

**EDUCATION AND TRAINING POLICY AND ACCESS TO EDUCATION FOR  
MOST VULNERABLE CHILDREN IN CHILDREN CARE CENTRES IN HAI  
DISTRICT, TANZANIA**

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MOST VULNERABLE CHILDREN IN CHILDREN CARE CENTRES IN HAI  
DISTRICT, TANZANIA**

**By**

**Robert A. Mwanga**

**A Dissertation Submitted in Partial Fulfillment of the Requirement for Award of  
the Degree of Master of Science in Development Policy (MSc. DP) of the Mzumbe  
University**

**2018**

## CERTIFICATION

We, the undersigned, certify that we have read and hereby recommend for acceptance by the Mzumbe University, a dissertation entitled “**Education and Training Policy and Access to Education for Most Vulnerable Children in Children Care Centres in Hai District, Tanzania**” in partial fulfillment of the requirements for award of the Degree of Master of Science in Development Policy of Mzumbe University.

Signature

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Major Supervisor

Signature

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Internal Examiner

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DIRECTOR, INSTITUTE OF DEVELOPMENT STUDIES

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I, Robert Abraham Mwanga, declare that this dissertation is my own original work and that it has not been presented and will not be presented to any other university for a similar or any other degree award.

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## **DEDICATION**

This study is dedicated to the loving memory of my revered father, Abraham Mwanga who always believed in academic investment. His words and advice are still clicking in my mind as source of academic inspiration. May The Almighty God grant his soul eternal peace, Amen.

## **LIST OF ACRONYMS**

AIDS	Acquired Immuno Deficiency Syndrome
CLHIV	Children Living with HIV
CRS	Catholic Relief Services
DC	District Council
DCDO	District Community Development Officer
DEOp	District Education Officer – primary
DRC	Democratic Republic of Congo
DSWO	District Social Welfare Office
EFA	Education For All
EO	Education Officer
FHI	Family Health International
HIV	Human Immune deficiency Virus
IJED	International Journal Of Educational Development
ILRI	International Livestock Research Institute
MVC	Most Vulnerable Children
O&OD	Obstacles and Opportunities to Development
OVC	Orphans and Vulnerable Children
PEDP	Primary Education Development Plan
RoU	Republic of Uganda
SOS	Save Our Soul
TB	Tuberculosis
TS	Tanzania Shillings
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organization

UNICEF	United Nations International Children's Emergency Fund
URT	United Republic of Tanzania
VEO	Village Executive Officer
WDC	Ward Development Committee
WEC	Ward Education Coordinator
WEO	Ward Executive Officer

## **ABSTRACT**

This study focused on assessing the implications of the Education and Training Policy in access to primary education for most vulnerable children (MVC) in children care centres in Hai district, Tanzania. The study assessed community knowledge of the MVC in children care centres, ways through which education is provided to the MVC, how the policy has improved access to primary education for the MVC, and influencing factors. The study employed a case study method and engaged 137 respondents who were selected by using purposive sampling and simple random techniques. Data were collected by using interviews, focus group discussions, questionnaires and documentary review and analysed through Microsoft excel and presented in table, quotations and percentages.

Findings show that respondents had high level of awareness about MVC in children care centres as they were well informed about it; knew about availability of MVC; could distinguish MVC from non MVC; and identified the children care centers. Primary education to the MVC was provided through extra curriculum trainings, enrolment of the most vulnerable children in nearby public schools, engagement of donors, exclusion from mandatory contributions, and continuation from ended classes. It was found that since the introduction of the children care centres there has been more achievements in educational status of the MVC. The achievements are life skills acquisition; decrease of truants in schools; unsegregational learning environment; integrated funding; increase of education facilities, number of MVC in secondary and technical trainings increase; and improvement of self identification ability among MVC. The failures are insufficient education privileges to MVC, failure of the MVC to cope with their original families when back home, and inadequate donations and supports as needs are many. Access facilitating factors are short distance to schools, availability of donors, children care centre's own financial capacity, stigmatization free environment, good conduct of care givers, integration of the most vulnerable and non vulnerable children in school, good educational infrastructures and lastly support from village government. The limiting factors are insufficiency of teachers trained on special needs education, lack of good community participation, land insufficiency and hidden indirect objectives of the children care centres.

To enhance education for the MVC there is need for increasing number of qualified teachers for children with special needs, promote community participation, look for more spaces for building children care centres and schools, and promote good governance among stakeholders.

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## **CHAPTER ONE**

### **INTRODUCTION TO THE STUDY**

#### **1.1 Introduction**

This chapter presents background information, statement of the problem, objectives, research questions, significance, scope, limitations, and organisation of the study.

#### **1.2 Background to the Study**

Education plays an important role in the attainment of sustainable economic, political, social and cultural aspect of a country. Education is considered as a tool for liberation as it enables people to fight against various life challenges such as diseases, poverty and ignorance (Nyerere, 1999). While this is important, access to education among most vulnerable children is an emerging challenge in the local and global child welfare discourse. Globally, it is estimated that about 145 million children are vulnerable due to orphanage, effects of illness and poverty (UNICEF, 2008). The number of children with low access to education is also shocking. It is estimated that 140 million children are out of school, 90% of them are living in low and middle income countries and over 80% are living in Africa (UNESCO, 2005).

Studies reveal that in Africa the number of most vulnerable children with low access to education is increasing. For example, in 2004 Namibia had 142,777 Most Vulnerable Children and this number is expected to double to 250,000 by the year 2021 (Republic of Namibia, 2008). Moreover, in year 2011 a total of 103,768 children were out of school (UNESCO, UNICEF & Republic of Namibia, 2015). In Uganda, 17.1 million people are children below 18 years (equivalent to 56% of the population); among these children about 11.3% of them are orphans, about 8% are critical vulnerable and 43% are moderate vulnerable (UNICEF, 2015). This is contrary to the Dakar Framework for Action (Education for All) which obligated all countries to ensure that by 2015 all children

especially girls and children in difficult circumstances have access to complete the compulsory primary education (UNESCO, 2000).

Tanzania as a developing country is not isolated from the challenges of most vulnerable children's access to formal education. It is estimated that about 3,000,000 children country wide are most vulnerable (SOS Children's Villages International, 2014). These children are facing various challenges such as poor access to education, loss of defensive factors like stable family environments, depression, exploitations, poor health and stigma, HIV/AIDS, Malaria and Tuberculosis (Mmasa & Mbaula, 2016). The Government of Tanzania enacted various policies that guide provision of education within the Ministry of Education over decades ago. These include both macro and sectoral policies such as the Education and Training Policy of 1995 that emphasized on access and equity in education (URT, 1995), and Primary Education Development Plan (PEDP) that abolished school fees and other mandatory contributions so that no child is denied to attend school due to financial difficulties (Rajani & Omondi, 2003). Within the same line Education and Training Policy of 2014 acknowledges challenges encountered by most vulnerable children in accessing education and therefore pledges to create conducive environment for enhancing equity and equality in education in order to enable transformation of national economy to be a middle economy country by 2025 (URT, 2014). Despite all the mentioned efforts by the government access to education to children who are more vulnerable is still a challenge.

Hai district is among the districts in Tanzania having Children Care Centres for most vulnerable children who are also at risk of losing social protection including access to formal education. According to preliminary interview with Hai District Council Social Welfare Office in early 2017, about 3,150 (1,912 Female and 1,238 Male) children in the district were vulnerable faced by various challenges including low access to education. The community has created safety nets to help some of the most vulnerable children. The remarkable social safety nets established include keeping them in centres so that they can be provided with life necessities such as health, food, clothing, shelter

and education facilities. While this is an important non-governmental based initiative, little is known about most vulnerable children's access to education in the study area (DSWO, 2017). This study was designed to bridge the information gap on policy nexus access to education for most vulnerable children in care centres.

### **1.3 Statement of the Problem**

Education is a fundamental right for all children (Plan International, 2012). Parents/guardians have a pivot role of ensuring education to their children. However, children who have no family care options lack parental support, thus taken to children care centres for maintenance (URT, 2009). Hai district in Tanzania has several Children Care Centres for taking care of most vulnerable children. About 3,150 children in the district are most vulnerable children (DSWO, 2017). While these centres are in line with the Tanzania Education and Training Policy of 2014 which emphasises that all school aged children are attending school, little was known if children in care centres have adequate access to education (URT, 2014). Therefore, this study intended to bridge information gap about access to primary education for most vulnerable children in children care centres. It was considered important to undertake this study in order to see how the education policy is supporting access to education especially for this category of children.

### **1.4 Objectives of the Study**

#### **1.4.1 General Objective**

The main objective of this study was to assess the implications of education and training policy on access to education for most vulnerable children in Children Care Centres in Hai District, Tanzania.

## **1.4.2 Specific Objectives**

Specifically this study intended to:

- i. Explore community knowledge of Most Vulnerable Children in Children Care Centres in Hai district
- ii. Explore ways through which primary education is provided to Most Vulnerable Children in Children Care Centres in Hai District
- iii. Examine how education and training policy has contributed to access to primary education among most Vulnerable Children in Children Care Centres in the district
- iv. Identify factors that affect access to education for Most Vulnerable Children in Children Care Centres in the district

## **1.5 Research Questions**

### **1.5.1 General Research Question**

What are the implications of education and training policy on promoting access to primary education for most vulnerable children in children care centres in Hai district?

### **1.5.2 Specific Research Question**

- i. What is the community knowledge on the most vulnerable children in children care centres in the district?
- ii. How is primary education provided to most vulnerable children in children care centres in the district?
- iii. To what extent has education and training policy promoted access to primary education for most vulnerable children in children care centres in the district?
- iv. What factors facilitate or limit access to primary education to most vulnerable children in children care centres?

## **1.6 Significance of the Study**

This study was conducted at the time when the government of Tanzania was working harder towards economic revolution for realisation of vision 2025 within the next seven years to come. Further, it was a time when the Ministry of Education and Vocational Training had updated the education and training policy to suit the national long term development plan of vision 2025. The study is moreover conducted three years since the new 2014 Education and Training Policy was launched (URT, 2014). This study is significant in ensuring provision of education to Most Vulnerable Children living in children centres as it has added stock of literature concerning the role of education policy in supporting access to education to Most Vulnerable Children from Children care centres.

## **1.7 Scope of the Study**

This study was conducted in Hai district and concentrated on assessing community's knowledge of most vulnerable children in children care centres, ways through which education is provided to most vulnerable children, levels of education and training policy achievements, and Identification of factors that affect access to education for Most Vulnerable Children in Children Care Centres in the district.

## **1.8 Limitations of the Study**

In the course of undertaking this work, various obstacles hindered smooth research processes. They included negative responses from children care centre owners as they thought that the study intended to investigate institutions' weakness which could put them in legal troubles, limited time of respondents and research deadlines. To avoid negative responses from children care center owners the research objectives, ethical matters and consent were stipulated out clearly before the start of data collection at every level. Time for discussions was minimised and sessions were conducted in the evening hours from 4.00 pm. To cope with given deadline the researcher prepared timetable and abided to it.

## **1.9 Organisation of the Study**

This research report is organised in five (5) chapters. Chapter one provides introduction of the study. It presents background information to the study, statement of the problem, objectives, research questions, significance, scope, limitations and organisation of the Study. Chapter two provides information on the relevant literature used in the study including definitions of key terms, dimensions of access to education, importance of access to primary education for most vulnerable children and common ways of providing education to most vulnerable children. Moreover, the chapter gives information on provision of education to most vulnerable children globally, education and training policy and provision of primary education for most vulnerable children in Tanzania, education and training policy of 2014, empirical review, research gap, theories guiding the study and conceptual framework. Chapter three covers research methodology which includes the research design, study area, study population, sample size and sampling techniques, types of data, methods of data collection, data analysis methods, ethical considerations and validity and reliability. Chapter four presents findings obtained from the study area. It covers findings on demographic information of respondents, community knowledge about most vulnerable children in children care centres, how education is provided to most vulnerable children in the children care centres, how education and training policy has improved access to primary education for most vulnerable children, factors affecting access to education for most vulnerable children in children care centres and discussion of results. Chapter five presents a summary, conclusions and policy implications of the study.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This chapter provides relevant reviewed literature on access to primary education for most vulnerable children in children care centres. The chapter presents definitions of key terms, dimensions of access to education importance of access to primary education for most vulnerable children and common ways of providing education to most vulnerable children. Furthermore, the chapter presents information on provision of education to most vulnerable children globally, education and training policy and provision of primary education for most vulnerable children in Tanzania, education and training policy of 2014, empirical review, research gap, theories guiding the study and conceptual framework.

#### **2.2 Definition of Key Terms**

In this work, several terminologies have been used that need to be defined to make the work understood. The terminologies include education, policy, child care centre, child, vulnerable child, most vulnerable child and access.

##### **2.2.1 Education**

Kumar & Ahmad (1998) define the term education as a process by which behavior, knowledge and character of the young are moulded and shaped. The term education may also be defined as a process of facilitating learning, or the acquisition of knowledge, skills, values, beliefs, and habits (UNESCO, 2000). In this study education means a process of gaining necessary knowledge, skills, ideas and lifestyles through attending formal primary schools.

### **2.2.2 Policy**

The term 'Policy' is described as a definite method or course of action opted (by individual, institution or government) from among available alternatives in the light of specified situation to guide and determine future and present decisions (International Livestock Research Institute, 1995). From this definition one may figure out that policy is a predetermined statement of intent to guide human's decision towards reaching a certain predetermined goals. Devon and Hebert (2000) define the term policy as an agreed plan of action by people who are vested with power to carry it out and enforce it. In this study education policy refers to rational set of government pronouncements with a common broad term objectives guiding education deliveries in Tanzania.

### **2.2.3 Child Care Centre**

Child care centre may be defined as places where care for and supervision of disadvantaged children are taking place (Wikipedia, 2017). The Early Childhood Development Agency (2017) defines a child care centre as a premise where five or more children bellow the ages of seven years are received for the intention of being provided with supervision and care. However, in Tanzania children homes act as alternative residence for children when they cannot live in their families for various reasons such as death of parents and lack of community care including lack of next of kin parent to take care of them. Children cared under these centres usually are from one week age to age thirteen. For the purpose of this study Child Care Centres are places where children are given an environment to grow, develop as well as giving life necessities for them such as shelter, food, education, area for playing and leisure in a caring environment.

### **2.2.4 Child**

There has been a different view regarding the actual age demarcation of adult age and child age. For example, the Malaysian Employment Act 350 of 1996 defines a child as any person who has not yet completed his/her sixteen year of age (UN, 2006). In Tanzania context the laws of Child Act demarcates out a child as any person below the

age of eighteen years. This study will rely on definition of a child as stipulated in the Child Act no. 21 of 2009 section 4 (1) that says “*A person below the age of eighteen years shall be known as a child*” (URT, 2009).

#### **(v) Vulnerable Child**

A vulnerable child may be described as any person below 18 years who is at high risk of lacking necessary care and protection from various harms (UNICEF, 2001). Naturally, children are at more vulnerability risk compared to adults but some are typically most vulnerable than others. Family Health International defines a vulnerable child as any child whose well being, safety, and development are in various dangers such as proper shelter, lack of care, nutrition, education, as well psychological support (Family Health International, 2011). For the purpose of this work vulnerable child means any child who is more exposed to some risks than other children and therefore kept in a children care centre. The risks include loss of education access, malnutrition, morbidity, parental care and isolation from one’s community.

#### **2.2.5 Access to Education**

The term “access” calls upon opportunity or right of reaching, taking and using a particular service (Cambridge Dictionary, 2004). Access is the ability to gain benefits from the available goods and services (Ribot & Peluso, 2003). Moreover, UNESCO (2005) defines improvement of “access to education” as welcoming diversity and benefiting all learners including those who may feel excluded. Within the same line Olekambainei (2013) define the term “access to education” as enrolment, retention, dropout, achievement, competition and being selected for further education. This study defines access to education as the right to timely registration, accomplishment and continuation to further studies.

## **2.3 Dimensions of Access to Education**

Access is the innermost component in the attainment of education in various parts of the world today (Daniels, 2014). However, access to education persists to be a challenging notion as it differs in different dimensional context of users over time (Frenk, 1992). In this study access to education for most vulnerable children is considered in three dimensions namely affordability, availability and acceptability.

### **2.3.1 Availability Dimension of Access**

Availability dimension calls upon physical existence of education resources with adequate capacity to offer the education service intended (Fenk, 1992). Availability results from characteristics of educational facilities existing including their range of distribution, buildings concentrations, user-friendliness and transport systems available. Availability dimension in education context also is reflected in the characteristics of trainers like presence of qualified and competent instructors. This dimension also focuses on mode of providing education services. Harries & Roland (2004) argues that access to education is limited if available education infrastructures and services are not evenly distributed across different levels in the country especially to primary levels and to lower class of children.

### **2.3.2 Affordability Dimension of Access**

Affordability dimension reflects the economic ability for people to spend resources and time to use appropriate services. It results from diverse price value of education services and related costs on top of opportunity cost which is related to the loss of such income. Moreover, affordability varies by kind of service and it depends on the power to produce resources to pay for service including resources mobilisation and payment mode (Shengelia & Tandon, 2003). It is argued by Salkever (1976) that affordability employs various variables such as price, opportunity cost linked to service, travel time to seek the service, quality of service and service provider behaviors. Affordability is thus

influenced by various factors such as poverty and social isolation and they hinder people from paying for the intended service (Daniels, 2014).

### 2.3.3 Acceptability Dimension of Access

Acceptability dimension refers to both social and cultural dynamics determining possibility of people to acknowledge aspects of the particular service (Shengelia & Tandon, 2003). For example, society restricting children with disability to go to school would reduce the acceptability of education and acceptability to seek for education if at all education is for children with no disability alone. Acceptability may be that some services are unbalanced in the system they are set, making them unacceptable to some part of the society which are targeted to be served. Therefore, acceptability dimension relates to the challenge of ensuring that service meets the needs of various socio economically and cultural less privileged populations (Fenk, 1992). Table 2.1 presents summary of the access dimensions and their features

**Table 2.1 Summary of Access Dimensions and their Features**

<b>Dimensions of Access</b>	<b>Key issues on access to education</b>
Availability	Physical existence of qualified trainers Existence of infrastructures Distance to school
Affordability	Pay for school contributions Cost of travel
Acceptability	Interaction between learners and staff Interaction among learners

**Source:** Researcher's own Construct, 2017

## 2.4 Importance of Access to Primary Education for Most Vulnerable Children

Ensuring access to education is the key and foundation for development of children today (UNICEF, 2005). This is derived from the fact that education helps in imparting new knowledge, skills and attitudes for the wellbeing future of children. While this is important, vulnerable children in Tanzania context are faced by various challenges including poor access to education among others. Specific strategies to address

challenges of most vulnerable children's access to education are required to ensure that they become inclusive in the development process of the country.

Early interventions towards ensuring access to education can result into increase of education attainment which is associated with positive chances and good mental health in adulthood of this category of children. Campbell (2006) suggests that education plays an important role to productive good life and it helps in eradicating poverty as well. This is due to the fact that education enables one to acquire good jobs and salary which enable beneficiary to afford good housing, food, clothing and other living necessities. Ensuring access to education implies a strategy to battle against unemployment, laying grounds for social equity and widen political socialisation and cultural diversity (Chimombo, 2005).

