

**SUMMARY REPORT ON RE-TRAINING, MONITORING, EVALUATION AND
FOLLOW UP VISIT CONDUCTED IN MWANZA AND DODOMA REGIONS
NOVEMBER-DECEMBER, 2011**

1. Introduction

This report covers basically matters that transpired particularly from the monitoring and evaluation process of the sampled wards of Mwanza and Dodoma Region.

Follow Ups Objectives

- To re-train District Advocacy Team (DAT) on advocacy, monitoring and evaluation for an MVC program in Mwanza and Dodoma region
- To understand the type of services PSW are providing to improve life of MVCs in their communities and document promising practices, challenges and action to address them
- To assess collaboration between PSW and ward/village leaders
- To examine availability and utilization of ward/village funding to supporting MVC
- To provide mentoring and coaching to PSW in order to improve quality of service offered to MVC

Re-Training DAT in Mwanza and Dodoma Region

The training was conducted for three days and the participants were:

Mwanza;

- 42 District Officials from 7 District councils of Mwanza
- One RSWO and One representative from NGO network
- Seven PASONET district leaders from six District Councils

Dodoma;

- 36 District Officials from 6 District councils of Dodoma
- One RSWO and One representative from NGO network
- Six PASONET district leaders from six District Councils

1. Monitoring and Evaluation

MVC M & E Specialist trained participants on Monitoring and Evaluation in relation to THRCP MVC program. Specifically, the following topics were covered:

1.1 Importance of information/data;

- Make informed decision
- Measure our achievements and challenges
- Make plans for development work at our villages, wards and districts

The following examples were shared with the participants on the kind of decisions made as a result of our data;

- Make decisions on resource allocation. i.e what resources go where?
- *Example: How many most vulnerable children need what kind of service?*
- Develop strategies to address various development challenges
- *Example: How to help families of most vulnerable children receive economic strengthening services*

The participants were also informed that our data is needed by different people such as-

- Government (village, ward, region and national)
- Nongovernmental organizations (NGOs)/civil society
- Private individuals
- Donors such as the World Bank, USAID, etc.
- Ourselves!

1.2 MVC Program and M & E system

Participants were introduced on the basics and importance of M&E in our program whereby at the end of the day they managed to;

- Describe how the THRP/MVC Program M&E system works and how the LGA M&E system is linked and need to sustainably work and explain their capacity to make it function
- Demonstrate the ability to analyze, interpret and explain phenomena regarding MVC/PSW when advocating for planning ,decisions, resources allocation and utilization
- Demonstrate willingness to be part and parcel of THRP/LGA M&E system and process by collecting analyzing and using data regularly

1.3 Joint follow-up visit set up;

The teams were oriented on the follow up methodology including the methodology and approach used to conduct follow up visit as follows;

Data Collection Tools:

- Standard Process Evaluation Data Collection Tool for PSWs interview.
- Questionnaire for in depth interview with village/ward leaders

Follow up Sites:

- Wards were selected randomly by the respective DSWOs
- In each Ward 4 PSWs including supervisors interviewed

Data collection Process:

- Discussion with key stakeholders at district and ward level (Social Welfare Officers, District Advocacy Team members, Ward/Village leaders, MVCC members, PSW Supervisors,)
- In depth interview with PSW

Participants were further given chance to do role plays on data collection tools so as to make sure they understood all tools and procedure for data

collection and reporting. After the training joint follow up visit was conducted in Mwanza City, Geita and Sengerema whereby DAT members were involved in data collection and feedback processes

1.4 DAT reporting tools:

Participants were oriented on reporting tools which they will be using to report progress of advocacy activities. Two types of reporting tool were shared i.e. monthly and quarterly reporting tools

1.5 Annual dissemination report :

During the training the copy of annual dissemination report was also circulated to the participants for them to work on the identified challenges whereby they developed action plan and agreed timeframe for the implementation



In the picture above DAT members in Mwanza region listening to the facilitator, November, 2011

M&E Issues Raised

- Need to report on quarterly basis instead of monthly however after discussion a team agreed to prepare a brief report on monthly basis
- To merge the THRP reporting templates with LGA/Government reporting templates. It was agreed that the THRP template will be used however most of the information will be extracted from the LGA report
- Participants discussed on how to overcome challenges of shortage of working e.g. stationeries which are facing PSW and DAT agreed to be supporting PSW with data collection reporting forms.

