

**Report on Consultations with Children and Youth from Mkombozi Center for Street Children as part of the Poverty Reduction Strategy (PRS) Review
5th & 9th March 2004**



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Purpose of the Report:

- To feedback views of marginalized children and youth in the PRS review
- To ensure that stakeholders are able to participate in the review

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4. **Dates in which consultations took place:** 5th and 9th March 2004
5. **Location:** Mkombozi Center for Street Children, a residential center for street children/ youth and at risk children and youth in Rau, Moshi Municipality, Kilimanjaro region¹.

¹ Please note that the children from the center come from all parts of the country and not Kilimanjaro alone.

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I. Introduction

Forty-six male children and youth from the ages of 9 to 21 years old² participated in this consultation on the Poverty Reduction Strategy (PRS) review. These children and youth are individuals who have been on the streets anywhere from 24 hours to a number years and have entered residential care at Mkombozi voluntarily. Some of them have been in care just for a few days and others have now been there for six years. They come from all over the country and therefore do not just represent Kilimanjaro region.

Even though all of these children vary in terms of their backgrounds, origin, what brought them to the streets and the amount of time they have spent on the streets, they have one thing in common: vulnerability. They are children that in one way or another have been exposed to the many manifestations of poverty and have consequently left their homes.

Street children result from a number of factors but predominantly poverty and abuse in families are the main factors that cause most children to come to the streets (see report³ of Mkombozi's census on street children in Moshi and Arusha conducted in 2003). In fact, Mkombozi's census uncovered that out of 1,120 children interviewed in Moshi and Arusha 49% in Moshi and 44% in Arusha identified themselves as part time⁴ street children. This group, mainly aged 10 to 19 years old make up the majority of children spending time on the streets in both towns. Ninety percent of children that said they spent time on the streets because they were not in school claimed that this was because they lacked material support for school costs. Many of our street children have not even had the opportunity to attend school because of poverty. The introduction of Universal Primary Education (UPE) for Tanzanian children has done little for these out of school children that are now too old to begin standard one but more so come from families that lack the means to cover school costs such as uniforms, text books etc.

Mkombozi's work has shown that poverty alone does not cause street children but that often a combination of vulnerabilities such as abuse, conflict in the home, the break down of families that can occur as a result etc results in children escaping from these situations and coming to the streets. Because this is not a paper on the causation of street children, it is not necessary to delve into all of the factors that cause street children. However, it is necessary to bring out and emphasize the role that both income and non-income poverty plays in causing children and youth to come to the streets. All over the world, children (and women) make up the majority of the poor. It is therefore vital for children and youth to be able to share their thoughts on how best to address poverty. This report is an opportunity for one of the most vulnerable groups to put forward what they feel should be priorities in trying to reduce poverty.

² See Annex 1

³ See Annex 2 for key points of census. Full report available at www.mkombozi.org

⁴ Part time street children are children that come to the street environment for part of the day, often to beg or work but return home at night.

II. Methodology⁵

The children and youth were divided in two groups by their educational level rather than age to ensure that children with similar cognitive abilities were grouped together. In consulting with children it is important to take this into consideration as the way in which information will be delivered, processed etc will vary from group to group. Therefore one group consisted of children attending COBET A and B (Non Formal Education (NFE) at the center) as well as children from standard 1 to 3 (sixteen children in total). The second group were children/youth from COBET C and those that are in standard 4 onwards (thirty children in total).

With the little ones, information was elicited through engaging them in Arts and Drama but with the older ones information was conveyed and ideas drawn out through discussion⁶. The facilitators began with creating a basic awareness of the PRS by sharing information with both groups on what the PRS is, the limitations of the first PRS, and what we were doing here. The amount of details, the language used etc was very basic for the little ones as compared to the older ones. The second step was to engage the children and youth in a discussion of what they understand by the term "poverty". For the little children they then drew two pictures each, one of life with poverty and the other of life without poverty (see Annex 4 and 5 for pictures) and explained what they had drawn. As for the older children they were given questions to reflect upon for four days and then called back together to discuss their thoughts (see Annex 6 for questions). Lastly, the young children were asked to put together two role-plays: one of life with poverty and one of life without poverty. After the role-play a brief discussion followed on the content of the plays.

The younger children were not able to give policy recommendations but one could infer that what they pointed out as lacking is what they felt was important for humans to have. For this reason the facilitators had to "read between the lines" and interpret what it is that the young children were trying to say. However, the older ones were able to explicitly articulate what they would like to see change.