Ensuring access to education also has positive implication in increasing government tax for skilled and educated workers (Allen, 2011). Education enables people to establish various ventures which in turns pay tax for development of nation. Chimombo (2005) suggests that education is broadly regarded as a way to economic prosperity and key to technological and scientific advancement. Ensuring access to education is a prerequisite for long term and short term economic growth. Smith (2006) argues that no country has reached continuous and quick economic growth without educating at least forty percent (40%) of its citizen to be able to read and write.

Improving access to education creates a sense of harmony and maintenance of society's standards. This is supported by Durkheim in functionalism and education where he admits that education and training broadcast society's qualities and standards (Yakkaldevi, 2014). It is in the education system where the required society's standards are transmitted from one generation to another hence ensuring access to education among vulnerable children qualifies them to adopt the required qualities to fit in the society system. Parsons (1961) accepts and supports Durkheim's view by arguing that education carry out a connection in the middle of family and more wider society that

prompts socialization. Parsons stressed that access to education similarly permits individuals to get ready for their expectations parts in the public eye.

On top of this there is a growing stock of evidence that there is a concrete correlation between vulnerability in childhood, school underperformance, anti social behaviors, economic underperformance and poor adulthood's physical health (Feliti & Anda, 2009). This suggests that ensuring vulnerable children's access to education is important.

### **2.5 Common Ways of Providing Education to Most Vulnerable Children**

Ensuring access to education is the key towards social, economic and cultural liberation for most vulnerable children. In spite of this appreciation, nations face great challenge in guaranteeing appropriate opportunities in provision of education to most vulnerable children (UNESCO, 2000). From this point of view it is difficult to design a specific global strategy or way of providing education to most vulnerable children that suit every nation. This is supported by Chimombo (2005) who suggests that the strategies required to solve education challenges vary and must be country specific.

Setting extra studies for most vulnerable children to address their peculiar needs in a specific country. Experience gained from Lesotho shows that most vulnerable children who are affected with HIV/AIDS are provided with extra curriculum education for changing their attitudes, knowledge and beliefs on HIV/AIDS which is termed as "social vaccination" (Vandemoortele and Delamonica, 2000). This knowledge enables them to delay sex, use of contraception, engage with few partners and general reduction of risk behaviours. This is backed up by the national constitution of Lesotho which declares education as the central right for any children in the country (Government of Lesotho, 2006).

Moreover, education to Most Vulnerable Children is provided by ensuring equity in resource allocation. Recognising most vulnerable children as children with special needs the government must ensure equity in the resource allocation to boost most vulnerable

children. Nigeria provides a success story on this whereby the government pays more attention to ensure caring school settings that gives special needs for Most Vulnerable Children including more financial support and psychosocial care to children (CRS Lesotho, 2006).

Setting appropriate policy options that support education delivery for most vulnerable children. Availability of suitable policy options provides relevant suitable ways of providing education to most vulnerable children. For example, the Government of Namibia enacted National Policy Options for educationally marginalised children. This policy identifies children of farm workers, street children, children in remote rural areas, children in squatter areas, resettlement camps, over aged and children with physical or mental impairment as children with challenge in access to education and therefore declares special intervention for provision of their education (Republic of Namibia, 2008). The government provides also boarding assistance for children who walk away from home to school and school feeding support to vulnerable children.

Education to Most Vulnerable Children is provided by engaging local communities. Dipankar (2009) draws strategic ways employed in addressing the education need of vulnerable children in Nyanza province Kenya where he pointed out some achievements acquired through involvement of community surrounding vulnerable children in their locality. Experience gained from this province indicates that government and nongovernmental efforts to support access to education for most vulnerable children are necessary but only compliment and not replace community action to support education delivery to most vulnerable children. Involvement of community is noted to be a sustainable way of ensuring access to education with particular complement efforts of government and nongovernmental efforts. This is supported by various success case studies obtained from local communities in Nyanza province (Dipankar, 2009). This is also supported by UNICEF (2015) which stresses that involving parents is important principle of quality and inclusive education delivery for both outside and inside the classroom. UNICEF insists that good connection between parents and school is the best

education delivery way to disadvantaged children because it influences children's achievements and attitudes in education.

From the experience gained from the cited countries specific examples, it can be noted that each country has its own peculiar way of providing education to most vulnerable children. This is supported by Chimombo (2005) who argued that strategies to solve education related challenges vary depending on country specific challenge. From this assertion it is vivid that no education strategy that fits all except international rectifications which provides agreed commitments that nations set local policies depending on their environment to suit those rectifications. This study was geared towards specific ways in which education is provided to most vulnerable children in the study area.

## **2.6 Provision of Education to Most Vulnerable Children Globally**

Provision of education especially to Most Vulnerable Children is an emerging international concern sources. The international community has been working harder towards setting global conducive environment for most vulnerable children's access to education. Article 26 of the Universal human rights declaration pledged to ensure access to education among children within nations. On top of this, Article 3 and 5 of Education for All (EFA) insist on underprivileged category of children challenges in accessing education (UNESCO, 1990). Other international ratified commitments on ensuring access to education include the Dakar Framework for Action which stressed on Education for All (UNESCO, 2000), United Nations Convention on the Right of Children of 1989 which affirmed child participation in all matters pertaining to them, African Charter on the Rights and Welfare of Children of 1990 which made efforts to ensure that any child who is subjected to school is treated with dignity, Millennium Development Goals which intended to archive universal primary education by 2015 (URT, 2010). Additionally, other international commitments include sustainable development goals which intend to ensure inclusive and equitable quality education and promote lifelong learning opportunities for all (UNESCO, 2015). Out of these

international commitments, each country provides peculiar experience in providing education for most vulnerable children.

Namibia provides practical experiences in providing education to most vulnerable children. The government ratified and localized international commitments to suit most vulnerable children in the country. For example, the country ratified in 1990 the Commitment of the Rights of Children which was declared in 1989. Through this ratification participation of parents in ensuring children access to education was highly insisted in article 5 and 42 (Republic of Namibia, 2008). Namibia also ensures access to education for most vulnerable children through its national constitution (1990) which declares openly that all people shall have right to education, primary education shall be free of charge, children are not allowed to leave school until they have completed primary education. The government has also set a policy on education for marginalised children which declares affordable education for children from poor families and enhances school feeding programme in schools.

Nigeria's experience provides a clear image on the magnitude of vulnerable children and their access to education. The Nigeria education policy vows to ensure provision of education to marginalised units of children although in practice section 7 of the policy does not mention most vulnerable children as among the marginalised children who need peculiar support (Government of Nigeria, 2013). Policy advocacy is required to incorporate most vulnerable children in the education policy so as to allocate equitable resource support for them. According to the study by Catholic Relief Services (CRS) Nigeria is reported to have a high burden of most vulnerable children. About 86% of the children interviewed were in school, 14% were not attending school (5% had never been to school and 9% dropped out of school). Orphans and children with disability were noted to have lesser access to education as compared to other category of most vulnerable children (CRS, 2008).

In Kenya efforts to ensure provision of education to most vulnerable children has been diversified to maximum involvement of Government, Parents/guardians and

development donors (Dipankar, 2009). Although both state and non state actors collaborate in ensuring education provision to most vulnerable children, emphasis is kept on empowering the community to take active role in education provision. In order to ensure every child (especially the most vulnerable children) are attending school free education was introduced in 2003. However, the study by Ogola (2010) claims that free education policy has killed the community's spirit of contributing to education delivery to compensate state and donor's efforts.

## **2.7 Factors Facilitating or Limiting Access to Education for Most Vulnerable Children Globally**

Ensuring access to quality education is the most consistent way of constructing a sustainable future for all children in any nation (UN, 2007). This is supported by Mwoma & Pilay (2016) who maintains that education access is a necessary indicator of children's future life and wellbeing. At any national level perspective, access to education helps to predict economic viability of state and growth of economy. While this is an important situation for all children the case of most vulnerable children's access to education may differ depending on the following factors.

### **i) Gender**

Studies have noted out that male children have more access to education than their counterpart female. This is due to poor gender division of labor available in the society (Smiley, Michele & Carol, 2013). At global perspective it is estimated that about 101 million of children are out of school of which majority of them are girls (United Nations, 2010). Gender determinant is also portrayed in comparative study on literacy rate between Kenya and South Sudan. Literacy in Kenya is 85%; where by boys count 91% and girls 79% only. Sudan national literacy is about 61% where 72% count for boys literacy and 50% for girls (UNESCO, 2015). These factors call upon a need to carry out specific programme that boost girls access to education.

ii) Level of wealth at household level

Families that have better economic wealth have more chances for their children to access education. This implies that children from poor households fail to get necessary school materials such as school uniforms, books, contributions and sufficient food. This is supported by Braga, Lucas, Abates & Simwaka (2017) where it is suggested that young people from wealthier families can keep a focus on academic challenges instead of keeping their centre of attention on financial challenges.

iii) Region of residence

This mostly depends on political nature of the region, economic structure, policy implementation and readiness of residents towards grabbing the available education privileges. For example, literacy rate in Kenya is 85% while that of South Sudan is 61% which implies that Kenya exceeds Sudan by 24 % (UNESCO, 2015). On the other side Zimbabwe counts literacy rate of 83% while South Africa has 93% literacy rate (UNESCO, 2013). The observed facts prove region of residence of a child to be among the determining factor towards access to education. For example, from this data, a child dwelling in Sudan has lower access to education than a child living in South Africa.

iv) Culture

Culture can be a limiting or a facilitating factor towards children's access to education. For example, the nomad cultures insist on animal keeping and ignore formal education and concentrate on their informal education which satisfies their culture (Olekambainei, 2013). The community becomes interested to join education if at all it reflects the needs of their daily lives as predetermined in their culture. This calls upon scheming education policies that suit people's daily lives challenges in the community.

v) Home chores

Children are being used in performing home chores and hence reduce their chances to access formal education. Olekambainei (2013) fetches examples from Maasai

community in Ngorongoro district where children are the major cattle rearing unit category. In other societies children are used in caring for the other young children and perform the rest of home duties hence fail to access formal education. From this case study point of view, having many home chores for children is a limiting factor towards their access to education.

vi) Distance from home to school

Availability of school near children's residences increases and eases access to education. It is evidently noted from studies that the shorter the travel time to school is more easier for children to reconcile school attendance and vice versa is true (Vuri, 2007). Walking distance from home to school exposes children to various harms that may hamper their access to education. These include teenage pregnancies, road accidents and diseases.

Factors that facilitate or limit access to education differ from one geographical location to another from time to time. This study was designed to provide context specific factors that promote or limit access to education among most vulnerable children care centres in Hai district.

## **2.8 Education and Training Policy and Provision of Primary Education for Most Vulnerable Children in Tanzania**

The Government of Tanzania has been struggling to implement various policies for the purpose of improving access to education in the country for many decades. These include policies such as Education and Training policy of 1995, Technical Education and Training Policy of 1996, Higher Education Policy of 1999 and Technology Information and Communication Policy for Primary Schools of 2007. The above policies were generally geared towards giving directives on private sector participation in education delivery, increasing education equality for all, strengthening education cost sharing, decentralization of education management, upgrading education quality and nurturing self employment in the society (URT, 2014). The implementation of education

policies resulted into outstanding successes such as increase in pre primary school enrolment from 24.7% (2004) to 37.3% (2013), increase of enrolment in primary schools from 77.6% (1995) to 96.2% (2013), increase of number of children joining secondary schools from 14.6% (1995) to 59.5% (2013) and increase of children joining technical education from 4,641(2000/2001) to 145,511 (2012/2013). In the same line constituent colleges have increased from 1 university(1995) to 50 universities (2013) leading to an increase of students enrolled in universities from 16,727 to 162,510 in the same period (URT, 2014).

While the above are important policy achievements, an analysis by HAKIELIMU concluded that the education environment in Tanzania has enormous challenges associated with access to education, gender based inequalities, poor learning outcomes and medium of instruction in schools (HAKIELIMU, 2015). These facts are backed up by more challenges highlighted in the analysis of implementation of education policies in Tanzania. They include low capacity to identify children with special needs and capabilities, poor education infrastructures, poor teaching aids, decrease of teacher's morale due to low remunerations and unsustainable education support especially to disadvantaged children. These challenges have resulted into decrease of performance in national examinations from 54% (2007) to 31% (2012), (URT, 2014). These challenges act as stumbling blocks in education arena of Tanzania and therefore call upon strategic policy measures to resolve them. This study was designed to analyse practical implementation of education and training policy to promote access to education among the most vulnerable children in the study area.

## **2.9 Education and Training Policy of 2014**

Education and training policy of 2014 is the result of update of previous policies such as Education and Training policy of 1995, Technical Education and Training Policy of 1996, Higher Education Policy of 1999 and Technology Information and Communication Policy for Primary Schools of 2007. Therefore the new education and training policy of 2014 was designed to create a roadmap towards resolving the existed

education challenges to suit the ongoing social, economic and technological changes prevailing in the country to reach human resource required to transform the country into middle income nation by 2025. The above policy challenges are geared to be resolved through attainment of the agreed policy objectives set afore in the education and training policy of 2014.

The general objective of education and training policy of 2014 is to have qualified Tanzanians with knowledge and skills able to contribute rapidly to national development and withstand competition. Specifically, the policy intends to create: System, structural and structural processes that enable Tanzanians develop in various streams and professions; Education and training with quality standards recognised nationally, regionally and internationally; Access to various educational and training opportunities in the country; Increasing human resources basing on national priorities; Effective management education and training in the country; Sustainable system of education and education training funding in the country; and Education and training system focusing on cross cutting issues.

In order to reach the intended objectives the government has set several strategies to be achieved.

- i. To create an integrated education and training system which is productive, efficient in order to increase the number of educated citizens on various fields.
- ii. Adjust educational and training time at various levels to bring productivity, effectiveness and efficient use of resources.
- iii. To be effective in coordination, management, accountability and control quality of education and training
- iv. Have a solid, effective and satisfying curriculum of the labour market in bringing national development and tolerance of competition
- v. Have enough population of educated people in science and technology to meet the needs of development nation
- vi. Have a good environment for teaching and learning.

- vii. Have a safe environment with essential and sustainable services at school and college
- viii. Have an advisory and responsive service that meets the requirements in education and training
- ix. Education for maintaining peace
- x. Create ability to use different languages in communication
- xi. Ensure that all students complete the cycle education and training at the relevant level
- xii. Have gender equality in education and training
- xiii. Have enough and sufficient resources to satisfy the needs of the education and training sector.
- xiv. Land acquisition for educational and training use.

## **2.10 Empirical Review**

The study of most vulnerable children access to education is not a new undertaking in the research arena. Various studies have been carried out in different parts of the world to elaborate about most vulnerable children's access to education. Selected studies are reviewed in this section.

Olekambainei (2013) conducted a study on Maasai girls' access to secondary education in Ngorongoro District in Tanzania. The study aimed at assessing factors that affect Maasai girls' access to secondary education in the district. The study involved 516 students out of whom 42% were boys and 58% were girls. The study employed questionnaires, interview, and focused group discussions as the key instruments for collecting relevant data. Olekambainei (2013) found that there was enrolment difference between girls and boys specifically 56.3% boys and 43.7% girls' enrolment and girls dropped out more than boys. He also found that girls had lower performance than boys. With regard to barriers to girls' education the study found that they included poverty, home chores, cultural rites of passage, care of animals, distance from school to home and lack of qualified teachers. The study recommended that Government should build

more schools, build of hostels, and re introduce new combinations that cater for the needs of pastoral communities.

Kanyua (2013) did a study on factors influencing primary school participation by vulnerable children in the Municipality division of Kiambu County in Kenya. The major purpose of this study was to identify factors affecting primary school participation by vulnerable children. Descriptive research design was employed in this study. The key respondents were 133 vulnerable children from class seven, 4 head teachers and one Life skills coordinator. The study noted that most of the pupils were from single parent families and they performed various jobs in the morning before and after school. These tasks included fetching water, cooking and taking care of their fellow children at home. The study found out factors that kept children out of schools were poverty in terms of lack of parental care, shortage of food, and psychological torture by teachers and sick parents. The study recommended that government should provide most vulnerable children with school requirements identify vulnerable children as children with special needs in education and improve school feeding programme to support vulnerable children.

Saga (2014) conducted a research on access and quality challenges facing community secondary schools in Kilolo District, Iringa Region, Tanzania. The study employed structured questionnaires for data collection. The study involved 64 students, 8 heads of secondary schools and 32 teachers. The study noted that school infrastructure, shortage of teachers, shortage of learning and teaching materials and education systems were the major challenges that limit access to education. The study recommended that heads of schools should enroll students according to the available infrastructures, use qualified teachers and provide regular training to teachers. The study recommend the government to commit itself in ensuring motivation to heads of schools, ensure availability of teaching and learning materials, improve school inspection and remove the difference between policy objectives and politicians' interests.

Jere (2014) did a research entitled ‘addressing educational access and retention of orphaned and vulnerable children in high HIV prevalence communities in rural Malawi’. The study intended to examine the degree to which flexible learning (Open and distance learning ) approach with nose to nose teaching and psychosocial support can help to improve access and retaining of vulnerable and orphaned children in Malawi. Findings from this study demonstrated the advantages of flexible learning to promote psycho social benefits enhance education experiences and support in retention of vulnerable children with necessary positive spill over of children who are at risk of drop out. It is also argued from this study that inclusive philosophy inside schools needs strategies to create enabling arena for its promotion.

In summary, empirical studies have shown experiences in addressing the challenge of access to education among vulnerable classes of children both in Tanzania and outside. Findings from studies have shown that access to education among most vulnerable children is influenced by gender disparities, poverty, culture and distance from home to school. In addition, lack of parental care, food insufficiency in schools, inadequate teachers and insufficient infrastructures in schools were reported to limit access to education among most vulnerable children in various areas. However, the studies did not show empirical evidence to show how policies are devoted to support access to education among most vulnerable children by addressing the noted challenges.

## **2.11 Theories Guiding the Study**

### **(i) Implementation Theory**

Implementation theory is an economic theory that is mainly used to explore the correlation that exists between normative objectives and organisation prepared to accomplish those objectives (Palfrey, 1992). The theory characterises institutional mechanism that will assure outcome consistent with main goal assuming that such mechanism comes from some specification of equilibrium. Maskin (2002) argued that implementation theory mainly deals with two challenges which are economic challenge

in producing and distributing private and public goods and choosing over limited set of alternatives. Implementation theory has faced criticism that common sense may be useful also in guiding implementation and therefore it is not necessary to use the implementation theory (Nilsen, 2015).

**(ii) Functionalist Theory**

The theory argues that access to education for an individual is a function of an individual learner and social cultural context in which the learner is exposed such as families, schools, villages or neighborhoods. While schools with proper strategies can make a difference in education of learners, the extent to which schools can make such a difference is heavily influenced by background of learners themselves, constraints they face, capabilities of teachers in schools and marketing strategies available. The role of different neighborhoods and communities to provide improved opportunities for educational and achievements for learners is also linked with effective parenting (Raffo, 2007). Generally, the theory emphasises that education is important in functioning of the society, though do not materialise for the case of people from poorer backgrounds.

