

Government of the United Republic of Tanzania  
And  
United Nations Children's Fund (UNICEF)

**STUDY ON THE MAIN ACTORS  
FOR CSPD IMPLEMENTATION  
AT THE VILLAGE, WARD AND  
DISTRICT LEVELS**

CONSULTANCY REPORT

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## ACRONYMS AND ABBREVIATIONS

AARW	Action to Assist Rural Women
CARE	Cooperative Assistance Relief Everywhere
CCM	Chama Cha Mapinduzi
CDO	Community Development Officer
CORPS	Community Own Resource Persons
CSPD	Child Survival Protection and Development Programme
DANIDA	Danish Development Agency
DCs	District Councils
DED	District Executive Director
DMMO	District Manpower Management Officer
DMT	District Management Team
DPLO	District Planning Officer
DT	District Treasurer
DWE	District Water Engineer
HESAWA	Health Sanitation and Water
HIMA	Hifadhi ya Mazingira
JCT	Joint Cooperation Tanzania
LGSC	Local Government Service Commission
MET	Mufindi Education Trust
MOF	Ministry of Finance
MRA&LG	Ministry of Regional Administration and Local Government

NGOS	Non – Governmental Organizations
PC	Planning Commission
PCO	Planning and Control Officer
PHC	Primary Health Committee
PMO	Prime Minister’s Office
RAS	Regional Administrative Secretary
RC	Regional Commissioner
RLGO	Regional Local Government Officer
SHDDP	Southern Highland Dairy Development Programme
SHERFS	Southern Highlands Extension and Rural Financial Support
TANESA	Tanzania Netherlands Support on Aids
TBAs	Traditional Birth Attendants
UNICEF	United Nations Children’s Fund
VEO	- Village Executive Officer -
VHWs	Village Health Workers
WDC	Ward Development Committee
WEO	Ward Executive Officer

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Last but not least the Consultant appreciates the contributions made by extension workers at the ward level, village leaderships and communities at large. They all provided a homage stay during the field visits.

## EXECUTIVE SUMMARY

### Background Information

UNICEF undertook a study whose overall objective was to determine who are the key “Actors” Current and Potential of CSPD programme at Community, Ward and District levels and their capacities for programme delivery. The study was in light of many political, economic and policy changes the country is undergoing which have direct bearing and input on programme implementation.

UNICEF supported CSPD programmes have for quite sometime operated in a rigid, centralized government and one – party structures, which despite their exclusiveness, did provide a degree of predictability and efficiency which, in turn, facilitated programme implementation. With the political democratization, economic liberalization processes going on at the moment, the CSPD programmes needed to re- examine its main actors – present and potential – in the context of growing and shifting of roles from public to private, government control to civil society organizations and the decentralized structures being put in place.

In the Fiscal year 1996/97 the Government started to implement its decision of restructuring regional administration and putting in place local authorities which are performing well in the way of championing development and delivering of economic and social services to the people.

Thus the government move was in the right direction, aimed at bringing closer to the people the decision making process which entails genuine participation, democracy and self governance as well as the implementation of various development programmes. This was a major shift from the traditional approach of regional focus to current the district focus planning and implementation with the final goal of transferring the same functions to ward and village levels.

## **Methodology of carrying out the study**

A briefing from UNICEF Senior Programme Officer and other Project Officers. (one from Health Unit and three from Community Based Planning and Coordination Unit), preceded the study. It was then followed by field studies covering three districts namely: Mufindi, Ulanga and Magu . Each district representing South West, Eastern and Lake Zones respectively.

The approach used to conduct the study was participatory in nature which involved interviews and discussions with district functional managers viz. District Executive Directors, Ward Development committee members and village governments. It also involved interviews with some collaborating partners like donor agencies, NGOs and Religious Institutions.

## **Findings of the Assignment**

- (i) The current key actors for CSPD implementation at the district level are: The DED who has overall responsibility for the implementation of all development projects and programmes, DPLO who has the overall coordinating responsibility and officers from collaborating sectors of Health, Water, Education, Community Development and Agriculture. At the ward level, key current actors are: WEO who is coordinating the programme and other extension workers. Key actors at the village level are: Communities, VHWs, TBAs, CORPs, PHC, and village government. However day to day implementation of the programme has been left to VHWs in all district visited.
- (ii) Most of the key actors at all administration levels with the exception of VHWs and TBAs limit themselves to coordination role much as it is not effective. The consultant has defined both the coordination and implementation roles for the key actors at all levels as follows:

### **District Implementation Team**

This is a small team, which deals with day to day implementation of programme activities. The roles of this team are as follows:



- Prepare annual plans with respect to community needs, budget and forward them to the respective committees.
- Train ward level (TOTs) on various issues related to CSPD.
- Coordinate and Follow - up programme implementation.
- Collect data, store, and interpret data (CSPD) for the purpose of improving the situation of children and women in the district.
- Management of programme supplies and equipment(ensure proper /intended use of programme supplies and equipments).
- Make follow- ups on financial resources, supplies and equipments from UNICEF for the purpose of doing programme activities timely.
- Implement all directives as issued by higher authorities.
- Act as a link between district and ward levels.
- Make a closer follow- ups to the areas under difficult circumstances and provide technical support.
- Members of District Teams will provide technical input in their respective areas of specialty.
- Facilitate Community based planning process.

#### **Ward Implementation Team:**

This is a small team, which is composed of technical personnel. Depending on the district, the team members range between four and five staffs. However in some districts like Mufindi and Utanga, there are wards which have two staffs only. For those districts which have complete teams, the roles are defined as follows:

- Prepare and implement various activities during the village health days.
- Participate and strengthen village committees and ensure that meetings are conducted as scheduled.
- Facilitate and participate in preparation of community based plans.
- Consolidate community-based plans.
- Prepare progress implementation reports and forward them to WDC.
- Assist VHWs in collection and aggregation of data on the following:

- ◆ Children nutritional status.
- ◆ Immunization status.
- ◆ Maternal and child deaths and their causes.
- ◆ Diseases and outbreak of diseases.
- ◆ Household food availability.
- ◆ Environment and sanitation.

### **Village council.**

The village council is responsible for overall programme implementation.

Roles:

- Overall programme implementation.
- Discuss programme implementation reports and forward them to WDC.
- Ensure that village health days are conducted as scheduled.
- Monitoring and Follow – up on Programme implementation.

Primary Health Committee (PHC) has the responsibility of ensuring that:

- ◆ Programme supplies and equipment are used for intended purposes.
- ◆ Village registers and follow – up forms are used for intended purposes and updated.
- ◆ Active community participation in preparation of community based plans.
- ◆ Make follow –ups on children with severe malnutrition.
- ◆ Act as a link between households and village government – members of the committee should make a closer follow – up on household with severe problems, discuss with them and come up with solutions to solve the same.
- ◆ VHWs are rewarded

(iii) The analysis of the existing capacities of the current key actors in implementing CSPD programme at all levels has shown that the actors are constrained with the following factors:

- Insufficient and under qualified staffs at all levels.
- Insufficient and under qualified supporting staff at the district level.
- Poor working environment.
- Inadequate working facilities and equipments.
- Weak financial management capacity.
- Weak planning, monitoring and coordination capacity.

(A detailed explanation is seen in chapter three section 3.1.2) Further analysis of cause – effect relationship has shown that the above mentioned problems have the following impact in programme implementation

- ❖ Coordination of CSPD programme is weak both at district and village council levels with intermediate wards performing not much better.
- ❖ Donor coordination is weak.
- ❖ Management of village councils is extremely poor with the majority of their membership broadly unaware of their roles, and pretty much unaccountable to villagers.
- ❖ Collection of data and maintenance of record books is poor.
- ❖ Communities lack adequate and quality services like water, health and education.
- ❖ Living standards of communities has deteriorated.

(iv) The study findings have revealed that there are no new actors in CSPD implementation which have emerged due to political, economic and social changes. This might have been attributed by UNICEF's operationalization through government structures. However the findings revealed further that there are potential actors who can work with UNICEF in CSPD implementation. It is also worth noting that all the potential actors visited have shown interest in collaborating with UNICEF in implementation of social development activities in the districts. In addition they all adhere to effective donor collaboration.

development activities in the districts. In addition they all adhere to effective donor collaboration.

Potential actors identified are Donor related agencies, local and international NGOs and Religious institutions. Most of these collaborating partners have strong institutional, technical and financial management capacities.

### **Recommendations**

In order to improve the capacities for programme delivery significant improvements in Management have to take place. This is particularly true for personnel and financial management. Strategies should be designed to address the main problems and capacity building will be a significant component. Capacity building needs to be integrated with the Local Government Reform Agenda (1996 – 2000).

1. It is recommended that for improved service delivery, UNICEF, in collaboration with district councils could as well operationalise through well established NGOs and religious institutions. Study findings have found that religious institutions like Roman Catholic, are well organized, accepted by communities and have strong management capacity and high Trust in maintaining resources. In addition they are prepared to collaborate with UNICEF and other donors.  
In line with the above recommendation, it is suggested that each district implementing CSPD, inventorize the potential NGOs and religious institutions which can collaborate with UNICEF effectively in programme implementation.
2. Key actors in CSPD implementation and those in other projects/activities at all levels should be oriented with the Current Country Programme Content and Structure.
3. Key actors in CSPD programme need to be provided with working facilities and equipments. These include: Vehicles for district implementation teams, computer and printers, photocopiers, stationery, typewriters, duplicating machines, calculators, office furnitures, cameras, and others which will be needed for smooth service delivery. At the Ward level there is a need of providing and replenishing motorcycle for

ward coordinators, and bicycles for VHWs and VEOs. Other facilities needed include TBAs and Drug kits.

