ASSESSMENT OF CHILDCARE WORKERS' STRENGTH IN PROVIDING

CARE AND SUPPORT TO VULNERABLE CHILDREN IN

DAR ES SALAAM, TANZANIA:

THE CASE OF KURASINI NATIONAL CHILDREN HOME

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A DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF THE

REQUIREMENTS FOR THE DEGREE OF MASTER OF SOCIAL WORK

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CERTIFICATION

The undersigned certifies that she has read the entire work and hereby recommends for the acceptance by Open University of Tanzania a dissertation titled: *"Assessment of Childcare Workers' Strength in Providing Care and Support to Vulnerable Children in Dar es Salaam, Tanzania: The Case of Kurasini National Children Home"* in partial fulfillment of the requirements for the Degree of Master of Social Work (MSW) of the Open University of Tanzania.

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(Supervisor)

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Date

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DECLARATION

I, Simon B Panga, hereby declare that this Dissertation is the work of my own and that it has never been submitted and will not be submitted to any University by any person either in whole or part of it in the award of Master of Social Work (MSW or in any other field related to this. I also declare that all sources used for this study have been duly acknowledged.

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Signature

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Date

DEDICATION

This dissertation paper is affectionately dedicated to the Vulnerable Children and the Childcare Workers at Kurasini National Children Home who accepted me and supported me wholeheartedly during the whole process of collecting data for the purpose of preparing the document that greatly counts for partial fulfillment of the requirements for the award of my master's degree in social work of the Open University of Tanzania.

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While expressing my appreciation to all the above-mentioned persons, I remain responsible for all the content of this work.

ABSTRACT

This study was conducted at Kurasini National Children home. The main objective of the study was to assess childcare workers' strength in providing child care and support to Vulnerable children in Tanzania. The specific objectives of the study were: to examine competences necessary for childcare workers; to assess the quality of child care services provided to children and to identify challenges experienced by childcare workers. The study was guided by the empowerment and attachment theories. Qualitative research design was used and semi-structured interviews, focus group discussions, observation and documentary review were used for collection of data which was thematically analyzed. A purposive sampling technique was used to obtain respondents. A sample of 30 children and 20 officials from childcare workers, social welfare officers and human right staff were selected, making a total sample of 50 participants. Study findings were analyzed and presented using a computer package known as SPSS version 20. The study revealed care workers' strength is weakened by their educational and training background, inadequate job orientations, inadequate supervisory leadership, organizational and management skills, lack of contractual framework between council welfare officers and childcare workers and inadequate resources. In view of the study findings it was concluded that the government and stakeholders were not adequately allocating resources for childcare workers' capacity strengthening and facilitation of child care interventions. The study therefore, recommends for the government, training institutions and stakeholders to adequately strengthen the capacity of childcare workers and to timely provide sufficient resources to facilitate the provision of quality child care services to the vulnerable children.

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LIST OF ABBREVIATIONS AND ACRONYMS

ACRWC   African Charter on the Rights and Welfare of the Child

AIDS   Acquired Immunodeficiency Syndrome

CBOs   Community Based Organization

CDP   Child Development Policy

CRC   Convention on the Rights of the Child

CRPD   Convention on the Rights of Persons with Disabilities

DSW   Department of Social Welfare

ERIC   Ethical Research Involving Children

FBOs   Faith Based organization

FHI   Family Health International

HIV   Human Immune-deficiency Virus

ILO   International Labour Organization

IMF   International Monetary Fund

KNCH   Kurasini National Children Home

LCA   Law of the Child Act

MCDGC   Ministry of Community Development, Gender and   Children

MOHSW   Ministry of Health and Social Welfare

MOHCDGEC Ministry of Health, Community Development, Gender, Elderly and

            Children

MVC   Most Vulnerable Children

NBS   National Bureau of Standards

NCPA   National Costed Plan of Action

NCPA -MVC   National Costed Plan of Action for Most Vulnerable Children

NGOs	Non-Governmental Organizations
REPOA	Research and Poverty Alleviation
SOS	saves Our Souls (SOS Villages)
SPSS	Statistical Package for the Social Sciences
SWWA	Social Welfare Workforce Assessment in Tanzania Children
TZ	Tanzania
UN	United Nations
UNICEF	United Nations Children's Fund
URT	The United Republic of Tanzania
USAID	United States Agency for International Development

CHAPTER ONE

INTRODUCTION

1.1 Introduction

Childcare workers' strength is a major and sensitive component in matters related to the care and support to vulnerable children (Naik, R et al., 2015). The importance of childcare workers' strength in providing care and support to vulnerable children has been articulated by many scholars. Naik, R et al., (2015) stated that the strength of childcare workers has far reaching effects on children who have passed in their hands. Anna (2013) argues that, well trained children from the children home are able to self-employ or get employment elsewhere, fight poverty and resist abuse of various forms.

According to Niboye (2013), vulnerable children suffer from many social and psychological problems which require childcare workers' strength in communication, instructional, positive attitude to learning and change, organizational, patience, decision-making and interpersonal skills. UNICEF (2014) reported 1.4 million vulnerable children in Europe, 240,000 in Latin America and Caribbean, and more than 10 million vulnerable children in Africa who would require the childcare workers' professional intervention. REPOA (2008) reported that nearly 2,000 orphaned children who are 10% of all children in Tanzania needed additional support to integrate well within the mainstream society. Anna (2013) indicated that in Africa where children are kept in residential care, they pass out without being transformed for better adulthood life. According to the report by MOHCDGEC (2016), about 65 older vulnerable children brought up at Kurasini National children home were not able to be resettled due to various reasons including the unpreparedness and lack of

confidence by children to lead an independent and self-reliant life. The achievement of the ideal childcare and future self-reliance goals for vulnerable children highly depends on the well-functioning and competent childcare workers (USAID, 2009).

1.2   Background of the Study

All over the world, there are families and child caregivers who are less able to take care of their children and organizations and trained childcare workers worldwide are working to ensure these children don't end up into difficult circumstances (Shah, 2010). According to Shah, (2010) trained childcare workers have always played an important role in empowering vulnerable children in various ways depending on the setting and location of child care institution. More recently, the Transformative Monitoring for Enhanced Equity project estimated that more than 1.4 million vulnerable children were either in residential or family-type care such as foster care or guardianship in 22 countries of Central and Eastern Europe and the Common-wealth of Independent States and the European Union (UNICEF, 2014). UNICEF (2012) also put the number of vulnerable children in residential care at around 240,000 in Latin America and the Caribbean, basing on data from 27 countries in the region.

Eastern and Southern Africa has been reported to be a home of more than 10 million vulnerable children who have lost one or both parents, representing 60 percent of all such children around the world (UNICEF, 2009). UNICEF (2009) also reported that ensuring adequate care for vulnerable children is a tremendous challenge since AIDS epidemic damaging force has drastically weakened traditional child protection and care mechanisms such as extended family support. The UNICEF (2009) report

continued to make a call on governments to highlight their responsibilities in ensuring basic safety nets that protects vulnerable children rights to health, education and protection from exploitation and abuse.

The United Republic of Tanzania population and Housing Census in 2002 showed that nearly 10% of all children in Tanzania had been orphaned – close to two million vulnerable children and their households needed additional support from the trained professionals (REPOA, 2008).