The study was informed by the functionalist theory as it was considered to be more relevant to the study. This is due to the fact that first, issues raised by the theory are more linked with access to educations; second, some issues raised by the implementation theory are also taken care in the functionalist theory.

**Table 2.2 Summary of Key Issues from Selected Theories**

<b>Theory</b>	<b>Key issues on access to education</b>
Functionalist Theory	Individual learner background Social cultural context Constraints Quality and quality of trainers Marketing strategies
Implementation Theory	Nature of objectives Organisational capacity Challenges

**Source:** Researcher’s own Construct, 2017

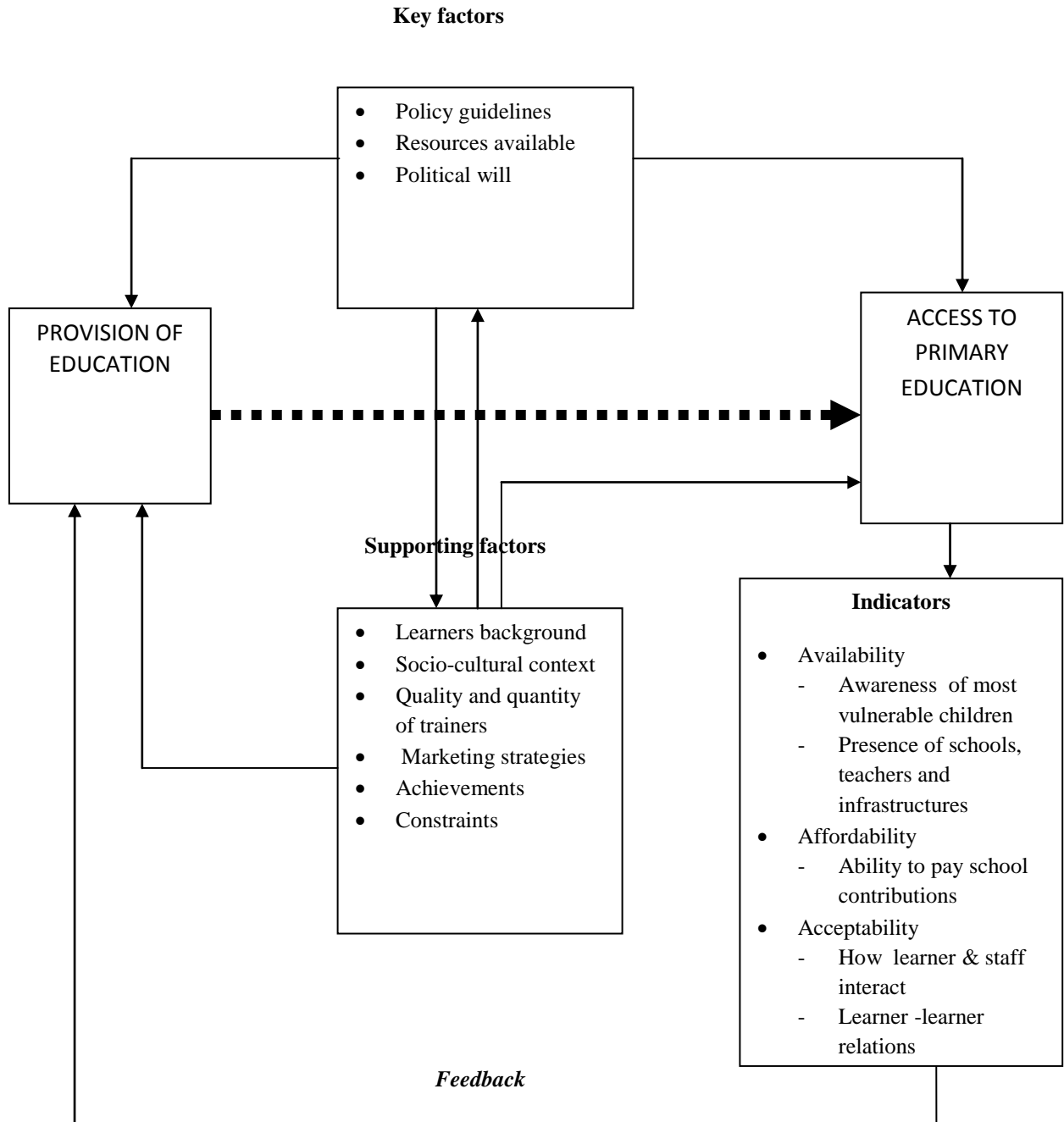
## **2.12 Research Gap**

Studies have revealed out that in both global, Africa and Tanzania contexts the number of most vulnerable children who are faced with various challenges including poor access to education is high(PACT, 2007 , UNICEF, 2008 , UNESCO, 2005 , Republic of Namibia, 2008 , UNICEF, 2015 and DSWO, 2017). Various studies also admit that most vulnerable children have challenge in accessing education (Olekambainei 2013, Kanyua, 2013, Saga, 2014, Jere, 2014 and Vuri, 2007). Hai district has several child care centres which, among other services, promote education for most vulnerable children. In the reviewed studies, researchers did not show sufficient empirical evidence to show how education policies are contextualized in the local places to enable the most vulnerable children to access the desired formal education. On top of this little is known whether children in care centres have access to education. The study is designed to bridge the information gap over the implications of education and training policy of 2014 on promoting access to education for most vulnerable children in care centres.

## **2.13 Conceptual Framework for Analysis of Access to Education**

The conceptual framework is a graphic mold showing the relationship among variables that will be undertaken by the research (Barifaijo and Basheka, 2010; Omari, 2011) Figure 2.1 is an illustration of conceptual framework for the analysis of the provision of education and access to primary education to most vulnerable children. The framework starts with the view that the success in the provision of education depends on key factors namely policy guidelines, resources available and political will; and supporting factors namely learner's background, social-cultural context, quality and quantity of trainers, marketing strategies, achievements and constraints. The extent to which access to primary education to most vulnerable children is improved will be reflected on the dimensions of access namely availability, affordability and acceptability. The feedback loop shows information given to implementers reporting whether or not the outcome intended is achieved

**Figure 2.1 Conceptual Framework of the Study**



**Source:** Researcher's own construct, 2017

### **2.13.1 Description of Conceptual Framework Variables**

#### **i) Provision of education**

According to UNESCO (1990) provision of education implies the whole process of distributing a body of information knowledge, skills and attitudes from one person to another. Provision of education is also described as the art or practice of imparting new judgment, skills and attitude through formal or informal procedures (Sumra & Rajani, 2006). Provision of education also implies giving children necessary knowledge, attitudes, skills and information in a formal school.

#### **ii) Access to primary education**

From this study access to primary education means possibilities of the most vulnerable children in children care centres to earn benefits from the available primary education services. Access to primary education is explained as a measure of availability, affordability and acceptability of most vulnerable children in getting primary education (Ribot & Peluso, 2003).

#### **iii) Policy guidelines**

Policy guidelines refer to procedural advices of how the policy can be implemented in the society to reach its intended objectives. Usually guideline provides a precise summary of key issues to be addressed in executing such policy to both implementers and beneficiaries intended (Parsons, 1961). In the conceptual framework availability of resources is described as another key factor for increasing access to education for most vulnerable children.

#### **iv) Resources available**

The term resource means any essential immaterial or material input for supporting a particular development initiative (Ayres, 2001). Moreover, resources refer to physical or non physical stock of materials, human, financial and other asserts that can be used by

an organisation or by an individual in order to work effectively. In this conceptual framework, availability of resources is described as another key factor for increasing access to education for the most vulnerable children. In other words, human capital and finances are important in for promoting access to education.

v) Political will

Political will means determination of individual political personnel to do and say issues that will produce a needed outcome. It also refers to collective sum of political payback and costs which will be the result of a particular decision undertaken in the society (Ann, 2010). In this study political will forms an important variable because in absence of political will nothing can be seriously done as lack of it is related to lack of commitment and accountability.

vi) Learners background

Learner's background means a state of the student's history. It is a broad record of student's family history, motivations, knowledge, culture, education, language and any other skill personal information (Rezig, 2014). In this study learner's background is viewed as important for accessing education in schools.

vii) Socio-cultural context

Socio-cultural context refer to a particular life styles, values, education, language, organisations, technology, attitudes and values prevailing in the community. It also means immediate way of life and circumstances in which something occurs in the society (Palfrey, 1992). In the conceptual framework socio-cultural context is considered to affect learner's access to education either positively or negatively. Positive effects of socio-cultural context are considered to increase access to education for most vulnerable children.

viii) Quality and quantity of trainers

Quality means standard of trainers as measured against their academic qualification and self-esteem and the degree of excellence in teaching. Quantity refers to available number or amount of teachers in a particular school. Quantity of teachers is measured in terms of ratio existing between teachers and students in a particular unit of measure (Alpaslan, 2007). In other words the number and quality of teachers available may also affect learner's access to education.

ix) Marketing strategies

Marketing strategy means a plan for getting people and making them to be customers of goods and service provided by a particular business. It is also defined as a wider picture of what an organisation will perform in markets (Kotler, 2000). In the conceptual framework, marketing strategies are considered catalyst informing people about most vulnerable children and need for providing them with quality education.

x) Achievements

Achievement means accomplishment particularly by better ability, unique efforts and enormous courage. Achievements especially in the primary educational context is a measure of excellence normally determined by level of distinctions in passing final examination and upgrade to further studies (Omar, 2011). Thus, the outcome of policies and efforts geared towards providing education for most vulnerable children will only be seen through what is achieved.

xi) Constraints

In the context of education, constraints refer to setbacks, challenges or limitations which hinder someone from getting education. They include issues such as insufficiency of teachers, classes, and school, distance to school and poor cultures (Masao, 2011). Thus, the extent to which the constraints that affect provision and access to education by most vulnerable children may tell whether or not access is reached.

xii) Availability

It refers to awareness, physical presence of schools, teachers and infrastructures means out key input for most education delivery to most vulnerable children. It implies presence of buildings, enough qualified trainers, books, library facilities, clean environment and safe water (Rajani & Omondi, 2003).

xiii) Affordability

Affordability means financial capacity to pay the required bills in the schools. Therefore affordability of school fees refers to the degree in which low and medium income families can pay for the available school fees in the society (Ayres, 2001). Thus, in this study affordability of education by the most vulnerable children was measure in terms of their ability to pay for school contributions.

xiv) Acceptability

Acceptability of learners refers to the degree of learner's integration (Most vulnerable and non vulnerable children) in schools. It calls upon most vulnerable children's tolerability by the education systems and their fellow non vulnerable children. Learner – trainer relations means the degree of closeness among the two as measure by trainer and student ratio (Rezig, 2014). In other words in this study acceptability was measured in terms of relationship between teachers and most vulnerable children and how they have been integrated in schools.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Introduction**

This chapter provides explanations on the research methodology used in the study. It specifically presents the research design, study area, study population and data collection methods. Moreover, it gives types of data to be collected, sample size and sampling techniques, data collection methods and analysis, reliability and validity and ethical issues.

#### **3.2 Research Design**

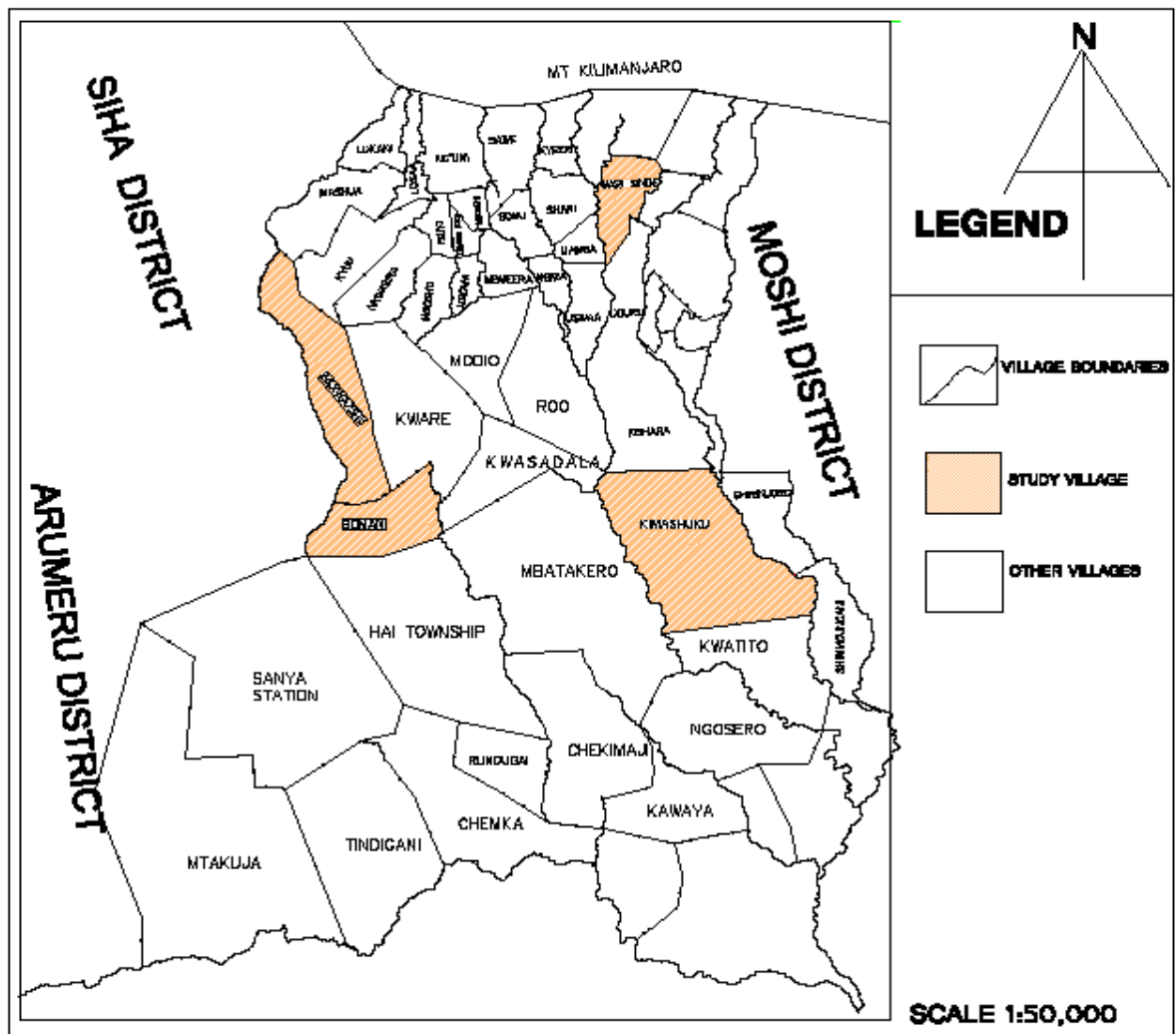
Research design is a plan to show how the study is going to be done (Msabila &Nalaila, 2013). It is a schedule through which an examiner arranges his or her job from initial stages of data collection to data analysis stage (Kothari, 1990). Research design is also described as a blue print of data collection, data measurement and analysis of data (Kothari, 2004). This study adopted a case study design to examine the implication of education policy on promoting access to education for most vulnerable children in child care centres. Case study design refers to a thorough investigation of particular unit of interest under consideration (Kothari, 2004). It is a comprehensive study of a particular situation (Shuttleworth, 2008). The study is more qualitative with some quantitative techniques in data analysis. This method was purposively chosen in order to get detailed information and actual image of education policy on improving access to education for most vulnerable children in child care centres. The design was also selected due to the nature of the topic that was undertaken since it involved most vulnerable children who needed flexibility in the aspect of data collection method.

#### **3.3 Study Area**

This study was conducted in Hai District, in Kilimanjaro Region. Administratively Hai District is divided into three divisions Lyamungo, Machame and Masama. It has 17

Wards, 62 villages, 17 urban streets and 277 hamlets (Executive Director’s Office, 2016). According to National bureau of statistics data (URT, 2015) the districts has a total population of 210,533 people (102,457 Male, and 108,076 Female).The study was conducted in this district because it had high number of Most Vulnerable Children placed in centres and to my knowledge no study that has been conducted in the area on access to education for the most Vulnerable Children (DSWO, 2017). Figure 3.1 presents Map of Hai district showing the study area.

**Figure 3.1 Map of Hai District to Show Study Area**



Source: Hai District Profile, 2017

### **3.4 Study Population**

Study population is a group of persons taken from a wide range of population who share some common characteristics (Futterman, 2012). The study population in this study was all community members of Hai district. Specifically, the study populations were the most vulnerable children in care centres who were core in analysing their access to education, district management officials who were employed in the study due to their administrative role of ensuring access to education for children. Other respondents in the study population were children care centre's management who were engaged in the study due to their role in administering alternative care for most vulnerable children, wards management officers who are overseers of villages development, non vulnerable children who were employed in the study as control variables and village leaders who were daily living with most vulnerable children in village centres.

### **3.5 Sample Size and Sampling Techniques**

#### **3.5.1 Sample Size**

The term sample size refers to selection of number of study units from a study population defined (Phrasisombath, 2009). The study employed a sample size of 137 respondents from district level to village level. At district level the study included the District chairperson, District Executive Director, District Education Officer, District Community Development Officer and District Social Welfare Officer. At ward level the study involved Councilor, Ward Executive Officer, Ward Education Officer and Ward Community Development Officer. At village level the study included Village Chairman, Village Executive Officer, Head Teachers, Village council development committee members, Community member pioneers, children care centre staffs, Most Vulnerable Children and non most vulnerable children. Table 3.1 presents a summary of sample size of the study.

**Table 3.1 Sample Size Summary**

<b>Level</b>	<b>Respondents</b>	<b>Number</b>
District	District Council Chairperson	1
	District Executive Director	1
	District Education officer	1
	District Social Welfare	1
	District Community Development Officer	1
Ward	Councilor	4
	Ward Executive Officer	4
	Ward Education Officer	4
	Ward Community Development Officer	4
Village	Village Chairman	4
	Village Executive Officer	4
	Head teachers	4
	Village Council Development Committee members	8
	Community member pioneers	8
	Children Care centre staffs	8
	Most Vulnerable children	40
	Non most vulnerable children	40
<b>Grand Total</b>		<b>137</b>

**Source:** Researcher's own construct, 2017

### **3.5.2 Sampling Techniques**

This study adopted two sampling techniques in drawing its study subjects. They included purposive sampling and simple random sampling. Purposive sampling is a non probability technique in which the researcher chooses a certain group of people to be involved in the study because they have certain element that are researcher's interest (Futterman, 2012). The purposive sampling technique was used in selecting the District chairperson, District Excecutive Director, District Education Officer, District Community Development Officer, District Social Welfare Officer, Councilor, Ward Education Officers, Ward Executive Officers, Ward Community Development Officers, Village Chairpersons and Village Executive Officers. These respondents were purposively chosen to be engaged in the study because they are responsible for managing implementation of education policy and maintaining children welfare including access to formal education at district level. Table 3.2 shows a summary of sample units that were selected purposively.

Simple random sampling is explained as a specific principle which is used to choose respondents among study population whereby each member has equal chance of being selected (Easton, 2008). Simple random sampling was used to select the village council development committee members, Community member pioneers, Children Care centre staffs, Most Vulnerable children, None vulnerable children. Table 3.2 provides a summary of sample units that were selected using simple random sampling.

