggregate national data on the status and impact of poverty by age. Currently, data in the Household Budget Survey, which largely assesses the economic and social well-being at the level of the household, can conceal that individuals within households are more vulnerable than others. For example, the data collected in this study indicates that in times of crises such as lack of income, water or food, the rights of children in households are affected in distinct ways. Food shortages which prevent children from attending school strike at the heart of children's development. If not addressed, it will lead to a spiraling of poverty with children from poorer families denied the opportunity to go to school and learn the skills necessary to secure adequate livelihoods and escape poverty.

The relationship between poverty and children's rights also brings out the complexities inherent in meeting children's rights. Both the government of Tanzania and households share the responsibility for meeting children's rights. While the government has signed both the CRC and the African Charter on the Rights and Welfare of the Child (ACRWC) 1999, it has not enacted domestic legislation to ratify the CRC. Therefore, no legal action can be taken against violators of children's rights, except those offences covered by national laws such as the Penal Code or Sexual Offences Special Provision Act (SOSPA) 1998. Many children's rights, such as the right to express their opinions, the right to rest, the right to participate in decision making on matters that concern them directly, are not covered under existing laws. Furthermore, there is no standard definition of a child in statutory law and the co-existence of customary and religious laws with their own definitions of a child compounds the issue.[16]

[16] For a fuller discussion of these aspects see Makaramba (1998).

Nor does Tanzania have a clear strategy to address children's rights nor national monitoring systems to measure progress in realising the rights of children enshrined in the CRC, the ACRWC or the Child Development Policy are met. This is also true for monitoring poverty and its impact on child rights. The monitoring system for MKUKUTA includes indicators to measure progress in education as well as child survival, nutrition and immunisation. However, the health indicators focus only on children up to the age of 5 years. The Integrated Labour Force Survey, conducted every five years, provides data on the employment of children from the perspective of "child work" which is considered benign or even useful and "child labor" which is considered detrimental to the rights of the child. However, the ILFS defines children as Tanzanians aged less than 15 years which is inconsistent with the definition in the CRC. Without a systematic framework for monitoring children's rights, how can the government ensure that these rights are met in accordance with the conventions that it has signed?

Households also have responsibilities for meeting children's rights but again there are complexities. First, data from this study show that not all parents/guardians understand the full scope of children's rights, which was reflected in the differences in perceptions between the adults and children surveyed on the extent to which children's rights were met. The whole concept of children having rights is also not very well understood in the prevailing socio-cultural environment in Tanzania in which children are considered the "property" of adults to be used as necessary. One only has to look at the incidences of children in this study being compelled to fetch water and thus miss school to support this argument.

There is also little data available on how households consider children's rights or needs when they are faced with scarce resources. Children's rights are typically highlighted when clear cases of abuse have occurred, such as rape, battery or other physical abuse. This study has shown, however, that children's rights can be neglected without any obvious violence. In many cases, parents/guardians do not deliberately neglect children's rights, rather the social or economic circumstances they face are beyond their control. Still, if there is no monitoring of how households manage or do not manage, how can strategies be put in place to help households meet children's basic need and rights?

New ways have to be found to realise children's rights

Study findings also highlight the need for a broader definition of vulnerable children. The current tendency is to target those groups of children with the most obvious signs of vulnerability – orphans, abandoned children and street children. However, this study has shown that children from "normal" Tanzanian households with both biological parents can be under stress. Therefore social welfare systems that tend to concentrate only on the most vulnerable children (MVC) may marginalise a large proportion of children that need assistance, and may perpetuate the poverty that affects children so negatively.

The real problem here is that the welfare of children is seen as the responsibility of parents, so government institutions, charities and NGOs target children who do not have biological parents. So what happens when parents, often through no fault of their own, cannot meet the needs and rights of their children? The study has shown that there is need to further define the vulnerability of children, to have a proper assessment of the extent of child deprivation across the country, and to set up systems to address it. For example, more discerning mechanisms of cost sharing are required to ensure that all Tanzanian children have access to basic services such as education, healthcare, water and food. Blanket policies tend to put pressure on those already failing to meet their basic household needs.