All the discussions were taped on audiocassettes (Annex 7). The various methodologies enabled the facilitators to engage the children and youth in this complex subject and elicit feedback on how they view poverty and their recommendations for what needs to be prioritized to reduce it.

All costs for materials used and snacks provided after consultations were covered by Mkombozi center for street children.

⁵ See Annex 3 for plan/guide for facilitators in conducting consultation.

⁶ See Annex 3 for details on methodology.

III. Findings

3.1. Feedback from Group one: young children:

When asked what poverty is, the children came up with a number of explanations. The young children did focus on income poverty mainly i.e. a person with no money and hence no means to access basics such as food, shelter, clothes, medical care, education etc. They did bring out in their discussions the insecurity in which such a person lives. Many of them spoke about people begging, eating and picking things from the garbage, and homelessness. Many children felt that people who could not get a TV, Radio, house and car are poor. They also described poverty as a person without a job. Some of the children talked about the lack of health and education facilities especially in the rural areas. One of the children said: "poverty of not having medical care is poverty of the government....what is government there for if not to give us hospitals?" Later on when the children shared their drawings and role-plays, you got a better idea of how they perceived poverty.

After the brainstorming on what poverty is, the children drew their pictures on life with and without poverty (see Annex 4 & 5) and shared them with the larger group and facilitators. The majority of children drew houses to express life with and without poverty. Life with poverty was people in rags, with no house, or people living in mud huts. Life without poverty was large houses with an antenna for TV and beautiful surroundings such as flowers, trees, flowing water. The importance of environment was brought out in their drawings as a life without poverty meant living in clean, beautiful and healthy surroundings. One of the children clearly showed this in his two drawings where his home with poverty hardly had trees or flowers and he explicitly said that there is desertification and his home without poverty had a mountain, water flowing from it, flowers and trees. One of the children expressed life without poverty by drawing a car and life with poverty by drawing a bicycle. Another child expressed life with poverty as a husband and wife that were not together and life without poverty as them together and happy.

One could see from the above that for the young children the ability of all people to afford adequate shelter, food, clothing and certain "luxury" items such as a TV, radio, car etc is important. Therefore reducing income poverty is a priority for them. They seem to make the link between income poverty and the vulnerability and exposure to illness, substance abuse and familial conflict. Other priorities include access to good quality education and health care for all especially in rural areas. The children clearly articulated that a person without education and health is poor. They further made the link that an uneducated and unhealthy person cannot be employed. It seems that opportunities for employment also is a priority for the young children. Lastly, the environment featured quite strongly in the younger people's presentations.

The role-plays although short, gave insight on a number of issues. The children were divided in two groups where one group would present a life with poverty and another would present a life without poverty. The children elected their respective group leaders and while doing this it was interesting that they suggested a child that was wearing all white to be the leader of the group presenting life without poverty. One of the children said, "It is because he is wearing all white". Many street children prefer coloured clothes, as the dirt is less likely to stand out. Whereas white clothing needs a clean environment and poor people cannot afford soap or clean environments.

Role play on life with poverty:

The play began with two children being sent home from school because they could not pay for the school costs and did not have their uniform and shoes. On their way home the children come across some street children sniffing glue and smoking marijuana. They stop and talk to them to explain that they have been sent home from school. The children get high together. The two children then go home and find their father there. He is not working. They explain what happened to their father and he says to them that they are a burden and that he has no money. He adds that he does not want them because their mother died from HIV/AIDS. The children insist that they want to go to school and that he should talk to their

teacher. He hesitates and they continue to insist. Eventually the children become quite forceful and pull the father by his arm to take him to school. This is where the role-play ends.

One can see vulnerability and non-income poverty played out much more in the above play. Children not having access to education are at risk of coming to the streets and engaging in substance abuse. Additionally, the issue of HIV/AIDS is brought out and the stigma and rejection associated with it. And lastly, conflict and abuse in the home is exhibited by the father's tone of voice while speaking to the children and in the children's forcefulness towards the father.

Role play on life without poverty:

Two children come home from school to find their father there. They tell their father they need to pay school fees. The father hands over the fees to the children. In the next scene the children come home and tell the father that they are done with school for the day. They then ask for money and their father reaches into their pocket and gives them money. He tells them to go and eat at a hotel. The children get in their car and leave.

One can clearly see from this play that a life without poverty means access to education, money, good food and a car. The father in this play also seemed more responsive to the children and did not seem to ask any questions.