4. More efforts on capacity building should be put to the community level which is immobile. Experience has shown that a lot of training have been conducted at the district level but there has been a lot of transfers for trained staffs which overshadowed the training impact. Communities should be empowered to internalize CSPD implementation.

In line with the above recommendation, it is suggested that participation of communities should be improved through PRA resulting in community based plans, the participation of beneficiaries in sectoral planning and attendance of the general public to Full Council sessions.

5. Communities' efforts to improve social services should be complemented. The study findings have revealed that in some villages of Magu district, communities have constructed schools, dispensaries and water schemes using own resources but the district council has not supported these efforts as promised due to financial constraint. Apparently communities are demoralized, it is therefore suggested that UNICEF in collaboration with other partners give support in terms of building materials to those communities which have shown such efforts.
6. Much as Development agencies supporting district councils have supported donor- coordination meetings, there is still a weak coordination capacity. This is probably true because most donors have their headquarters in Dar es salaam and those in the districts are more of implementers than decision makers.  
It is therefore suggested that UNICEF, in collaboration with other development agencies and the MRA & LG, PMO, MF, PC Should find a strong coordination mechanism to alleviate this problem. This will improve management and delivery of economic and social services in district councils.  
(Detailed recommendations are narrated in chapter four).

## CHAPTER ONE

### INTRODUCTION.

#### 1.1. Background To the Study:

The Child Survival, Protection and Development (CSPD) Programme (1997 – 2001) was designed and developed at a time when the country was beginning a far – reaching process of political, economic and social reforms geared towards strengthening democracy, higher economic growth and improvement of the wellbeing of the people through better services delivery. The multi – partisanship ushered in by the political reforms has created more democratic decision making as opposed to the previous one party operation. The economic liberalization brought in new opportunities and avenues for people's ways of doing things. The policy reforms are transforming many government structures to create enabling environment in the provision of social services. All these changes have potentially major implications in the implementation and delivery of the Child Survival, Protection and Development Programme.

UNICEF supported CSPD programmes have for quite sometime operated in a rigid, centralized government and one – party structures, which despite their exclusiveness, did provide a degree of predictability and efficiency which, in turn, facilitated programme implementation. With the political democratization, economic liberalization processes going on at the moment, the CSPD Programme needs to re- examine its main actors – present and potential – in the context of growing and shifting of roles from public to private, government control to civil society organizations and the decentralized structures being put in place.

## **1.2. Objectives of the Study.**

In light of the many political, economic and policy changes the country is undergoing which have direct bearing and impact on programme implementation, UNICEF is undertaking a study whose overall objective is: to determine who are the key “actors” – current and potential – of CSPD programme at community, ward and district levels and their capacities for programme delivery. Specifically:

- ◆ Identify the main actors at each level and assess their capacities.
- ◆ Identify the new actors who have emerged due to political, economic and social policy changes in each level and assess their capacities.
- ◆ Identify the potential actors at each level and assess their capacities.

Actors are those individuals and institutions directly or likely to be involved in CSPD programme implementation at community, ward and district levels e.g. community volunteers, village health workers, village development committee members, ward extension workers, ward development committee members, district functionaries, district councils/committees, CORPS, CBOs NGOs etc.

## **1.3. Work Assignment:**

- i) Identify current key actors at community, ward and district levels by reviewing implementation progress reports in 3 selected districts. Define their roles in programme implementation.
- ii) Investigate new and potential actors in the 3 selected districts.
- iii) Assess the capacities of the current, emerging and potential actors in the 3 selected districts.
- iv) Recommend to UNICEF measures in terms of capacity building for the key actors at community, ward and district levels.
- v) Write final report in Microsoft Word in diskette and produce hard copy for the consultancy period.

#### **1.4. Methodology of Carrying Out the Study**

A briefing from UNICEF Senior Programme Officer and other Project Officers, (one from Health Unit and three from Community Based Planning and Coordination Unit), preceded the study. It was then followed by field studies covering three districts namely: Mufindi, Ulanga and Magu each representing South West, Eastern and Lake Zones respectively.

The field studies involved interviews and discussions with district functional managers viz. District Executive Directors, Ward Development committee members and village governments. It also involved interviews with some collaborating partners like donor agencies, NGOs and Religious Institutions.

Instruments which were used in this study include:

- Study of relevant documents.
- Interviews with key stake holders at district, ward and village levels.
- Focus group discussion.
- Field observation.
- Institutional Analysis.

#### **1.5. Layout of the Report.**

The report has been structured to give a comprehensive narration and facts of the main actors for the implementation of CSPD activities, their roles and capacities at the district, ward and village levels. It is followed by a list of recommendations for capacity building covering institutional, technical and financial capacities.



## CHAPTER TWO

### THE EXISTING SITUATION

#### 2.1. District Social – economic Profile.

District social – economic profiles intend to give a bird's eye view of the districts where the study was conducted. The profiles cover in a nut shell information on location, area and population, administrative setup, major economic activities, water supplies, health, education and donor agencies and NGOs. The information is summarized in the table overleaf.

**Table 1:  
Districts Social Economic Profile**

<b>DISTRICT</b>	<b>LOCATION</b>	<b>Area and Population</b>	<b>Administrative Set up</b>	<b>Major economic Activities</b>	<b>Water supply</b>	<b>Health</b>	<b>Education</b>	<b>Donors and N Gos.</b>
<b>Mufindi</b>	80 km. South of the Regional capital of Iringa and 602 km. South west of capital city Dar es Salaam	Land. 7,122 sq. km 1988: 299,247 Males: 141,303 Females: 157,944	Division – 5 Wards – 28 Villages – 131	Agriculture employing about 85% of the total population	Coverage:	One private Hospital Health Centres 4 1 – private Dispensaries	No of Primary school 137 enrolment 51, 947 (25,440 boys 26,507 girls Secondary school	UNICEF DANIDA SHERFS SHDDP AARW MET/INCOME HIMA Religions Institut
<b>Ulanga</b>	North – Kilombero District East – Lindi region South – Ruvuma region W. – Kilombero District	Land – 24,460 km <sup>2</sup> 1988 – 138,642 people	Division – 5 Wards – 24 Villages – 65	Farming & keeping of some livestock	Coverage: 56.6%	H: 2(1 private)  HC: 3 all public  D: 30(14 are private)	No of Primary school 89  Enrolment – 25,525 Secondary school 4 all public	<ul style="list-style-type: none"> <li>• UNICEF</li> <li>• IRISH AID</li> <li>• RELIGIOUS INSTITUTION</li> <li>• DWS</li> <li>• KVT</li> <li>• IMA</li> <li>• JCT</li> <li>• GERMAN ORPHANAGE</li> </ul>

DISTRICT	Location	Area and Population	Admin set up	Major economic activities	Water supplies	Health	Education	Donors and NGOs
<b>Magu</b>	Within 201 <sup>0</sup> and 205 <sup>0</sup> latitude South of Equator and 33 <sup>0</sup> and 34 <sup>0</sup> East of Green which	1988: 415,030 males: 203,365 females: 211,665 underfives: 87.133  Land: 4800 km <sup>2</sup> water coverage: 1725km <sup>2</sup>	Division- 6 Wards - 27 Villages 115	More than 80% of population is employed by agriculture sector. Livestock keeping is also practiced in the district	Coverage: 42.8% of the population is served with clean and safe water.	H: 2(1 private)  HC: 4 (all Govt.)  D: 38(Govt) 12 ( Private)	No. of Primary school 160  Enrolment : 55,269  No of secondary Schools: 7	<ul style="list-style-type: none"> <li>• UNICEF</li> <li>• HESAWA</li> <li>• TANESA</li> <li>• CARITAS</li> <li>• CARE</li> <li>• AIDET ET ACTION</li> </ul>

## **2.2 District Council Set- up:**

### **2.2.1. Organisation Structure**

According to the Local Government Reform, the District Councils fall under the Ministry of Regional Administration and Local Government and are answerable to the minister through the proper officer i.e. the Regional Commissioner. The chief executive officer is the District Executive Director (DED). At the council level the DED is a non – voting member functioning as secretary to the Full Council composed of elected councilors and local members of parliament. The council functions through six standing committees. Membership to the standing committees, which varies between five(5) and ten(10), is open to elected councilors and the local members of parliament. The DED is the secretary to the Finance and Planning committee whose membership is made up of the chairpersons of the other five standing committees. Respective heads of the responsible departments act as the secretary to the other committees. These committees which meet quarterly i.e. four(4) times a year cover:

- Finance and Planning
- Administration and Establishment
- Social Services
- Education and Culture
- Human Resources Deployment
- Economic services

These committees deliberate on administrative and financial matters falling under their jurisdiction as submitted to them by the relevant heads of department from the district administration. While each standing committee reports to the full council on administrative matters, they still have an obligation to report on financial matters to the finance and planning committee which meets once every month. The finance and planning committee is the main watchdog of the council's operations and is responsible for monitoring trends of approved expenditures on projects. This committee reports to the Full council once every quarter. The Full Council deliberates on reports and issues submitted to it by the standing committees including financial performance of the various sectors which is submitted by the Planning and Finance committee. One of the major functions of the Full Council is deliberations on the annual planning and budget. Minutes and resolutions of the council's quarterly meetings are

communicated to the Ministry of Regional Administration and Local Government (MRA & LG).

The DED has under his command fourteen (14) departments that form the District Management Team(DMT) of which he/she is the chairperson. The DMT meets once every three month. The departments that form DMT cover the following sectors:

- Finance
- Planning
- Personnel and Administration
- Water
- Health
- Community Development
- Education
- Cooperatives
- Trade
- Natural Resources
- Land
- Agriculture and Livestock
- Culture
- Works

### **2.2.2 Relationship With Central Government**

District Councils are semi – autonomies bodies functioning under the central government through the office of the Regional Commissioner (RC) referred as Appropriate Officer. The Office of the Regional Administrative Secretary (RAS) is the advisory body of the RC on all technical matters. The Regional Local Government Officer (RLGO) is the officer within the office of the RAS responsible for local government matters. The RC who is the final Approving Officer for district budgets finally decides all activities of the district.