Another finding from the study was that short-term absenteeism from school is a significant occurrence among children from all income groups. About 50% of the children from households in the two higher income categories and 60% from the poorest households were absent from school at some time or another during the school year. Nationally, a great deal of attention is paid to school enrolment rates, especially in light of the second Millennium Development Goal (MDG2) to achieve universal primary school education by 2015. Some attention is also being paid to performance in national examinations. However, comparatively little information is available on absenteeism, especially short-term absence. Ultimately, non-attendance can affect a child's school exam performance and their opportunity to continue onto secondary schools, thereby limiting development of their full potential. By concentrating only on enrolment, MDG2 ignores student retention and performance. Greater attention needs to be paid to absenteeism, and low levels of retention and completion in primary and secondary schools. The data from the quantitative survey and the feedback session provided some startling statistics. Children said that at some times of the year their classes were half empty. A senior official at the District Council in Kisarawe also put absenteeism at between 20-30% during certain seasons. There is a need for improved monitoring of absenteeism and its causes at different levels in the education system such as the school inspectorate, community leaders and the parents themselves.

The high proportion of respondents who perceived difficulties in meeting the costs of education raises the question of cost sharing in education. Study data show that children in 8% of surveyed households were not going to school because of their inability to pay school costs, which included contributions for school infrastructure and maintenance. Households may also be required to pay for the school inspector to visit schools. About 12% of the households reported that when they did not have enough resources, children stayed away from school. Based on this evidence, the burden of cost sharing in education needs to be looked at more carefully. Even in developed countries there is a system of shielding poorer households from paying the full costs of education. Education is generally accepted as essential for human development and a tool for empowering children to get out of poverty. But cost sharing may force many children to remain poor.

Illness prevented children from more than half of the households surveyed from fully attending school. Malaria was the illness most commonly cited. To date, national strategies for malaria prevention, such as distribution of free insecticide-treated nets (ITNs), have targeted pregnant women and children under than five years of age. While these initiatives are highly commended, school-age children have been largely overlooked in interventions to prevent malaria. This study clearly shows that children from 5-17 years are also vulnerable. Reducing the incidence of malaria among older children is critically important if education is to be the engine of Tanzanian growth and development. Therefore, ITN distribution and use should be promoted for all households, and exemption from cost sharing in health for all children should be seriously considered.

Finally, the study revealed high rates of food insecurity as reflected in the significant proportion of households in which children have less than three meals a day. The right to adequate amounts of food has not been realised for many Tanzanian children. Hungry children find it difficult to concentrate, and school attendance and performance suffers. Therefore, strategies are needed to provide supplementary meals in public primary and secondary schools. This will require strong support from all stakeholders. Kisarawe District has made several attempts to initiate a school meals programme in partnership with parents. However, the number of schools involved dropped from 48 in 2005 to about 10 in 2007. At the feedback session, the parents were reluctant to take on the whole burden and wanted the government to increase the capitation grant provided to schools so that they could fund feeding programmes.

Undoubtedly, fulfilling the rights of all children is complicated, and no one wants to exacerbate the dependency syndrome. However, policies and strategies have to be developed to ensure that children from poorer households are able to realise their right to quality education.