Finally the discussion with the children about the plays gave us deeper insight. The children observed that in the play on life with poverty the children suffer. They do not have access to education and they are hungry. The children pointed out that when the children met with the street children they had money for cigarettes etc but not to develop themselves. One can see that substance abuse negatively affects their life as it makes people poorer. When asked what happens to the children when they go to school with the father the children said that they were sent home because without money no one can go to school.

In contrast, when the children were asked what happened next in the play on life without poverty, they said that after getting money from the father, the children went to the bar to drink beer and smoke. Their teacher finds them and reports their behavior to the father. One can see the existence of safety nets for children in this scenario. Children from both plays engage in substance use, which emphasizes this as a societal problem. A priority is clearly addressing substance abuse.

All the children felt that the situation in the home without poverty was better because the father had money to pay for the children's school costs. The children said in the play on life without poverty "the children asked for money and the father gave it to them". Perhaps this could mean that this father is responsive and able to meet the children's needs. One child said, "the rich and poor cannot be friends" which brings out issues of inequalities and discrimination.

Lastly when asked where the mother's are in both plays the children said that as a male it is shameful to act like a woman. The lower status of women in society and gender roles is brought out here. In the first play the children said the mother died from HIV/AIDS and in the second play they said the father chased away his wife, as she did not take care of the children well.

3.2. Feedback from Group two: older children/youth:

The older boys made references to both income and non-income poverty during their brainstorming on what poverty is. They obviously identified people not being able to afford adequate housing, clothing, and food as well as education and health as a definition of poverty but also recognized that there are many types of poverty. They explained that there is "poverty of development" where cultural practices or attitudes may hinder progress. They spoke of the fear and insecurity that is caused by poverty and also discussed discrimination as a type of poverty. They mentioned improper use of resources and/or unequal distribution of resources and emphasized rural development especially in terms of roads, water, health

and education. The children also spoke about substance use, street children, HIV/AIDS and abuse and neglect in families that are caused by and also can result from poverty. They specifically mentioned alcoholism as perpetuating poverty and said that many fathers do not support their children and wives but instead spend their money on alcohol. Lastly they spoke of degradation of the environment as a type of poverty. For more details on the children's thoughts on what poverty is please review audiotapes (Annex 7).

After a discussion on poverty, the children were given five questions to provide feedback on after four days. The following are the responses and policy recommendations of the older youth.

1) Are people still poor?

The entire group felt that people in Tanzania are still poor because of the following indicators or signs:

- Many people are still ignorant;
- Many people do not have food especially nutritional food;
- Drought and Famine;
- People lack access to good quality education and health care;
- People still have disabilities that are not addressed or intervened with;
- Lack of care and services for the vulnerable such as elderly, orphans, disabled, people living with HIV/AIDS, children etc;
- Unemployment is still very high;
- Environmental degradation and poor use of resources;
- Abuse and conflict in families and poor government social services to assist families and communities;
- Abuse and neglect in families that result in death;
- Lack of safe water, electricity, proper roads especially in rural areas;
- Diseases such as HIV/AIDS.

2) Education, Health, Water, Agriculture, Roads, and the Judiciary and Legal system were given priority in the PRS in the last three years;

a) Are there any successes/ developments in these areas/ sectors?

b) Are there any failures in these areas/sectors and what are they?

The successes or developments in each of the six sectors that were identified by the children are as follows:

- i) Education:
 - Introduction of Universal Primary Education (UPE)
 - Higher enrollment in primary classes
 - Improved teaching methodologies in some schools
- ii) Health:
 - More clinics and hospitals making it a little easier to access these facilities.
- iii) Water:
 - Bore holes and wells in some areas making it easier to access water.
- iv) Agriculture:
 - None
- v) Roads:
 - There are tarmac roads that have been put in place in some areas;
 - Some of the roads have been expanded.
- vi) Judiciary and Legal System:
 - None

The failures or weaknesses in each of the sectors are as follows:

- i) Education:
 - Lack of adequate resources in schools (classrooms, books, etc)
 - Existence of corporal punishment
 - Retrogressive assessment systems especially children not given second chances if they fail
 - Not enough secondary schools
 - Not being able to go to secondary school if cannot afford the costs
 - Teaching methodologies not appropriate for all children especially children with special needs
 - Not enough schools especially in rural areas

- ii) Health:
 - Few hospitals in rural areas
 - Many people suffering from diseases especially HIV/AIDS
 - Lack of support by families or community to cover medical costs

- iii) Water:
 - Unsafe water
 - Waterborne diseases
 - Lack of access especially in rural areas