The Heads of departments at the district level can communicate directly with relevant parent ministries on all technical matters while administrative issues are handled through DED and office of the RAS.

The Ministry RA & LG handles all district administrative issues through the Local Government Service Commission(LGSC). These issues include training, promotions and inter – district transfers. It is worth noting that with the formation of full MRA &LG, the office of the Prime Minister does not have a direct influence on matters related to the district administration except for disasters of national magnitude. A national committee of which the minister for RA & LG is a member handles such disasters and it draws its funding from the consolidated Fund. Within the Directorate of Local Government in the MRA & LG there is a department responsible for monitoring of projects in the districts. This department is composed of a civil engineer, a planner, an accountant and architect. The unit is responsible for monitoring implementation of projects in the districts through random inspection.

### **2.2.3. Relationship With Parent Ministries**

In future, local government will be reorganized to have only three statutory committees (instead of the current six). These are:

- Finance and Administration
- Education, Public Health and Water
- Economic Affairs.

Additionally, each district will have the option to form other committees depending on needs but limited to three.

District will then be making major decisions without the interference of Central Government. This will include implementation and control of all approved projects regardless of value (hitherto controlled by Central and Regional Tender Boards).

The role of the MRA & LG will be to give guidelines and co – ordinate inter – ministerial issues that affect the districts within the national policy guidelines. Training and development of Senior Staff will be overseen by LGSC.

The Office of the RAS will play the role of a supporter and Coordinator for districts and assist in inter- district communication e.g. transfer or hire equipment. The RAS will still consolidate district budgets without alteration for onwards transmission to the MRA & LG.

## CHAPTER THREE

### MAIN ACTORS FOR CSPD IMPLEMENTATION AT THE VILLAGE, WARD AND DISTRICT LEVELS.

#### 3.1 Current Actors Implementing CSPD Programme At District, Ward and Village Levels

The District Executive Director is the Chief Executive Officer to the Council as well as the accounting Officer. Overall responsibility for the implementation of all development projects and programmes (CSPD being one of them) lies with the DED.

The three main advisers to the DED are the District Planning Officer(DPLO) who has the overall coordinating responsibility, particularly with respect to donor supported projects, the District Treasurer (DT) and the District Manpower Management Officer (DMMO).

The District Management Team(DMT) is an adhoc committee which acts in a monitoring/steering capacity. In addition, closely related departments of Health, Water, Education, Community Development and Agriculture play a major role in CSPD implementation. Officers from these departments work hand in hand with the DPLO for day to day running of the programme activities. It was also noted that in Magu district one accountant has been specifically assigned CSPD tasks.

At the Ward level programme implementation is coordinated by the Ward Executive Officer who work closely with extension workers. It was only in Magu district where Ward Executive Committee(WDC) discusses CSPD implementation progress.

Key actors at the village level identified for CSPD implementation are Communities, VHWs, TBAs, CORPS, PHC (VHC) and Village government. However day to day implementation of the programme has been left to VHWs in all district visited. It was also noted that programme implementation progress is not discussed in village govt. seating.

### **3.1.1. Roles of the Key Current Actors:**

Prior to defining roles for the key actors in CSPD implementation, it is important to look at the responsibilities that the district councils have in administering development programmes and projects.

The officially stated objectives of local government in Tanzania as per 1984 Local Government act are:

*To provide meaningful decentralization of government administration by facilitating the more effective democratic participation at the village, district and regional levels.*

The functions of local government summarized in section (iii) of the local government (District authorities) Act of 1982 are as follows:

- To maintain and facilitate the maintenance of peace, order and good government in its area of jurisdiction
- To promote the social welfare and economic well being of all persons within its area of jurisdiction.

Subject to the national policy and plans of rural and urban development to further social and economic development in its area of jurisdiction.

Specific Objectives are to :

- Formulate, coordinate and supervise the implementation of all plans for the economic commercial, industrial and social development of its area of control.



- Monitor and control the performance of the duties and functions of council by departments of the council and offices and staff.
- Make by – laws throughout its area of operation.
- Consider, regulate, and coordinate development plans, projects and programmes of village councils and township authorities within the area of governance in order to ensure:
  - the enhancement of economic productivity
  - the acceleration of social and economic development of villages
  - the amelioration of rural life.
  -

During the study visit, the consultant tried to ask key actors at each administration level to define their roles. Unfortunately most of them limited themselves to coordination role much as it is not effective.

As one of the requirement, the consultant has defined roles for key actors at each level in line with the functions of the local government as follows:

### **District level:**

#### **The District Management Team (DMT)**

As aforementioned DMT is an adhoc committee which acts in a monitoring/steering capacity. This committee is composed of district heads of departments.

- i) Discuss and approve annual plan and budget.
- ii) Discuss and approve progress implementation reports.
- iii) Issue guidelines on programme implementation and address problems which occur in the course of implementation
- iv) Ensure proper resource utilization and supplies.
- v) Forward issues pertaining to CSPD to Full council and to the regional level.
- vi) Strengthen intra sectoral collaboration.
- vii) Conduct donor coordination meetings

### **District Implementation Team**

This is a small team which deals with day to day implementation of programme activities. The team is composed of Planning Officer responsible for CSPD and other officers from collaborating sectors. The roles of this team are as follows:

- i) Prepare annual plans with respect to community needs, budget and forward them to the respective committees.
- ii) Train ward level (TOTs) on various issues related to CSPD.
- iii) Coordinate and Follow – up programme implementation.
- iv) Collect data, store, and interpret data (CSPD) for the purpose of improving the situation of children and women in the district.
- v) Management of programme supplies and equipment (ensure proper /intended use of programme supplies and equipments).
- vi) Make follow- ups on financial resources, supplies and equipments from UNICEF for the purpose of doing programme activities timely.
- vii) Implement all directives as issued by higher authorities.
- viii) Act as a link between district and ward levels.
- ix) Make a closer follow- ups to the areas under difficult circumstances and provide technical support.
- x) Members of District Teams will provide technical input in their respective areas of specialty.
- xi) Facilitate Community based planning.

## **Ward level**

### Ward Development Committee:

This is a committee, which oversee all developmental issues in the ward. The committee is composed of Ward Councilor who acts as a chairperson, WEO, ward and village extension workers, village chairpersons and VEOs.

#### **Roles:**

- i) Receive and discuss programme implementation reports from the respective villages and make a follow – up on the same.
- ii) Discuss community-based plans and forward them to the district level.
- iii) Monitor programme implementation.
- iv) Act as a link between village and ward levels.
- v) Ensure proper use of resources.

### Ward Implementation Team:

This is a small team which is composed of technical personnel. Depending on the district, the team members range between four and five staffs. However in some districts like Mufindi and Ulanga , there are wards which have two staffs only. For those districts which have complete teams, the \roles are defined as follows:

- i) Prepare and implement various activities during the village health days.
- ii) Participate and strengthen village committees and ensure that meetings are conducted as scheduled.
- iii) Facilitate and participate in preparation of community based plans.
- iv) Consolidate community-based plans.
- v) Prepare progress implementation reports and forward them to WDC.

vi) Assist VHWs in collection and aggregation of data on the following:

- ◆ Children nutritional status.
- ◆ Immunization status.
- ◆ Maternal and child deaths and their causes.
- ◆ Diseases and outbreak of diseases.
- ◆ Household food availability.
- ◆ Environment and sanitation.

### **Village Level:**

#### **Village council.**

The village council is responsible for overall programme implementation.

#### **Roles:**

- i) Overall programme implementation.
- ii) Discuss programme implementation reports and forward them to WDC.
- iii) Ensure that village health days are conducted as scheduled.
- iv) Monitoring and Follow – up on Programme implementation.
- v) Facilitate and participate in Community Based Planning process.

The Village Health Committee (VHC/PHC) has the responsibility of ensuring that

- ◆ Programme supplies and equipment are used for intended purposes.
- ◆ Village registers and follow – up forms are used for intended purposes and updated.
- ◆ Active community participation in preparation of community based plans.
- ◆ Make follow –ups on children with severe malnutrition.

- ◆ Act as a link between households and village government – members of the committee should make a closer follow – up on household with severe problems, discuss with them and come up with solutions to solve the same.
- ◆ VHWs are rewarded

**VHWs have the following responsibilities:**

- Collection and aggregation of data on the following:
  - ◆ Children nutritional status.
  - ◆ Immunization status.
  - ◆ Maternal and child deaths and their causes.
  - ◆ Diseases and outbreak of diseases.
  - ◆ Household food availability.
  - ◆ Environment and sanitation.
- Updating village Registers.
- Preparing monthly and quarterly reports.

**Sub – Villages Representation:**

It is recommended that each sub – village should have a sub committee (health) which will be responsible for follow – up and implementation/ monitoring of CSPD programme. Composition and Number of committee members will differ depending on the nature of the sub – village.

### 3.1.2. Capacities of the Current Actors for CSPD Implementation.

Effective capacity require that:

- Adequate financial, human and material resources are available and efficiently and effectively managed.
- Communities, districts and Institutions have access to relevant skills and knowledge according to their area of operation and responsibility.
- Sufficient leadership and management skills are present to take and effectuate decisions.
- A supportive, political, economic and social environment is in place.