**Table 3.2 Sampling Techniques Summary**

SN	Sampling Technique	Respondents	Number
1	Purposive Sampling	District Council Chairperson	1
		District Executive Director	1
		District Education officer	1
		District Social Welfare	1
		District community Development Officer	1
		Councilor	4
		Ward Executive Officer	4
		Ward Education Officer	4
		Ward Community Development Officer	4
		Village Chairperson	4
		Village executive Officer	4
		Head teachers	4
2	Simple Random Sampling	village council development committee members	8
		Community member pioneers	8
		Children Care centre staffs	8
		Most Vulnerable children	40
		None most vulnerable children	40
	<b>Total</b>		<b>137</b>

**Source:** Researcher's own construct, 2017

### 3.6 Types of Data

The study employed both primary and secondary sources of data. Gupta, (2010) defines primary data as data which are gathered for the first time by the researcher, given in original and raw material form while secondary data are data that exist as they are

already collected and analysed by others. In this study primary data on implication of education and training policy on supporting access to education were collected from respondents. On the other side secondary data about the study were collected from books, article journals, research reports, magazines and different reports on education policy and access to education for most vulnerable children.

### **3.7 Methods of Data Collection**

Methods of data collection refer to means through which relevant study's data were gathered (Futterman, 2012). This study used questionnaires administration, interviews, focus group discussions and documentary review.

#### **3.7.1 Questionnaires Administration**

Questionnaire is a data collection instrument that consists of series of questions and other prompts for the aim of gathering information from study's respondents (Gupta, 2010). It is a set of questions for congregating information from respondents which can be administered by telephone, mail, face to face interview or electronically (Tailor, 1998). The researcher distributed questionnaires to respondents and gave them time to scrutinize and give relevant information required. Specifically questionnaires were administered to ward and village respondents as illustrated in Table 3.3.

**Table 3.3 Questionnaire Distribution Summary**

<b>Technique</b>	<b>Respondents</b>	<b>Number</b>
Questionnaire	Councilors	4
	Ward Executive Officers	4
	Ward Education Officers	4
	Ward Community Development Officers	4
	Village Chairpersons	4
	Village Executive Officers	4
	Head teachers	4
	Village Council Development Committee members	8
	Community member pioneers	8
	Children Care centre staffs	8

**Source:** Researcher's own construct, 2017

### **3.7.2 Interviews**

Interview is a dialogue for information gathering (Gabrium & Holstein, 2001). It is the verbal discussion among two people with the objective of gathering important information for the purpose of research (Gupta, 2010). Face to face interviews were conducted. Specifically, the researcher interviewed district management officers (key informants) as indicated in Table 3.4. These leaders are mostly occupied by official responsibilities and therefore this became a justification for using interview rather than any other method of data collection to them.

**Table 3.4 Interviews Summary**

<b>Technique</b>	<b>Respondents</b>	<b>Number</b>
Interviews	District Council Chairperson	1
	District Executive Director	1
	District Education officer	1
	District Social Welfare	1
	District community Development Officer	1

**Source:** Researcher's own construct, 2017

### **3.7.3 Focus Group Discussions**

Focus group discussion is a carefully arranged discussion geared to obtain people's insights on a defined area of interest in a lenient and non threatening environment (Krueger, 1988).The researcher prepared a group discussion with most vulnerable children and non vulnerable children in order to gather their experiences on access to education. The discussions involved groups of six to ten children. Girls had their own discussion separately to that of boys due to different gender needs. The distribution of focus group discussions are as shown in table 3.5 below.

**Table 3.5 Focus Group Discussions Summary**

<b>Technique</b>	<b>FGD Members</b>	<b>Number of FGDs</b>
Focus group discussion	Most Vulnerable children	4
	None most vulnerable children	4

**Source:** Research own construct, 2017

**Figure 3.4 Focus Group Discussions during Data Collection**



**Source:** Research Findings, 2018

#### **3.7.4 Documentary Review**

The study obtained some data which were already composed by others. According to Kothari (2004) it is important to use secondary information since they are proved valid and have gone through some statistical process. Specifically the study acquired its review as shown in Table 3.6.

**Table 3.6 Documentary Review Summary**

Type of Data	Review Sources
Community knowledge most vulnerable children in children care centres in Hai district	Village Development Reports Ward development report Children Care centres report
Ways through which primary education is provided to Most Vulnerable Children in Children Care Centres in Hai District.	District Strategic Plan. Annual education reports School annual reports Children Centre annual reports Non Governmental reports
How education and training policy has improved access to primary education for Most Vulnerable Children in Children Care Centres in the district	School annual reports Education and training Policy Studies reports
Factors that affect access to education for Most Vulnerable Children in Children Care Centres In the district	School annual reports Studies report Gender desk reports Child protection report

**Source:** Researcher’s own construct, 2017

### 3.8 Data Analysis Methods

Analysis of data involved coding, summarising, recording and interpreting data. Microsoft excel was used for quantification and analysis of quantitative data. On the other hand qualitative data obtained from the interview were interpreted, summarised, categorised and analysed using narrative method and logical reasoning.

### **3.9 Ethical Considerations**

In the course of conducting this research, it was important to observe ethical matters .In this regard the researcher abided to the following ethical matters: The researcher requested a letter from Mzumbe University describing the rationale of the study before vacating to study area. This letter was used to request for permission to undertake the study in Hai district Council and other administrative units reached during data collection. The purpose of the study was elaborated clearly to respondents and confidentiality of data to be given was also guaranteed before data collection. Confidentiality of children involved in focus group discussion was involved where their faces have been covered in pictures used in the report as per legal requirements.

### **3.10 Validity and Reliability**

Validity is defined as the extent to which a concept is accurate in the study while reliability is defined as a consistency of a measure (Twycross and Heale, 2017).This study employed triangulation methods of data collection for the purpose of validating and improving reliability of findings. These were addressed through use of various tools of data collection such as questionnaires, interviews, focused group discussions and documentary review.

## **CHAPTER FOUR**

### **PRESENTATION AND DISCUSSION OF THE FINDINGS**

#### **4.1 Introduction**

This chapter presents findings of the study. The presentation begins with demographic information of respondents. Then, it examines community knowledge about most vulnerable children in children care centres, how education is provided to most vulnerable children in the children care centres, how education and training policy of 2014 has improved access to primary education for most vulnerable children and factors affecting access to education for most vulnerable children in children care centres.

#### **4.2 Socio-Demographic Characteristics of Respondents**

To understand the respondents, the study studied socio-demographic characteristics of respondents namely, sex, marital status, age, level of education, occupation status and income.

##### **4.2.1 Sex of Respondents**

A total of 137 respondents were involved in the study whereby 52.6% were males while 47.4% were females. Out of the male respondents 13.4% were drawn from Mungushi village, 13.1% from Kimashuku Village, 13.9% from Bomani Village, 10.2% from Warisinde Village and 1.5% from the district headquarters. Table 4.2 also shows that out of 65 female respondents 10.2% were drawn from Mungushi Village 10.9% from Kimashuku Village, 10.2% from Bomani village, 13.9% from Warisinde village and 2.2% were drawn from district headquarters. Sex of the respondents was studied to capture gender considerations in providing education to the most vulnerable children living in the children care centres. Table 4.1 presents a summary distribution of respondents by sex.

**Table 4.1 Distribution of Respondents by Sex (n = 137)**

SN	Sex	Community Leaders by Villages								District Head Quarter		Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde				N	%
		N	%	N	%	N	%	N	%	N	%		
1	Male	19	13.9	18	13.1	19	13.9	14	10.2	2	1.5	72	52.6
2	Female	14	10.2	15	10.9	14	10.2	19	13.9	3	2.2	65	47.4
<b>Total</b>		<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>5</b>	<b>3.6</b>	<b>137</b>	<b>100.0</b>

**Source:** Field data, 2018

#### 4.2.2. Age of Respondents

Age of respondents was taken into consideration in order to assess responses on implications of education and training policy on promoting access to education among most vulnerable children in children care centres by age categories. Respondents were grouped into age categories of 10 to 17 years, 18 to 25 years, 26 to 35 years, 36 to 45 years, 46 to 65 years and those aged 66 and above years. Findings indicate that 58.4% of respondents had age ranging from 10 to 17 years, 13.9% were 46 to 65 years old, 10.2 % were aged 36 to 45 years, while 9.5% were 26 to 35 years. Moreover, findings show that 5.8% were 18 to 25 years while 2.2% of the respondents were 66 years and above. Table 4.2 presents the age of respondents.

**Table 4.2: Distribution of Respondents by Age (n = 137)**

SN	Age Group	Villages								District Head Quarter		Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde				N	%
		N	%	N	%	N	%	N	%	N	%		
1	10–17	20	14.6	20	14.6	20	14.6	20	14.6	0	0.0	80	58.4
2	18–25	1	0.7	4	2.9	0	0.0	3	2.2	0	0.0	8	5.8
3	26–35	3	2.2	2	1.5	4	2.9	3	2.2	1	0.7	13	9.5
4	36–45	2	1.5	4	2.9	2	1.5	4	2.9	2	1.5	14	10.2
5	46–65	5	3.6	3	2.2	6	4.4	3	2.2	2	1.5	19	13.9
6	66 <sup>+</sup>	2	1.5	0	0.0	1	0.7	0	0.0	0	0.0	3	2.2
<b>Total</b>		<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>5</b>	<b>3.6</b>	<b>137</b>	<b>100.0</b>

**Source:** Field data, 2018

### 4.2.3. Marital Status

The study sought information regarding marital status of respondents in order to solicit their views by each individual category. Findings reveal that 66.4% of the respondents were single, 32.1% of the respondents were married, 0.7% of respondents were separated and 0.7% of respondents were widow/widowed while none of the respondents had a divorced status. The majority respondents 66.4% were single. Table 4.3 presents a summary of respondent's marital status.

**Table 4.3 Distribution of Respondents by Marital Status (n = 137)**

SN	Marital Status	Villages								District Head Quarter		Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%	N	%
		N	%	N	%	N	%	N	%				
1	Single	22	16.1	21	15.3	27	19.7	21	15.3	0	0.0	91	66.4
2	Married	11	8.0	11	8.0	6	4.4	11	8.0	5	3.6	44	32.1
3	Separated	0	0.0	0	0.0	0	0.0	1	0.7	0	0.0	1	0.7
4	Divorced	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5	Widow/Widower	0	0.0	1	0.7	0	0.0	0	0.0	0	0.0	1	0.7
<b>Total</b>		<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>5</b>	<b>3.6</b>	<b>137</b>	<b>100.0</b>

**Source:** Field data, 2018

### 4.2.4. Level of Education

Education level determines individual's knowledge, skills, perception and attitudes towards a particular phenomenon (UNESCO, 1990). Education level of respondents was studied to determine their answers in relation to their level of education. The assumption was that the more people are educated, the more they understand phenomenon. Findings show that no respondents had no formal education, 62.8% had primary education, 6.6% had secondary education, 21.9% had tertiary education (Certificate/Diploma), and 8.8% had university degree. Table 4.4 presents respondent's level of education.

**Table 4.4 Education Level of Respondents (n = 137)**

SN	Education Level	Villages								District Head Quarter		Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde				N	%
		N	%	N	%	N	%	N	%	N	%	N	%
1	Non formal	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2	Primary	22	16.1	23	16.8	21	15.3	20	14.6	0	0.0	86	62.8
3	Secondary	4	2.9	2	1.5	2	1.5	1	0.7	0	0.0	9	6.6
4	Tertiary	6	4.4	5	3.6	4	2.9	10	7.3	5	3.6	30	21.9
5	University	1	0.7	3	2.2	6	4.4	2	1.5	0	0.0	12	8.8
<b>Total</b>		<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>5</b>	<b>3.6</b>	<b>137</b>	<b>100.0</b>

Source: Field data, 2018

#### 4.2.5. Occupational Status of Respondents

The study sought information concerning the occupation of respondents in order to assess their perceptions on education policy implication for access to education among most vulnerable children. Findings indicate that 5.8% of the respondents were farmers, 9.5% were entrepreneurs, and 21.9% were civil servants, while 62.8% were doing other business including children in schools. These were considered to possess useful information as policy implementers at district level. Table 4.5 presents occupation status of respondents.

**Table 4.5 Occupation Status of Respondents (n = 137)**

SN	Occupation	Villages								District Head Quarter		Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde				N	%
		N	%	N	%	N	%	N	%	N	%	N	%
1	Farmer	1	0.7	3	2.2	0	0.0	4	2.9	0	0.0	8	5.8
2	Entrepreneur	4	2.9	5	3.6	1	0.7	3	2.2	0	0.0	13	9.5
3	Civil servant	5	3.6	4	2.9	11	8.0	5	3.6	5	3.6	30	21.9
4	Other Occupations	23	16.8	21	15.3	21	15.3	21	15.3	0	0.0	86	62.8
<b>Total</b>		<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>5</b>	<b>3.6</b>	<b>137</b>	<b>100.0</b>

Source: Field data, 2018

#### 4.2.6. Monthly Income of Respondents

Individual with different income have different views and perceptions over a certain issue. Respondents' income per month was studied in order to inform the researcher on respondents' views in relation to their monthly earnings. This is derived from the fact that the vulnerability of children is mainly caused by parents' low income hence failure to cater for children basic needs. Findings indicate that 58.4% had income ranging from Tsh 0 to 49,000Tsh, 2.9% had income ranging between Tsh 50,000 and Tsh 100,000 per month and 0.0% had income between Tsh 101,000 to Tsh 150,000 while 2.9% of respondents had income between Tsh 151,000 and Tsh 200,000. Moreover, 5.8% of respondents had income between 201,000 to 250,000 monthly while 29.9% were those with income of 250,000 and above per month. Table 4.6 presents respondents' income per month.

**Table 4.6 Monthly Income of Respondents (n = 137)**

SN	Income Range (Tsh)	Villages								District Head Quarter		Total	
		Mungushi		Kimashuku		Bomani		Wari Sindi		N	%	N	%
		N	%	N	%	N	%	N	%				
1	0 - 49,000	20	14.6	20	14.6	20	14.6	20	14.6	0	0.0	80	58.4
1	50,000 - 100,000	0	0.0	0	0.0	2	1.5	2	1.5	0	0.0	4	2.9
2	101,000 - 150,000	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
3	151,000 - 200,000	1	0.7	3	2.2	0	0.0	0	0.0	0	0.0	4	2.9
4	201,000 - 250,000	4	2.9	1	0.7	0	0.0	3	2.2	0	0.0	8	5.8
5	251,000 <sup>+</sup>	8	5.8	9	6.6	11	8.0	8	5.8	5	3.6	41	29.9
<b>Total</b>		<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>33</b>	<b>24.1</b>	<b>5</b>	<b>3.6</b>	<b>137</b>	<b>100.0</b>

**Source:** Field data, 2018

#### **4.2.7 Section Summary**

The demographic characteristics of respondents provided researcher with the following socio demographic general data. The study involved 72(52.6%) male and 65(47.4%) female respondents. These were respondents aged from 10 to 66 and above years. Other respondent's characteristics included marital status in whereby 91(66.4%) were single and 86(62.8%) had primary education engaging with other occupations out of being famers, entrepreneurs and civil servants. Moreover, 80(58.4) had income ranging from Tsh 0 to Tsh 49,000 per month. The rest of the presentation and discussion is in accordance with the objectives.

#### **4.3 Community's Knowledge on Most Vulnerable Children and Children Care Centres in Hai District**

The first objective was to assess community knowledge about most vulnerable children living in children care centres in the district. The assessment covers community awareness of most vulnerable children and their features or characteristics, child care centres and existence of most vulnerable children in the community.

##### **4.3.1 Community Awareness about Most Vulnerable Children**

To understand the community awareness about most vulnerable children, the respondents were asked to state if they had ever heard about most vulnerable children in their areas. This question was directed to community leaders, key informants and non vulnerable children. Findings from community leader respondents indicate that the majority of respondents 86.5% had information about existence of most vulnerable children in their areas while 13.5% of them were not aware. Table 4.7 presents a summary of responses from study sites.

**Table 4.7 Community Awareness about Most Vulnerable Children (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Yes	11	21.2	9	17.3	13	25.0	12	23.1	45	86.5
2	No	2	3.8	4	7.7	0	0.0	1	1.9	7	13.5
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

Findings from the study also revealed that 77.5% of FGD including non vulnerable children respondents were aware of most vulnerable children while 22.5% were not aware. One boy had this to contribute during discussion *“I have heard and we know them. They live around us and we play football together in the evening”...* (FGD/NMVCB/02). Moreover, findings obtained from key informants indicated that all 5 (100%) were aware about vulnerable children. During conversation one key informant said *“I have heard most vulnerable children several times. They are part and parcel of my daily work routine”...* (KI, 03/05) This suggests that the community in the study area was aware of the existence of most vulnerable children in their areas. Community awareness spread was reported to be activated by some district council interventions in the study area. These included availability of community Radio (Boma Hai FM), Child protection project, Child protection committees at district, ward and village levels.

#### **4.3.2 Characteristics of Most Vulnerable Children**

When asked to identify the characteristics of most vulnerable children, the respondents motioned lack of education, orphanage, lack of basic needs, psychological problems, living in child care centres, abandoned, prone to child abuse, lack moral support and love, hardly get two meals per day, truants, faced with financial problems and have unknown family members as their governing features. Some of features reported by community leaders were also raised by key informants and none most vulnerable children as described below:-

It was mentioned that the most vulnerable children have no education sustainability plans. The majority of the most vulnerable children were reported to lack education sustainability because they do not have committed parents to take them to school. This was pointed out by 59.6% of respondents that they depend on donations which seemed to have less sustainability as compared to parental education plans. Relative to this argument one key informant commented that“...*Imagine, who will pay for their education needs like uniforms and food if the centres are closed up?*”... (KI, 04/05).

Ophanage was mentioned as another factor. It was reported by 94.2% of respondents that majority of children who are categorised in the most vulnerable group have lost one parent or both parents. These incorporate the children who were misallocated in infant stages and therefore their family background is totally anonymous.

Likewise, most vulnerable children have acute lack of basic needs. It was mentioned by 61.5% of respondents that the majority of children especially those who are in poor rural family settings lack educational basic needs. However, most vulnerable children were perceived as those who have more pressing needs in terms of education material needs, food, cloth, shelter and social protection. It was also added that rich and middle income families in urban and semi urban settings have most vulnerable children cases as well.

Also, most vulnerable children are said to be psychologically tortured. It was reported by 86.5% of respondents reported that MVC were psychologically tortured. This is mainly due to various life depression backgrounds they went through. They include but not limited to lack of parents, isolation from own community, mistreatments and general lack of happiness in life. One key informant said ...“*most vulnerable children isolate themselves. Mostly would like to stay alone in the classroom or outside classroom*”... (KI, 02/05).

Moreover, it was mentioned that most vulnerable children are placed in children centres. It was reported by 84.6% of respondents that mostly a most vulnerable child is the one who has been placed in children care centre. It was specified that most vulnerable children who have family care option are not required to stay in children care centre. In supporting this assertion one key informant responded that *“Child being placed in children care centre implies that other family setting care has failed (KI, 01/05)*. This was confirmed by another key informant who argued that *“according to The Child Act no.11 of 2009 the Social Welfare Department has mandate to take a child to children care centres when fostering and family care options are not available to such child”*. (KI, 03/05).