In implementing the UN convention on the rights of the child and other international instruments that touched on welfare of children, the government through the Department of Social Welfare in the Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC) developed and implemented a number of interventions to adequately, timely and appropriately provide care, support and protection to vulnerable children, including the enactment of the law of the child Act no. 21 of 2009 and the development National guidelines for the establishment and management of children's homes in Tanzania (TZ Child Rights Forum, 2013).

The formal alternative care arrangements for Vulnerable children in Tanzania which consisted of foster care, public or private residential homes and adoption were also emphasized (SOS, 2012). However, there were considerable gaps in the implementation of alternative care services, mainly due to poor coordination, lack of inspection, weak monitoring, evaluation and oversight (SOS, 2012).

Quality childcare and child care safety protection standards are a necessity for Childcare Workers and children who have come under residential care for permanent

or shorter-term reasons. A Childcare worker needs skills to gain the trust of children and young people who for a variety of reasons need to use residential care to help them deal with issues affecting their lives. The work involves being a role model, developing good relationships and guiding children and young people in their learning, life skills and personal development (Karthy Karageorge and Rosemary Kendall, 2008).

According to Leach et al (2006), the best predictor of children's overall non-compliance was quality of care, with children from high quality centres showing more compliance and cooperativeness than children from low quality centres. Between the years 2012 and 2016, the Department of Social Welfare moved about sixty-five (65) older children from the Kurasini National children home to Nunge home for the elderly and persons with disabilities for temporary shelter upon realizing that their age has advanced to young adults. The majority of them also developed non-compliance, less cooperativeness and other risky behaviors such as violence and sexual abuse against the younger children and were as well not able to be integrated and/or start independent living.

These children were later being removed from the Nunge Home for elderly and persons with disabilities because of their defiant behavior, non-cooperation and inability to start self-reliant living (MOHCDGEC, 2016). This situation developed the interest of the researcher to look into the childcare workers' strength in providing care and support to vulnerable children, the availability and sustainability of child care plans and the quality of care and support services to vulnerable children at Kurasini National Children Home.

This study was therefore, carried out to assess the childcare workers' strength in providing care and support services to vulnerable children as an essential condition for quality care and service provision to Vulnerable children in Tanzania and to as well identify better solutions to improve the quality of care among Vulnerable Children in Tanzania.

1.3   Statement of the Problem

The strength of childcare workers has been identified as an important component in empowering vulnerable children to well integrate within the mainstream society after they leave care at the children home (Naik R. et al., 2015, Anna 2013, Niboye, 2013). In an effort to ensure quality care and support service to vulnerable children in Tanzania, the government introduced different measures. The government established the Kurasini National Children home to provide child care and support to vulnerable children and employed trained professional childcare workers to facilitate the empowerment of these children (MOHCDGEC, 2016).

The government ratified the international instruments on child protection, including the UN Convention on the Rights of the Child, the African Charter on the Rights and Welfare of the Child, Convention on the Elimination of all forms of Discrimination against Women and Children and collaborates with Non-governmental organizations (UNICEF, 2001). The government also introduced the NCPA-MVC 2007-2010, revised the National child development policy of 2008 and enacted the Law of the Child Act no. 21 of 2009, with its respective regulations and guidelines to ensure child protection in the country (URT 2016).

Despite the above efforts made by the Government, it has been observed that, there were vulnerable children who have continued to experience harsh living conditions in their lifetime after leaving the Kurasini national children home (Niboye, 2013).

The childcare workers at Kurasini National children home have not demonstrated their strength in empowering vulnerable children to grow into responsible adults. The problem of vulnerable children has not been curbed and their adulthood self-reliance is not seen (Niboye, 2013).

This study, therefore, seek to assess the childcare workers' strength in providing care and support to Vulnerable Children in an effort to addressing challenges and promoting quality care and support services to vulnerable children in the country.

1.4 Research Objectives

1.4.1 General Objective

The general objective of this study was to assess childcare workers' strength in providing childcare and support to vulnerable children in the country.

1.4.2 Specific Objectives

(i)   To examine the competence necessary for childcare workers in providing child care-and support to vulnerable children.

(ii)   To assess the quality of care in services provided to vulnerable children at Kurasini National children home.

(iii)   To identify challenges experienced by childcare workers in providing child care and support services to children at Kurasini National Children Home

1.5   Research Questions

(i)   What are the childcare Workers' competences necessary in providing child care and support services to vulnerable children?

(ii)   How is the quality of care in services provided by Childcare Workers to vulnerable children at Kurasini National Children Home?

(iii)   What are the challenges experienced by Childcare Workers in providing child care and support services to children at Kurasini National Children Home?

1.6   Significance of the Study

The study focuses on childcare workers' strength in providing care and support to vulnerable children in Tanzania.

The study offers contribution to the knowledge base, policy and practice.

1.6.1   Policy Makers

The study will be useful in the identification of childcare workers' strengths to shed more light into areas never thought before as useful such as workers' competence level and associated challenges, hence provide the possible solutions to overcome the challenges. The study findings will guide policy makers in developing new approaches for increasing childcare workers' competences in the country. The study findings will inform the policy makers on the important role of childcare workers' competences in the upbringing of competent children. The study findings will stimulate the policy makers to develop policy guidelines that will ensure the existence of children homes in Tanzania goes hand in hand with emphasis on child care workers' competence in handling vulnerable children. The policy makers will be guided by the findings of this study on what should be emphasized by childcare

workers training schools in the school curriculum to improve childcare workers performance.

1.6.2   Practice

The findings of this study rebound to the benefit of the society that childcare workers' strength plays an important role in the development of competent children. The study findings remind the childcare stakeholders on the need for erecting competence-building programs for childcare workers in children homes. The findings of this study will help to generate ideas for reducing workers' negative perceptions and attitudes towards vulnerable children most especially to vulnerable youth. The study will help practitioners to come up with new strategies during the implementation of child protection programs in children homes in the country. The childcare workers training institutions and children home administrators that apply the recommended childcare workers' strength and/or competence derived from the results of this study will be able to train competent childcare workers.

1.6.3   The Knowledge Base

The study will enrich academicians and add new body of knowledge on which theories and critical explanation on child care workers' competence will be developed and provide a room for further researches. The study will help the researchers to uncover critical areas in the childcare workers' educational process that many researchers were not able to explore. Thus, a new theory on childcare workers' competence may be arrived at. The successful undertaking of this study is considered a fulfillment of the requirement to qualify the researcher being awarded the Degree of Master of Social Work.

The recommendations that will be made by this study will play a role towards improving effectiveness on service provision, leading to sufficient services such as education, cultural, moral, self-esteem and self-reliance among the vulnerable children thereby contribute towards reaching the millennium development goals for children.

1.7 Definition of Key Terms

1.7.1 A child

In Tanzania, according to the Law of Child Act 21 of 2009 a child is defined as "a person below the age of eighteen years. Parents i.e. Fathers and mothers are obliged to continue contributing to the upkeep of their children until they are 18 years old. The United Nations (UN) Convention on the Rights of the Child (1991), a child means any human being below the age of eighteen years (18) unless, under the law applicable to the child, the age of legal majority is attained earlier". Also, a word child can simply be defined to mean a young human being below the age of puberty (UNHCR, 2001).