5 Recommendations

Based on the study evidence, the following five recommendations are made to accelerate progress in meeting children's rights in Tanzania:

i. The Government of Tanzania needs to harmonise the definition of a child in statutory law as well as in the other codes of law such as customary law, in accordance with the definition adopted by the Tanzania Child Development Policy, the CRC and the African Charter in order to avoid loopholes that allow children's rights to be neglected without legal recourse. A national strategy for promoting children's rights which includes regular monitoring and reporting is also required. The strategy should consider the special needs of girls and children from poor households. All stakeholders including children should be involved in developing this strategy.

ii. REPOA should commission more in-depth studies to better understand the relationship between poverty and children's rights. This study has examined only three of the rights in the CRC and the Tanzanian Child Development Policy. Other studies are needed to look at other rights of children and in other geographical areas. Lessons could be learned from broad-based research. For example, the researchers were told that in one region concerned adults could accost any child that was found loitering in the streets during school hours and return him/her to the school. In fact in Kisarawe District during a feedback session with parents, there was a recommendation that communities should consider setting up patrols to keep children out of the streets. Successful school feeding programs could also be examined to replicate in other areas.

iii. The Ministry of Education and Vocational Training (MOEVT) needs to pay greater attention to absenteeism of children from school, especially periodic short-term absenteeism – its frequency, causes, and which children are most affected, girls or boys, and in which areas. The education sector has a good monitoring system but comprehensive information about absenteeism is missing. Absenteeism rates need to be accurately captured in national statistics and included in reviews of education to assess implications in terms of school performance, retention and transition to secondary school.

iv. It is recommended that a comprehensive study on the vulnerability of children be commissioned by the Planning Commission which is responsible for coordinating MKUKUTA, including mapping of districts and wards, to inform the development and implementation of a national strategy to address child vulnerability at the local government level. The study would have to start with a re-definition of child vulnerability and end with an assessment of current programmes to address vulnerability so that all vulnerable children in Tanzania are reached. Efforts to effectively address child vulnerability is consistent with Goal 4 of the MKUKUTA's Cluster II. REPOA also commissions research into children under its structured research programme.

v. REPOA and other stakeholders should sponsor research on the issue of household food shortages and child hunger and their relationship to school attendance and performance to inform the design and implementation of school feeding programmes with broad stakeholder involvement and support. If primary school attendance is mandatory, there has to be a system to ensure that children are not too hungry to study. Currently, there is no official policy for school meals and as a result commendable initiatives start well but then fizzle out. A systematic approach is needed based on a thorough analysis of Tanzanian and international best practices.

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Appendices

Appendix 1: Main Demographic and Socio-economic Characteristics of the Study Districts

Characteristics	Same District	Kisarawe District	Comments
Total population - Census 2002	211,378 (2002)	100,775 (2002)	Census 2002
Female population (%)	51% (2002)	49.5% (2002)	Census 2002
Population below poverty line (2000/01)	34%	51%	National average is 36%
Agriculture as main employment	86% (2002)	90% (2002)	Census 2002
Number of primary schools	175 (2006)	78 (2005)	District documents
Number of secondary schools	31 (2006)	10 (2005)	District documents
Net enrolment rate	100% (2006)	95% (2006)	BEST, Regional Data
Female proportion of enrolment	49%	48%	
Pass rate in primary school leaving exams	78%	64%	
Selected for secondary schools	53% (2005)	75%	
Access to clean water (piped)	44% (2006)	28% (2005)	
Number of health facilities	62 (2006)	24 (2005)	
Doctor-to-patient ratio	1:26,541 (2006)	n.a	
Rate of assisted birth	70% (2006)	79% (2005)	Was 50.2 % in 2004
Five most common diseases of all people aged 5 years and above (2005)	Malaria, pneumonia, diarrhea, urinary tract infections and anaemia	Malaria, acute respiratory infections, diarrhoea, intestinal worms and skin infections	HIV/AIDS was listed as number 8 for both districts

Compiled from several documents including: (i) URT, 2002 Population and Housing Census, Volume IV, District Profile Kisarawe, and District Profile Same, Dar es Salaam, National Bureau of Census;

(ii) URT, Household Budget Survey, 2000/01, Dar es Salaam, National Bureau of Statistics;
(iii) URT, Prime Minister's Office, Regional Administration and Local Government, Coast Region, Kisarawe District Council, Comprehensive Council Health Plan, July 2006 to June 2007;
(iv) Same District, Comprehensive Council Plan for the year 2005/2006, Same, 2005
(v) Brief on Same District prepared by the Same District Planning Officer, Same, 2007
(vi) Kisarawe District Council, *Taarifa ya Idara ya Elimu*, 2002-2006.