Capacities of the Current key actors in CSPD implementation have been summarized in Technical, Financial and Institutional, which will cover all aspects, mentioned above:

#### **Technical Capacity:**

Study findings have revealed that at the district level the number of staff available in planning offices and collaborating sectors is generally insufficient with exceptions of a few instances. In Mufindi district there is a shortage in planning office, in which there is only one qualified Planning Officer and one Planning Assistant. In Ulanga and Magu districts, the planning offices have four and three qualified Planning Officers respectively. It was further revealed that although the number of Planning Officers in Ulanga and Magu districts looks big, these officers are overworked as compared to the amount of work to be done effectively.

The findings have further revealed that due to lack of Statisticians in the planning offices in all district visited, there is inadequate reliable data, inefficiently stored and badly processed which contribute to a situation where the ability to plan well is severely constrained.

In order to ensure an effective devolution of power, the local authorities have to be provided with well trained and qualified staff and necessary support needed at that level. Staffed with competent personnel, the local authorities are expected to prepare and implement

their own development plans which by and large will make use of existing, locally available resources.

The availability of reliable, adequate, qualitative and relevant data and information at the district level is a pre-requisite for the success of the local authorities in their new role of formulating, planning, implementing, monitoring and evaluating their development programmes.

It is anticipated that the recent training on District Situation Analysis supported by UNICEF to Planning Officers will improve the situation.

Other collaborating sectors are also understaffed. The findings have revealed that in Mufindi district Water and Education departments have under qualified staffs. In Ulanga district the Health sector is facing a similar problem. In Magu district the situation is also the same.

The study findings have revealed that although some departments seem to have adequate manning level these staffs lack required qualifications and skills. In Magu district for instance, there is only one Medical Doctor whereas the requirement is three; in Water sector there are 16 staffs but there is no qualified engineers, all of them are technicians; similarly in Community Development there are four staffs with two diplomas and two certificates. Like wise Ulanga district faces the similar problem.

Apart from key actors, the district councils are also constrained by insufficient and unqualified supporting staffs like secretaries. At the Ward level, it has been revealed that there is understaffing of extension workers. In Mufindi district, Ifwagi ward has only two extension staffs i.e. Ward Executive Officer and ward Education Coordinator. It was further revealed that some wards lack qualified personnel at the dispensaries. There are no MCH Aiders at that level, most of the nurses are Nursing Auxiliaries. In Ulanga district, the situation is quite similar. While there are 24 wards, the CDOs are 5 and Agricultural Field Officers are only 5; there is also inadequate MCH Aiders. It is required that each dispensary have one MCH Aider, but in Mwaya Division there are only 2 against 9 dispensaries, Malinyi Division has 2 MCH aiders against 13 dispensaries.

department at the ward level. It is however worth noting that there are sufficient Agricultural Field Officers and Ward Education coordinators in the district.

At the village level the situation is worse. Most villages in districts visited lack village extension workers apart from a few Health Assistants and primary school teachers.

The human resource capacity described above has a bearing in CSPD implementation. Coordination of CSPD programme is described as very weak both at district and village council levels with intermediate wards performing not much better. This is due to a mismatch between qualifications and the needs of job, low level of morale, inadequate working tools and uncondusive working environments. This is all compounded by inadequate financial resources and weak interdepartmental coordination.

Donor Coordination in the districts is weak. With the exception of UNICEF, the councils are broadly uninformed about some donor plans and budgets and duplication of activities is occurring. Villagers are confused by the different approaches donors have. Some donors operate illegally without the formal blessing of the district councils.

The study findings revealed that management of village councils is extremely poor with the majority of their membership broadly unaware of their roles, and pretty much unaccountable to villagers. Most village leaders do not understand the CSPD programme. This is because the programme implementation has been left to VHWs. In some instances the programme is understood in its narrow sense, mainly nutrition and immunization.

The village leaderships have not been empowered to internalize their roles and responsibilities towards supporting programme implementation in regard to payment of key actors and maintenance of bicycles, water facilities, replenishment of drug kits etc. When asked whether the village leadership have received any training on leadership skills since they came into power they replied NO. The communities also do not know what they should expect from their leaders.

Collection of data and maintenance of record books at the village are faced with problem of inconsistencies in reporting, lack of continuity whereby trained people are temporarily disabled while in other areas



Collection of data and maintenance of record books at the village are faced with problem of inconsistencies in reporting, lack of continuity whereby trained people are temporarily disabled while in other areas books and register may be missing. This is attributed by lack of storage facilities and furnitures in village offices which cause VHWs to keep registers in their residences.

### **Institutional Management Capacity:**

Institutional capacity will mainly describe the level and access to resources and facilities an institution has for a conducive working environment which can increase staff working spirit. It will also describe the extent to which the organization is committed to support its programme goals and strategies of social development activities, as well as the ability to motivate and utilize human and other resources which are under its control.

The institutional capacity in the districts visited is very weak. The findings revealed that the working environment in the offices visited at the district, ward and village levels are very poor. In addition there is inadequate working facilities at all levels.

At the district level most facilities belong to donor funded projects, some of which are strictly for project use only. The DED and DPLO have no access and control to these facilities. The case is with HIMA project in Mufindi district.

The assessment has further revealed that in Mufindi district there are total of 15 vehicles, one old computer (1991) one photocopier (1991), and manual typewriters. Ulanga district has 10 vehicles, 5 computers, one photocopier and manual typewriters. Magu district has 12 vehicles, 19 motorcycles, manual typewriters, duplicating machines and one computer. As aforementioned, most of these facilities belong to donor funded projects.

With regard to CSPD programme, Project vehicles are not in very good condition. Some vehicles are grounded in Magu and Mufindi district due to high costs required to make them roadworthy.

At the ward and village levels, working facilities and environment are also poor. Ward and village offices lack necessary facilities like furnitures, stationary etc. In some areas even village offices are missing.

In Mufindi district WEOs who are project coordinators at their capacity lack motorcycles, similarly VEO lack bicycles in all districts visited. The VHWs

and TBAs lack necessary facilities and equipments for CSPD implementation. They need to be provided with new bicycles, TBA kits, Drug kits and stationery.

It has also been revealed that the district councils play a minimum role in supporting donor efforts for implementing social and economic development activities. The district councils provide staffs who are being paid salaries by the councils. DCs are incapable of maintaining facilities and equipments provided by donors due to financial constraints. Although districts budget show allocation of funds for CSPD programme, in actual fact the funds are not oftenly released.

### **Financial Management Capacity:**

Financial management and control capacity refer to the availability of financial and other resources in the institution both to enable it to maintain activities as well as to ensure the skills in the work force are effectively being utilized.

The assessment has revealed that the financial capacity of the district councils is very weak. In Ulunga district for example, only Tshs.50 million is raised annually the bulk of which is spent on the recurrent not the development budget. The situation at the ward level is much the same virtually none of monies retained from tax collection is reinvested in development.

A trend analysis disturbingly noted that compared to ten years ago, villagers almost unanimously felt that their living standards had eroded due to a deterioration in social services, increases in the price of consumer goods, and collapse of agriculture sector in the districts. A poverty profile compiled adopting techniques noted that a rift had developed between government and villagers. As one villager put it (we have our councilor, but we don't see any activities, no assistance of any kind, the only activity is the collection of tax and levy each year).

The weak financial capacity has also a bearing in CSPD implementation. Communities lack adequate and quality basic services like water, health and education. Economic hardships, which have hit the communities, incapacitate revenue collection leaving village council bankrupt thus unable of paying VHVs. Consequently this has demoralized the VHVs causing inefficiency in CSPD implementation.

Limited allocation of development funds from the central government and from district councils has minimized follow – up at the ward and village levels. Communities in Mufindi and some parts of Ulanga district (Mtimbira Village) thought that the CSPD programme was over.

### **2.3 Emerging and Potential Actors in CSPD Implementation.**

The study findings have revealed that there are no new actors in CSPD implementation, which have emerged due to political, economic and social changes. This might have been attributed by UNICEF's operationalization through government structures. However the findings revealed further that there are potential actors who can work with UNICEF in CSPD implementation. It is also worth noting that all the potential actors visited have shown interest in collaborating with UNICEF in implementation of social development activities in the districts. In addition they all adhere to effective donor collaboration.

Potential actors identified are Donor related agencies, local and international NGOs and Religious institutions. Most of these collaborating partners have strong institutional, technical and financial management capacities.

The findings revealed that these partners have their own offices in the district councils, their employees, paying them salaries and allowances which are far different from those of the district officials. In addition they have their own transport and other working equipments which are monitored, controlled and supervised by themselves.

It is important to point out that, there has been a tendency of many donor agencies (except UNICEF which operate through govt. structures) to draw technical staffs from the district councils to work permanently in their projects. This has left the DCs with unskilled manpower because each project needs qualified staffs. The consultant feels that this need to be re-examined carefully, because if each donor

want qualified staffs, then how will the DCs execute projects which have no donor support or donor agencies operating within government structures?

The consultant also feels that there is a need of effective donor coordination. However, the DCs have no capacity to coordinate donors effectively because some donors are based at the regional and national headquarters. Those at the districts are more of implementers than decision-makers. In addition there is lack of transparency between donors and between some donors and the government. It is recommended therefore that during the donor coordination meeting at the national level UNICEF could bring in this issue for thorough discussion and agreement. It is further suggested that the MRA & LG, PMO, Planning Commission, Ministry of Finance should work on a strong coordination mechanism to alleviate this problem.

Summary of potential actors, activities, capacities and required input for capacity building is shown in table 2 overleaf.