The Constitution of the United Republic of Tanzania states that an adult is a person whose age begins from 18 years, hence when below 18 years is a child. A child is any person under 18 years of age, for that matter that person has not attained maturity or the age of legal majority. In this study it should be noted that, a child is defined to mean a young human being below the age of 25 years who for the reasons of vulnerability is still dependent on the support from the Kurasini National children home.

1.7.2 Attitude

Attitude is the voluntary disposition of a person given the existence in general or to a particular aspect of this. According to Nordlund (2009), attitude is a mental and

emotional response to the variety of circumstances that occur in life; also it is the feelings or opinions that a person show by his/her behavior. This is the hypothetical construct that represents an individual's degree of like or dislike for something. At the level of Social Psychology, attitudes come to constitute extremely important elements for the prediction of behavior (Didactic Encyclopedia, 2013). In psychological perspectives, Cherry (2010) referred an attitude as a set of emotions, beliefs, and behaviors toward a particular object, person, thing, or event.

In view of the above facts, attitudes could be further explained as the result of experience or upbringing, and can have a powerful influence over behavior. Though attitudes are enduring, they can also change (Cherry, 2010). The same may be any product of the activity of the man, a social fact, or an individual. Attitude would be a lasting organization's beliefs and cognisance in general, which contains an effective charge against or in favour of an already defined object, which induces a coherent character action both with cognisance, as well as with the affections linked to this object. An attitude is a predisposition or a tendency to respond positively or negatively towards a certain idea, object, person, or situation. Attitude also influences an individual's choice of action, and responses to challenges, incentives, and rewards. In this study it should be noted that the research is interested to test the feelings or opinions and emotional response of vulnerable children towards the care support services provided by childcare workers.

1.7.3 Childcare

Childcare is when children are supervised and cared for by a person other than a parent or caregiver (Bennett, 2011). In this study childcare will be referred to as all the

activities and services provided by childcare worker to vulnerable children with aim of empowering them to grow into responsible adults.

1.7.4 Childcare Workers

A Childcare Worker is the person who provides care for children when parents and other family members are unavailable, or the child is in the vulnerable situation. They attend to children's basic needs, such as bathing and feeding. In addition, some help children prepare for kindergarten or help older children with homework. They care for children in childcare centers, their own home, or the homes of the children in their care (Karageorge & Kendall, 2008). For the purpose of this study it should be understood that, Childcare Workers are the trained staff professionals who work to provide childcare and support services to vulnerable children at the children home.

1.7.5 Child Protection

Child Protection is the overall duty and responsibility to safeguard children under the care of any responsible person either assigned or voluntarily decided to take care of the vulnerable children from violence, exploitation, abuse and neglect in and out of their home (UN CRC 1989:19). In this study it should be noted that, child protection is safeguarding vulnerable children from harm or anything that could endanger their well-being or lives in general, including risks of loss of parental care and ensuring availability and provision of things vulnerable children need to enable their smooth growth and happiness until they become responsible and caring adults.

1.7.6 Knowledge

It means what is known about a particular subject. It is a familiarity, awareness or understanding of someone or something, such as facts, information, description, or

skills, which is acquired through experience or education by perceiving, discovering and learning (Cavell, 2002). Knowledge is a familiarity, awareness, or understanding of someone or something, such as facts, information, descriptions, or skills, which is acquired through experience or education by perceiving, discovering, or learning.

In this study the researcher would be interested to test the knowledge of childcare workers on concepts of child care, child protection and the needs of children and the causes of vulnerability and vulnerable children1.7.7 Needs of Children

1.7.7   Needs of Children

Needs of Children are basic, fundamental experiences or environmental conditions essential to optimal child growth and development (Kamptner, 2005). Needs of Children have been divided into five major categories:

(i)   Physiological needs (food, clothes, shelter, warmth and sleep),

(ii)   Safety and security needs (feeling secure and safe, being in a safe environment and protected from harm, security and safety of self and things, job and health),

(iii)   Social Needs (affiliation, acceptance, affection, attention, approval, belonging, connection with family, friends and community, love and be loved),

Esteem Needs (Self-respect, respect of others, confidence, feeling of accomplishment and achievement) and Self-actualization (creativity, desire to learn, to explore, to understand, recognition, self-fulfillment, having fun with life and feeling like they have real meaning to their lives) (McLeod, 2017).

In this study it should be noted that vulnerable children like any other children are different from each other and have different needs and their needs go beyond food, school, medication, shelter, sleep and clothes.

1.7.8 Vulnerable Child

A vulnerable child is referred to as a child who has no or very restricted access to basic needs. The child may have both parents, but his/her rights might be denied (Skinner et al., 2004). Vulnerable child is a child under the age of 18 whose mother, father or both parents, and a primary caregiver have died, and who is in need of care or protection (Namibian Government definition, 2006). A vulnerable child is a child under the age of 18 years and currently at high risk of lacking adequate care and protection. Accordingly, all children are vulnerable by nature compared to adults, but some are more critically vulnerable than others (Fischhoff *et al.,* 2001). In Tanzania, the term vulnerable children was introduced as a category in its own right to describe children who were, for various reasons, not limited to orphan hood, at risk of harm, including care and educational disadvantage (World Bank, 2013).

1.7.9 Workers' Competence

According to Richards (2015), employee competencies are those traits, skills or attributes that employees need to perform their jobs most effectively. The author clearly put that, the competencies do vary by job and position, but there are some commonalities that apply to just about any job in just about any organization. According to Nagarajan and Prabhu (2015), a person and his work can be evaluated as competent if the performance is considered satisfactory. Competence can include a combination of knowledge, basic requirements, skills, abilities, behavior and attitude.

Naik, R et al., (2015) defined Competence as the capability or ability of an individual to do a job properly. In other words competence can be explained as a set of defined behaviors that provide a structured guide enabling the identification, evaluation and development of the behaviors in individual employees.

For the purpose of this study it should be understood that, competencies are traits, skills, proven abilities and improved capabilities or attributes that workers need to perform their jobs of providing childcare and support services to vulnerable children most effectively.

1.7.10 Workers' Strength

According to Karageorge and Kendall (2008) workers' strength is defined as the most specific and useful qualities and skills that a worker has which include forte, knowledge, proficiencies, skills, talents and attitude or behaviour needed to work in taking care and supporting the vulnerable children. For the purpose of this study it should be understood that, Childcare Workers' strength are the specific competencies or qualities that make a person to become a competent worker having those traits, skills, proven abilities and improved capabilities or attributes that workers need to perform their jobs of providing childcare services most effectively.

1.7.11 Youth

 The World Health Organization (1985) defines youth as those belonging to the age group of 15 to 24 years. The definition of a youth is a young person who has not yet reached adulthood and refers to the time period before you become an adult. It is a period of transition from the dependence of childhood to adulthood's independence.

In Tanzania, according to the National Youth Development Policy (2007), youth is defined as young men and women from the age group of 15 to 35 years.

In this study youth should be defined as young men and women cared for at KNCH as vulnerable children who are in the age group of 16 to 29 years still needing special attention, protection and focus with a view of accessing equal opportunities for young men and women in education, training and social security.