2. Follow up Team

The follow up team that visited the districts and wards consisted of;

- (i) Nora Kaaya – IntraHealth, Dar
- (ii) Zena Amury- IntraHealth, Dar
- (iii) Mwanza District Advocacy Team Members
- (iv) Dodoma District Advocacy Team Members
- (v) Regional Social Welfare Officers from Mwanza and Dododma
- (vi) PASONET representatives from each district in Mwanza and Dododma

2.1 Sampling

Districts were selected purposively by the IntraHealth M&E department basing on the fact that the focus was to visit pending districts after the follow ups done in May, 2011(last six months). Wards were selected randomly by the District Social Welfare Officers. Furthermore, in this visit compared to the previous ones, the District Advocacy Team (DAT) were effectively involved in the data collection exercise, in that exercise we had two teams and each team visited at least two wards per day

3. Follow up Visit Findings

Mwanza;

- Follow up visit was conducted for advocacy and M&E activities in Mwanza region particularly; Mwanza city, Sengerema and Geita
- A total of 21 wards were visited in Mwanza City (6), Geita (8) and Sengerema (7) equals to 20% of the total wards in 3 districts
- 21 ward leaders including PSW supervisors were interviewed and 60 PSWs were also interviewed

Dodoma;

- Follow up visit was conducted for advocacy and M&E activities in Dodoma; Kongwa, Chamwino and Bahi district.
- A total of 17 wards were visited in Dodoma (8) Kongwa, (6) Bahi (3) Chamwino equals to 23% of the total wards in 3 districts
- 17 ward leaders including PSW supervisors were interviewed and 20 PSWs were also interviewed

Wards visited

During this monitoring and evaluation exercise, a total of 21 wards were visited - 6 in Mwanza City, 8 in Geita District and 7 in Sengerema District.

The districts and wards visited were as follows;

- Mwanza City - 6 out of 21 wards (28.6%). Wards visited are Bugogwa, Buswelu, Mkuyuni, Nyakato, Sangabuye and Nyamagana.
- Geita District - 8 out of 47 wards (17.02%). Wards visited are Bukondo, Bulala, Ihanamilo, Kakora, Kaseme, Katoro, Nyachiluluma and Nyang'hwale.

- Sengerema District - 7 out of 34 wards (20.6%). Wards visited were
 Kalebezo, Katwe, Nyakaliro,
 Nyakasungwa, Nyanzenda, Nyehunge and
 Tabaruka.

- Kongwa District-8 out of 22 wards(36%) Wards visited were
 Kibaigwa, Mtanana,
 Pandambili, Sejeli, Mkoka ,
 Songambebe , Zoissa , Hogoro

- Bahi District-6 out of 21 (28%), wards visited were;
 Mwitikila, Babayu, Chibelela, Makanda,
 Mpalanga, Mtitaa

- Chamwino District-3 District out of 32 (9%), wards visited were
 Itiso, Membe and Mpwayungu.

The team planned to reach the following wards but we didn't manage due to heavy rains which caused breakdown of bridges; Manda, Segala, Msamalo, Manzase and Chinugulu whereby trials to reach those wards failed. Overall a total of 78 PSWs were interviewed in Mwanza and Dodoma (60 and 18 respectively)

4. Key Achievements

Follow up teams observed the following main achievements;

4.1 District Advocacy Team support to PSWs and Community

All the three districts visited have managed to have District Advocacy Team (DAT) which has already got training on MVCs and PSW issues. We were told that the teams have not yet visited the wards, villages and streets to mobilize the communities and PSWs on MVCs issues.

4.2 Inconsistent Physical follow up and Mentoring

There was no consistent follow up monitoring and mentoring of the Para social workers by leaders and supervisors from the ward and district levels. Through discussion with ward supervisors, it was learnt that each supervisor had own modality of supervision and as a result affect the provision of care and support to OVCs. For instance due to this situation in most of the wards PSW never used service plans as a guide to address needs of MVCs.