Table 2.  
POTENTIAL ACTORS IN CSPD IMPLEMENTATION IN DISTRICTS VISITED

DISTRICT	NAME OF ORGANIZATION INSTITUTION	DESCRIPTION	EXISTING CAPACITY	REQUIRED INPUT
MUFINDI	1. MUFINDI EDUCATION TRUST (MET)	<p>MET is a Non governmental organization, which was incorporated in 1984. Among other things MET aim at upgrading the general level of education in the District by mobilizing community to establish their own secondary school their community participation. It also aims at collaborating with governmental and Ngos for promotion of education generally among the residents of Mufindi Districts.</p> <p>In promoting its objectives MET performs the following activities:</p> <ul style="list-style-type: none"> <li>• Undertakes on behalf of parents project planning, implementation, supervision and management. MET is currently constructing self-help secondary schools with at least one school in each of the five divisions of Mufindi district.</li> <li>• Promotes awareness, self-reliance, and contact donor agencies from both within and outside Tz for generation of resources in support of parent's self-help effort to build and operate schools.</li> </ul>	<ul style="list-style-type: none"> <li>• Qualified and trained staff in place.</li> <li>• Enabling environment in place</li> <li>• (There is strong support from the ruling party and DC</li> <li>• Organizational building capacity in place</li> <li>• Inadequate materials and equipments in secondary schools</li> </ul>	<ul style="list-style-type: none"> <li>• To learn more from other partners about how they do the activities efficiently.</li> <li>• Exchange experiences gained through the implementation of activities which correspond to MET's</li> <li>• Assistance in equipments, materials and funds to implement its objectives effectively and establish income generating projects to enable MET to be self-reliant.</li> </ul>
		<ul style="list-style-type: none"> <li>• Maintain control of resources and coordination of activities.</li> <li>• Engages competent MET's aff. school headmasters, teaching staff and other employees to ensure provision of sound education compliance with statutory requirements and guidelines of the ministry of education.</li> </ul>		

		<ul style="list-style-type: none"> <li>• Submits regular report to all appropriate organs of MFT, CCM and the Government including the Mufindi district Council in order to ensure accountability to the public of Mufindi District and the public at large.</li> <li>• Seeks to establish contact and dialogue with whoever is promoting similar objectives anywhere in Tz and elsewhere in the world in order to exchange visit and engage in collaborative programmes for mutual benefits.</li> <li>• Provides management services to the schools.</li> </ul>		
		<ul style="list-style-type: none"> <li>• Prepares project write-ups for income generating activities.</li> <li>• Ensures good management of income generating activities and uses surplus income to subsidize school fees according to need in the different project areas.</li> <li>• Collaborates with CCM and WAZAZI organization in undertaking social mobilization of the entire population in order to ensure the need for strengthening primary education and promoting Secondary and other forms of post-primary education, is adequately perceived by all segments of society within Mufindi District.</li> </ul>		
	2. INCOMENT	<p>INCOMENT- is the economic wing of MET . It assists target groups in their struggle to produce enough food livelihood security and eventually in the poverty alleviation. Through its various units INCOMET assists its target groups and individual with financial and material resources as well as training to facilitate their target goals like :</p> <ul style="list-style-type: none"> <li>• The smooth running of MET schools.</li> <li>• Increase of food by the rural population.</li> <li>• The start up and running of various income generating activities by individuals.</li> </ul>	<ul style="list-style-type: none"> <li>• Qualified and trained staff in place.</li> <li>• Enabling working environment in place.</li> <li>• Adequate working facilities.</li> <li>• Technical expertise in its area of operation in place.</li> </ul>	<ul style="list-style-type: none"> <li>• Financial support in carrying nutrition related activities and income generating activities.</li> <li>• Collaboration with other development agencies</li> </ul>
		<ul style="list-style-type: none"> <li>• Training of artisans and business people for self employment and better book-keeping for their</li> </ul>		

		business transactions respectively.		
	3. HIMA (HIFADHI YA MAZINGIRA)	<p>HIMA is a DANIDA funded project which gives support in environmental protection. The project's main activities are:</p> <ul style="list-style-type: none"> <li>• Establish tree nurseries at community level.</li> <li>• Support tree planting of various species at household level.</li> <li>• Conduct various training on establishment of tree nurseries, and proper tree management and use.</li> </ul>	<ul style="list-style-type: none"> <li>• Qualified and trained staff in place.</li> <li>• Qualified resource persons in participatory planning approaches.</li> <li>• Enabling working environment in place.</li> <li>• Working facilities and equipments in place.</li> <li>• Weak integration with district council and other collaborating partners.</li> </ul>	Effective donor collaboration and coordination mechanisms.

	4. ACTION TO ASSIST RURAL WOMEN	<p>This project is operating under International Labor Organization (ILO). It gives support in credit supply to rural women who undertake Agricultural and business enterprises.</p>	<ul style="list-style-type: none"> <li>• Qualified personnel in place.</li> <li>• Good working environment.</li> <li>• Working facilities in place.</li> <li>• Limited funds for project expansion.</li> </ul>	<ul style="list-style-type: none"> <li>• Financial assistance for project expansion.</li> <li>• Collaboration with other related partners</li> </ul>
	5. SHERFS (SOUTHERN HIGHLANDS EXTENSION AND RURAL FINANCIAL SUPPORT)	<p>This project is financed by International Fund for Agriculture Development (IFAD). It supports extension services and credit mobilization to the small holder farmers. It covers the whole district.</p>	<ul style="list-style-type: none"> <li>• Qualified personnel in place.</li> <li>• Good working environment.</li> <li>• Working facilities in place.</li> <li>• Weak integration with other development agencies.</li> </ul>	Effective donor coordination and collaboration mechanisms.

	1. SHDDP ( SOUTHERN HIGHLAND DAIRY DEVELOPMENT PROGRAMME)	This is a Swiss assisted programme in Dairy activities for small holder farmers. It covers the whole District.	<ul style="list-style-type: none"> <li>• Qualified personnel in place.</li> <li>• Good working environment.</li> <li>• Working facilities in place.</li> <li>• Weak integration with other development agencies.</li> </ul>	Effective donor coordination and collaboration mechanisms.
	7. RELIGIOUS INSTITUTIONS	Religious Institutions including Roman Catholic , Lutheran and Anglican. These institutions are engaged in various social and development activities such as assisting in rural water supply, agriculture and livestock development. They have also established several vocational centers.	<ul style="list-style-type: none"> <li>• Strong organizational structures in place.</li> <li>• Management skills in place.</li> <li>• Community acceptance in place.</li> <li>• Limited financial resources.</li> <li>• Limited working facilities.</li> <li>• Weak integration with other collaborating partners.</li> </ul>	<ul style="list-style-type: none"> <li>• Strong collaboration with other development agencies.</li> <li>• Financial assistance.</li> <li>• Assistance in working facilities.</li> </ul>



DISTRICT	NAME OF ORGANIZATION / INSTITUTION	DESCRIPTION	EXISTING CAPACITY	REQUIRED INPUT
ULANGA	1. IRISH AID	<p>The government of Ireland through IRISH aid , supports various social development activities in Ulanga District. Activities carried out by this organization include:</p> <ul style="list-style-type: none"> <li>• Provision of delivery beds to District Hospital.</li> <li>• Supports education sector in <ul style="list-style-type: none"> <li>□ Construction and rehabilitation of class rooms and teachers houses.</li> <li>□ Procurement and supply of school materials like books and desks .</li> <li>□ Training teachers in administrative skills, health, sports and games.</li> <li>□ Provision of garden tools for horticulture activities in schools.</li> <li>□ Provision of departmental vehicle</li> </ul> </li> </ul> <p>Facilitating seminars to school teachers in various subjects.</p>	<ul style="list-style-type: none"> <li>• Qualified and trained staffs in place.</li> <li>• Working facilities and equipments in place.</li> <li>• Financial Management capacity in place.</li> <li>• Planning capacity in place.</li> <li>• Weak integration with other collaborating partners .</li> </ul>	Effective donor coordination and collaboration mechanisms
	2. PLAN INTERNATIONAL	<p>Plan International is non-governmental organization which deals with construction and rehabilitation of classroom.</p>	<ul style="list-style-type: none"> <li>• Working facilities in place.</li> <li>• Inadequate financial resources for expansion..</li> <li>• Weak integration with other development agencies.</li> </ul>	<ul style="list-style-type: none"> <li>• Effective donor coordination an collaboration mechanisms.</li> <li>• Financial assistance for expansion of activities</li> </ul>
	3. JOINT COOPERATION TANZANIA(JCT)	<p>JCT is a non-governmental organization that deals with the following .</p> <ul style="list-style-type: none"> <li>• Teaching English subject to Primary School pupils.</li> <li>• Facilitate seminars for Primary School teachers.</li> </ul>	<ul style="list-style-type: none"> <li>• Technical expertise in place.</li> <li>• Adequate working facilities.</li> <li>• Qualified and</li> </ul>	<ul style="list-style-type: none"> <li>• Effective donor coordination an collaboration mechanisms.</li> </ul>