CHAPTER TWO

LITERATURE REVIEW

2.1   Introduction

In this chapter both theoretical and empirical literature reviews on Childcare Workers' strength in providing care and support to vulnerable children have been done. The review is based on the research objectives with the purpose of delineating the research gaps. The review has come up with the conceptual framework, which was used in this study. Other issues dealt within this chapter includes Childcare Workers' competences, child care and protection to vulnerable children, quality of child care services provided to vulnerable children by childcare workers, challenges experienced by childcare workers in providing child care services to vulnerable children and research gap.

2.2   Theoretical Literature Review

The reviewed literature has offered a given set of theories, which support the study objectives. In this study therefore the theoretical literature review dealt with the theories and concepts that are relevant to this topic under study and related to broader areas of knowledge being considered Alasuutari (2010). Theoretical analysis allows a number of theories which are relevant to the study to be reviewed and applied to the study. Alasuutari (2010) maintains that, in qualitative research approach the use of theoretical framework is highly recommended because theories help to legitimize some concepts and facts used in the given study. Each study is guided by a theory; hence, this study was guided by empowerment and attachment theories.

2.2.1   Empowerment Theory

The empowerment theory was used to guide this study as the study was interested in understanding empowerment approach to child development specifically to vulnerable children at individual, group, organizational and community levels of analysis (Zimmerman, 1995). Empowerment perspective was applied in this study to see the closer relationship between the Childcare Workers' strength in providing childcare and empowerment services to vulnerable children and their life outcomes. The American community psychologist Julian Rappaport (1981) who is said to be one of the original founders of the term empowerment; explained it as a process mechanism by which people, organizations and community gain more control over their lives, either by themselves or with the help of others. Rappaport (1981) developed the concept theoretically and presented it as a solution to social problems resulting from powerlessness.

According to Rappaport (1981, 1984); empowerment theory, is a construct that link individual strengths and natural helping systems with the larger social and political environment. In this study, the researcher applied empowerment perspective to evaluate how the strength of childcare workers could contribute into the personal growth and development of vulnerable children through lifespan in which improvements can be made into their physical, cognitive or intellectual, psychological or emotional, social and spiritual realms to realize their full potential (Berk, 2007 Rappaport, 1984).   In social work, empowerment forms a practical approach of resource-oriented intervention (Torronen et al., (2013). Empowerment theory was later developed in 1990s and has taken different forms in the discourse communities

of social psychology, political science, feminism, planning and development studies. It has most often been applied to marginalized groups, like women and indigenous peoples in the third world (Sandra & Tina, 2014).

According to Narayan (2005) in her work with World Bank on measuring empowerment; cross-disciplinary perspectives and the household were the focus for empowerment rather than the individual, and she argued that, the alternative development should begin by permitting the "household access to the bases of power, thereby improving the household's condition of life and livelihood. She highlighted that if the household is economically empowered, it become socially and politically very active. Narayan (2005) emphasized that social and political empowerment will be brought about through systemic change, appropriate economic growth, gender equality and sustainable inter-generational equity. The empowerment perspective was chosen by the researcher and applied in this study to see the relationship between the strength of childcare workers and the empowerment of children. According to Narayan (2005) the theory brings recommendation to the study that the responsibility of empowering vulnerable children does not end with the childcare workers only, but rather as a chain that involves different actors such as the policy makers, social organizations and the community. Narayan (2005) continued to emphasize that it is the strengths from multiple sources, which will contribute to the empowerment of vulnerable children (Narayan, 2005).

While Narayan (2005) emphasizes empowering the community through collective social action beginning with the individual and household, Jennings et al., (2006) defined empowerment as a social action that can occur at multiple levels and as a

continuum or ladder focusing on changing individual and the community as two endpoints. According to Jennings et al (2006), NGOs and CBOs working with vulnerable children can participate in empowerment of vulnerable children in a variety of ways such as acting as service providers, creating organizations in which those most vulnerable can participate in group therapeutic activities, providing their clients with skills and knowledge.

Through empowerment method, everyone is given equal chance to participate in the empowerment activities (Pulla, 2006). As far as the empowerment of vulnerable children is concern, this perspective presupposes that every individual has strengths; people can change and grow; every environment has assets; thus trusting in children for their personal development (Kondrat, 2010). The goal of empowerment should be the improvement activities for vulnerable children to overcome their current limiting factors until they are no longer limiting factors (Goldratt, 1984). In this study, the empowerment theory has clearly defined the importance of focusing on every individual's equal importance and equal rights. Everyone is different, and it is possible to use these differences and take advantage of every unique experiences. Childcare workers must empower every individual or group; vulnerable children inclusive in developing a sense of self and confidence which permits them to undo the effects of internalized oppression and to have self-efficacy in their life.

2.2.2   Relevance of Empowerment Theory

According to Zimmerman (2000) empowerment is a psychological process in which individuals think positively about their ability to make change and gain mastery over issues at individual and social levels, including the self-perceptions of competence,

personal control and positive self-image. The childcare workers who are trained on issues related to empowerment perspective will be able to stimulate the strengths of each individual child to its fullest potentials and overcome their limitations.

Childcare designed in this perspective is expected to empower children to perform a new task or even to be able to carry out tough life responsibilities in a better and more efficient or well-designed way. Regarding childcare worker, the theory will be very significant in that it will enrich the childcare goals and objectives as it addresses issues concerned with children growth and development process to self-reliance as it can be integrated to child empowerment and building self- reliance for vulnerable children.

The level of an individual child empowerment can be understood as the process of building their capacity to be able to achieve their goals and expectations in life to grow into responsible, self-governing and self-regulating adults who can provide for themselves (Lord and Hutchison, 2006). In this study, the researcher has used the theory as a guide in the assessment process in order to understand the goals for vulnerable children and the strategies that are in place, including the goals for children in the National children home and childcare workers' faculties to help children achieve such outcomes.

In the same perspectives, the theory also has guided the researcher in this study in the review of literature on various studies that have been done at global, regional and national levels over the care and protection to vulnerable children, competences necessary for childcare workers in providing childcare services, types and quality of

child care services provided and challenges experienced by childcare workers in providing child care services to vulnerable children.

2.2.3 Attachment Theory

This study is also guided by the attachment theory in order to enrich the conceptual framework used in this study. Attachment theory draws on the work of Bowlby and Ainsworth as cited by Shemmings (2011). Attachment refers to special bond and lasting relationships that young children form with adults. It refers specifically to the child's sense of security and safety when in the company of a particular adult (Wittmer, 2011). Bowlby's (1969/1982, 1973, 1980, 1988), say that the attachment theory explains that children's interaction with primary caregivers during infancy, shapes their help-seeking and attachment behaviour, as well as their internal representation of themselves and of caregivers (McGrath, (2013). The Bowlby's attachment theory proposes that only attachment experiences results in children organizing their views of themselves as either lovable or unlovable, and their attachment figures as either trustworthy or untrustworthy. The Bowlby's theory further hypothesized that once shaped, these internal representation serve as templates that influence how individuals navigate attachment relationships throughout life (McGrath, 2013).