- iv) Agriculture:
 - Desertification
 - Not enough land for agricultural activities
 - Many farmers do not have agricultural tools and inputs
 - Lack of a market for agricultural goods

- v) Roads:
 - Impassible roads especially during rainy season (especially rural areas)
 - Roads are narrow
 - Some roads pass through people's land causing conflict
 - Bad roads hinder transportation of goods to and from rural areas and also hinders services being delivered

- vi) Judiciary and Legal system:
 - Legal Procedures take very long – undue delays
 - Remanded for very long before taken to court
 - Courts are inefficient
 - People not granted bail even for minor offences
 - There is no legal representation for people that cannot afford a lawyer
 - Government does not appoint a lawyer to such people
 - Corruption at all levels
 - Abuses of human rights
 - Accusing a victim of false charges (e.g. caught for loitering but accused of drug trafficking)

3) As a child, which sectors do you give priority in the PRS?

The children prioritized the following sectors/ issues:

- Education
- Health
- Employment (including adult education, skills training etc)
- Agriculture
- Basic needs such as clothing, food and adequate housing met
- Family (less conflict and abuse in families, more love from parents and between parents, less discrimination especially of girl children)
- Children's rights (including upholding of all human rights)
- Roads
- Legal and Judiciary system

- Water

4) What should this PRS consider to improve your life and your family's life and to ensure that children's rights are upheld?

The children felt that the PRS should consider access to high quality and relevant education depending on the child or adult's needs. They also felt the government should find a way to address the lack of basic necessities such as food, clothing, adequate housing etc that many Tanzanians suffer from. There should at least be provision of these basic needs and services for all Tanzanians. In this regard the children/youth felt that one way is to improve income of families so that they can access these basics and/or the government should provide such services to families and persons that are vulnerable and in need. One of the ways in which they felt their lives and their families' lives could be improved is through good parenting. The children felt that adult education should include lessons on how to raise children. An improvement of health services as well as access and affordability should be considered. Lastly, access to safe water for all should also be a priority to improve livelihoods and ensure that rights are upheld.

5) If you were given an opportunity to decide, which five important issues/sectors would you want to be addressed by the Government of Tanzania in order to improve social services to children?

Children gave the following responses:

- Education should be a priority especially in terms of having enough schools, resources, fairer assessment systems and improved teaching methodologies.
- Health facilities should be of a high quality and accessible for all even if people cannot afford to pay.
- Provision of basic services and needs (shelter, food, clothing, education and health) by the government especially for vulnerable and marginalized people (esp. street children).
- Children's rights should be upheld nationally and in families
- Focus on families – teach parents how to raise children, children should be protected from abuse in families, parents should provide appropriate guidance and counseling, parents should love children.
- Skills training, appropriate education and subsequent employment for youth.

All issues covered in Annex 2 of the PRS Consultation Guidelines could not be addressed because of the complexity and the difficulty in pitching information appropriately to different populations. The language was quite complex and the facilitators felt it would be more effective to engage children and youth in a dialogue about poverty and policy recommendations. As it is, none of the children or youth had heard about the PRS or knew about its content.

IV. Challenges encountered

There were three main challenges or difficulties encountered in doing the consultations with children and youth. The most limiting factor was the time allocated by the Vice President's office (VPO) to carry out consultations with stakeholders, especially stakeholders that have not heard about the PRS and first need awareness created about it. Four weeks is not sufficient to reach a large number of stakeholders. The Government must not forget that NGOs do have other responsibilities and activities that need to be carried out and although the opportunity to participate in the PRS review is vital, adequate time should be allowed so that NGOs can factor this exercise into their planning and activities.

Secondly was the lack of awareness on the PRS. Not only are our stakeholders unaware of its content but many people working with NGOs and CBOs are also unaware of the content of the PRS. A two-day workshop is not adequate in equipping facilitators with a comprehensive knowledge of the PRS. Information is necessary, especially a good grasp of the information is important for good facilitation. Further still, only one staff member from Mkombozi attended this two-day workshop on the PRS. Time did not allow for training of other staff that were assisting in facilitation. Therefore, many of them had an even more basic understanding of the PRS and the process of review etc. Related to this, can one effectively engage stakeholders in a review of a process and strategy that they are unaware of? How informed is their review?