		<ul style="list-style-type: none"> <li>• Construction and rehabilitation of classrooms .</li> <li>• Procurement of games and sports gears.</li> </ul>	<p>trained personnel in place.</p> <ul style="list-style-type: none"> <li>• Weak integration with other collaborating partners.</li> </ul>	
	4. ROMAN CATHOLIC	<p>ROMAN CATHOLIC in Ulanga District has played a big role in supporting various social development activities in areas of education, health , water and social welfare.</p> <p><b>EDUCATION:</b></p> <ul style="list-style-type: none"> <li>• Create awareness on improving quality of education</li> </ul>	<ul style="list-style-type: none"> <li>• The institution has experienced instructors in VTC and Secondary Schools.</li> <li>• Rich in management skills and discipline.</li> </ul>	<ul style="list-style-type: none"> <li>• Assistance in teaching facilities and equipments in VTC and girls Secondary School (Regina Mundi)</li> </ul>
		<ul style="list-style-type: none"> <li>• Run a mentally retarded children center. It aims at ensuring that these children are not severely handicapped.</li> <li>• Run pre-school centers.</li> <li>• Run vocational training centers.</li> <li>• Run boys seminary schools , and girls secondary school.</li> </ul> <p><b>WATER:</b> In collaboration with DWE, RC supports rain water harvesting schemes.</p> <p><b>HEALTH:</b></p> <ul style="list-style-type: none"> <li>• Runs 19 dispensaries in Ulanga and Kilombero Districts. Majority of population in these two districts depend on these facilities. The institution work very close with the DMO .</li> <li>• Runs leprosy center.</li> </ul> <p><b>WELFARE:</b></p> <ul style="list-style-type: none"> <li>• RC has care centers for handicapped and disabled people.</li> <li>• Supports women income generating activities.</li> </ul>	<ul style="list-style-type: none"> <li>• Institutional and organizational skills are in place.</li> <li>• It has financial management skills.</li> <li>• It has qualified women in development coordinator.</li> <li>• It lacks teaching facilities and equipments in Secondary schools.</li> <li>• It does not have adequate resources to complete newly opened girls secondary schools and extension in rain water harvesting schemes.</li> <li>• Community acceptance in place.</li> <li>• Weak integration with other development agencies.</li> </ul>	<ul style="list-style-type: none"> <li>• The institution wants to collaborate closely with UNICEF</li> <li>• Effective and coordination an collaboration mechanisms is required.</li> </ul>

DISTRICT	NAME OF ORGANISATION /INSTITUTION	DESCRIPTION	EXISTING CAPACITY	REQUIRED INPUT
MAGU	1. HESAWA (HEALTH THROUGH SANITATION AND WATER)	<p>HESAWA is an integrated development programme. It is supported jointly by the governments of Tanzania and Sweden. The programme overall objective is to improve health and welfare of the rural population through improved health education, environmental sanitation, water supply, community participation, capacity building at village, ward and district levels. Activities which are being implemented by HESAWA are :</p> <ul style="list-style-type: none"> <li>• Construction of shallow wells.</li> <li>• Drilling of boreholes.</li> <li>• Construction /rehabilitation of rural piped water schemes.</li> <li>• Improvements of traditional water sources.</li> <li>• Construction of institutional latrines.</li> <li>• Construction of household latrines.</li> <li>• Construction of households and institutional rainwater harvesting tanks.</li> <li>• Training of village artisans.</li> <li>• Training of TBAs &amp; VHWs.</li> <li>• Training of shallow well care takers and pump mechanics.</li> </ul>	<ul style="list-style-type: none"> <li>• Qualified and trained personnel in place.</li> <li>• Support from district council in place.</li> <li>• Working facilities in place.</li> <li>• Conducive working environment in place.</li> <li>• Adequate financial resource.</li> <li>• Weak integration with other development agents.</li> </ul>	Effective coordination and collaboration mechanisms.
	2. TANESA (TZ NETHERLANDS SUPPORT PROJECT ON AIDS)	<p>TANESA is a project being implemented jointly by the governments of Tanzania and Netherlands in combating the spread of AIDS in the district. The objectives are as follows:</p> <ul style="list-style-type: none"> <li>• To initiate and coordinate strategies for prevention of the fast spreading of AIDS.</li> <li>• To initiate and coordinate functional strategies dealing with problems caused by AIDS infections.</li> </ul> <p>The programme is multisectoral. It collaborates with departments of health , education , community development and NGOs in :</p> <ul style="list-style-type: none"> <li>➤ In establishing AIDS</li> </ul>	<ul style="list-style-type: none"> <li>• Qualified and trained personnel in place .</li> <li>• Conducive working environment in place.</li> <li>• Working facilities and equipments in place.</li> </ul>	Effective coordination and collaboration mechanisms.

		<p>committees in primary schools.</p> <ul style="list-style-type: none"> <li>➤ Establishing and strengthening AIDS committees in fishing villages.</li> <li>➤ Forming cultural groups responsible for educating the community on AIDS in high risk areas.</li> <li>➤ Running the income generating activities fund.</li> </ul>		
	3. CARITAS	<p>CARITAS is a Roman Catholic NGO. In MAGU district CARITAS is concerned with provision of relief services such as distribution of relief food, caring for the sick (AIDS victims in particular) and supporting orphans. CARITAS also extends soft loans to economic groups.</p>	<ul style="list-style-type: none"> <li>• Limited financial resources.</li> <li>• Strong organizational structure in place.</li> <li>• Community acceptance in place.</li> <li>• Weak integration with other development agents.</li> </ul>	<ul style="list-style-type: none"> <li>• Effective coordination an collaboration mechanisms.</li> <li>• Financial assistance</li> </ul>
	4. CARE INTERNATIONAL	<p>CARE is an international NGO which supports Magu District Livelihood Security Project. This project targets rural household especially female-headed household in 5 wards of Magu District. Its objective is to improve the livelihood security of household especially female-headed ones within the 5 wards of Magu District. Interventions in this project include:</p> <ul style="list-style-type: none"> <li>• Agricultural technology transfer.</li> <li>• Adapt and introduce treadle pumps for irrigation purposes.</li> <li>• Improve farmers access to Agricultural inputs for production.</li> <li>• Savings mobilization at community level.</li> </ul>	<ul style="list-style-type: none"> <li>• Qualified and trained personnel in place .</li> <li>• Conducive working environment in place.</li> <li>• Working facilities and equipments in place.</li> <li>• Adequate financial resources.</li> <li>• Weak integration with other development agents.</li> </ul>	<ul style="list-style-type: none"> <li>• Effective coordination an collaboration mechanisms.</li> </ul>
	5. AIDE ET ACTION	<p>Aide et action is an international NGO devoting its funds and activities to basic education in developing countries. In Magu</p>	<ul style="list-style-type: none"> <li>• Qualified and trained personnel in place .</li> <li>• Conducive</li> </ul>	<ul style="list-style-type: none"> <li>• Effective coordination an collaboration mechanisms.</li> </ul>

		<p>District Aide et action 's main objective is to support the development of public primary education in the district. Therefore the organization is supporting directly, and cooperating permanently with District Education Officer. One officer from the DEO is seconded on permanent basis to Aid et action programme. The three major areas of activities are:</p> <ul style="list-style-type: none"> <li>• Improvement of teachers academic standard, working conditions and performances. To set up teachers' resource centers is one of the main concerns in this area. These centers will facilitate inservice training , refresher courses and upgrading of teachers.</li> <li>• Improving and strengthening school committees and their management capacity, by organizing training and conducting projects with them. Awareness on importance of education among parents is also part of that objective.</li> </ul>	<p>working environment in place.</p> <ul style="list-style-type: none"> <li>• Working facilities and equipments in place.</li> <li>• Weak integration with other development agents</li> </ul>	
		<ul style="list-style-type: none"> <li>• Improving the non-environment for pupils with : <ul style="list-style-type: none"> <li>➤ Rehabilitating and constructing school buildings.</li> <li>➤ Supplying classrooms equipments and furniture.</li> <li>➤ Supplying learning materials and text books in schools.</li> </ul> </li> </ul> <p>Aid et action projects and activities rely on the community interest and involvement. Projects are designed in line with the cost sharing approach , especially in respect of maintenance and running costs so to secure the best sustainability. In the long-run the programme will expand its action to other fields apart from the formal primary school system.</p> <ol style="list-style-type: none"> <li>1) Addressing the issue of out of school .</li> <li>2) Adult education and literacy.</li> </ol>		

## CHAPTER FOUR

### CONCLUSIONS AND RECOMMENDATIONS

#### 4.1. Conclusion

The analysis of the existing capacities of the current key actors in implementing CSPD programme at all levels is described as poor, while the capacities for potential actors for CSPD implementation i.e. Donors, NGOs and Religious institutions is described as relatively strong.

In order to improve the capacities for programme delivery significant improvements in Management have to take place. This is particularly true for personnel and financial management. Strategies should be designed to address the main problems and capacity building will be a significant component. Capacity building needs to be integrated with the Local Government Reform Agenda (1996 – 2000).

#### 4.2 Recommendations

1. Much as Development agencies supporting district councils have supported donor- coordination meetings, there is still a weak coordination capacity. This is probably true because most donors have their headquarters in Dar es Salaam and those in the districts are more of implementers than decision-makers. It is therefore suggested that UNICEF, in collaboration with other development agencies and the MRA & LG, PMO, MOF, PC Should find a strong coordination mechanism to alleviate this problem. This will improve management and delivery of economic and social services in district councils.
2. It is recommended that planning departments be empowered so that they can plan, manage and coordinate social development programmes and projects effectively and effectively. Ms Grace Mwalemba in her report on “Needs Assessment for Capacity Building at District Planning Offices in Six District Council, November 1998” has given detailed recommendations on how to empower the planning offices.

3. Key actors in CSPD implementation and those in other projects/ activities at all levels should be oriented with the Current Country Programme Content and Structure.
4. It is recommended that after every training there should be a follow up evaluation to see the impact of the training.
5. Key actors in CSPD programme need to be provided with working facilities and equipments. These include: Vehicles for district implementation teams, computer and printers, photocopiers, stationery, typewriters, duplicating machines, calculators, office furniture, cameras, and others which will be needed for smooth service delivery. At the Ward level there is a need of providing or replenishing motorcycle for ward coordinators, the same applies to VHWs and VEOs for bicycles. Other facilities needed include TBAs and Drug kits.
6. It is recommended that for improved service delivery, UNICEF, in collaboration with district councils could as well operationalise through well-established NGOs and religious institutions. Study findings have found that religious institutions like Roman Catholic, are well organized, accepted by communities and have strong management capacity and high trust in maintaining resources. In addition they are prepared to collaborate with UNICEF and other donors.
7. In line with the above recommendation, it is suggested that each district implementing CSPD, inventorize the potential NGOs and religious institutions which can collaborate with UNICEF effectively in programme implementation.
8. More efforts on capacity building should be put to the ward and community levels which are immobile. Experience has shown that a lot of training has been conducted at the district level but there have been a lot of transfers of trained staff, which overshadowed the training impact. Communities should be empowered to internalize CSPD implementation.