According to basic precepts of attachment theory, attachment is a formative developmental process affecting all areas of a child's development. The nature and quality of a child's early attachment to a primary caregiver is a significant part of the foundation for adulthood, affecting the child's cognitive, emotional, psychological and

social functioning (Hughes, 2009). Young children who have sensitive and responsive attachment figures develop trust (Schofield and Beek, 2014).

Berk, L. E. & Shanker, S. G., (2006) described that a securely attached child is confident in the presence of their primary caregiver because they have learned to associate the caregiver with relief and reward and have learned to trust that the attachment figure will be reliable and responsive to their needs.

Hughes (2009) highlighted that, with the assistance of the adult attachment figure, the securely attached child learns to develop self- regulation skills and moves freely and appropriately between autonomy and dependence. Goldberg (2000) explained that secure attachment is a developmental goal and, Steinhauer (1993) argued that those children who are secure in their early attachments are generally healthier and more capable throughout their lives.

Daniel & Jennifer (2011) argued that early child exposure to intolerable amounts of stress through separation from a primary care giver or experiences such as child abuse, neglect or family violence can measurably stunt normal brain growth. Daniel & Jennifer (2011) compared and found out that, a child raised in a healthy attachment and allowed to develop an effective stress response through attachment to a nurturing and consistent caregiver is better set for optimal brain development and mental health. Hughes (2009), described children with unhealthy attachment relationship as those who were not able to form a secure attachment to their parents or caregivers. Judith (2006) claim that children with unhealthy attachment relationship are those whose

needs were unmet by primary caregiver or for whom attachment relationship is unpredictable or frightening. Judith (2006) further stated that the child with unhealthy attachment has learned that they cannot rely on their caregiver as a secure base from which to explore the world and build other healthy relationships. According to Schofield and Beek (2014), a response that is unavailable or cold will lead a child to beliefs on the attachment figure as rejecting and himself or herself as unworthy of care and others as not to be relied on for help and support.

Goldberg (2000) added that a child whose attachment to a caregiver is insecure may adapt by clinging to the caregiver in an effort to ensure proximity. That child is expected to develop with a lack of independence and preoccupation with relationships. Goldberg (2000) continued to state that with other manifestations of the insecure attachment, the child will adapt to the unreliable care relationships by turning away from the caregiver to avoid possible rejection. Such a child presents with an excess of independence. She further described that the child rejection of the caregiver masks the stress that has not been relieved. And that this adaptive response to the unreliable attachment relationship is expected to develop into a lack of healthy reliance on relationships.

2.2.4   Relevance of Attachment Theory to this Study

From the perspective of child development and importance of attachment, when children are removed from the care of their families for any reasons including parental death or maltreatment, those children are triply at risk (McGrath, 2013). First, they endure the trauma of separation from their known primary caregiver, from their home and familiar family circumstances (Steinhauer, 1993). Second, they may encounter

child protection intervention with insecure primary caregiver (Goldberg, 2000). Third, these children enter into a system that is premised temporary care. Because healthy attachments requires continuous, quality nurturing and the resulting development of trust in relationships and yet children in child protection intervention such as foster home are denied the element of continuity and permanence (Paul, 1993). These children enter the foster care system bearing the weight of trauma of separation and the preceding negative caring experiences (ibid).

The basic principles of attachment theory are nurturing and continuity of care which are key to building trust in relationships and healthy engagement in relationships (McGrath, 2013). He continued to emphasize that continuity of care is developmental premium for young children; therefore, the children involvement within the interventions should not be troubled with disruption of the child's relationship.

McGrath (2013) concluded that, for attachment theory to have an impact on the end result in the child's welfare, it must first be understood and accepted by professionals trained in child care. Child care plan designed in this perspective is expected to build trust with children and engage them in healthy relationships to form a secure attachment to caregivers and use the caregivers as secure base from which to explore the world and develop self- regulation skills, knowing they can return to caregiver's safe haven for comfort and reassurance when needed (Judith, 2006). In view of the above information concerning the childcare workers (interchangeably used as caregivers in this paper), the theory will be very significant in that it will enrich the childcare goals and objectives as it addresses issues concerned with children growth and development process to self-reliance as it can be integrated to child development

initiatives and building self- reliance for vulnerable children. At the level of an individual child, attachment can be understood as the formative developmental process affecting all areas of a child's development.

In this study, the researcher has used the attachment theory as a guide in the assessment of the link between children behavior and their attachment relationship with their primary caregivers. The above reviewed literature indicated that, the children with secure attachment are confident in the presence of their caregivers, they develop self-regulating skills and are generally healthier and more capable throughout their lives (Berk & Shanker, 2006, Hughes, D. 2009and Steinhauer, 1993), while on the other hand the children with insecure attachment do lack confidence, cling to their caregivers to secure proximity, lack independence, preoccupied with relationships and rejecting their caregivers to mask the unrelieved stress (Goldberg, 2000).

In that regard the assumption is that the non-compliance behavior, the less cooperativeness, children violence against their young ones, including sexual abuse and the inability to confidently separate from the children home for self-reliant living as portrayed by the children at Kurasini national children home could be attributed to children unhealthy or insecure attachment relationship with their caregivers (Berk & Shanker,2006, Steinhauer, 1993) and the quality of care as highlighted by Leach (2006) that the best predictor of children's non-compliance is the quality of care.

Both theories have as well, been the effective guide to the researcher in the assessment of the competences necessary for childcare workers in providing childcare services, quality of child care and support services provided by childcare workers and the

challenges experienced by childcare workers in providing child care services to vulnerable children at Kurasini National children home.

As once concluded by McGrath K. C (2013), the treatment of attachment-related issues in children is difficult and produces limited remedial results, therefore, the important message about both empowerment and attachment theories is prevention and empowerment of children; that, the childcare workers should be able to empower vulnerable children and prevent them from all circumstances that can interfere with their wellbeing.

2.3   Global Overview of Care and Protection to Vulnerable Children

After World War I, starting from the year 1914 up to the year 1918, children's vulnerability started to be noticed. Children in all war affected areas suffered the trauma due to separation of children from parents who died serving in the military (Donson, 2014). This resulted to people in Sweden and Great Britain began to work for the rights of the children and they stated that the society to be responsible for implementing children rights should be established (Regeringskansli et al., 2006). In November 1989, the Convention on the Rights of the Children (CRC) was approved and its implementation began by holding the General Assembly of the United Nations in the year 2005 and about 192 Countries had ratified CRC.

On 1st December 2010, the Government of Sweden approved the strategy to strengthen the rights of the children in Sweden expressing fundamental requirements for strengthening the rights of the children in Sweden among which is that decision makers and relevant professional groups must be knowledgeable about the rights of

the children and put this knowledge into practice in relevant activities (Government of Sweden, 2014).

The UN Convention on the rights of the Children (CRC) regulates the human rights of the children and provides a universal definition that includes every child. A country takes part in a legally binding agreement to Convention on the rights of the Child (CRC) by ratifying it. This agreement includes an international collaboration between the countries and a commitment of the national government to ensure that the rights of the child are respected and followed. CRC consists of 54 articles, which all are equally important. However, the Swedish strategy (2014) states that, in order to facilitate the interpretation of CRC there are four guiding principles, which can be seen as central in issues regarding the child. These principles are; article two, three, six and twelve. Article two states all children's equal rights and equal value, despite the child's, parents' or another guardian's differences. This means that the rights of the child include all children regardless of gender, race, religion, political ideology or disability. It is the obligation of the government to ensure that there is no such discrimination against the child.