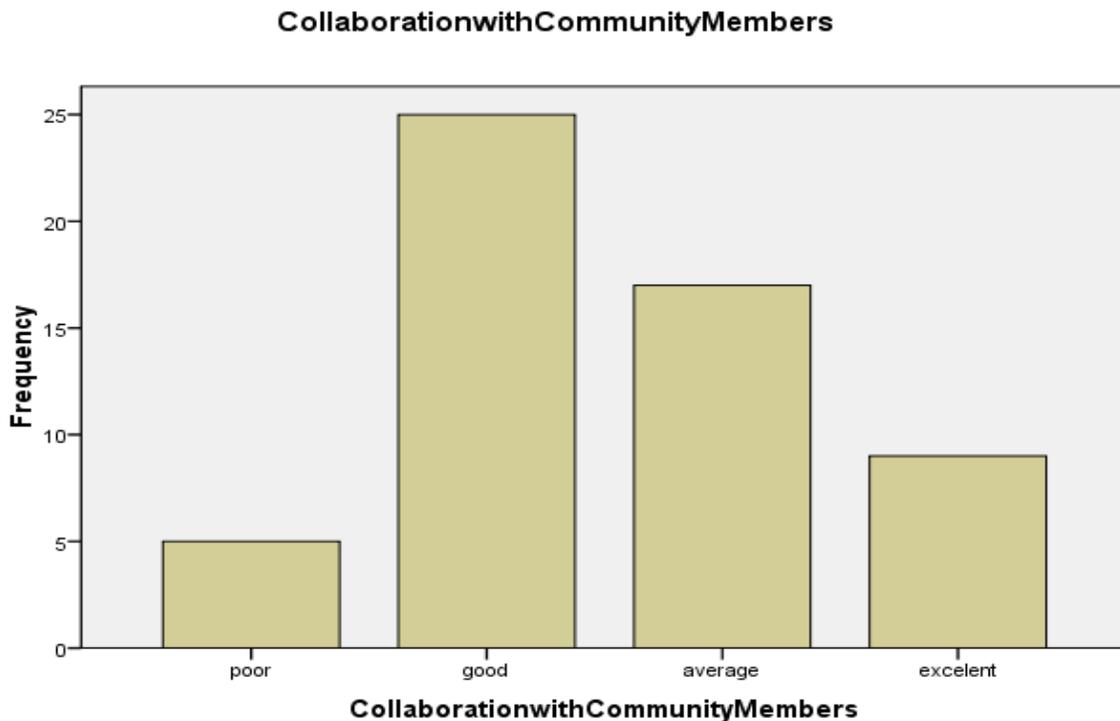
The District Advocacy Team (DAT) is not playing the expected roles in their districts. Data collected indicated that they have not visited their wards and villages/streets in advocacy of MVCs issues. However, we were promised by leaders in all districts at the wind-up meetings that the DAT will with immediate effect start visiting the wards and villages.

4.3 Collaboration among PSWs, Village/Ward Leaders and Community Members

There was a considerably good cooperation among Para Social Workers (PSWs), village/ward leadership and community members to some extent have enhanced a sense of commitment to para social workers. For instance, in several wards of Sengerema, Geita and Mwanza City the PSW are utilized in various social service tasks like in distributing mosquito nets and in assisting organizations/ agencies provide support to

MVCs. Majority of the PSW Supervisors offer support to the PSWs in terms of paying frequent visits to them and assisting them in how to correctly fill in the monthly report forms as well as collecting and send them.

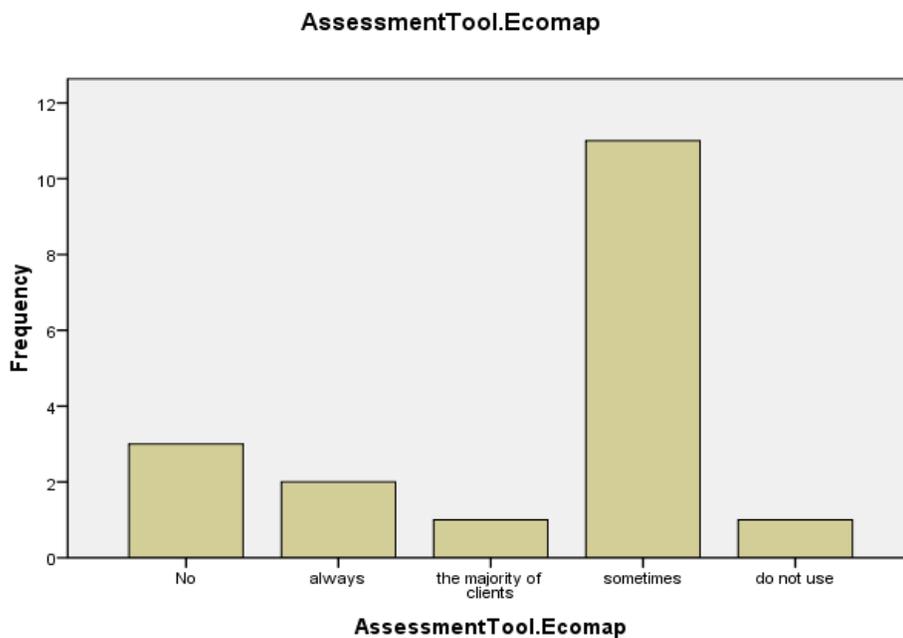
Despite limited financial and material resources and difficulty working conditions including lack of transport facilities to reach the distant areas, the para social workers have done a commendable job particularly in identifying and linking some children with support agencies. This has been the common experience majority of the ward leaders in the visited wards narrated. Although special funds to support MVCs and para social workers have not yet been initiated in almost all wards visited, there were plans to set up the fund in majority wards - according to ward leaders. An outstanding example was found in Kaseme ward – Geita District where community members were able to contribute about 345,000 shillings to provide for educational needs of MVCs .The fund has already supported 28 primary and 13 secondary school students. See the chart below for more information.