It was reported by 71.2% of the respondents that existence of most vulnerable implies that someone escaped from his or her parental responsibility intentionally or unintentionally. The abandonment factors which were reported from the study sites included death of parents, Chaga cultures (example where both parents are traders), modernisation (nuclear families) and excessive alcoholism. Abandonment excludes children from lack of their right to parental love and cares

Additionally, most of the most vulnerable children lack community moral and parental love from home settings. In describing most vulnerable child it was reported by 88.5% of respondents that the majority of the most vulnerable children have once experienced emotional violence, physical violence, psychological violence, sexual violence and any other type of violence in their life history. It was argued that any child vulnerability is the result of a certain abuse. According to one key informant ... *“a child who is placed in a children care centre because of death of parents obviously experience emotional abuse because of lack of parental love and care”*... (KI, 05/05). Another key informant asserted that... *“Some of MVC have been rejected by their parents due to poverty; others have been raped, employed in hazardous works and others have experienced severe beating etc”*... (KI, 03/52).

Most of vulnerable children lack community moral and parental love from home settings. It was stated by 69.2% of the respondents that this is mainly due to staying in

children care centres from infant stages. It has been noted from respondents that although children care centres are trying to forge formation of relevant domestic setting through placing children in separate house with one or two guardians but still it has not been possible to form the traditional home settings in children care centres.

Additionally, most vulnerable children hardly get two meals per day. It was reported by 75.0% of respondents that meals for most vulnerable children were not guaranteed. This was reported to be caused by poor parental support to them and therefore they needed immediate support from community to earn their living. It was added that although the community has many vulnerable children, there are others who are most vulnerable to the extent that they are not sure of daily meals; an important need for human survival. One child confirmed this argument when she said that *“The largest part of most vulnerable children does not have parents to ensure daily meals. They depend on begging or working in small scale jobs to get their meals”* (FGD/MVCG/01).

It was also pointed out that most vulnerable children lack of support from their families. 84.6% of respondents stated that most vulnerable children are the ones who have insufficient support from their biological parents. These include moral, education, shelter and protection supports from families. Some of them stay with their grandparents who sometimes fail to provide them with basic needs due to ageing challenge. Therefore, most vulnerable children that has feature of having deprived and dirty school uniforms due to insufficient support from parents.

Some study participants pointed out that the majority of most vulnerable children are truants. It was stated by 65.4% of the respondents that most vulnerable children have frequent absenteeism from school. However, on the other hand it was acknowledged that most vulnerable children’s attendances have increased in recent years due to declaration of free education. This was appreciated by non vulnerable children during focus group discussion when they argued that in previous years those who never paid school fees and other contributions were sent way from classes and went back home until they got the required school contributions.

Likewise, the most vulnerable children have significant financial challenges to meet education needs. It was reported by 84.6% of the respondents that the majority of the most vulnerable children could not afford to pay for school materials and other needs. This includes text books, uniforms, and necessary contributions. Children care centres and various charities act as their immediate guardians in supporting most vulnerable children’s education matters. However, experience gained from study sites indicated that donations were not well guaranteed to create sustainable funding scheme for most vulnerable children from children care centres.

Further, the most vulnerable children have unknown family members. It was stated by 76.9% of the respondents that the majority of most vulnerable children especially those who are placed in care centres had unknown family members. It was added that some of them were thrown away at their infant stages by their biological mothers and therefore they didn’t know them

*...for example x child (name of child hidden for confidentiality purpose) was found in the bush crying during public cleanness day....I remember it was on the first day that president declared the Saturday of end of month to be a public cleaning day. In the case like this a child cannot get the right to know her biological father... (KI, 03/05)*

**Table 4.8 Features of Most Vulnerable Children (n = 45)**

SN	Feature	Frequency	Percentage
1	Lack of education sustainability plan	27	59.6
2	Orphanage	42	94.2
3	Acute lack of basic needs	28	61.5
4	Psychologically tortured	39	86.5
5	Placed in children care centres	38	84.6
6	Once abandoned by someone	32	71.2
7	Faced with one or more form of child abuse	40	88.5
8	Lacks community morals and love from home settings	31	69.2
9	Do not get two meals per day	34	75.0
10	They lack support from their families	38	84.6
11	Majority are truants	29	65.4
12	Have significant financial challenges	38	84.6
13	Have unknown family members	35	76.9

**Source:** Field data, 2018

### 4.3.3 Awareness on Availability of Most Vulnerable Children in their Areas

The study examined if most vulnerable children existed in the respondent's areas (villages and wards). The study findings indicate that 96.2% of community leaders acknowledged the presence of most vulnerable children in their areas. However, 3.8% of community leaders were not aware of the existence of most vulnerable children in their areas. This implies that the community has high understanding of availability of most vulnerable children in the district. Table 4.9 presents a summary of awareness on availability of most vulnerable children.

**Table 4.9 Community Awareness of Most Vulnerable Children (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sindi		N	%
		N	%	N	%	N	%	N	%		
1	Yes	13	25.0	12	23.1	12	23.1	13	25.0	50	96.2
2	No	0	0.0	1	1.9	1	1.9	0	0.0	2	3.8
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

### 4.3.4 Community Awareness of Availability of Children Care Centres

The study assessed the respondents' awareness on the availability of children care centres. Findings obtained indicate that the majority of respondents 90.4% in village and ward areas acknowledge existence of children care centres while about 9.6% were not aware on the existence of children care centres in their localities. Table 4.10 presents a summary of responses.

**Table 4.10 Awareness of Availability of Children Care Centres (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sindi		N	%
		N	%	N	%	N	%	N	%		
1	Yes	13	25.0	12	23.1	12	23.1	10	19.2	47.0	90.4
2	No	0	0.0	1	1.9	1	1.9	3	5.8	5.0	9.6
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52.0</b>	<b>100.0</b>

**Source:** Field data, 2018

### 4.3.5 Community Awareness about Children Care Centres in their Village

The respondents were asked to list children care centres that are available in their areas. Findings indicated that respondents who acknowledged existence of children care centres were able to mention them by their official names and locations. The findings in this part are presented in Table 4.11

**Table 4.11 Available Children Care Centres in the Study Area**

SN	Centre Name	Ward	Village
1	Neema Orphanage	Machame Kaskazini	Wari Sinde
2	Rafiki Foundation	Mnadani	Kimashuku
3	Kao La Amani	Bomang'ombe	Bomani
4	Light In Africa	Masama Kusini	Mungushi

**Source:** Field data, 2018

To sum up, the findings indicate that most of community leaders 86.5% were aware of most vulnerable children and were able to state how most vulnerable children can be distinguished from other non vulnerable children through thirteen (13) features. Moreover, about 96.2% of respondents acknowledged availability of MVC in their areas and 90.4% appreciates availability of children care centres and their appropriate locations (wards and village). High level of awareness in the community was reported to be activated by availability of friendly system and structures which campaigns various issues concerning most vulnerable children in the study area. These include district council radio (Boma Hai FM) found on 89.5FM. This is a free to air radio owned and managed by district council under support of UNICEF mainly for children related matters. Other supportive systems and structures include availability of community justice facilitators (CJF), most vulnerable children committees (MVCC), Child protection teams (CPT) and children forums (junior councils and TUSEME clubs). All these systems portray children messages to community through meetings and radio programs.

#### **4.4. Ways through which Education is Provided to Most Vulnerable Children**

The second objective was to explore ways through which primary education is provided to most vulnerable children. The study explored both non vulnerable children and most vulnerable children status in access to primary education, common ways of providing education to most vulnerable children and comparison of education privileges between most vulnerable children and non vulnerable children in the community.

##### **4.4.1 MVC and Non MVC Status in Access to Education**

The respondents were asked to give their experience as to whether most vulnerable children gets education as other children who are not in the most vulnerable children category. This question was asked to community leaders. Findings indicate that 57.7% of the respondents acknowledge that most vulnerable children get education as other non vulnerable children while 28.9% of the respondents reported that most vulnerable children do not get education as other non vulnerable children. On the other side 13.5% of the respondents were not aware whether most vulnerable children gets education as other non vulnerable children or not. Findings obtained from focused group discussions revealed that most vulnerable children are not isolated from education as other non most vulnerable children. In support of this, one of the focused group discussion member commented that

*Our fellow children from children care centres are not isolated from education; they just get education as other children. However, some of them fail to attend to school due to various hindrance including lack of parental support and lack of school uniforms (FGD/NMVCB/02)*

Moreover, it was reported that most vulnerable children's attendance to school has improved due to introduction of school feeding programme and waive of some chaotic school contributions including school fees, construction contribution and extra tuition contributions. One key informant supported this argument when he responded that

*Education is provided to most vulnerable children in the same manner like other non vulnerable children. Previously most vulnerable children used to be truants due to*

*failure in paying school fees and many school contributions. Now days those contributions have been waived by the government. Only food contribution exists in school though most vulnerable children who are proved to have no capacity to pay are waived from contribution by the school management committees (KI, 05/05)*

It was noted that school contributions excluded the most vulnerable children from getting education in the same manner before introduction of free education. This was triggered by their weak capacity to pay for the services. Table 4.12 presents summary of comparison findings between the two classes of children (MVC and non MVC) in access to primary education.

**Table 4.12 Awareness of Access to Education between MVC and Non MVC (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Yes	7	13.5	8	15.4	7	13.5	8	15.4	30	57.7
2	No	4	7.7	2	3.9	4	7.7	5	9.6	15	28.9
3	I don't know	2	3.9	3	5.8	2	3.9	0	0.0	7	13.5
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

#### **4.4.2 Provision of Education to Most Vulnerable Children**

To understand ways used to provide education to most vulnerable children in children care centres, the respondents were asked to mention the applicable ways through which education is provided to most vulnerable children in child care centres in their areas. Information was sought from community leaders, key informants and children (both MVC and non MVC). Findings show that there are five (5) ways of ensuring education access to most vulnerable children in the study area. These are as illustrated below.

### 1) Through setting extra curriculum training

The majority of respondents (84.6%) reported that education to most vulnerable children in the study area is provided through both curriculum and extra curriculum trainings. Extra curriculum training referred to additional guidance given to most vulnerable children in children care centres outside the realm of normal national primary school syllabus offered by ministry of education in Tanzania. Example of reported extracurricular in children care centres include social skills trainings, team building, discipline skills, housekeeping, sports, personal hygiene, reproductive health and religion matters while curriculum training meant all academic lessons that are taught in primary schools as per syllabus directed by ministry of education and vocation training to lead in delivering primary school education. To support this assertion, one respondent said that “*We give both formal and non formal education to most vulnerable children in care centres*”. (QN, 23/52) In supporting the above argument one key informant added that:

*Children care centres ensures that some family setting and care components that are found in the household including respect for elders, love for one another and table manners to mention but a few are moulded into the minds of children care centres to ensure that they cope with their society* (KI, 02/05).

Most vulnerable children acknowledged both curricular and extracurricular training delivered to them in the children centres. One focus group discussion participant confirmed the argument when she said “*Our teachers teach us in the classrooms and continue to guide us on several matters when we are outside the class in the centre*” (FGD/MVCG/02)

### 2) Through enrolment to nearby public primary schools

It was reported by 82.7% of the respondents that most vulnerable children are enrolled in nearby public primary schools. Public primary schools referred to those schools established and maintained by government. It was stated that when a most vulnerable child is enrolled in Children Care centre, the management of the centre would consult

the nearby primary school and enroll such child for studies. Enrolment and registration involves collaboration between social welfare officers, education officers and children care centres management. It was added that most vulnerable children are enrolled to nearby primary school due affordability and closeness to the centre reasons.

Furthermore, it was commented that few most vulnerable children are enrolled to nearby ward private schools. Private primary school referred to those primary schools established and maintained by individual people or non government entity. It was added that private primary schools were more expensive costs and mostly away from children care centres. Relevant to this argument, one respondent commented that “*Enrolment of a most vulnerable child to a private primary school depends on capacity of centres income and pupil personal donor*” (QN, 13/52). The argument was supported by another respondent who said that

*Some of our fellows were studying in private primary schools and they used to be taken by school bus in the morning and return in the evening. Over recent days they have been transferred to our nearby public primary school for unknown reasons (FGD/MVCB/01)*

It was noted that most of the children centres do not provide education services, instead they use nearby primary schools. It is only two children centre that have a school inside their centre. These are Kao la Amani (which accommodate some of most vulnerable children and others are absorbed in nearby public primary schools) and Rafiki Foundation that absorb all its pupils in its school.

**Figure 4.1 Children Care Centres with School Service inside the Centre**



**Source:** Field findings, 2018

3) Through engagement of internal and external donor support

Education to most vulnerable children is provided through involvement of internal and external donors in the district. This assertion was reported by 84.6% of the respondents. Internal donors referred to contributions made by people and organisations inside Tanzania while external donors referred to donations made by people and charity organisations from outside of Tanzania. The support involves both material and non material supports .The reported material support to MVC include school fees, uniforms, food, books and mattress while non material involved trainings especially on psycho social supports to CCC staffs, HIV/AIDS care and preventions. This was supported by key informant when she confirmed that *“Most vulnerable children challenges are communicated to religions, non Governmental organisations and government units in order to be supported with their education needs”*(KI, 02/05).

One most vulnerable child also authenticated this view when he reacted that: *...“Education is provided to us through sponsorships” ...* (FGD/MVCG/02)

Engagement of internal and external support enables diverse maintenances of the most vulnerable children who are placed in the centres including primary education without any problem. Some of the donors who support education are the church and mosque contributions, Village community Banks, Most vulnerable children committees, CRDB Bank, NMB Bank and Tanzania Social Action Fund supports (TASAF)

#### 4) Exclusion from mandatory school contributions

It was agreed by 82.7 % of the respondents that most vulnerable children who fail to pay the mandatory school contributions like meal contributions are exempted from payments. MVC exceptions come when a particular child is proved to have no any kind of support to enable her to pay such contribution. Mandatory contribution referred to donations which are not waived in primary schools whereby each pupil has to pay it as agreed by school board. Furthermore, MVC exceptions were only reported from government primary schools and never reported in private primary schools. To support this, one key informant said that

*...The public primary school committees discuss all most vulnerable children who cannot afford to pay for the agreed school contributions and notify the school to exempt them from payments, and then the same committee scrutinises alternative ways to fill the gap of the children who have been exempted from paying such contribution (KI, 05/05).*

#### 5) Continuation of ended classes from previous school

It was learned from 80.8% of the respondents that most vulnerable children who are taken to care centres have different education profile. It was reported that some were reported absconded in certain primary school classes, some has never attended school and others are taken in infant stages. Two respondents said

*Once a school aged children is taken to care centre, the education officers in collaboration with children centre's social welfare conducts mini research to identify the classes where such child ended in order to ensure continuation in the new school (KI, 01/05) "Those who are taken to care centres after completing standard seven are taken to secondary or technical colleges for further studies" (KI, 02/05).*

Findings indicate that government schools has resources for supporting most vulnerable children from centres who never attended school but in practice those children becoming fewer year by year.... *“We have teachers trained on MEMKWA but for couple of years those children are becoming fewer and in some years they don’t exist”... (KI, 05/05).* MEMKWA meant abbreviation for a special education program for those who never attended. Table 4.13 provides a summary of common ways of ensuring access to education among most vulnerable children.

**Table 4.13 Ways of Providing Education to Most Vulnerable Children (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Extra curriculum trainings	12	23.1	9	17.3	11	21.2	12	23.1	44	84.6
2	Enrolment to nearby public primary schools	8	15.4	11	21.2	13	25.0	11	21.2	43	82.7
3	Engagement of donor supports	13	25.0	12	23.1	10	19.2	9	17.3	44	84.6
4	Exclusion from mandatory contributions	10	19.2	9	17.3	11	21.2	13	25.0	43	82.7
5	Ensure continuation	12	23.1	11	21.2	10	19.2	9	17.3	42	80.8

**Source:** Field data, 2018

#### **4.4.3 Education Opportunities between MVC and Non MVC**

The study also investigated education privileges among most vulnerable children and non vulnerable children. Respondents were asked to compare education opportunities between MVC and non MVC with option answers of either (i) the same, (ii)Most vulnerable children have more opportunities than non vulnerable children , (iii)Non Vulnerable have more opportunities than most vulnerable children or (iv) Don’t know

Findings indicate 57.7% of the respondents said that non vulnerable children have more education opportunities than most vulnerable children 15.4% claimed most vulnerable children to have more education opportunities than non vulnerable. In the same line

23.1% reported both categories to have the same education opportunities while only 3.8% of the respondents reported not to know anything about education privileges pertaining to either group of children. This finding implies that non vulnerable children are vested with more education opportunities due to family based support which is termed to be a more sustainable support than most vulnerable children who mostly depends on donations that has no sustainable guarantee of cash inflows. Table 4.14 presents a summary of education privileges to MVC and non vulnerable children.

**Table 4.14 Education Privileges Vulnerable and Non vulnerable (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Are the same	3	5.8	2	3.8	4	7.7	3	5.8	12	23.1
2	Most vulnerable children have more opportunities than non vulnerable children	2	3.8	0	0	2	7.7	4	7.7	8	15.4
3	Non vulnerable children have more opportunities than most vulnerable children	7	13.5	11	21.2	7	7.7	5	7.7	30	57.7
4	Don't Know	1	1.9	0	0	0	0	1	1.9	2	3.8
	<b>Total</b>	<b>13</b>	<b>25</b>	<b>13</b>	<b>25</b>	<b>13</b>	<b>25</b>	<b>13</b>	<b>25</b>	<b>52</b>	<b>100</b>

**Source:** Field data, 2018

To sum up, findings obtained in part 4.3 of this study indicate that most vulnerable children are not isolated from available education services offered by the Government. Majority of respondents 57.7% said that most vulnerable children gets education like other non vulnerable children. Common ways of providing education to most vulnerable children in the study area were pointed out. They include extra curriculum which as reported by 84.6% of the respondents, enrolment to nearby primary schools reported by 82.7%, involvement of donors reported by 84.6%, exclusion from contributions reported by 82.7% and ensuring continuation from previous classes as reported by 80.8% of respondents. In terms of education privileges available among most vulnerable children

and no vulnerable children, it was reported by 57.7% of the respondents that non vulnerable children have more education opportunities.

#### **4.5 Impact of Education and Training Policy of 2014 to Most Vulnerable Children's Access to Formal Education**

The third objective was to examine how education and training policy has impacted access to primary education for most vulnerable children from care centres. The study examined policy achievements and failures in promoting access to education among most vulnerable children in care centres. Further, the study rated the status of most vulnerable children education before and after introduction of children care centres in the community.

##### **4.5.1 Achievements**

The study examined how education and training policy of 2014 has improved access to education for most vulnerable children from care centres. In this case all respondents were first asked if there were achievements noted in providing access to education for most vulnerable children living in children care centres. Findings revealed that 76.9% of the respondents acknowledge existence of /achievements in providing education to most vulnerable children living in care centres. About 7.7% of respondents said that there were no achievements and 15.4% said they are not aware whether there is noted success or not. Table 4.15 presents summary of responses on existence of success in providing education to most vulnerable children in the study area.