Likewise, article three of CRC states that, children should be considered in all decisions concerning them. The child should be in primary consideration, regardless of what decision that is going to be made. It is the government's responsibility to ensure that this is met through legislation and administrative measures. Similarly, the third principle consists of article six and states the child's right to life, survival and development. In accordance with the last of the four guiding principles, article twelve,

states that all children have the rights to express their own opinions in issues concerning affairs.

The article states that the opinion of the child should be respected and be taken into consideration, however, the consideration depends on the child's age and maturity. Article 27 comprises the child's standard of living (Government of Sweden, 2014). According to the article all children have the right to a positive physical, mental, spiritual, moral and social development. The main responsibility to meet this right lies at the parents. In cases where assistance is needed the State parties shall contribute with materials such as clothing, food and shelter. All articles in the CRC aims at preventing and protecting children's' rights and aim to the best interests of the child.

2.4   The African Overview of Care and Protection to Vulnerable Children

Following the Convention on the Rights of the Children (CRC, 1989), the African Charter on the Rights and Welfare of the Children (ACRWC, 1990) was created to protect children (UNICEF, 2010). The ACRWC having special provisions guided by the situation in Africa requires the member states to develop policies that facilitate for the rights of the child to the highest attainable standard of health, right to adequate standard of living, right to education and protection from all forms of violence. For vulnerable children, it is a vital time to ensure access to social services which can help them reach their full potential. Vulnerable Children are confronted by barriers including inadequate legislation and policies, negative cultures, practices, and inadequate services (Christine Lloyd, 2006).

According to UNICEF (2009), Eastern and Southern Africa is a home of more than 10 million vulnerable children who have lost one or both parents, representing 60 percent

of all such children around the world (UNICEF, 2009). UNICEF reported that ensuring adequate care for vulnerable children is a tremendous challenge since AIDS epidemic damaging force has drastically weakened traditional children safety net and care mechanisms such as extended family support. The report continued to make a call on governments to highlight their responsibilities in ensuring basic safety nets that protects vulnerable children rights to health, education and protection from exploitation and abuse (UNICEF, 2009).

UNICEF (2018) released another report on the state of children in Africa that over 140 million children in Africa are at great risk of illness, hearing loss, blindness and even death if they won't be provided with lifesaving Vitamin A supplement. The same (UNICEF, 2018) report highlighted that more than 500 children, 87 girls were released by the armed groups in Southern Sudan in two folds of 200 and 300 children consecutively.

Edith C. Chamwi (2014) of Aalborg University, Denmark, in her study on the problem of street children of Moshi, Tanzania made a conclusive remark about situation of vulnerable children that, though the situation of Vulnerable Children in Tanzania do not have any significant difference from that of other African countries or any other part of the world, children allover are unique and different from one another, therefore, they should be treated differently.

2.5 An Overview of Care and Protection to Vulnerable Children in Tanzania

Tanzania is a signatory to all the key international and regional agreements and convention on the rights of the children. The Government of Tanzania ratified the CRC in 1991, the ILO convention on the worst forms of child labor in 2001, the

African Charter on the Rights and Welfare of the Child in 2003 (MOHSW, 2009). Before and after independence, Tanzanian orphans and other vulnerable children were taken care of and supported by their close relatives and neighbors through extended families. When the number of orphans and other vulnerable children increased beyond the capacity of the community to handle, some of these children were taken to orphanage homes while others were taken by step parents and others were adopted (MOHSW, 2009).

The Government of the United Republic of Tanzania ratified the CRC in 1991, but the children's rights were not properly regulated in the laws and policies until when the Child Development Policy of 1996 and the law of the child Act no.21 of 2009 were established. The Child Development Policy revised version of 2008 highlights the need to protect children living in difficult circumstances, such as orphans, children with disabilities, street children, and children affected by natural disasters, children who cannot fend for themselves such as adolescent mothers. The policy also states that it shall provide directions on upbringing of children in difficult circumstances and therefore propose measures to promote protection of children living in difficult circumstances (Status report, 2013). The Law of the Child Act No. 21 of 2009 was made to ensure every child's welfare. The law confirms who is included in the term child and who is in need of care and protection (LCA 2009/3).

The definition of a child is every person beneath 18 years old, and according to paragraph 16 those in need for care and protection are for example children who are poor, orphaned, neglected or mistreated by their caretaker. However, paragraph 8:1 the law states the responsibility of the parents or the child's caretaker. They are

obligated to provide services such as but not limited to food, shelter, cloths and education. The law recognizes the child's right to have and express own opinions and that no child should be discriminated of any reason. Just as the CRC, the law states that the child's best interest should always be primary in decisions involving them.

Another policy framework was the Second National Costed Plan of Action II for Most Vulnerable Children (NCPAII), which provides measures and strategies to reach the most vulnerable children. These are achievements that need to be noted, although there are challenges caused by high levels of poverty, limited resources and limited capacity to implement policies, plans and strategies (MOHSW, Tanzania Child Rights Status Report, 2013).

The author of this study was interested in the literature or studies that have discussed the quality of child care services and factors affecting quality of care, the effects on children's development and education and cognitive, sociability, thinking skills and problem behavior. According to the study conducted by SOS Children Village Tanzania (2014), around half of the Tanzanian population of 40million is children under the age of 18 years. The SOS (2014) study indicated that the number of MVCs in the country who were living without parental care or at risk of losing was about 3,000,000. These included double orphans (230,256), maternal orphans (462,688), paternal orphans (1,283,067), children cared by elderly (327,514) and those cared by siblings (200,091). In 2012, about 11,565 children were living in residential homes. 453 children were in conflict with the law and kept under prison, 578 were in detention, 80 in retention homes, and 80 in approved schools.

According to the analysis conducted by SOS Village Tanzania (2014) in 12 regions, children living in child headed households are increasing in the areas of Iramba and Lushoto. The number of children living with households headed by elderly is high in Iramba, Lushoto, Mtwara and Dodoma. These children are victims of all socio-economic problems and ultimately, they are exploited, 11 abused, and cannot access education, suffer from poor nutrition and inadequate food supply and survive only under extreme poverty. Child rights violations are mostly observed for children who are in conflict with the law, living in prison, remand home, detention, street children and children affected by HIV/AIDs (Ibid).

SOS Village Tanzania (2014), argued that due to an increase of children in need, most of the individuals in the community failed to play their major traditional role of providing care and protection to children. This gap has made thousands of children in Tanzania become parent-less, discriminated, tortured, abused, killed, and solitary.

The SOS Village Tanzania (2014) study continued to reveal that, once these children lost their parental care, the chances of developing a problematic behaviour are high. That the community may experience cases like robbery, rape, sodomy, drug abuse and other issues. Failure to support these children may lead into serious problems in the community. Early pregnancy can lead to an increase of vulnerable groups. A similar situation may also happen to other children if strategies for youth development are limited.