Appendix 2: Education Status of Survey Respondents, by District and Residence

Education level	Overall	Kisarawe	Same	Rural	Urban
Primary not completed	20.1	21.1	17.5	22.6	17.9
Primary completed	60.8	53.1	67.6	67.7	54.3
Lower secondary	9.9	10.9	9.0	2.31	17.1
Upper secondary	3.7	4.7	2.8	2.3	5.0
Certificate	1.5	3.1	---	0.8	2.1
Diploma	1.1	1.6	0.7	0.71.	0.7
Did not attend school	2.9	5.5	0.7	3.9	2.9

Source: Field Data, 2006

Appendix 3: Household Expenditure – Kisarawe District
(No. and percentage of all households that utilized more than half their monthly income on identified expenditure categories)

Category of Expenditure	No. of households	% of households
Food	71	51.8
Water	3	2.2
Improvement of business	6	4.4
Children's education	23	16.8
Healthcare	6	4.4
Transport for children	10	7.3
Other household needs	4	2.9
Agricultural improvements	11	8.0
Improvements to the house	3	2.2
Total	**137**	**100%**

Source: Field data collected in 2006

Appendix 4: Household Expenditure – Same District
(No. and percentage of all households that utilized more than half their monthly income on identified expenditure categories)

Category of Expenditure	No. of households	% of households
Food	71	54.6
Water	9	6.9
Improvement of business	8	6.2
Children's education	33	25.5
Healthcare	1	0.8
Transport for children	4	3.1
Other household needs	2	1.5
Agricultural improvements	1	0.8
Improvements to the house	1	0.8
Total	**130**	**100%**

Source: Field data collected in 2006

Appendix 5: Household Expenditure by Household Wealth Status – Same District, (No. of households by income group that utilized more than half their monthly income on identified expenditure categories)

Category of Expenditure	Household Wealth Status (Monthly income in Tshs)				Total
	Poor	Medium	Better Off	Well Off	
	< 50,000	51,000- 100,000	101,000-250,000	>250,000	
Food	39	22	7	1	69
Water	5	3	0	0	8
Improvement of business	2	4	2	0	8
Children's education	14	14	4	0	32
Healthcare	0	1	0	0	1
Transport for children	3	1	0	0	4
Other household needs	1	1	0	0	2
Agricultural improvements	1	0	0	0	1
Improvements to the house	1	0	0	0	1
Total	**66**	**46**	**13**	**1**	**126**

Source: Field data collected in 2006

Appendix 6: Household Expenditure by Household Wealth Status – Kisarawe District, (No. of households by income group that utilized more than half their monthly income on identified expenditure categories)

Category of Expenditure	Household Wealth Status (Monthly income in Tshs)				Total
	Poor	Medium	Better Off	Well Off	
	< 50,000	51,000- 100,000	101,000-250,000	>250,000	
Food	41	12	4	8	65
Water	2	0	0	1	3
Improvement of business	1	2	1	2	6
Children's education	13	5	0	7	25
Healthcare	5	1	0	0	6
Transport for children	7	3	0	0	10
Other household needs	1	1	2	0	4
Agricultural improvements	7	2	2	0	1
Improvements to the house	1	2	0	0	3
Total	**78**	**28**	**9**	**18**	**133**

Source: Field data collected in 2006

Appendix 7: Main Source of Energy for Cooking

Energy source	No. of Households	% of Households
Electricity	8	2.6
Charcoal	108	34.8
Kerosene	5	1.6
Wood	189	61.0
Total	**310**	**100%**