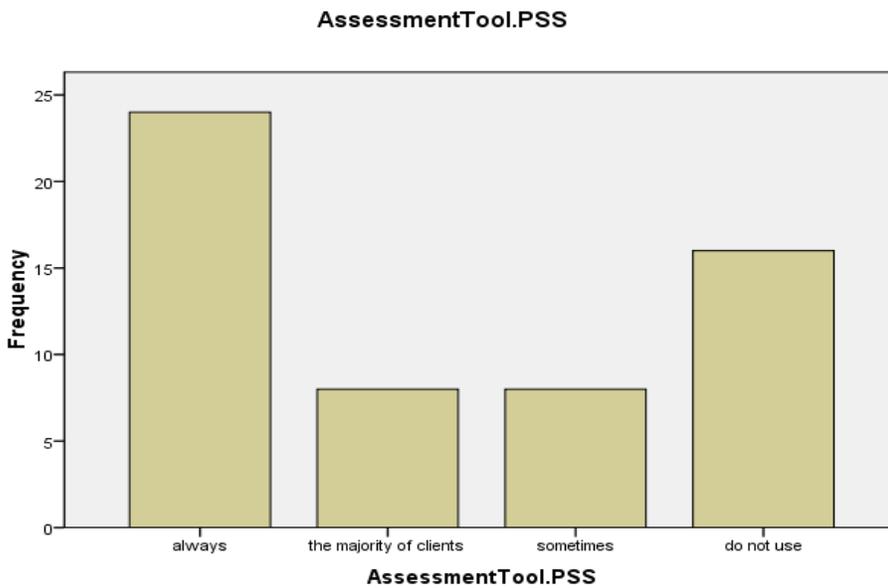
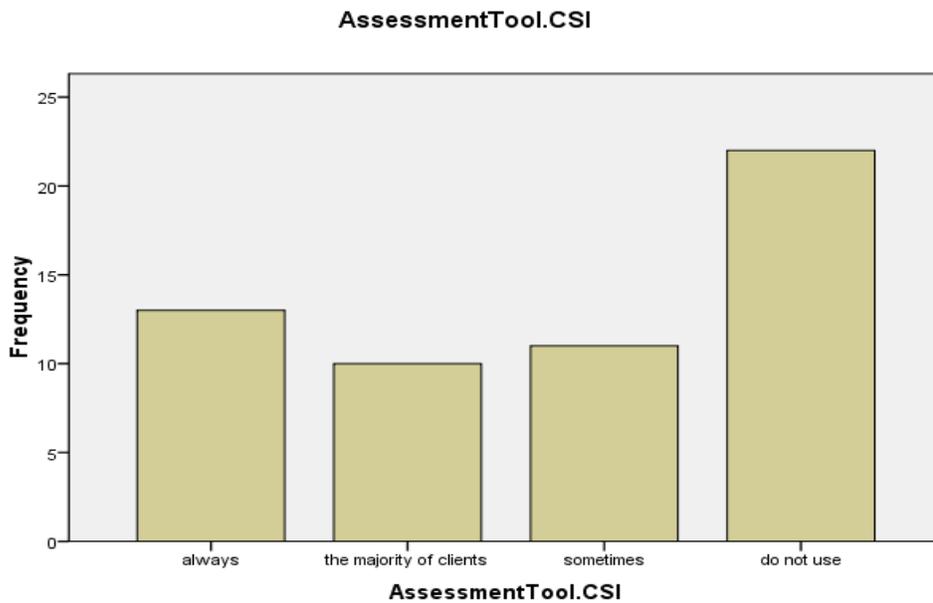


Source: Field data

4.4 Difficulty / Poor use of tools by the PSWs

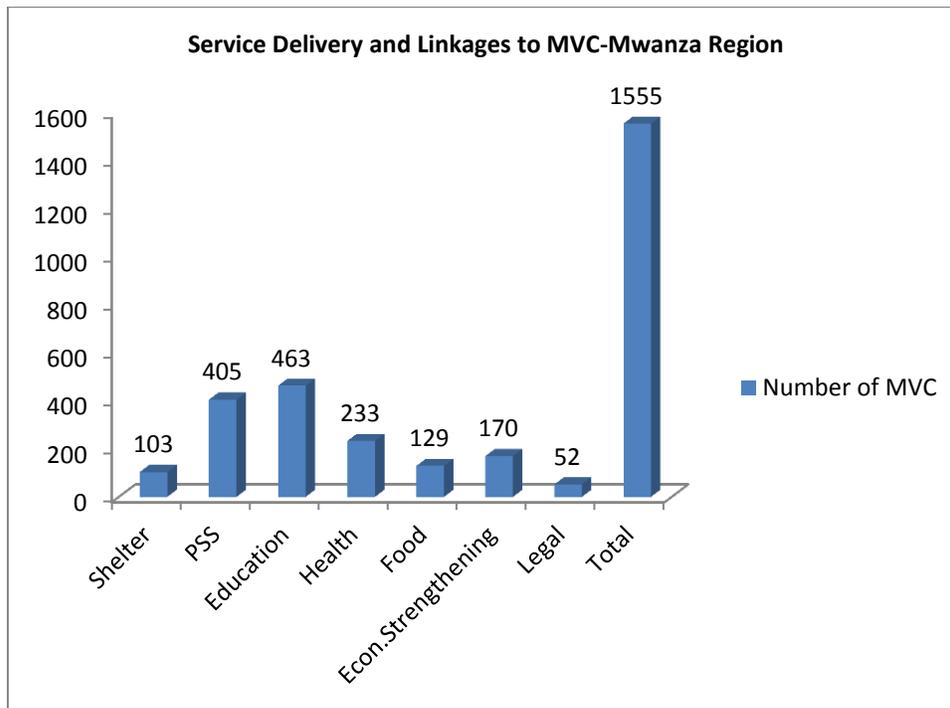
We noted that there was some difficulty in the use of tools in practical problem situation. Use of such tools as eco map, tool of assessment of strengths and weaknesses and case plan was noted to be difficult. This suggests the need to review tools and propose those that can be best used, or provide more knowledge to PSWs on the use of the tools. See charts below from Dodoma and Mwanza source documents for more illustrations.