The SOS Village Tanzania (2014) study concluded that Youth who are not employed and not engaged in any self-reliance activities are more likely to be irresponsible for their own children. They might not be able to meet the necessary needs of their

children. Immediate control strategies are needed to prevent the extension of the problem throughout the generations.

REPOA (2008), conducted a brief overview on Children and vulnerability in Tanzania and reported that nearly 10% of all children in Tanzania, about two million children had been orphaned. According to REPOA (2008), vulnerable children and their households needed additional support.

2.6 Competence Necessary for Childcare Workers in Providing Childcare and Support to Vulnerable Children

The main objective of this study was to assess Childcare Workers' strength in providing childcare and support to vulnerable children in the Tanzanian. The first specific objective of this qualitative study is to examine competences necessary for childcare workers in providing childcare and support to vulnerable children. Competence is being defined as a combination of knowledge, attitudes and skills that are critical to the childcare workers' job and affect a major part of the job (Parry, 1996 & Kaslow, 2004). Childcare Workers' competence is generally defined as the person's achieved capacity to interact effectively within the childcare environment (white, 1963).

According to Richards (2015), employee competences are those traits, skills or attribute that employees need to have in order to perform their jobs most effectively. These competences are practiced through interaction between the children and supervisor. These competent behaviors lead to outputs, namely optimum service provision to the children whose results indicate the achievement of outcomes, also

allow for feedback on which competences are necessary for the supervisor to successfully achieve optimum practice (Zorga, 2007).

Childcare workers should provide services and represent themselves as competent only within the boundaries of their education, training, experience or other relevant professional experience (Sutherland, et al., 2012). The literature reviewed during the study, presented Childcare Workers' competence in providing child care services as the following:

2.6.1 Positive Relationship between Childcare Provider and Children

Karageorge and Kendall (2008), in their work on the role of professional child care provider in preventing and responding to child abuse and neglect, discussed important competences that the child care provider needed to have in providing child welfare services. Among the competences is a positive relationship between the childcare provider and the children in order to enhance the resilience of children to overcome their hurts and fear associated with maltreatment.

According to Karageorge and Kendall (2008), these children need to be held, rocked or cuddled in a non-threatening way, therefore, the child care provider should be aware of non-corporal discipline alternatives because punishments increase the child's sense of insecurity and distress. The authors recommended that the child care provider should care for the maltreated children based on their emotional age and needs not on their chronological age because these children are often delayed emotionally and socially and therefore, may not be able to act their age because they are fearful or frustrated.

Karageorge and Kendall (2008), continue to say that the child care provider should model positive behaviors such as open communication, respect and appropriate physical contact in order to best teach the children since the children don't know how to effectively interact with other people. They continue arguing that, during listening and talking to the abused and neglected children the child care provider should be gentle and consistent to enable the child to share the feelings and to trust the care provider. This can be emphasized that the importance of child care programmes that provide opportunities for vulnerable children to develop meaningful relationship with caring, knowledgeable adults must show the children that there are caring people with physical and emotional availability in the world who can be of help to them.

2.6.2   Supervisory Leadership and Management Skills in Child Welfare Organizations

Mallon and Hess (2014) in their work on "Child Welfare for the 21st Century" discussed the attributes of supervisory leadership in child welfare organizations. These attributes include communicating purpose and meaning of the work, providing a strong ethical example, stimulating creative thinking and problem solving, building a climate that promotes high quality work and creating a culture of caring. They also examined the crucial management skills, introduced a management assessment model, and specifically focused on planning, communication, and decision making skills in child welfare environment.

The authors directed their attention to the specific leadership and management skills involved in supervising a child welfare unit; such as managing group development, understanding group roles and managing both care worker-child relationship and

inter-group relationships. Furthermore they presented on the skills needed to work at the intersections of unit and agency and those agency and community including approaches to assessing the environment and skills for developing effective relationship and community partnership. These skills are discussed in the context of the many practices initiatives in child welfare that require strong community collaboration components and in promoting diversity in the work place.

2.6.3   Intercultural Communication Skills

Mallon and Hess (2014) again examined approaches to multiculturalism and their applications to child welfare; taking an in depth look at skills associated with intercultural communication and the effective use of these skills in supervisor supervisee relationships and in managing diverse teams. They took their readers through the process and skills needed for effective performance management, including developing and communicating performance standards, monitoring and documenting performance, analyzing and addressing performance problems, and working with human resources systems. All these skills are grounded in an understanding of the relevant legal frameworks involved in performance management. According to Engelbrecht (2006), Childcare workers need to understand how their practice is affected by personal and structural issues surrounding cultural differences, thus need to respectfully and effectively respond to people of all cultural backgrounds.

2.6.4   Skills and Knowledge on Child Development and how it can be Supported

According to Nichols (2010), the study on the common core of skills and knowledge for the children and young people's workforce; there are common core of skills and knowledge that everyone who works with children is expected to have so as to

effectively improve life chances for all children including those who are most vulnerable.

The author discussed the importance of understanding how children physically, intellectually, linguistically, socially, emotionally, morally develop and grow in character and change in behavior and the effects they can have on children behavior, how they form attachment and how it might change, how children see and experience the world in different ways, importance of forming positive relationships in the development of children and how it can be supported.

2.6.5 Ability to Recognize Child Developmental Variations and Manage Transition

Nichols (2010) highlighted on importance of the Care Workers' ability to recognize when a child is not achieving their developmental potential, displaying risky or harmful behavior as well as the worker's ability to identify the sources of help for children. The author also discussed the growth and development of a child as a transition and the worker's ability to manage the process of transition in a timely way and help the child to reach positive outcomes by making choices appropriate to their age and stage of development (Nichols, 2010).

2.6.6 Good Communication and Engagement Skills

Nichols (2010) described good communication and engagement as central to working with children in building trust and engaging children to seek advice and use services. The author emphasized on the importance of the worker being able to assess and respond to children's needs as they emerge at different stages of their development.

2.6.7 Interpersonal Skills

Nichols (2010) also discussed the importance of the worker to know how to interact with children in ways that support the development of children, ability to think, learn and become independent as well as the workers to be clear of their roles and responsibilities in addressing the specific children needs.

2.6.8 Generative and Flexible, Self-Directed and High Degree of Personal Initiative

According to Mattingly et al., (2010), professional child and youth practitioners are generative and flexible, self-directed and have high degree of personal initiative. He further described the professional practitioners as being aware of the functions of professional ethics and use professional ethics to guide and enhance practice and advocates effectively for children, youth, families and the profession.

2.6.9 Emotional Intelligence

According to Ashbourne *et al.,* (2012) emotions are at the center of childcare workers. Awareness of emotions helps them to be more empathetic and able to build a genuine relationship with the children. The author emphasized that; emotional intelligence is necessary aspect for the childcare workers to lead to greater work performance, satisfaction and problem-solving ability and a reduction in stress.

2.6.10 Anti-discriminatory Practices

According to Kupperschmidt (2000), one of the areas of diversity is age, or more specifically generational differences. Kupperschmidt (2000) argued that each generation has a particular perception that molds its expectations, beliefs and work

styles. The author highlighted that Childcare workers need to understand how generational differences influence the dynamics of supervision and how to effectively work within generational differences and use them as a tool to create more productivity in working with children.