Lastly, determining how to pitch the information to children and youth was difficult. The way in which information is conveyed will impact how much is absorbed, the level of participation etc. Trying to find a "child friendly" way to consult children was difficult especially since the content of the PRS is quite complex. It is possible that the facilitation skills, methodologies used etc may have been inappropriate. There is a need therefore to look at who is carrying out consultation in terms of their knowledge about the subject but also their actual facilitation/ consulting skills.

Annex 1: Names and ages of children that participated in the PRS Review Consultation

Young children⁷ (Cobet A & B, Std I-III) involved:

Name:	Age:
1. Arobogast Dominic	13
2. Haji Juma	11
3. Mathias Julian	11
4. Deo Antipas	13
5. Gabriel Wendelini	14
6. Wilson Innocent	10
7. Safari August	9
8. Anthony Christopher	14
9. Charles Peter	16
10. Innocent Joseph	10
11. Bruce Godfrey	12
12. Shabani Seifu	12
13. Mohamed Stanley	9
14. Emanuel Augustino	13
15. Julius Didas	14
16. George Emil	11

Older children (Cobet C, Std IV-VII, Secondary, Vocational training etc.) involved:

Name:	Age:
Flavian Colman	17
Samweli Thomas	16
Regan Ignas	14
Peter Zawadi	16
Alex Emilian	15
Fred Mohamed	18
Emanuel Gilbert	17
Pascal Joseph	14
Raymond Richard	16
Morgan Amani	14
Nickson Akwilini	13
Martin Lubuva	13
Ezekiel Longidare	15
Frank William	20
Omary Kapara	21
Hussein Mohammed	14
Musa Augustino	12
Babuu Alex	14
David William	16
Jackson Mohamed	14
Silvanous Aloyce	19
Gerald Mrita	14
Luka Alex	12
Salvatory Josephat	15
Even Christian	16
Amos Jackson	18
Eric Son	12
Solomon Joseph	13
Valerian Syste	15
John Joseph	13

⁷ Children that come to Mkombozi center are assessed before they are placed in either the Non-Formal Education program (COBET A, B or C) or in formal schooling. The assessment takes into consideration their past circumstances, whether they have been to school or not, whether they have special learning, emotional or behavioural difficulties and then places them appropriately. This is why we have some fourteen year olds in COBET B but then also have 14 year olds in COBET C and formal schooling. Age alone is not a criteria of their mental and academic ability.

MKOMBOZI CENTRE FOR STREET CHILDREN

Census of the number of children who were spending time on the streets on 4th and 6th June 2003 in Moshi and Arusha Municipalities, Tanzania

1ST EVER CENSUS OF STREET CHILDREN IN ARUSHA AND MOSHI

1ST DECEMBER 2003

**Implemented by Mkombozi Centre for Street Children
Strengthening Communities Producing Street Children in Kilimanjaro Region, Tanzania project
In partnership with Child Hope UK
Funded by Comic Relief and the Foundation for Civil Society**

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The social problem of marginalized urban children and young people (CYPs) is an issue of concern to Civil Society and to Government, local and national. Since the early 1990s Tanzania has witnessed a visible increase in the number of children living and working on the street. Mkombozi Centre for Street Children is one of the leading child focused NGO's in Northern Tanzania and conducted this census of the number of children on the streets as part of its 'Strengthening Communities producing Street Children in Kilimanjaro Region, Tanzania' project. The results will provide Mkombozi with baseline data from which to measure the project's impact in reducing the number of street children coming from the target communities. Research about street children in Tanzania is sparse and tends to focus on a qualitative analysis of their situation. This census intends to partially fill the gap in existing research by quantifying the total number of children spending time on the streets in Moshi and Arusha Municipalities, and then quantifying how many of these are street children. The census also uncovers gaps in current services and interventions for street children. Data was collected over a 24 hour period in each town by Mkombozi children and staff using a questionnaire with closed and open-ended questions. Both quantitative and qualitative analyses were conducted.

**We're on the Web!
www.mkombozi.
org**

**We believe that only
if families, grassroots
communities, civil
society organisations
and the Government
work together can
we address the root
causes behind child
migration to the
streets.**

RESULTS:

- 1,120 children were interviewed in Moshi (457) and Arusha (663).
- In Moshi 14% (64) and in Arusha 29% (195) identified themselves as full time street children.
- In Moshi 49% (224) and in Arusha 44% (296) of children identified themselves as part time street children.
- In both towns there are more part time street children on the streets than full time and more boys than girls.
- In Moshi 92% of full time street children and 89% of part time street children are between 10 and 19 years of age.
- In Arusha 94% of full time street children and 96% of part time street children were between the ages of 10 – 19.
- In Moshi 25% and in Arusha 12% of street children came from Mkombozi's target communities (Kibosho, Majengo, Machame and Uru).
- In Moshi 77.23% and in Arusha 69.26% of part time street children are not in school.