**Table 4.15 Responses on Existence of Success in Providing Education to Most Vulnerable Children (n = 52)**

SN	Responses	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari sinde		N	%
		N	%	N	%	N	%	N	%		
1	Yes	10	19.2	9	17.3	10	19.2	11	21.2	40	76.9
2	No	2	3.9	1	1.9	0	0.0	1	1.9	4	7.7
3	Don't Know	1	1.9	3	5.8	3	5.8	1	1.9	8	15.4
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

When asked to state any prominent policy achievements to support access to education among most vulnerable children in children care centres, respondents (Key informants, community leaders and pupils) mentioned fourteen (14) achievements as described below.

1) Acquisition of necessary life skills

It was mentioned by 77.5% of the respondents that there were improvements in the acquisition of life skills to most vulnerable children through education they got. The improvements include English language through interacting with English speaker volunteers from abroad, cleanness, health, and respect. It was reported that children from care centres were more fluent in English than non vulnerable children. Increase of life skills was triggered by close guardians mentoring on education for most vulnerable children in children care centre. One respondent commented during discussion that

*Providing education has enabled children from centres to socialize with other children from families and make friends, without attending to school we could have been isolated in our centres and loose friendship with our fellows outside the centres ( FGD/MVCB/02)*

## 2) Decrease of truants

About 72.5% of community leaders respondents reported decrease of truant cases. Truants referred to children who stay absent from school without any clarification or school leave. This was mainly caused by removal of many school contributions which existed before launching of recent education and training policy. This assertion was confirmed by one respondent when she said

*...before introduction of this free primary education policy there were a lot of contributions like food contributions, school fees, school security contributions, ,examination fees, school maintenance fees, monthly test fee for class 7 and class 4 pupils ,water bill contributions and farming projects contributions...Imagine the possibility available for poor pupil to pay all those costs ...Waiving those costs has led to more attendance of poor pupils ( KI, 05/05)*

## 3) Unsegregated environment for most vulnerable children

It was reported by 82.5% of the respondents that most vulnerable children from care centres were not segregated from the available education privileges. This is particularly in public primary schools where most of contributions have been waived out and school boards makes arrangements to supports the most vulnerable children who fail to pay for the remained contributions. One respondent had this to say during interview: *“Most vulnerable children from care centres enjoy the available education privileges. The policy forbids any education practitioner to segregate them by any means due to their vulnerability status”* (KI, 05/05)

## 4) Setting sustainable and integrated funding environment for education for most vulnerable children.

It was given by 75.0% of respondents reported improvement in funding for most vulnerable children in the district. In the same vein, one key informant reported nearly the same response that

*According to this free education policy now days no child is excluded from public primary education. However this excludes those who are in private primary schools*

*where once donor drops out in paying the school fees students becomes excluded from school services (KI, 03/05).*

Moreover, in practice it was reported that MVC themselves appreciate support given to them by various donors through their centre's management. In confirming this argument, one respondent said *"we thank our donors for giving us food, books, and uniforms"...* (FGD/MVCG/01).

#### 5) Identification and support to most vulnerable children with more special needs

It was reported by 80.0% of the respondents that children with special needs are given special support. They include children with disabilities such as albinos, handicapped and those with mental challenges. It was reported that whenever they are enrolled in the centre, efforts are taken to ensure that they get education regardless of their vulnerability challenges. These include taking them to special schools within the district or outside the district...*"our fellows with disability have been transferred to St.Francis"...* (FGD/MVCB/01).

#### 6) Increase of education facilities to most vulnerable children

It was mentioned by 85.0% of the respondents reported that some donors have gone beyond children care centres in the district by establishing registered schools inside the centres. Children care centres that encompass the component of having school in the centres were noted to have good school facilities. For example Rafiki Foundation and Kao la Amani were noted to have excellent school facilities such as text books, Libraries, pupil's chairs, tables, computers and means of transport for their most vulnerable children. One respondent confirmed this when she said *"We have enough text books and teachers in our centre"* (FGD/MVCG/01). These were noted applicable to all most vulnerable children who were in public primary schools only. The assertion was also supported by key informants. One respondent commented that. *"...Honestly speaking, private primary schools are better than public primary school"...* (KI, 04/05).

**Figure 4.2 Library Facility in one of Children Care Centre**



**Source:** Field findings, 2018

Figure 4.2 shows library facility available in one of the children care centre. This enables students to access relevant learning material easily in the centre.

#### 7) Increase of MVCs in secondary schools and technical training

It was reported by 87.5% of the respondents that there is existence of favorable policy environment and implementation for most vulnerable children in the district. Moreover, it was added that most vulnerable children from care centres attain good pass marks which enable them to be selected for secondary education in nearby secondary schools and technical educations. One community leader reported that.

*...most vulnerable children from our centres have passed well and are studying in the nearby secondary schools such as MUKWASA secondary school, Hai Day secondary and Boma Secondary School .For example all of our 18 students passed in grade A and B pass marks as per last year (2017) standard seven results”...This is advancement*

*because the other previous year (2016) only 11 children joined secondary schools.(QN,01/52)*

It was reported that Rafiki Foundation has advanced to establish secondary education in the care centre in which majority of most vulnerable children who graduate from primary schools in the centre are absorbed by this secondary school.

8) Increase of consciousness ability among most vulnerable children in the care centres

About 80.0% of the respondents commented that education provided to most vulnerable children has enabled them to be conscious on their vulnerability positions and therefore strive towards attaining education as a way to liberate themselves. Respondents acknowledged that self understanding among most vulnerable children would not have been possible if they were not gathered in the children care centres and get mobilized for school attendances and routine follow-ups for behavior changes. Every participant of focus group discussion agreed from argument raised by one girl from centre that *“Education has helped girls from centre to avoid early pregnancy. We have no cases of student pregnancy in our centre due to abstinence teachings we receive from our guardians and teachers”* (FGD/MVCB/01). Table 4.16 presents Summary of Policy Achievements to support access to primary education among most vulnerable children in children care centres

**Table 4.16 Education Policy Achievements to MVC's access to Education (n=40)**

SN	Achievements	Villages								Total	
		Mungushi		Kimashuku		Bomani		WariSinde		N	%
		N	%	N	%	N	%	N	%		
1	Life Skills acquisition	9	22.5	7	17.5	9	22.5	6	15.0	31	77.5
2	Decrease of truants Cases	8	20.0	9	22.5	5	12.5	7	17.5	29	72.5
3	Un segregated environment	6	15.0	8	20.0	9	22.5	10	25.0	33	82.5
4	Sustainable and integrated funding for MVC education	8	20.0	8	20.0	6	15	8	20.0	30	75.0
5	Identification and support to children with special needs	9	22.5	7	17.5	9	22.5	7	17.5	32	80.0
6	Increased education facilities	10	25.0	10	25.0	8	20	6	15.0	34	85.0
7	Increased number of MVCs in schools	10	25.0	6	15.0	8	20	11	27.5	35	87.5
8	Improvement of self identification ability	8	20.0	6	15.0	9	22.5	9	22.5	32	80.0

**Source:** Field data, 2018

#### **4.5.3 Failures of Education and Training Policy of 2014 to Support MVC Access to Education**

The study also sought perceptions of the 7.7% the respondents who said that there was no achievement. Four factors were mentioned as reasons for absence of achievement namely; most vulnerable children in children care centres are still psychologically tortured, Insufficient education privileges to most vulnerable children, Insufficient donations and supports, and Failure to integrate with their community after re unification as described below:-

##### 1) Insufficient education privileges among most vulnerable children

It was reported by 50.0 % of the respondents that education privileges are not well guaranteed especially to children care centres that have no school components within the centre. Not only that but also some children in the centres had more special needs such as visual impairments, deaf and disabilities which are not yet well addressed within the centres. *“Schools around have insufficient special teachers to support children who have special needs who in actual senses requires special classes and trainings to suit their*

*needs*” (QN, 18/52). This assertion was raised by pupil respondents when one of them said that “*Our fellows with disability have been transferred to St. Francis Primary School*”...(FGD/MVCB/01. St. Francis Primary school was reported as a school found in neighboring ward (Muungano ward). This is a private primary school established and managed by Roman Catholic Church mainly for children with disability.

2) Insufficient donations and supports to cater for most vulnerable children needs in care centre’s education needs.

This argument was confirmed by 75.0% of the respondents. In support of this argument one respondent said ‘*Most vulnerable have many education needs which to my own view it is unfair to say that there are achievements because over recent years donor supports to centres has sharply dropped to the extent that we were forced to transfer our children from private primary schools to free public primary schools* (QN, 13/52). Most vulnerable children gave reports which indicated drop of donations in their care centres. One most vulnerable child had this to say “*we used to be given new clothes at each December mainly for Christmas and New Year school uniforms... “to date no one of us has received a new cloth*”...(FGD/MVCG/02). Insufficient donor supports was noted to contribute to failures in ensuring access to education for most vulnerable children placed in the care centres.

3) Failure to integrate with their community after re unification

It was given by 75% of the respondent accounted that although education has been provided in the centres to create alternative household care for most vulnerable children ,still some children fail to live with their original community once are re unified. Re unification refers to the process of returning a most vulnerable child to family based care option from children care option. This reflected the fact that education and life styles provided in the children care centres does not reflect community morals and behaviors. Most of the re unified children were reported to lose affection, love and family ties from their own community where they originate. This was reported to be the gap that would

be filled by both primary school syllabus and non syllabus education provided to most vulnerable children in centres in primary schools. Table 4.17 presents a summary of responses on awareness of existence of policy failures in providing education to most vulnerable children in children care centres.

4) Lack of family setting environment

It was reported by 100% of the respondents that although efforts have been made by children care centre to forge alternative care and training to suit household care setting, still most vulnerable children cannot abide fully to directives given. It was commented that they always feel like abandoned /isolated from community and therefore psychologically tortured. One key informant added that

*...In spite of education they receive still some of those children are found to have unique bad behaviors as if nobody is caring for them. For example one child from centre caused fire that burned all maize aggregates that were to be used for school meal... (KI, 05/05).*

**Table 4.17 Responses on Existence Policy Failures in Providing Education to Most Vulnerable Children (n = 4)**

S N	Policy Failures	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	MVC in CCC are still psychologically tortured	2	50.0	0	0.0	1	25.0	1	25.0	4	100.0
2	Insufficient education privileges to MVC	0	0.0	1	25.0	1	25.0	0	0.0	2	50.0
3	Insufficient donations and supports	1	25.0	0	0.0	1	25.0	1	25.0	3	75.0
4	Failure to integrate with their community after re unification	0	0.0	2	50.0	1	25.0	0	0.0	3	75.0

**Source:** Field data, 2018

#### **4.5.4 Education Status of Most Vulnerable Children Before Introduction of Children Care Centres**

In order to understand education status of most vulnerable children, respondents were asked to rate the status of education to most vulnerable children before introduction of children care centres in their area. Findings indicate that 38.5% of respondents declared that the status of most vulnerable children was in worst situation before introduction of children care centres in their areas. On the other side 19.2% reported that they were in Poor, 15.4% reported good, 7.7% reported satisfactory, 9.6% reported excellent, 5.8% reported very good while 3.8% reported that they had worse status. These findings imply that the general status of education to most vulnerable children before introduction of children care centres in the district was in worst status.

Most vulnerable children gave their experiences which indicated that their situation was not good. For example, one MVC gave her own example when she said ... *“like in my case I was able to afford neither meals nor school materials because I lived with my grandmother who was not able to provide” ...I give my thanks to this centre because now I am in standard seven and I get all my needs here...* (FGD/MVCB/02). Table 4.18 presents a summary of education status of most vulnerable children before children care centres

**Table 4.18 Education Status of Most Vulnerable Children before Children Care Centres (n = 52)**

SN	Response	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Excellent	1	1.9	2	3.8	2	3.8	0	0.0	5	9.6
2	Very good	0	0.0	0	0.0	1	1.9	2	3.8	3	5.8
3	Good	0	0.0	2	3.8	2	3.8	4	7.7	8	15.4
4	Satisfactory	2	3.8	0	0.0	1	1.9	1	1.9	4	7.7
5	Poor	3	5.8	3	5.8	3	5.8	1	1.9	10	19.2
6	Worse	0	0.0	0	0.0	0	0.0	2	3.8	2	3.8
7	Worst	7	13.5	6	11.5	4	7.7	3	5.8	20	38.5
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

#### **4.5.5 Education Status of Most Vulnerable Children after Children Care Centres in the Study Area**

The study sought to investigate remarkable changes in education status to most vulnerable children brought by introduction of children care centres. In this case respondents were asked to rate the status of education to most vulnerable children after introduction of children care centres in their villages and wards areas. Findings indicate that 57.7% of respondents reported good status, 13.5% reported very good status, 11.5% reported excellent status, 7.7% reported satisfactory status, and 5.8% reported poor status. On the other side Worse status was reported by 3.8% and Worst status was reported by 0.0% of respondent. These findings imply that the education status of most vulnerable children after introduction of children care centres is good. The situation is mainly changed by the available services and structures to protect children in the district. From these findings it is open and clear that the community is satisfied with services provided by children care centres especially in supporting education for MVC in the

district. Table 4.19 presents a summary of education status of most vulnerable children after introduction of children care centres.

**Table 4.19 Education Status of Most Vulnerable Children after Introduction of Children Care Centres (n = 52)**

SN	Response	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sindi		N	%
		N	%	N	%	N	%	N	%		
1	Excellent	1	1.9	1	1.9	1	1.9	3	5.8	6	11.5
2	Very good	0	0.0	4	7.7	1	1.9	2	3.8	7	13.5
3	Good	10	19.2	6	11.5	6	11.5	8	15.4	30	57.7
4	Satisfactory	0	0.0	1	1.9	3	5.8	0	0.0	4	7.7
5	Poor	2	3.8	0	0.0	1	1.9	0	0.0	3	5.8
6	Worse	0	0.0	1	1.9	1	1.9	0	0.0	2	3.8
7	Worst	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

Conclusively, the findings obtained reveal that there has been success in providing education to most vulnerable children as confirmed by majority of respondents 76.9% of them with critical evidences based elaborations .In spite of the noted successes, there has been some policy failures where by most of respondents 100% who acknowledged existence of policy challenges reported that MVC are still psychologically tortured. The study findings have revealed that there has been a tremendous change in the education status of most vulnerable children’s education status from worst situation before introduction of children care centre as agreed by 38.5% of the respondents to a good situation after introduction of children care centres in the district as agreed by 57.7% of respondents.

#### 4.6 Factors that Influence Access to Education for Most Vulnerable Children in Children Care Centres

The fourth objective was to identify factors that influence access to education for most vulnerable children care centres. Both facilitating factors and inhibitive factors were identified.

##### 4.6.1 Facilitating Factors for Most Vulnerable Children’s Access to Education

The study sought to identify factors that influence access to education among most vulnerable children in children care centres. In order to the facilitating factors, the respondents were asked if there were factors that facilitate access to primary education for most vulnerable children in care centres available in their ward and village areas. Option answers were either Yes, No or I don’t know. Findings indicate that the majority 75.0% of respondents acknowledged existence of factors that influences access to primary education while 9.6% of all respondents declares that there are no factors that influences access to primary education for most vulnerable children. However, 15.4% of all respondents were not aware whether there are those factors or not. Table 4.20 present a summary of awareness of presence of factors facilitating access to primary education for most vulnerable children in children care centres in study area

**Table 4.20 Awareness of Presence of Factors Facilitating Access to Primary Education for Most Vulnerable Children in Children Care Centres (n = 52)**

SN	Response	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Yes	9	17.3	13	25.0	7	13.5	10	19.2	39	75.0
2	No	3	5.8	0	0.0	1	1.9	1	1.9	5	9.6
3	Don’t Know	1	1.9	0	0.0	5	9.6	2	3.9	8	15.4
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data, 2018

A total of thirty nine respondents 75.0% acknowledged the existence of factors that influences access to primary education for most vulnerable children in the children care centres as shown in Table 4.20. These respondents were then asked to mention those factors. Key informants and children (both MVC and Non MVC) were asked to give their experience where they gave nine (9) factors as described below.

#### 1) Distance between school and centres

The majority 87.2% of respondents stated that children centres that have school within the centre were more realistic in ensuring access to education for most vulnerable children than those which depend on available public and private schools that are found in distance areas and cost full. In supporting this argument, one key informant confirmed the same when he narrated that

*Children from care centres who study within their centre or to nearby schools do not waste their studies time but children from care centres who studies in distance away from their centres, spend most of time loitering in the street and arrive late to school in the morning and likewise late back to centres in the evening (KI, 02/05).*

Therefore it was agreed that the closer the education facility the higher most vulnerable children's access to education.

#### 2) Availability of donors to support education

It was confirmed by 84.6% of the respondents that availability of donations is among factors influencing access to education for Most Vulnerable Children in Care centres. They include availability of external supports and local supports from non-governmental, individual, charities, and Governmental entities supports to children in care centres. One key informant validated this argument when she reacted that “*Children centres that have good donor supports like Rafiki Foundation and Neema orphanage have high possibility of ensuring education to their children as compared to less donated centres like Kao la Amani*”(KI, 04/05).

In this case, the study noted that the weaker the donation schemes in the centre, the poor education access among most vulnerable children and vice versa. Therefore donation is among the factors that influence primary education among most vulnerable children placed in care centres.

### 3) Children care centre's own financial capacity

This was reported by 94.9% of the respondents to be a factor that influenced education access among most vulnerable children in the children centres. Moreover, one key informant confirmed this argument when she said each "*children care centre is encouraged to prepare its own financial arrangement instead of relying on unpredicted donations (KI, 02/05)*". It was agreed through respondents experience that children centres which have diversified their centre to have alternative income generating projects have high possibilities of ensuring education to their children than those which depends mostly on donor supports that cannot be guaranteed. In supporting this one key informant added that

*Kao la Amani and Rafiki foundation have started their own primary school now days. Rafiki foundation has recently started secondary school in the centre. Light in Africa have established tour guest houses. These projects help them very much in supporting their children care centres (KI, 03/05).*

### 4) Incorporation of school component in the centre

It was agreed by 89.7% of the respondents that children care centres which have school within the centre have better assurance of education to their children than those which do not have this component. It was argued and agreed that once school is incorporated in the children centre it means education becomes another core function of the centre out of the initial core function of children care. Most vulnerable children who were visited during focus group discussion in the centres that has school within the centre were observed to have more access and education sustainability than in the centres that had no school component with the centre.

#### 5) Stigma free environments for vulnerable children from care centres

It was reported by 84.6% of the respondents that stigma free arena is among the factors for MVC access to education. The argument was supported by one most vulnerable child from one of the centre that *“some of Most Vulnerable Children in the Children Care Centre are victims of domestic violence, rape, murder attempts and other shame histories”*.... (FGD/MVCB/01).

Availability of most vulnerable children’s friendly environment within the school and in care centres is the factor for access to education. In support of this argument one key informant confirmed that *“Some of most vulnerable children have bad historical backgrounds. Some were abandoned by their parents soon after birth, some have been raped, sodomy and others are victim of HIV/AIDS”* (KI, 02/05).