4.5 Service Delivery and Linkages to MVC in Mwanza Region

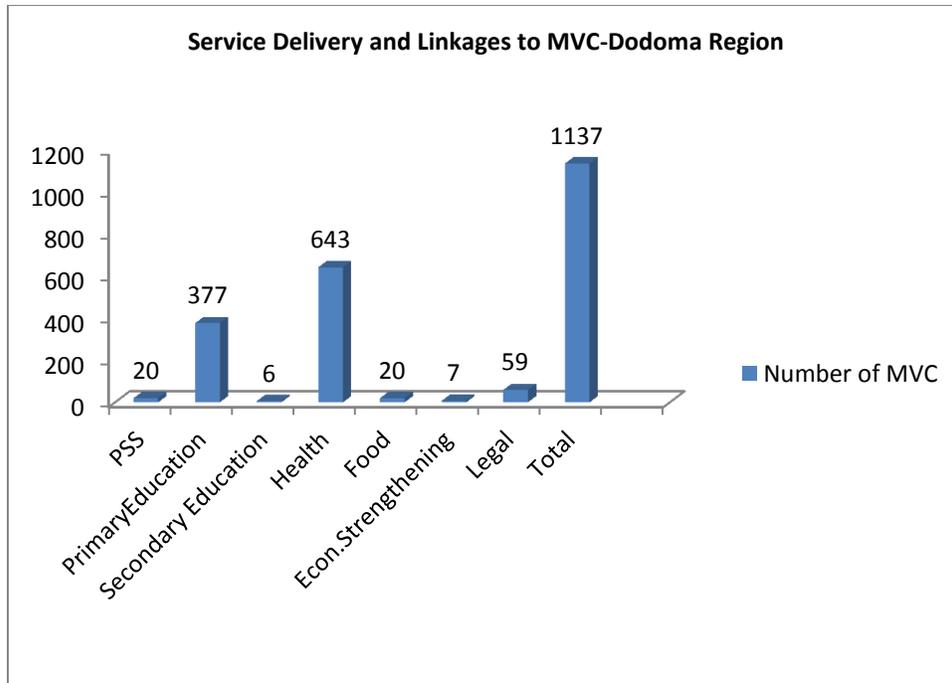
PSW in Mwanza region have linked MVC to other service providers such as TUNAJALI, Plan International, NERICO and Church whereby MVC received the following support:



Source: Field data

Service Delivery and Linkages in Dodoma Region

PSWs in Dodoma region has supported MVC through the following service providers, UMWEMA Group, AFRICARE, SEREMALA and World Vision the following services has been provided to MVC



Source: Field data

4.6 Inadequate resources to support MVC

The para social workers are doing commendable job of trying to link MVCs with available resources. It was observed that majority of them work in areas with very limited services / resources hence they fail to get places or agencies where they can refer the children to. But whenever possible MVCs are linked with whatever existing source of support, find tables below for more clarification

Dodoma

Mwanza		
Service	Resource	%
Shelter	CSO	44
PSS	PSW	50
Education	Village&CSO	40
Health	Village&CSO	43
Food	Village funding	20
Eco.Streng	Village Funding	48
Legal	Village Funding	11

Service	Resource	%
Shelter	CSO	22
PSS	PSW	50
Education	Village&CSO	42
Health	Village&CSO	45
Food	Village funding	28
Eco.Streng	Village Funding	22
Legal	Village Funding	17

Source: Field data

4.7 Community Funds to support MVC at Ward/Village Level-Mwanza and Dodoma Region

Geita:

- Magenge village in Kaseme Ward- Has mobilized the community to contribute for MVC fund- TZS 345,500/= has been collected and bank account opened.
- Mnekezi Village in Kaseme Ward mobilized the community and TZS 70,000 has been collected.
- There were no community funds to support MVC in wards visited in Sengerema and Mwanza city

Kongwa:

- Mkoka ward has mobilized the community contribute for MVC support and they have Tshs 12,000/= , they have also opened an account for MVC funds. They are planning contribute more from January2012 whereby every household will be required to contribute 1000 per month

- Hogoro ward has contributed 120, 000/= for MVC support and they have set apart 4 acres of land for MVC support. They are planning to use the money for farming activities from January 2012

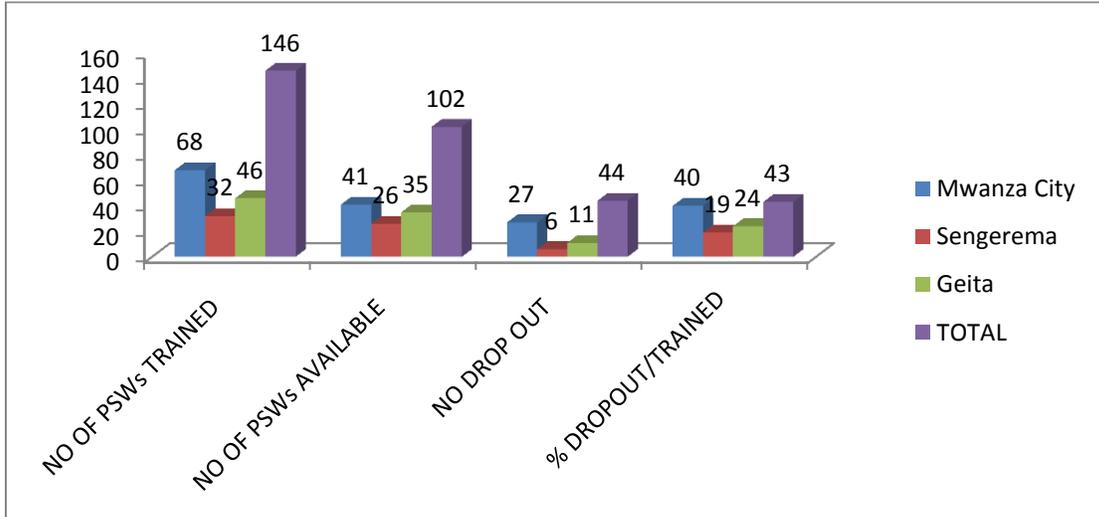
4.8 Little knowledge on MVC issues by key village leaders on their role in supporting MVC and PSWs

It was learnt that some key leaders in the wards and villages - like the Ward councilors, village executive officers, etc. were not well informed about their roles in supporting PSWs and MVCs. After they are trained or be informed of their role by the monitoring and advocacy team they promise to provide support and care to MVCs and PSWs.

4.9 Drop out of Some PSWs

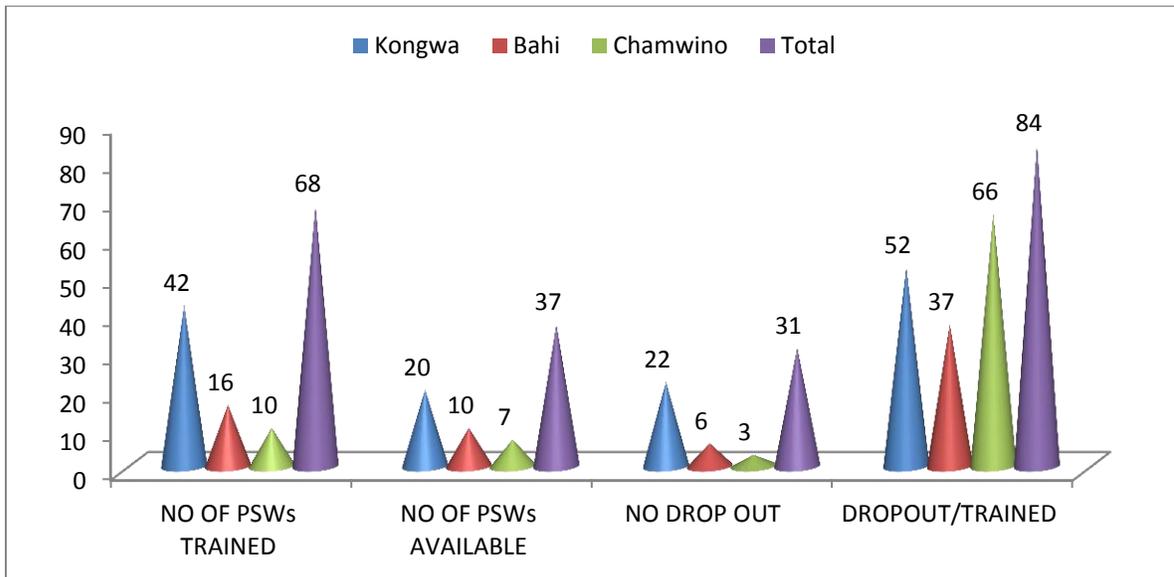
It was learnt that due to various reasons including the so called social problems, marriage, search for further educational and migration to other places some trained PSW were no longer supporting the MVC.