Source: Field data collected in 2006

Appendix 8: Distribution of Children in the Households Surveyed

No. of children in household	Children < 5 years			Children Aged 5-17 years		
	No. of households	% of households	Total no. of children < 5 years	No. of households	% of households	Total no. of children 5-17 years
None	21	10.0	0	5	1.6	0
1 child	124	59.3	124	62	20.1	62
2 children	49	23.4	94	107	34.8	214
3 children	14	6.7	42	65	21.0	195
4 children				39	12.6	156
5 children	1	0.3	5	22	7.1	110
6 children				5	1.6	30
7 children				4	1.3	28
Total			**265**			**795**

Source: Field data collected in 2006

Appendix 9: Children's Knowledge of Their Rights

Right to…	% of children who were aware of right	
	Same	Kisarawe
Education	100	100
Food	100	100
Clothes	100	87
Protection	32.9	100
Health	24.3	100
Shelter	32.9	49
Participate in decision making	9	65
Not be harassed	18.3	51
Show their talents	25.6	0
Visit friends	14.6	31
Not do hard work	0	17
Play	78.1	100
Clean and safe water	62.2	98
Better care	75.6	73
Take rest	47.5	74.5
Be heard	32.9	82
Be loved	7	69
Respect parents/adults	47.6	54
Get time to study	20.7	14.5
Go around e.g. town	18.3	0

Source: Field data collected in 2006

Appendix 10: Comparison of Household Asset Levels with Household Income Levels (no. and % of households)

Household Asset Level (based on asset index)	Household Income Level (Monthly income in Tshs)				Total
	Poor < 50,000	Medium 51,000 - 100,000	Better Off 101,000 - 250,000	Best Off > 250,000	
Poor	135 69.9%	46 23.8%	9 4.7%	3 1.6%	193 100%
Medium	21 28.0%	30 40.0%	13 17.3%	11 14.7%	75 100%
Better Off	1 5.3%	12 63.2%	2 10.5%	4 21.1%	19 100%
Best Off	0 0%	4 44.4%	1 11.1%	4 44.4%	9 100%
Total	**157 53.0%**	**92 31.1%**	**25 8.4%**	**22 7.4%**	**296 100%**

Source: Field data collected in 2006

Appendix 11: Children's Perceptions about Their Access to Education

Perception	Number of respondents	Percentage of respondents
Fully available	108	74.5
Moderately available	24	16.3
Very little	13	8.8
Total	**145**	**100.0**

Note: Two children did not answer this question

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Research on Poverty Alleviation, REPOA, is an independent, non-profit organization concerned with poverty and related policy issues in Tanzania. REPOA undertakes and facilitates research, enables monitoring, and promotes capacity building, dialogue and knowledge sharing.

REPOA's research agenda is concerned with poverty and its alleviation. Our objectives are to:

- develop the research capacity in Tanzania;
- enhance stakeholders' knowledge of poverty issues and empower them to act;
- contribute to policy dialogue;
- support the monitoring of the implementation of poverty related policy;
- strengthen national and international poverty research networks, and forge linkages between research(ers) and users.

It is our conviction that research provides the means for the acquisition of knowledge necessary for improving the quality of welfare in Tanzanian society.

REPOA's Research Reports contain the result of research financed by REPOA. Our Special Papers contain the findings of commissioned studies conducted under our programmers of research, training and capacity building. The authors of these research reports and special papers are entitled to use their material in other publications; with acknowledgement to REPOA.

REPOA has published the results from this research as part of our mandate to disseminate information. Any views expressed are those of the authors alone and should not be attributed to REPOA.

Research on Poverty Alleviation (REPOA)
P.O. Box 33223, Dar es Salaam, Tanzania
157 Mgombani Street, Regent Estate
Tel: +255(0)(22) 270 00 83 / 277 25 56
Fax: +255(0)(22) 277 57 38
Email: repoa@repoa.or.tz
Website: www.repoa.or.tz

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