Due to those scenarios availability of free stigma environment was recorded as the factor for most vulnerable children’s access to education and where stigmatization is high children becomes psychologically affected and therefore abscond from school.

#### 6) Relation with care givers

It was agreed by 92.3% of the respondents that close relation between Most Vulnerable Children and care givers including follow-ups of most vulnerable children forges creation of household setting for most vulnerable children. It was added that this is mostly influenced by having reasonable ratio between care givers and most vulnerable children. The study identified available ratio of around 1 care giver to 20 most vulnerable children in most children care centres except Rafiki foundation which had ratio of 1 care giver to 10 most vulnerable children. The less the ratio between care givers and most vulnerable children the stronger follow-ups of education progress among most vulnerable children and vice versa is true. This implies that when a centre has more care givers they conduct close education progress follow-ups of most vulnerable children and likewise when they are few they fail to monitor education progress of most vulnerable children.

#### 7) Integration of both most vulnerable other non vulnerable children in schools

This factor was approved by 84.6% of the respondents to be among the influencing factor for most vulnerable children from children care centres access to education. In support of this assertion, one key informant had this to say

*“Most vulnerable children should not be left to study alone especially in those centres which have school inside the centre. They should mix with other children from normal domestic environment households. Doing so will imply social segregation to most vulnerable children in centres”* (KI, 03/05).

Another respondent added that ...*“Keeping most vulnerable children in their own schools will create social violence through psychological alienation”* ... (KI, 03/05)

This implies that there is a need to have a holistic approach that integrates all children without consideration of family background in order to ensure proper education environment for most vulnerable children from child care centres.

#### 8) Availability of good education infrastructures

It was confirmed by 92.3% of the respondents that these were the most important factors for most vulnerable children’s access to education. One key informant reported that *“.....schools that has good facilities have possibilities of enabling children to study well and attain good pass marks in their examinations than those schools which have poor infrastructures* (KI, 05/05). In most cases public primary school were observed to have less improved education infrastructure than visited private primary schools. One Most vulnerable child raised argument during focus group discussion that *“Food and water for drinking are important for school life. I cannot stay comfortable in the classroom if am hungry and thirsty”* (FGD/MVCG/02)

#### 9) Village and ward management close follow-ups to children care centres

It was reported by 89.7% of the respondents that these are the nearby government units that can oversee performance of children care centres in supporting access to education for most vulnerable children. If these local governments perform their duties as required

then access to education for most vulnerable children in care centres can be reached. In supporting this one key informant had this to say “Wards are equipped with all technical officers who can conduct close follow-ups in children care centres. They include ward education officers, community development officers, ward executive officers and councilors” (KI, 01/05). Table 4.21 presents a summary of influencing factors for most vulnerable children’s access to education in the study area.

**Table 4.21 Facilitating Factors for Most Vulnerable Children’s Access to Education (n = 39)**

SN	Factors	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Distance between school and centres	9	23.1	9	23.1	9	23.1	7	18.0	34	87.2
2	Availability of donors to support education	8	20.5	8	20.5	8	20.5	9	23.1	33	84.6
3	Children care centre’s own financial capacity	9	23.1	10	25.6	8	20.5	10	25.6	37	94.9
4	Incorporation of school component in the centre	9	23.1	7	18.0	9	23.1	10	25.6	35	89.7
5	Stigmatization free environment	10	25.6	8	20.5	6	15.4	9	23.1	33	84.6
6	Relation with care givers	9	23.1	9	23.1	10	25.6	8	20.5	36	92.3
7	Integration of MVC and Non MVC in school	8	20.5	10	25.6	9	23.1	6	15.4	33	84.6
8	Availability of good education infrastructures	10	25.6	8	20.5	10	25.6	8	20.5	36	92.3
9	Village and ward management close follow-ups	7	18.0	10	25.6	9	23.1	9	23.1	35	89.7

**Source:** Field data, 2018

Briefly, the findings show that access to education is influenced by distance between school and centres, availability of donors to support education, availability of donors to support education, children care centre’s own financial capacity, incorporation of school component in the centre, stigmatization free environment, village and ward management close follow-ups, integration of MVC and Non MVC in school, availability of good

education infrastructures and MVC relation with care givers in the care centre. It was noted from respondent's experience that once those factors are available then children can have good access to education and vice versa.

#### 4.6.2 Limiting Factors for Most Vulnerable Children in Children Care Centres to Access Primary Education

Respondents were requested to respond if there are factors which inhibit access to primary education in their locality or not. Option answers were limited to Yes, No or I don't know. Findings indicate that 42.3% of the respondents acknowledged existence of factors that inhibit access to primary education in their localities while 38.5% reacted to have no factors that inhibits most vulnerable children's access to education. On the other side 19.2% of the respondents were not aware of existence of factors that inhibit access to primary education among most vulnerable children. From these findings it can be noted down that there are factors in the community which impede down most vulnerable children's access to primary education as shown by majority of respondents 42.3%. Table 4.22 presents a summary of factors inhibiting access to primary education for most vulnerable children in children care centres in the study area.

**Table 4.22 Awareness of Existence of Factors Limiting Access to Primary Education for MVC in Children Care Centres (n=52)**

SN	Response	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sinde		N	%
		N	%	N	%	N	%	N	%		
1	Yes	5	9.6	8	9.6	4	7.7	5	9.6	22	42.3
2	No	4	7.7	3	5.8	6	11.5	7	13.5	20	38.5
3	Don't Know	4	7.7	2	3.9	3	5.7	1	1.9	10	19.2
	<b>Total</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>13</b>	<b>25.0</b>	<b>52</b>	<b>100.0</b>

**Source:** Field data (2018)

The 39 respondents who acknowledged the existence of factors that facilitate access to primary education for MVC in the children care centres were then asked to mention those factors. Key informants and children (both MVC and Non MVC) were asked to give their experience. The following factors were mentioned:-

1) Hidden objectives of the children care centres

It was reported by 72.7% of the respondents that some of children centres especially those which have been closed had an intention of making business out of vulnerability situation of children. Information obtained from key informant confirmed this assertion insisted '*Most of the children care centres which have been closed their children were not going to school. They received education support funds from charity donors and reallocate them in their personal issues instead of targeted most vulnerable children in the centre*' (KI, 03/05). It was agreed in this point that, having antagonistic intentions acted as stumbling block towards education welfare of most vulnerable children in the children care centres.

2) Insufficiency of teachers trained on special needs education

It was pointed by 86.4% of the respondents that some of most vulnerable children placed in care centres have various challenges including visual impairments, physical disability, albinism, deaf and those who are living with HIV/AIDS. However, schools near children care centres have insufficient teachers trained on special needs education and the programs for challenged children. For example it was reported that deaf signs are negligible taught in those primary schools. This argument was confirmed by one of key informants saying... "*Those children are taken to special schools that have special education sessions*" (KI, 05/05).

3) Weak participation of community on supporting education for most vulnerable children living in children care centres

It was stated by 77.3% of the respondents pointed fingers on poor involvement of community in supporting education delivery for most vulnerable children. It was added by key informants that some children care centres takes responsibilities alone without cooperating with community around in supporting education for most vulnerable children. *“If the communities get more involved they would prioritize and support most vulnerable children in various ways”* (KI, 05/05). It was agreed further that, children care centres were not much involving the community and therefore when they fail to support children remain out of getting education.

#### 4) Insufficient land for developing a sustainable children care centre area

Community leaders as well as key informants declared the need to incorporate school component in the children care centres. Moreover insufficient land was reported by 81.8% of the respondents as a hindrance factor towards establishing school which requires large areas. Most vulnerable children themselves reported that *“We lack enough spaces to play within the centre’s environment”* (FGD/MVCG/02). This was reported to be triggered mainly by available land tenure systems with growing population in which people own small pieces of land and therefore insufficient free lands in the district. In supporting this assertion one key informant had this to say; *“The challenge is that population of district is growing while the land size remains the same”*... (KI, 01/05). Table 4.23 presents a summary of hampering factors for most vulnerable children’s access to education in the study area

**Table 4.23 Inhibitive factors for Most Vulnerable Children’s Access to Education (n = 22)**

SN	Hampering Factors	Villages								Total	
		Mungushi		Kimashuku		Bomani		Wari Sindi		N	%
		N	%	N	%	N	%	N	%		
1	Hidden indirect objectives of the children care centres	4	18.2	3	13.6	4	18.2	5	22.7	16	72.7
2	Insufficiency of teachers trained on special needs education	5	22.7	5	22.7	5	22.7	4	18.2	19	86.4
3	Weak Community participation	5	22.7	5	22.7	4	18.2	3	13.6	17	77.3
4	Land insufficiency	3	13.6	5	22.7	5	22.7	5	22.7	18	81.8

**Source:** Field data, 2018

#### 4.7 Discussions of Results

This part presents discussion of findings attained from study area. The study intended to assess the implication of education and training policy on promoting access to education for most vulnerable children in children care centres in Hai district. It was guided by four (4) specific objectives which were; to assess community knowledge on most vulnerable children and children care centres, explore ways through which primary education is provided to most vulnerable children in children care centres, examine how education and training policy has improved access to primary education for most vulnerable children in children care centres and identifying factors that affect access to education for most vulnerable children in children care centres.

The first objective intended to assess community knowledge about most vulnerable children and children care centres. Knowledge was assessed in terms of community’s awareness of the concept of most vulnerable children, and presence of most vulnerable children in their areas; , ability to identify features of the most vulnerable children and awareness presence of children care centres in the study area. The study findings indicate that the community has high level of awareness about most vulnerable children and their physical existence in the community. Moreover, the findings show that the community views the most vulnerable children as people who lack educational

sustainability plan, basic needs, community moral, love, lack of family support, orphaned, psychologically tortured, placed in children care centres, abandoned, experiencing child abuse, hardly get two meals per day, truants in schools, faced with financial challenges, and have unknown family members. Lastly findings portrayed that many respondents were aware of physical existence of children care centres in their localities. Generally, the findings indicate that the majority of the respondents have knowledge about most vulnerable children and children care centres. These results are consistent with other literature that defines a most vulnerable child as a child lacking necessary care and protection from different harms (UNICEF, 2015). Similarly, the findings are in line with arguments of the Family Health International (2011) that viewed most vulnerable children as children whose well being, safety and development are in a diverse of harms such as poor nutrition, insufficient psychological supports, shelter, lack of care and lack of education. Findings demonstrate applicability of functionalist theory which gives that access to education of a student is attributed by the social cultural circumstances in which one is exposed to (Raffo, 2007). From functionalist perspectives it implies that most vulnerable children are associated with features that hamper their access to education. Theoretical review advocate for reinforcement of key factors (Policy guidelines, resource availability and political will) as suggested in the conceptual framework to enhance access to primary education for most vulnerable children.

The second objective intended to identify ways through which primary education is provided to most vulnerable children in children care centres. Findings indicate that education to most vulnerable children is provided through five (5) ways in the study area. The first way is through setting extra curriculum trainings in which Most Vulnerable Children in Care Centres are given additional guidance. This is similar to a study by Vandemoortele and Delamonica (2000) in Lesotho which reported that most vulnerable children who are victims of HIV/AIDS are given extra studies for reproductive health which is termed as social vaccination to enable them to change their knowledge attitudes and beliefs about HIV/AIDS. The second way is through enrolment

of most vulnerable children in nearby schools from the children care centres. It has been confirmed in other studies that long distance walking away of children from school to residential area contributes to increase of truant cases, pregnancies and poor academic performances (URT, 2014, Olekambaine, 2013, Vuri, 2007). The third way is through involvement of donors whereby charity organisations and individual persons pull resources to support most vulnerable children education. This is relevant to the study by Dipankar (2009) who reported that education is provided to most vulnerable children through maximum involvement of community around in Nyanza province in Kenya. Moreover, UNICEF (2015) also suggest that community involvement is the best principle in inclusive and participatory education delivery especially to less privileged category of children. The fourth way of providing education to MVC is through exclusion from mandatory contributions. This finding concurs with Namibia's policy strategy for most vulnerable children in accessing education where by school uniforms and fees are not mandatory to most vulnerable children (Republic of Namibia, 2008). The fifth way of providing education to MVC is through ensuring continuation of ended classes In this case once a child is enrolled to children care centre the education management in collaboration with particular centres takes ensure that child is attending class from where he /she ended prior arrival to centre. This confirms availability of localised strategies to support MVC's access to education as suggested by Chimombo (2005) that strategies to solve education challenges vary and must be context specific.

The third objective intended to examine how education and training policy has improved access to primary education for most vulnerable children from children care centre. The study examined achievements, failures in supporting access to primary education for most vulnerable children and education status of most vulnerable children before and after introduction of children care centres in the study area. The achievements identified include acquisition of life skills such as language, sanitation, reproductive health, respect and socializations which are all important component for children's access to education. This is similar to education policy which intends to ensure that all children attain necessary life skills (URT, 2014). Decrease of truant cases was reported among policy

achievements. This is similar to Vuri (2007) where decrease of number of pupils dropping was reported. Moreover, presence of an isolated learning environment between the most vulnerable and non vulnerable children which is similar to a study by CRS Lesotho (2006) in which most vulnerable children are identified as children with special needs and therefore are provided with special care environment within schools environment in Nigeria. The study identified sustainable and integrated funding for the most vulnerable children education, good support to children with special needs, increase of education facilities, increase of number of most vulnerable children in secondary and technical trainings and improvement of self identification ability among most vulnerable children. These are policy achievements are similar to Dipankar (2009) and UNICEF (2015) which stressed on importance of stakeholders participation in solving challenges of education delivery in the community. Moreover, findings' regarding policy achievements implies effectiveness of organisation intended to accomplish education and training policy objectives as propounded in the implementation theory (Palfrey, 1992). They include; schools, children care centres, local and central government education structures. Dysfunction of the organisations intended to implement the normative policy objective results into unrealisation of indicators of access to primary education for most vulnerable children in children care centres. Those indicators are degrees of affordability, acceptability and availability of MVC in the education system and structures.

Regarding failures in promoting access to education for the most vulnerable children from children care centres, the study found four major failures. The findings show that there were insufficient education privileges to most vulnerable children. This is finding is similar to a study by Olekombainei (2013) which reported existence of low education privilege to nomad societies due to influence of culture where privilege is given more to rearing livestock and less in education. The study also found that there is a problem of inadequate donations and supports. This is finding is similar to a study by UNICEF (2015) which concluded that education aid is important but should not exclude community contributions due to its insufficiency to cater for education needs. The

findings also show that there is failure of MVC to integrate /cope with their community once returned back to their original families and lack of family setting environment in the children care centres. These findings are parallel to analysis paper by HAKIELIMU (2015) which reported various challenges of access to education among children in Tanzania context. Generally, the failures are contrary to education policy of 2014 which pledged that it could remove all barriers to access to education for all children. *“The Government will eliminate obstacles which hinders student to grasp education opportunities and complete education cycle at each particular level”* (URT, 2014).

In terms of education status of most vulnerable children before and after introduction of children care centres majority of respondents acknowledged changes from worst status before introduction of children care centres to a good status after introduction of children care centres in the study area. This finding signifies education policy implementation which called upon all stakeholders’ collaboration to enable policy achieve the intended objective (URT, 2014) Moreover, noted policy success indicate efforts that have been done by government of Tanzania through enactment of various policies which are noted to be the root for the exposed policy achievements. They include education policy of 1995, technical education and training policy of 1996, technology information and communication policy for primary schools of 2007 hence the recent education and training policy of 2014 (URT, 2014).

The fourth objective intended to identify factors that affect access to education for most vulnerable children in children care centres. The study depicted both facilitating and limiting factors for most vulnerable children’s access to primary education. The result indicates existence of factors that facilitate access to primary education for the most vulnerable children in the care centres are short distance between school and centres, availability of donors to support education, children care centre’s own financial capacity, incorporation of school component in the centre, stigmatization free environment, relation with care givers. These findings relates to studies by Smiley, Michele & Carol (2013) and UNESCO (2013). Moreover, integration of most vulnerable children and non

vulnerable children in school, availability of good education infrastructures and lastly village and ward management close follow-ups were reported to be among facilitating factors. These findings relate to studies by Mwoma and Pilay (2016), which reported that availability of friendly education arena as well as good leadership are important factors for children education.

The study results also indicate existence of limiting factors namely hidden indirect objectives of the children care centres, insufficiency of teachers trained on special needs education, weak community participation and land insufficiency. These findings are similar to study findings by UNESCO (2015) and Braga *et.al* (2017) which reported financial capacity of care givers, insufficiency education resources and culture to be among the factors limiting access to education among children in various areas. These findings confirm what is suggested in the functionalist theory that access to education is influenced by constraints faced by both learners and surrounding environment (Raffo, 2007). Interpretation of these findings from functionalist perspectives confirms that learner's background and social cultural context surrounding are important determinants of access to education among most vulnerable children.

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSIONS, AND POLICY IMPLICATIONS**

#### **5.1 Introduction**

This chapter provides a summary, conclusions and policy implications of the study.

#### **5.2 Summary**

The study dealt with assessment of implications of education and training policy on promoting access to primary education for most vulnerable children in child care centres in Hai district, in Tanzania. The study assessed community knowledge on most vulnerable children and children care centres, ways through which primary education is provided to most vulnerable children, how education and training policy has improved access to education for most vulnerable children and factors that affect access to education for most vulnerable children in children care centres.

The study employed interview, FGDs questionnaire administration, and documentary review as major tools of data collection. The study involved 137 respondents who were selected by using both purposive sampling technique and simple random sampling technique. Data were collected and analysis was done by using Microsoft excels where by responses were obtained, summarised and presented in tables.

Findings show that the respondents had high level of awareness about most vulnerable children and children care centres as they had information about it, able to distinguish most vulnerable children from non vulnerable children by pointing out their characteristics.

The ways in which primary education is delivered to most vulnerable children in children care centres are extra curriculum trainings, enrolment of the most vulnerable children in nearby public schools, engagement of donors, exclusion from mandatory contributions, and continuation from ended classes.

The achievements identified are, life skills acquisition, decrease of truants cases, presence of un segregated learning environment between the most vulnerable and non vulnerable children, sustainable and integrated funding for the most vulnerable children education, good support to children with special needs, increase of education facilities, increase of number of most vulnerable children in secondary and technical trainings and improvement of self identification ability among most vulnerable children. The failures are insufficient education privileges to most vulnerable children, failure to cope with their original families when returned back and inadequate donations and supports. The study results also indicate that the education status of most vulnerable children has changed from worst condition to a better condition after introduction of children care centres in the study area.

The factors that facilitate access to primary education for the most vulnerable children in the care centres are short distance between school and centres, availability of donors to support education, children care centre's own financial capacity, incorporation of school component in the centre, stigmatization free environment, relation with care givers, integration of most vulnerable children and non vulnerable children in school, availability of good education infrastructures and lastly village and ward management close follow-ups. The limiting factors are insufficiency of teachers trained on special needs education, weak community participation, land insufficiency and hidden indirect objectives of the children care centres.