PSW Status-Mwanza City



Source: Field data

PSW Status-Dodoma Region



Source: Field data

5.0 High Expectation from community members on material support.

Majority of PSW interviewed indicated the community member expects material support from them. Some households do not want PSW to visit their houses as they feel PSW are benefiting by the data they collect from their children.

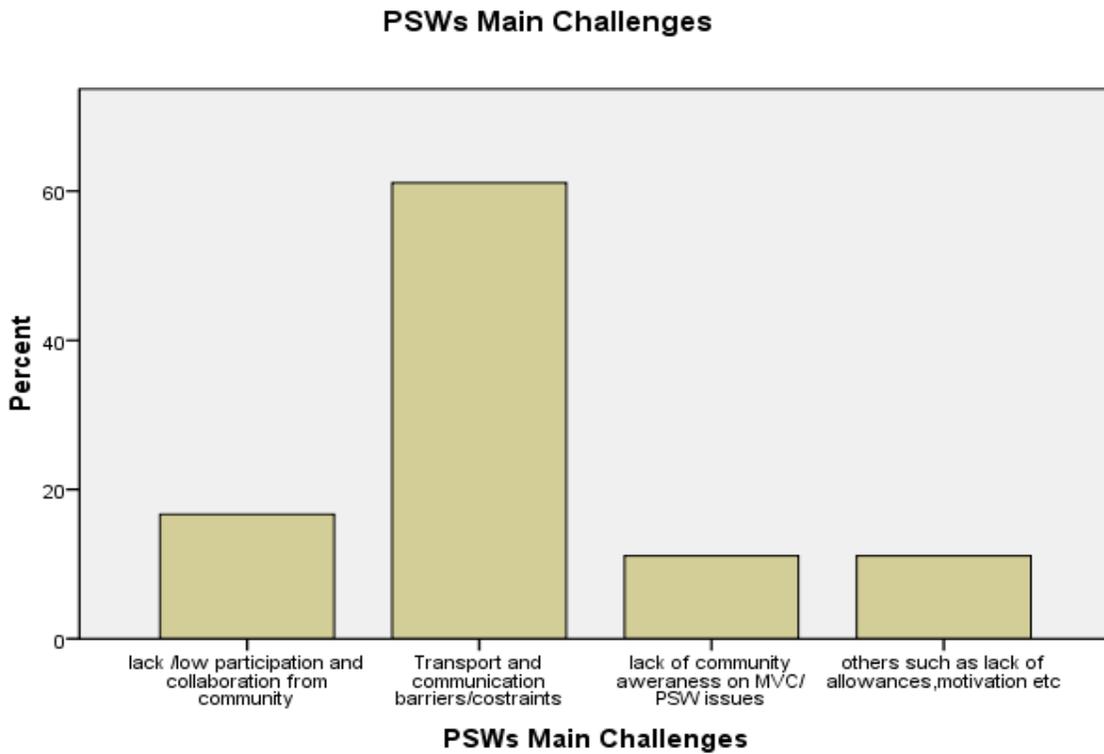
5.1 Budget line for supporting MVC at village/wards.

It was learnt that in almost all the wards visited no budget is set by ward and village authorities to support MVCs. However, it was also learnt that most districts, wards and villages have not set special budget for support to MVCs. Other village/wards visited reported that MVC were not seen as a priority agenda during budget setting exercise because of ignorance. Other villages are aware of the MVC burden but the funding is usually provided for the priorities identified by the ward/village officials such as construction of classrooms.