9. In line with the above recommendation, it is suggested that participation of communities should be improved through PRA resulting in community based plans, the participation of beneficiaries in sectoral planning and attendance of the general public to Full Council sessions.
10. In keeping with the Local Government Reform Agenda (1996 2000) District Councils should promote greater transparency and accountability.
11. District Councils should devise a mechanism where majority of facilities will be centralized, such as a computer room and administration unit. A transport pool should also be established. Efforts should be made such that these facilities are used for intended purposes.
12. Strategies for improved revenue collection should be promoted in district councils for improved and sustainable service delivery as stipulated in Local Government Reform.
13. Efforts should be made to improve the economic status of the communities. District Councils in collaboration with other development agencies should support income-generating activities. Prior to the start of these activities feasibility studies should be done to establish their viability. Study tours could also be made to successful projects.
14. Communities' efforts to improve social services should be complemented. The study findings have revealed that in some villages of Magu district, communities have constructed schools, dispensaries and water schemes using own resources but the district council has not supported these efforts as promised due to financial constraints. Apparently communities are demoralized, it is therefore suggested that UNICEF in collaboration with other partners give support in terms of building materials to those communities which have shown such efforts.



## REFERENCES

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5. Morogoro Regional Social Economic Profile, November 1997.
6. Mufindi District Rolling Plan and Forward Budget 1998/1999.
7. Mufindi District Social Economic Profile, November, 1997.
8. Needs Assessment For Capacity Building at District Planning Offices in District Councils by Grace F. Mwalemba, November 1998.
9. Restructuring Regional Administration Draft of the Regional Operations Manual Prepared by Prime Ministers Office, November 1997.
10. The Effects of Child Survival, Protection, and Development Programme in Rural Development. A case Study of Magu District by David M.L Mulongo, February 1999.
11. Ulanga District Annual CSPD Plan, 1998.

APPENDICES

APPENDIX 1

SCHEDULE OF WORK

DATE	PLACE	ACTIVITY
18/04/1999	Travel to Dar es Salaam	
19 – 22/04/1999	UNICEF – Dar es Salaam	Work in Dar es Salaam
23/04/1999	Travel to Mufindi	
24 – 27/04/1999	Mufindi	Work in Mufindi
28/04/1999	Travel to Ulanga	
29/04 – 03/05/1999	Ulanga	Work in Ulanga
04/05/1999	Travel to Dar es Salaam	
05/05/1999	Travel to Magu	
06 – 08/05/1999	Magu	Work in Magu
09/05/1999	Travel to Mwanza	
10/05/1999	Travel to Dar es Salaam	
11- 21/05 1999	Dar es Salaam	Report writing

PLAN OF WORK

Procedure for the Study:

- i) Data Collection and Review:
  - ◆ Review data in database. Identify gaps and anomalies.
  - ◆ Identify, obtain and review any existing reports.
  - ◆ Identify, obtain and analyze available data on various variables as in accordance to study objectives.
  
- ii) Field Visit:
  - ◆ Review implementation status with district and Ward Teams.
    - Explain study objective.
    - Find out understanding of the programme by all development agents.

Find out the current, Emerging and Potential actors and their capacities and roles.

Find out integration of the CSPD programme into the district planning process.
    - Find out their perceptions of achievements and constraints on development including political, policy and economic issues.

- ◆ Consult other collaborating partners.
  - Who are they
  - What are they doing
  - How are they doing
  - Assess their capacities
  - Possibility of integration to CSPD operationalisation.
  
- Consult Communities.
  - Explain the study objectives and priorities.
  - Find out understanding of the programme by leaders and communities.
  - Find out the current, Emerging and Potential actors and their capacities and roles.
  - Find out existence of village registers, follow – up forms and whether up- dated and other supplies.
  - Verify committee’s representation and composition.
  - Assess whether review meetings are conducted as scheduled.
  
  - Assess the integration of village plans into the ward and district plans.
  
  - Assess participation of communities in programme implementation.

**LIST OF PEOPLE INTERVIEWED AND SITES VISITED.****MUFINDI DISTRICT.****A: District Heads of Departments.**

	Name:	Position
1.	M.A. Mungai	Ag. DED
2.	F.L. Mangula	DPLO
3.	Cecilia Kibona	Nutrition Officer
4.	Violet Mnyawami	CDO
5.	Joseph Muna	
6.	B.J.L Nyanzali	District Ext. Officer
7.	Cletus o. Mwageni	Planning Assistant
8.	S.P.K Mbugi	Education Officer
9.	A.N. Migoha	DWE
10.	S.C. Ngunya	Ag. DCDO

**B: Donors and NGOs:**

1.	D.L. Kazikuboma	Project Manager- HIMA
2.	K. Muragwa	CD Adviser- - HIMA
3.	M. Kumangwa	Ag. Director- INCOMET
4.	Mr. Kalinga	Secretary - MET
5.	A. Kahemela	Forest Officer- TFCG

**C: Wards:****Ihanu Ward, Ifwagi Division:**

1.	B.A. Mwofuga	WEO
2.	E.M. Mvani	WEC

**Ifwagi Ward, Ifwagi Division:**

1.	Idrisa A. Kaguo	Councillor
2.	Antony Kinyunyu	WEO

**D: Villages:**

**Sao Hill Village, Mafinga Ward, Ifwagi Division:**

1.	Lujeli Cholela	VEO
2.	Yohanes Ndinde	Village Chairman
3.	Anjelo A. Msigwa	Member of Village govt.
4.	Erasto Msigwa	VEO
5.	Samwel Lubala	Member of village govt.
6.	Felix Nduva	"
7.	Francis Kitwange	"
8.	Merus E. Msigwa	VHW
9.	Ms. Nazalena Mtoyole	VHW
10.	Ms. Grace Nziuke	Ass. Headteacher

**Lulanda Village, Ifwagi Ward, Ifwagi Division:**

1.	J.M. Madege	Chairman
2.	L.C. Kavaya	VEO
3.	C.N. Kihongole	Member of village Govt.
4.	A. Kilendi	"
5.	J.F. Kilendu	"
6.	G. Kipande	"
7.	Ms. Esther Chang'a	VHW
8.	B. N. Kalinga	VHW

**Villages (Ifwagi Ward)**

1.	Daudi Chafu	VEO – Ifwagi Village
2.	Ms. Eliza C. Mgwaeje	VEO – Ikongoji Village
3.	John Pangalasi	VEO – Itulavan Village
4.	Lucas Lutambi	VEO – Mtili Village
5.	Bruce P. Kayuki	VEO – Ifundira Village

## ULANGA DISTRICT:

### A: District Heads of Department:

1.	H.H.	Hida	DED
2.	Paul	Nkulila	DPLO
3.	Peter	Mbilizi	PCO
4.	N.E.	Kisaka	DMMO
5.	Dr. A.	Kidunda	For DMO
6.	M.C.	Chami	Ed. Officer
7.	Damas	Debwa	PCO
8.	Ali S.	Mwegole	DEO
9.	Ms. A.	Mpaugile	DMCH Co
10.	P.	Kicheleri	D.Ext. Officer
11.	N.	Gimbi	Ag. DCDO
12.	E.Z.P.	Bisakala	DNO/SWO
13.	P.M.	Jerome	DWE
14.	Ben	Mganga	Prg. Mgr.-DNSP

### B: Donors, NGOs and Religious Institutions:

1.	Howard	Clegg	Dev.Adviser- Irish Aid
2.	Fr. Callistus	Mdai	Parochial- Kwiro Parish
3.	Fr. Paul	Mhuwile	Parochial – Lupiro Parish
4.	Ms.	Choma	Ukwama Children's Home
5.	Ms.Redempta	Choma	Ukwama Children's Home
6.	Ms. Maria	Choma	Ukwama Children's Home
7.	Mr. Jovan	Kwita	Ukwama Children's Home

### C: Wards:

#### Mtimbira Ward, Mtimbira Division:

1.	Ms. Nemwe	Lwimbo	WEO
2.	Anastas	Mzeru	CDO
3.	Sultan	Mapande	WEC

**Lupiro Ward, Lupiro Division:**

1.	Aziz	Kaloya	WEC
2.	Shaban R.	Mnog'onongo	Igota Sec School
3.	Douglas	Sichone	Igumbiro Pr. Sch.
4.	Willy	Njingu	Igota Sec School
5.	Theofrid S.	Ngalisoni	WEC
6.	Mkessey	W.S.	Health officer
7.	Mlemwah	K.L.	Clinical Officer
8.	Mwinimvua	Hatibu	Milola Pr. School
9.	Faustin Y.	Balua	Agr.Field Assist.
10.	Nasoro	Kipegije	Liv. Field Assit.