### **5.3 Conclusions**

The general research objective of this study was to assess the implications of education and training policy on promoting access to primary education for most vulnerable children in children care centres basing on four specific objectives. The assessment results showed that there is high level of community awareness about most vulnerable children as majority of the had information about the them, areas they are found in the community, distinguishable features and availability of children care centres in the study area. Education to most vulnerable children is provided in various ways including extra

curriculum trainings besides normal classes, enrolling them in nearby schools, support from donors, and exemptions from fee contributions and continuation from ended classes. Moreover, findings show that there is no segregation in providing education to most vulnerable and non vulnerable children. The study has found that there has been improvement of educational status of the MVC from worst status before introduction of children care centres to a good status after introduction of children care centres. Conducive learning environment was found to facilitate access to education for the MVC in the study areas.

#### **5.4 Policy Implications**

In view of key findings the following policy implications are proposed in order to improve access to education for most vulnerable children living in children care centres in Hai district.

- i) Increase number of teachers trained on special education

The study found that there is insufficiency of teachers trained to support children with special needs such as most vulnerable children. It is suggested from this study that children care centres and government should recruit more qualified special education teachers in schools where children with special needs exists.

- ii) Improvement of community participation

The study found that there is weak community participation in promoting access to primary education to most vulnerable children in the study area. It is recommended that the government through school boards should look for appropriate mechanism to involve community members in promoting education for most vulnerable children in the study area.

iii) Addressing land insufficiency

It was reported that children care centres lacks adequate land to scale up their projects including school projects in the study area. It is suggested that children care centres management should cooperate with village and ward management to get larger areas for scaling up children care centres project.

iv) Promote good governance among stakeholders

The study found elements of poor governance in the children care centres whereby some of children centre's objectives were not open clear to the community members. It is suggested that good governance should be promoted among most vulnerable children stakeholders in the study area.

v) Routine psycho social trainings to MVC

It was reported that MVC in children care centres are psychologically tortured. Respondents recommended that each centre must arrange sessions for all centres' children to attend psychosocial training to enable them to cope with their environment and hence prepared for alternative family cares through re unifications. Majority of respondents agreed that this would be an appropriate measure to mitigate their psychological torture and the exercise should be done with broad consultation to psychologists.

## **5.5 Area for Further Research**

This study concentrated on implications of education and training policy in enhancing access to education for most vulnerable children in children care centres. However, experience indicates that most vulnerable children exist even at domestic household level. Information about access to education among most vulnerable children from families is still lacking. Therefore, another study could be carried out on implications of Education and Training Policy in promoting access to primary education for Most Vulnerable Children in poor households.

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## **APPENDICES**

### **Appendix 1: Questionnaire for Wards and Villages Respondents**

( To be administered to Councilors, Ward Executive Officers, Ward Education Officers, Ward Community Development Officers, Village Chair Persons, Village Executive Officers, Village Development Committee Members, Head Teachers ,Community member Pioneers, Children Care Centre Staffs )

#### **Introduction**

( )

Dear respondent

My name is Robert A. Mwangi, a Post Graduate student of Mzumbe University. I am conducting a research on “Education and Training Policy and Access to Education for Most Vulnerable Children in Child Care Centres in Hai District, Tanzania”. The major aim of this questionnaire is to grasp relevant information necessary for accomplishment of academic dissertation for Masters of Science in development policy of Mzumbe University. Findings obtained from your answers will be held as confidential information and used for academic purpose only. You are requested to be truthful and honest as you can in answering questions in this questionnaire. I appreciate in advance your positive contributions towards making this study possible through your positive responses.

**Thank you**

#### **SECTION A: PERSONAL INFORMATION.**

This section asks you to provide your personal information. Please tick ( V ) where appropriate.

1. Sex

A. Male

B. Female

2. Age

- A. 18 – 25
- B. 26 – 35
- C. 36 – 45
- D. 46 – 65
- E. 66 and above

3. Marital status

- A. Single
- B. Married
- C. Separated
- D. Divorced
- E. Widow/Widowed

4. Education level

- A. None
- B. Primary
- C. Secondary
- D. Tertiary
- E. University Education/Degree

5. Occupation

- A. Farmer
- B. Entrepreneur
- C. Civil servant
- D. Any other specific. Specify.....

6. Income per month

- A. Between 0 and 500,000
- B. Between 500,001 and 1,000,000
- C. Between 1,000,001 and 1,500,000
- D. 1,500,001 and 2,000,000
- E. Above 2,000,001+

**SECTION B: KNOWLEDGE ON CHILDREN CARE CENTRES**

In this section you are requested to provide your experiences about children care centres. Please respond as requested to each question.

7. Have you heard about most vulnerable children in your area? (Ward, Village)

- A. Yes
- B. No

8. if your answer is YES, how do they look like ?

.....  
.....

9. Are there most vulnerable children in your area? (Ward, Village)

- A. Yes
- B. No

10. In some areas most vulnerable children are gathered in children care centres. Is/are there any children care centre in your area? (Ward, Village)

- A. Yes
- B. No

11.If your answer to question 10 above is YES, mention the children care centre you know in your area (Ward, Village)

.....  
.....

**SECTION C: WAYS OF PROMOTING EDUCATION TO MOST VULNERABLE CHILDREN IN CHILDREN CARE CENTRES**

This section asks questions about ways that are commonly used to provide education to most vulnerable children living in children care centres.

12. Basing on your experience, do most vulnerable children get education as other children who are not vulnerable?

- A. Yes
- B. No
- C. Don't know

13. what are the ways through which most vulnerable children get education ?.

.....  
.....

14. How would you compare the education opportunities available between most vulnerable children and non most vulnerable children

- A. Same
- B. Most vulnerable children have more opportunities than none vulnerable ones
- C. Non vulnerable children have more opportunities than most vulnerable children
- D. Don't know

**SECTION D: IMPACT OF EDUCATION AND TRAINING POLICY TO VULNERABLE CHILDREN'S ACCESS TO FORMAL EDUCATION**

15. Are there any success/achievements in providing access to education for most vulnerable children living in children care centres ?

- A. Yes
- B. No
- C. Don't know

16. If your answer in question 14 above is YES, explain.

.....  
.....

17.If your answer in question 14 above is NO, mention the failures

.....  
.....

18.How would you rate the status of education to most vulnerable children before introduction of children care centres in your area?

- A. Excellent
- B. Very good
- C. Good
- D. Satisfactory
- E. Poor
- F. Worse
- G. Worst

19.How would you rate the status of education to most vulnerable children after introduction of children care centres in your area?

- A. Excellent
- B. Very good
- C. Good
- D. Satisfactory
- E. Poor
- F. Worse
- G. Worst

**SECTION E : FACTORS THAT INFLUENCE ACCESS TO EDUCATION FOR MOST VULNERABLE CHILDREN IN CHILDREN CARE CENTRES.**

This section is intending to capture your experiences of factors that influences or hamper access to education for most vulnerable children in children care centres.

20.In your understanding are there factors that facilitate access to primary education for most vulnerable children in children care centres in your area ? (Village ,Ward)

- A. Yes
- B. No

C. Don't know

21.If your answer in question 20 above is YES , mention those factors.

.....  
.....

22.In your understanding are there factors that inhibit access to primary education for most vulnerable children in children care centres in your area ? (Village ,Ward)

A. Yes

B. No

C. Don't know

23. If your answer in question 20 above is YES , mention those factors

.....  
.....

24. What are your suggestion in improving provision of education for most vulnerable children in children care centres ?

.....  
.....

## **Appendix 2: Interview Guide Questions for District Management Staffs**

(To be administered to District Chairperson, District Executive Director, District Education Officer, District Social Welfare Officer and District Community Development Officer)

### **Introduction**

( )

Dear respondent

My name is Robert A. Mwangi, a Post Graduate student of Mzumbe University. I am conducting a research on “Education and Training Policy and Access to Education for Most Vulnerable Children in Child Care Centres in Hai District, Tanzania”. The major aim of this interview is to grasp relevant information necessary for accomplishment of academic dissertation for Masters of Science in development policy of Mzumbe University. Findings obtained from your answers will be held as confidential information and used for academic purpose only. You are requested to be truthful and honest as you can in answering questions in this interview. I appreciate in advance your positive contributions towards making this study possible through your positive responses.

### **Thank you**

1. Have you heard of Most Vulnerable Children in your area?
2. How would you describe the status of most vulnerable children in your district?
3. How is primary education provided to most vulnerable children living in children care centres
4. What are the success and failures in providing education to most vulnerable children in your district?
5. In your view, what factors do you think contribute to success in providing education to most vulnerable children living in children care centres?
6. In your views what factors do you think contribute to failures in providing to most vulnerable children care centres?
7. What are your views if education to most vulnerable children is to be improved?
8. If you don't mind may you briefly give me your personal information (age marital status, education etc).

## **Appendix 3: Focus Group Discussion Guide Questions for Most Vulnerable Children**

### **Introduction**

Dear respondent

My name is Robert A. Mwanga, a Post Graduate student of Mzumbe University. I am conducting a research on “Education and Training Policy and Access to Education for Most Vulnerable Children in Child Care Centres in Hai District, Tanzania”. The major aim of this discussion is to grasp relevant information necessary for accomplishment of academic dissertation for Masters of Science in development policy of Mzumbe University. Findings obtained from your answers will be held as confidential information and used for academic purpose only. You are requested to be truthful and honest as you can in participating in this discussion. I appreciate in advance your positive contributions towards making this study possible through your positive responses.

### **Thank you**

1. How do you get primary education in schools?
2. How have you benefited from primary education.(Probe to identify any success eg enrolment etc)
3. What factors that facilitates most vulnerable children in children centres to access formal education. Let us discuss these factors
- 4.What factors that limits most vulnerable children in children centres to access formal education. Let us discuss these factors
5. What do you think should be done, by whom to promote access to education among most vulnerable children from children care centres?

## **Appendix 4: Focus Group Discussion Guide Questions for Non Vulnerable Children**

### **Introduction**

Dear respondent

My name is Robert A. Mwanga, a Post Graduate student of Mzumbe University. I am conducting a research on “Education and Training Policy and Access to Education for Most Vulnerable Children in Child Care Centres in Hai District, Tanzania”. The major aim of this discussion is to grasp relevant information necessary for accomplishment of academic dissertation for Masters of Science in development policy of Mzumbe University. Findings obtained from your answers will be held as confidential information and used for academic purpose only. You are requested to be truthful and honest as you can in participating in this discussion. I appreciate in advance your positive contributions towards making this study possible through your positive responses.

1. Have you heard about most vulnerable children?
2. How do most vulnerable children get primary education
3. How have most vulnerable children get benefits from primary education
4. What factors that facilitates most vulnerable children in children centres to access formal education. Let us discuss these factors
5. What factors that limits most vulnerable children in children centres to access formal education. Let us discuss these factors
6. What do you think should be done, by whom to promote access to education among most vulnerable children from children care centres

## Appendix 5: Research Budget

The study is estimated to cost the researcher about 3,677,300/= Tshs as itemized bellow:

S/N	Particulars	Description	Amount (Tshs.)
1.	<b>Accommodation</b>	60 Days, @ day 10,000/= Tshs	60,000/= Tshs
	<b>Sub Total</b>		<b>600,000/= Tshs</b>
2.	<b>Research Assistants</b>	Data Collection (2 People) @ 5,000/= Tshs Thus, 2 X 5,000/= Tshs for 30 days	300,000/= Tshs
	<b>Sub Total</b>		<b>300,000/= Tshs</b>
3.	<b>Stationery, Printing and Photocopy</b> Questionnaire Proposal Report	80 copies @ 100/= Tshs 4 copies 300,000/= Tshs	8000/= Tshs 20,000/= Tshs 300,0000/= Tshs
	<b>Sub Total</b>		<b>328,000/= Tshs</b>
4.	<b>Communication</b> Phone Calls Internet Services	90 Days @ 2000/= Tshs 90 Days @ 1500/= Tshs	180,000/= Tshs 135,000/= Tshs
	<b>Sub Total</b>		<b>315,000/=Tshs</b>
5.	<b>Transport</b> To and from various areas Within the study area	90 days @ 10,000/= Tshs	900,000/= Tshs
	<b>Sub Total</b>		<b>900,000/= Tshs</b>
6.	<b>Meals:</b> Breakfast Lunch Supper	90 days @ 2000/= Tshs 90 days @ 4000/= Tshs 90 days @ 4000/= Tshs	180,000/= Tshs 360,000/= Tshs 360,000/= Tshs
	<b>Sub Total</b>		<b>900,000/= Tshs</b>
7.	<b>Contingency (10%)</b>		<b>334,300/= Tshs</b>
	<b>GRAND TOTAL</b>		<b>3,677,300/= Tshs</b>

## Appendix 6: Research Action Plan

No.	ACTIVITY	MONTHS: FROM JUNE 2017 TO MARCH 2018									
		JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR
1	Preparation of research concept note and presentation to the panel										
2	Amendment of concept note to suit technical suggestions from the panel										
3	Preliminary visits to study site										
4	Proposal preparation.										
5	Beginning of the Proposal writing.										
6	Submission of research proposal to the Supervisor										
7	Survey and Familiarization to research site.										
8	Data collection.										
9	Data analysis and report writing.										
10	Submission of first draft report.										
11	Amendments of the research report to suit comments from supervisor										

## Appendix 7: Language Editing Letter



**MZUMBE UNIVERSITY**

**FACULTY OF SOCIAL SCIENCES**

**DEPARTMENT OF LANGUAGES AND COMMUNICATION STUDIES**

E-mail: [jkapaya@mzumbe.ac.tz](mailto:jkapaya@mzumbe.ac.tz)

Cell: +2550764763696

P.O. Box 5,  
Mzumbe-Morogoro, Tanzania

Ref.No.MU/PF/Vol.I /120

Date: 8.10.2018

**The Director, DRPS  
Mzumbe University  
P.O Box 05  
Mzumbe- Morogoro**




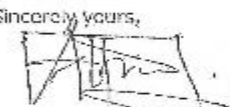
**RE: EVIDENCE OF LANGUAGE EDITING**

This is to certify that the undersigned has read, proofread and edited the Dissertation of MR MWANGA ROBERT ABRAHAM entitled "EDUCATION AND TRAINING POLICY AND ACCESS TO EDUCATION FOR MOST VULNERABLE CHILDREN IN CHILDREN CARE CENTRES IN HAI DISTRICT, TANZANIA" to ensure language accuracy before it is passed forward for the Degree of Master of MSC-DP. In editing, I have addressed errors in spelling, tenses, cohesion, coherence, consistency of arguments, and the general organization of the dissertation. Therefore, I recommend that the candidate can submit the dissertation for further scrutiny and determination for award of the Masters degree as per the jurisdiction and discretion of the concerned board of Examiners and the relevant University authority

Sincerely yours

James Kapaya –Lecturer  
English Language Editor, Translator

## Appendix 8: Introduction letter

 <b>MZUMBE UNIVERSITY</b> <b>(CHUO KIKUU MZUMBE)</b>	
<b>OFFICE OF THE VICE CHANCELLOR</b>	
	
Ref. No. MU/DPGS/INT/38/Vol. IV/43	Date: 31 <sup>st</sup> January, 2018
<b>TO WHOM IT MAY CONCERN</b>	
<b>RE: INTRODUCTION OF MR. ROBERT ABRAHAM MWANGA</b>	
The bearer of this letter Mr. Robert Abraham Mwangi whose registration number is 15409086/T.15 is a postgraduate student at our University (Mzumbe University) pursuing <b>Masters of Science in Development Policy (MSc. DP)</b> . As part of requirements for completion of his studies, he is collecting information on: <b>The implementations of Education and Training Policy on promoting access to Education for most vulnerable children in Child Care Centre in Hai District, Tanzania.</b>	
This letter serves to achieve three purposes. Firstly, to introduce him to you, secondly, to request you to grant him permission to undertake the mentioned research at your Institute, and thirdly to request you to facilitate any form of assistance he might need in order to successfully pursue this noble exercise at your organization/Institute. We can assure you that this activity is entirely for academic and will never be used for any other purposes.	
We trust that you will accord our student with necessary assistance.	
Sincerely yours,	
	
Dr. Fred Alfred (PhD) For: VICE CHANCELLOR	
QUOTATION OF REF. NO IS ESSENTIAL	

## Appendix 9: Research Permission letter

### HAJ DISTRICT COUNCIL

KILIMANJARO REGION

Phone: 27 - 2758441

Fax: 27 - 2756102

E mail: mkurugenzihai@yahoo.co.u



DISTRICT EXECUTIVE DIRECTOR'S  
P.O.BOX 27,  
HAJ.

03<sup>rd</sup> February, 2018

Ref.No. I.G/S.20/4/60

Mzumbe University  
P.O.BOX 1  
Mzumbe - Morogoro

**RE: PERMISSION FOR MR.ROBERT A.MWANGA TO UNDERTAKE RESEARCH IN  
HAJ DISTRICT.**

Reference is made to the subject matter above,

Refer to your letter dated 31<sup>st</sup> January 2018 with ref No.MU/DPGS/INT/38/VOL.IV/43 which requested a permission for the mentioned student to undertake research in the district.

I am glad to inform you that the permission is granted to him as per your request. The district council will give him any necessary support to make the study successfully.

Sincerely yours,

**Edward.F.Ntakiliho**

**Ag District executive Director  
DISTRICT EXECUTIVE DIRECTOR  
HAJ**

C C

- DCDO : Provide necessary assistance as may be requested by the student

✓ Robert Mwangi : Report to your host office (Community Development Office)

## Appendix 10: Extension Letter



### OFFICE OF THE VICE CHANCELLOR

Tel: 022 2624200/2624201	Fax: 022 2624202
E-mail: <a href="mailto:vc@mzumbe.ac.tz">vc@mzumbe.ac.tz</a>	Website: <a href="http://www.mzumbe.ac.tz">www.mzumbe.ac.tz</a>

Ref. No. MU/DFGS/Msc. EXT/Vol. 1/29

Date: 29<sup>th</sup> March, 2018

Mr. Robert A. Mwangi,  
P. O. Box 9,  
MZUMBE - MOROGORO.

**RE: REQUEST FOR EXTENSION OF TIME FOR SUBMISSION OF YOUR  
RESEARCH DISSERTATION**

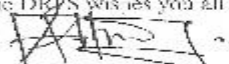
Your letter dated 28<sup>th</sup> March, 2018 refers.

The DRPS acknowledges receipt of your request for extension of time for submission of your research dissertation. The request is accompanied with all required documents as hereunder stated:

1. Duly-filled Progress Report, and
2. Valid MU cash receipt against bank deposit-in slip worth Tzs Ninety thousand only (90,000/-).

Having scrutinized the whole matter, and basing on the recommendations by relevant officers as offered on the duly-filled progress report, and pursuant to Articles 3.5.1.-3 of the Guidelines for Postgraduate Programmes (2012), the DRPS grants you an extension of three (3) months from 1<sup>st</sup> April, 2018 to 30<sup>th</sup> June, 2018 to complete your dissertation and submission of the same to the Institute of Development Studies of Mzumbe University. By this letter, your research supervisor is informed to continue mentoring you during this specified period which was paid for.

The DRPS wishes you all the best.

  
Dr. Fred Alfred (PhD)  
Ag: DIRECTOR

- C.C:
1. Director – JDS
  2. HoD – DP
  3. Mr. Moses Ndunguru (Research Supervisor) – Please continue mentoring the candidate for the specified period of time which was paid for.

QUOTATION OF REF. NO IS ESSENTIAL.