6. PSWs Challenges

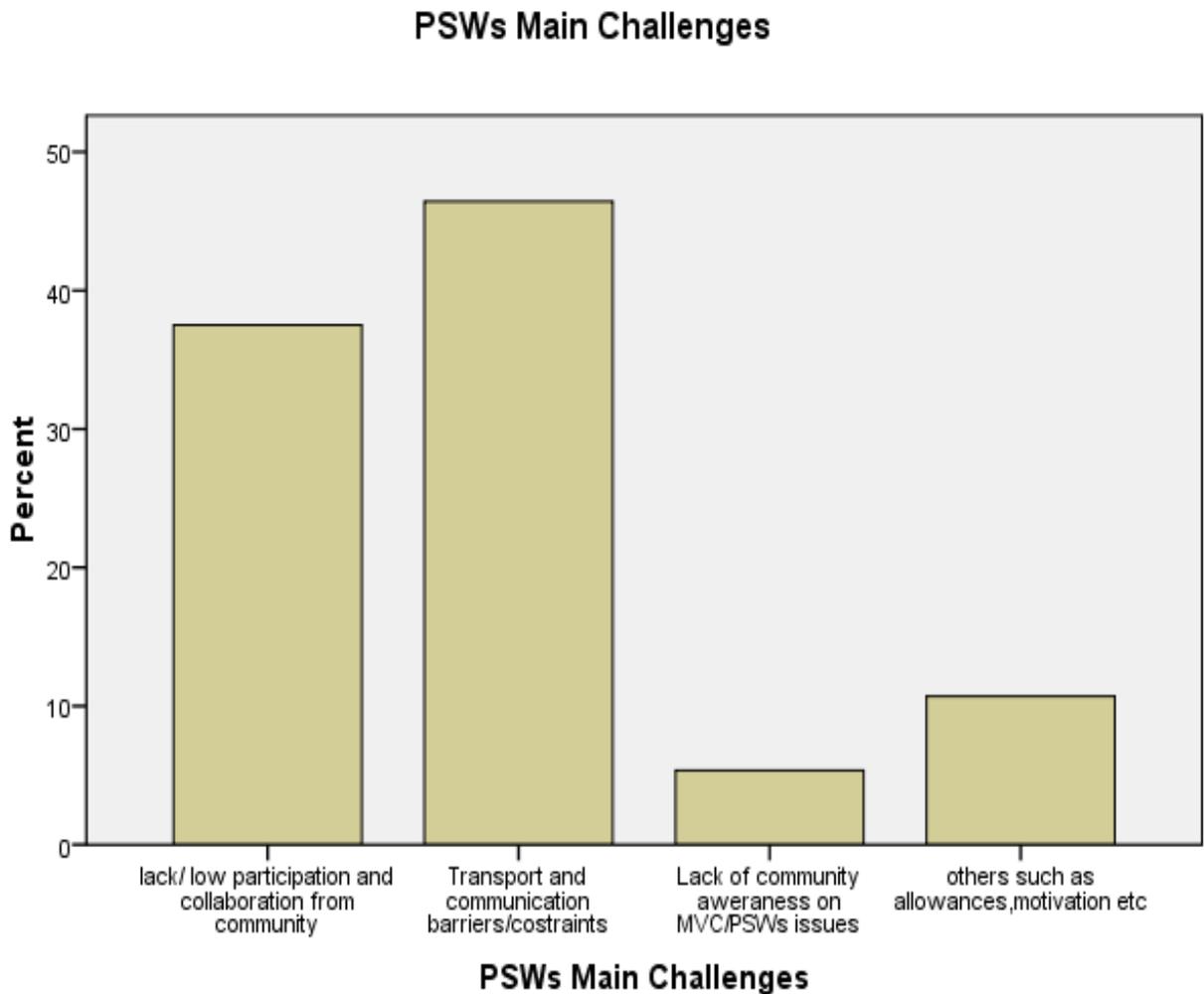
The following found as main challenges facing PSWs in Dodoma and Mwanza at village and ward levels; lack/low participation and collaboration from community members, transport and communication barriers, lack of community awareness on MVC issues and lack of monthly allowance to PSWs. Below find a chart for more illustrations.

i) Dodoma



Source: Field data

i) Mwanza



Source: Field data

7. Success Story

PSWs in Nyamagana ward at Mwanza City mobilized the community and Muslim Foundation to raise fund (TZS 600,000/) for a 3years old MVC who had a heart problem (hole in his heart) which made him sick/bedridden throughout. The MVC was taken to India for treatment last year, 2010 the MVC has recovered and is now doing fine. The amount mobilized by PSW helped to cover some cost of treatment. The MVC guardian

was then secured a soft loan from Brack Tanzania and is now doing a small business (selling charcoal and used clothes)

8. Observation

- District Advocacy Team members were very motivated and excited being retrained and fully involved in the data collection process, this is the best practice which needs to be emulated to other areas
- Most MVC are still cared in the extended families despite the high poverty at family levels. Economic strengthening initiatives at family level should be given a priority.

10. Recommendations

The following were the recommendations:

- Trained PSWs be motivated with allowance/stipend and transport facilities to simplify their work .
- Politicians and other key decision makers in the wards and villages be well informed and trained about Para social workers and the problem of MVCs hence mainstream MVC issues into their plans and budget.
- Improve communication and collaborations among village /ward, community members and district leaders.
- Need to revisit PSWs identification criteria so as to reduces PDWs drop out rate for program sustainability

- Re-training of new para social workers so as to replace those who have dropped out due to various reasons.

11. Conclusion

Districts visited were quite happy with the follow up exercise. In all the districts visited, we were accorded with good cooperation from officials in all the districts and wards visited and therefore were able to track the progress of performance of para social workers, village/ward leaders as well as district officials. Therefore through this follow up visit we managed to retraining 78 District Advocacy Team members, 2 Regional Social Welfare Officers and 13 PASONET leaders from Dodoma and Mwanza region. In addition to that we managed to conduct mentorship and coaching on MVC issues/program to 38 ward leaders and 80 PSWs in Mwanza and Dodoma region as reflected above.