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Current gaps in services...

The following gaps in services were identified by part time street children:

- 76% of those who said that one of the causes driving them to the streets was a lack of safety and security at home also identified a lack of family based services as a gap in social welfare provision.
- 69% of those who claimed that they came to the streets to look for employment identified lack of employment opportunities as a gap.
- 90% of those who said that they spent time on the streets because they were not in school claimed that this was because they lacked material support for school costs.
- 48% of those who came to the streets to look for money to cover the costs at home asserted that a current gap in services was poor linking of families to community support systems.

Full time street children identified the following shortcomings in interventions:

- 79% of children who said that they disliked the fact that they could not access basic services on the streets (food, healthcare, clothes) identified a lack of services to address basic needs as a current gap in social welfare provision.
- 79.07% of those that said that they did not like being unable to get employment as a downside of street life recommended that projects be initiated to help older youths build self reliance.
- Of those who said that they disliked not being treated as normal citizens by the police and public 50% said that they would like services to address this issue.
- 48% of full time street children who said that they disliked the fact that they had no one to love or care for them also recommended that staff and volunteers in centres working with street children spend more time and be closer to street children when they are on the streets.
- Of the full time street children who identified the dangers of drug addiction as a negative aspect of street life 51% recommended that projects work with street children to address both prevention and treatment of addiction.

Recommendations

The census demonstrated that 30% of children spending time on the streets are not street children. Government planners and NGO's should be aware of the tendency to overestimate the scale of the problem of street children in Arusha and in contrast to underplay it in Moshi. There needs to be a range of interventions that respond to the many complex needs of street children of different ages, genders and psychosocial, educational and physical needs. The fact that the majority of part time street children in Arusha and Moshi come from neighbouring slums emphasizes the need for intensive community based rehabilitation and interventions for at risk children in these urban neighbourhoods.

A more holistic approach to community development needs to be undertaken, with a focus on community and familial support that would address much of the causation of street children. Funds need to be allocated at local level together with intensive capacity building amongst the implementing staff within Government Departments (Social Workers, Community Development Workers etc.). Services for marginalised children need to be taken back to families and communities, rather than remaining in residential centres. Intensive family based

support is expensive and time consuming. However, given the personal and economic cost to society from having children fall through social safety nets it is important to allocate tax revenue to social services provision and to focus on skills development, resource allocation and empowerment to those working in the field, whether they are Government or private sector personnel.

Non-attendance at school is a primary causal factor driving children to the streets. A two pronged approach needs to be undertaken that addresses both the need to re-enrol and supervise the school attendance of part time street children already and the need to undertake preventative work with schools, communities and families to reduce the number of children excluded, dropping out and playing truant from school.

Mkombozi and other actors in the community and government need to address the issue of youth unemployment since it will have a significant impact on social and economic development in Tanzania over the medium and long term. Government and NGO's need to think creatively on how they can access youth on the streets and in our slums to ensure that they gain appropriate workplace and life skills.

Annex 3: PRS Review – Plan for Conducting Consultation with Mkombozi center children

Annex 4: Pictures drawn by young children to express life with poverty

Annex 5: Pictures drawn by young children to express life without poverty

Annex 6: Questions given to older children

- 1) Je, watoto bado ni masikini?
- 2) Yafuatayo (elimu, afya, maji, kilimo, barabara, mfumo wa sheria na mahakama) yalipewa kipaumbele katika mkakati wa kupunguza umasikini.
 - a) Je, kumekuwa na maendeleo au mafanikio kwenye maeneo hayo?
 - b) Je, kuna mapungufu kwenye maeneo hayo? Na ni yapi?
- 3) Kama mtoto, ni mambo yapi unayapa kipaumbele katika mkakati wa kupunguza umasikini?
- 4) Je, mkakati huu wa kupunguza umasikini ungezingatia mambo gani ili kuboresha maisha yako na familia yako na kuhakikisha haki za watoto zinatekelezwa?
- 5) Kama ungepewa nafasi ya kutoa maamuzi, ni mambo gani matano muhimu ambayo ungependa yashughulikiwe na serakali ya Tanzania kwa ajili ya kuboresha huduma kwa watoto?

Annex 7: Audio cassettes of PRS Review Consultations with Mkombozi center children