**Isongo Ward, Vigoi Division:**

1.	Paul F.	Ngonyani	WEO
2.	Mr. Mambea		CDO
3.	Selemani H.	Kaperewere	CCM Secretary
4.	Alex	Manditi	Uponera Pr. Sch.

**D Villages:**

**Mtimbira Village, Mtimbira Ward, Mtimbira Division:**

1.	John	Sangayau	Village Chairman
2.	Mwawembe	C. Kilonga	VEO
3.	Thabirth	Nampanga	Member of Village Govt.
4.	Yasini	Mpira	"
5.	Mussa	Makumba	"
6.	Ally	Maganga	VHW



**Lupiro Village, Lupiro Ward, Lupiro Division:**

1.	Hasani	Mtowoli	Village Chairman
2.	Rajabu W.	Kitanda	VEO
3.	Frowin	Mhasi	Lupiro Pr. School
4.	Mohaedi	Kinemite	Member of village govt.
5.	Ally	Mchungu	“
6.	Ms.Martha	Ngonya	“
7.	Aldis	Kilambo	“
8.	Sadiki	Chikoka	“
9.	Mohamed H.	Ngacha	“
10.	Salumu A.	Nembo	“
11.	Hasani	Myambule	“
12.	Ally	Lyenda	“
13.	Maimuna	Makeyutu	“
14.	Hadija S.	Kittanda	“

**Igumbiro Village, Lupiro Ward, Lupiro Division:**

1.	Omari	Lyambange	Village Chairman
2.	Ayoub	Hongo	VEO
3.	Francis	Framattu	Teacher
4.	Salma	Mkundage	VHW
5.	Hashim	Lipyanda	VHW
6.	Salumu	Chuti	Member of Village Govt.
7.	Shani	Mchukengi	“
8.	Andrew M.	Ngalya	“
9.	Douglas	Sichone	Headteacher

**Isongo Village, Isongo Ward, Vigoi Division:**

1.	Daudi	Mteka	Village Chairman
2.	Mashaka	Salum	Member of Village Govt.
3.	Sebastian	Mteka	“
4.	Agrip	Barua	“
5.	Fidolin	Mangwanyu	VHW
6.	Ms. Digna	Limuma	VHW

**Ponera Village, Isongo Ward, Vigoi Division:**

1.	Simon M.	Jonatahan	Village Chairman
2.	Paulo E.	Mstale	VEO
3.	Martin M.	Gwaka	Member of Village Govt.
4.	Ladislaus	Magwira	"
5.	Rashim M.	Kufa	"
6.	Iddi I.	Khakim	"
7.	Ms. Honoratha	Amandu	VEO
8.	Ivodia	Mkomangi	Member of Village Govt.
9.	Lidia	Mhawi	"
10.	Patrick	Nkano	"
11.	Seleman H.	Kaperewere	CCM Secretary

## **MAGU DISTRICT:**

### **A: District Heads of Department:**

1.	David ML	Mayala	PCO
2.	Joseph K.	Makinda	DCDO
3.	Ms. Mariam N.	Magai	Education Officer
4.	Christian	Matogolo	DWE
5.	Dr.Juventus L.	Mzee	DALDO
6.	J.C.	Mnyaluko	Accountant
7.	Ms. Margareth	Busuna	PCO

### **B: Donors and NGOs:**

1.	Mathenge	Gitonga	Project Mgr.- CARE
2.	Richard M.	Mihayo	Project Crd – HESAWA

### **C: Wards:**

#### **Shishani Ward, Ndagalu Division:**

1.	Samwel	Chege	WEO
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#### **Ng'ahaya Ward, Ndagalu Division:**

1.	Ms. Cresenzia	Epinaki	Councillor
2.	William	Buswelu	WEO
3.	John K.	Ndege	WEC
4.	Mashenene	Marco	Agr.Field Asst.
5.	James J.	Rubisha	Forest Field Asst.
6.	Simando H.	Mayanga	Agr. Field Asst.

**D: Villages:**

**Kayenze B Village, Nkungulu Ward, Ndagalu Division:**

1.	Lucas	Magashi	Chairman
2.	William	Manyilizu	VEO
3.	Charles	Nkanda	Member of Village Govt.
4.	Halili	Shayunga	“
5.	Kazimili	Kiharata	“
6.	Madirisha	Kaboya	“
7.	Maziku	Saidi	“
8.	Selema	Yadeda	“
9.	Simon	Lutalicha	“
10.	Nyuma	Magarata	“
11.	Gazzelle	Magushi	“
12.	Kulwa	Pauline	“

**Mwashepi Village, Nkungulu Ward, Ndagalu Division:**

1.	Malete	Itenga	Village Chairman
2.	Alphonse	Mabula	VEO
3.	Marcha	Zacharia	Member of Village Govt.
4.	Makoye	Busembela	“
5.	Elikana	Manyilizu	“
6.	Samwel	Yohana	“
7.	Bahati	Buhulugilika	“
8.	Chrisenti	Ngereja	“
9.	Ms. Monica	Manyanza	“
10.	Ms. Bulalo	Nduttu	“
11.	Ms. Kinyala	Biliya	“
12.	Ms. Mary	Mauweki	“
13.	Majenga	Nding'wa	“
14.	John	Mdangaluma	
15.	Ms. Resilia	Bunzari	TIBA
16.	Nestory	Busumabu	Headteacher

**Shishani Village, Shishani Ward, Ndagalu Division:**

1.	Stephano	Shimbe	Chairman
2.	Matulanya	Makoye	Member of Village Govt.
3.	Faustin	Lulahula	“
4.	Ayubu S.	Malibe	“
5.	Nchiman	Lumbadila	“
6.	Sospeter	Muchehe	“
7.	Nchiman	Lusana	“
8.	Kagumea		“
9.	Ms.Rehema	Khamis	“
10.	Ms. Sabina	Ngweta	“
11.	Ms. Savela	Suzo	“
12.	Renatus	Manyasi	Health Assistant
13.	Pastory	Paulo	Headteacher

**Jinjimili Village, Shishani Ward, Ndagalu Division:**

1.	Lushugembe	Masaga	Chairman
2.	Stephano	Mangaka	VEO
3.	Ms. Meresiana	Yang'wekwe	VHW
4.	Faustin	William	VHW
5.	Fanueli	Mahuli	Member of Village Govt.
6.	Mathayo	Lumbo	“
7.	Salume	Cleopance	“
8.	Felician	Kuseuza	“
9.	Lolesia	Stephan	“
10.	Feruzi	Mashenenhe	“
11.	Juma	Chandaluba	“
12.	Shepi	Mussa	“
13.	Francis	Lubinza	“
14.	Shija	Stephano	“
15.	Herenia	Bukenelo	“
16.	Gonji	Shineneko	“
17.	Hamisi	Telena	“
18.	Ms. Venelanda	William	“
19.	Manungwa	Lulengo	“
20.	Ndaki	Lutaja	“
21.	Saasita	Lucas	“

**Villages in Ng'ahaya Ward:**

1.	Grayson	Mbeyeurwa	H/teacher-	Mwabulenga Village
2.	Elikana	Luleingulo	Chairman	"
3.	Machibya	Mongo	VEO	"
4.	Ernew	Mwombeli	H/teacher	Busalanga Village
5.	Jorman	Luteja	RMA	"
6.	Ms. Lucia	Mafwimbo	H/teacher	Ng'ahaya Village
7.	Andrea	Nkalli	Chairman	"
8.	John	Maliganya	VEO	"
9.	Joseph	Kadulu	Chairman	Bugatu Village
10.	Costantini	Kanga	VEO	"
11.	Martin	Sumbuka	RMA	"
12.	Teogenes	Kiiza	H/teachear	Salama Village
13.	Shija M.	Masalu	VEO	"
14.	Willison	Henye	Chairman	"
15.	Yohana N.	Ndimi	Chairman	Chandulu Village
16.	Leornad	Paulo	VEO	"
17.	Jame JB	Dida	H/teacher	"
18.	Masota A.	Masota	H/teacher	Nyankonya.

TERMS OF REFERENCE  
FOR  
STUDY ON THE MAIN ACTORS FOR CSPD IMPLEMENTATION AT  
VILLAGE, WARD AND DISTRICT LEVELS

**1. Introduction**

The Child Survive, Protection and Development (CSPD) Programme (1997 – 2001) was designed and developed at a time when the country was beginning a far – reaching process of political, economic and social reforms geared towards strengthening democracy, higher economic growth and improvement of the wellbeing of the people through better services delivery. The multi – partisim ushered in by the political reforms has created more democratic decision making as opposed to the previous one party operation. The economic liberalization brought in new opportunities and avenues for people's ways of doing things. The policy reforms are transforming many government structures to create enabling environment in the provision of social services. All these changes have potentially major implications in the implementation and delivery of the Child Survival, Protection and Development Programme.

UNICEF supported CSPD programmes have for quite sometime operated in a rigid, centralized government and one – party structures, which despite their exclusiveness, did provide a degree of predictability and efficiency which, in turn, facilitated programme implementation. With the political democratization, economic liberalization processes going on at the moment, the CSPD Programme needs to re- examine its main actors – present and potential – in the context of growing and shifting of roles from public to private, government control to civil society organizations and the decentralized strictures being put in place.

**2. Objective**

In light of the many political, economic and policy changes the country is undergoing which have direct bearing and impact on programme implementation, UNICEF is undertaking a study whose

overall objective is: to determine who are the key "actors" – current and potential – of CSPD programme at community, ward and district levels and their capacities for programme delivery. Specifically:

- ◆ Identify the main actors at each level and assess their capacities.
- ◆ Identify the new actors who have emerged due to political, economic and social policy changes in each level and assess their capacities.
- ◆ Identify the potential actors at each level and assess their capacities.

Actors are those individuals and institutions directly or likely to be involved in CSPD programme implementation at community, ward and district levels e.g. community volunteers, village health workers, village development committee members, ward extension workers, ward development committee members, district functionaries, district councils/committees, CORPS, CBOs NGOs etc.

**3: Work Assignment:**

- i) Identify current key actors at community, ward and district levels by reviewing implementation progress reports in 3 selected districts. Define their roles in programme implementation.
- vi) Investigate new and potential actors in the 3 selected districts.
- vii) Assess the capacities of the current, emerging and potential actors in the 3 selected districts.
- viii) Recommend to UNICEF measures in terms of capacity building for the key actors at community, ward and district levels.
- ix) Write final report in Microsoft Word in diskette and produce hard copy for the consultancy period.