2.6.11 Ethical Practice and Legal Knowledge

According to Rodolfa *et al., (*2005) the final essential professional competence for childcare workers is competence in the area of ethical practice and legal knowledge. This includes the application of ethical concepts and awareness of legal issues regarding professional activities, as well as advocating for the profession.

Fine, *et al.,* (2012) argued that childcare workers need to be knowledgeable in ethical and legal practices for his/her own benefit, as well as that of the organization, social worker and service user. Sutherland, et al.., (2012) presented that ethical practice is at the very center of social work and supervision, and is therefore an area of competence in which childcare workers must excel. It is vital that the childcare workers not only have knowledge of ethical and legal requirements, but also the ability to convert this knowledge into practice.

2.7   Quality of Care in Services Provided by Childcare Workers

The second specific objective of this qualitative study was to assess the quality of care in services provided by childcare workers. The author of this study based the literature review of this objective on two subheadings; one on the types of services and the other on the quality of care as follows:

2.7.1 Types of Childcare Services Provided by Childcare Workers to Vulnerable Children

Brown (2008) in the publication on "Quality Programs for Vulnerable Children: A facilitator's Guide to establishing Services Standards" described core six areas of services to vulnerable children that can be used in combination with economic strengthening efforts to assist children, families and communities. Brown (2008) also outlined a process for coordination of care that ensures the right cluster of service reaches vulnerable children and their families as follows.

2.7.1.1 Food and Nutrition Support

According to Brown (2008), the vulnerable children need to have food and nutrition support. He further stated that, vulnerable children need to have sufficient food to sustain an active and healthy life at all times, and growing well compared to others of same age., According to the United States President's Emergency Plan for AIDS Relief (PEPFAR, 2012) vulnerable children needs health and nutritional services.

2.7.1.2 Shelter and Material Care

According to Brown (2008), other types of needs for vulnerable children are shelter and material care. He continued to argue that the needs the children need include shelter that is adequate, dry and safe and have at least one adult who provides consistent love and support. The provision of good shelter to children includes the availability of good clothes to children matching to their ages.

2.7.1.3 Protection and Safety

Brown (2008) also said that children need to be protected and therefore should be safe from abuse, neglect or exploitation and have legal protection services as needed.

PEPFAR (2012) say that, vulnerable children need social protection to reduce vulnerability and risks, foster human capital development and interrupt transmission of poverty from one generation to the other. Other child services according to PEPFAR were protection of children against child abuse and exploitation, violence and family separation.

Boothby (2014) in the publication titled "Guidelines on Children's Reintegration" expressed the concern that the need for safety should be considered for vulnerable children in the case of abuse, neglect and exploitation within the family.

2.7.1.4 Health Care

Brown, 2008 & PEPFAR, (2012) continued to describe services to vulnerable children amounting to health care. Both of them described health care services as to ensuring that children are healthy and have access to needed services, preventative and treatment.

2.7.1.5 Psychosocial Care and Support

Another type of services to vulnerable children according to Brown (2008) and PEPFAR, (2012) are psychosocial care and support. By psychosocial care and support the authors meant the process of ensuring children are emotionally healthy, cooperative and enjoys participating in activities with other children and adults.

2.7.1.6 Education and Vocational Training

According to Brown (2008) & PEPFAR, (2012) vulnerable children need to be given education and vocational training; whereby the responsible authorities should ensure

that children are attending school to acquire knowledge and skills as expected and works appropriate for their age.

2.7.1.8 Households Economic Strengthening

According to Brown (2008) & PEPFAR (2012) other important needs for children are the economic strengthening to ensure that households caring for vulnerable children can meet their own basic needs; reducing the economic vulnerability of families and empower the families to provide for essential needs of the children in their care.

2.7.1.9 Assurance on legal rights, birth registration and inheritance rights

According to PEPFAR (2012) vulnerable children need assurance on their legal rights, birth registration and inheritance rights.

2.7.1.10 Reintegration with their families

Boothby (2014) presented that vulnerable (separated) children need to be reintegrated with their families of origin in order to receive protection and care and to find a sense of belonging and purpose in all spheres of life. The author explained that reintegration of children should not be seen as a single, one off event, but rather a long-term process with different phases including extensive preparation and follow up with proper support services provided to families and children at each step of the way.

2.7.1.11 Foster care and adoption services

According to Boothby (2014), vulnerable children need temporary alternative care arrangements such as foster care or supervised independent living and placement in a

new permanent family through adoption of children. Boothby (2014) continued to explain that vulnerable children with long histories of violence have emotional needs that need to replace violent, destructive relationships with more constructive and caring behaviour.

2.7.2   Quality of Care in Services Provided by Childcare Workers

According to Lewis and Brooms (1983), the quality of care is defined as a measure of how well the level of delivered service corresponds to the requirements and expectations of the customers. When the expectations are greater than the performance of the service provided, then the perceived quality is not satisfactory and can generate almost certainly customer dissatisfaction (Parasuraman et al., 1985). UNICEF UNAIDS and USAID (2004) contributed that to make a meaningful difference for vulnerable children it should be ensured that children have access to the broad spectrum of coordinated services.

The authors further argued that the services must be based on the best practices and evidence and must reflect expert and indigenous knowledge and wisdom about the needs of children. The authors continued to describe that the delivery of quality services should follow the processes that systematically monitor and evaluate services or overall care to ensure the desired levels of outcomes or results are being met and are regularly updated to reflect current knowledge and that the gaps between expectations and the actual results/outcomes are routinely identified and addressed.

USAID (2008) defined quality services as coordinated care, a child focused process that identifies needs and augments and coordinate existing services and manage child

wellness through advocacy, communication, education and identification of and referral to services. USAID (2008) argue that, coordination of care at child level involves assessing needs, planning care and making adjustments to the combination of services when needed according to the Canadian Council on Learning (2006), quality child care is equally important for both advantaged and disadvantaged children and that quality of child care can result for all children in better, more cooperative relationships with adults, improved relationships between mother and child, fewer behaviour problems and better social interactions with other children. The Canadian Council on Learning (2006) further argued that children can experience high quality child care in any type of child care setting; at home, in a child care center, or a family child care home.

The author highlighted the important characteristics of high quality child care such as a high adult-child ratio, small groups sizes, post-secondary training/education (child-care providers with college diplomas or university degree in early childhood education), a positive care provider - child relationship, well-defined spaces, well-structured and well-planned curricula and significant parental involvement.

According to USAID (2008), an important indicator of quality care is the child care providers' level of education and continuing professional development and the low staff turnover which provides consistency of care for children and important for their social-emotional development. The author described other quality childcare service indicators as where children can be comfortable, relaxed, and happy and involved in play (USAID, 2008).

2.8   Challenges Experienced by Childcare Workers in Providing Childcare and Support Services to Vulnerable Children

The third specific objective of this study was to examine the challenges experienced by childcare workers in the course of providing child care services to vulnerable children. The literature reviewed under this specific objective have revealed remarkable challenges facing childcare workers as presented below:

2.8.1 Lack of Training Opportunities

According to assessment of social welfare workforce in Tanzania (2012), there were no training opportunities for childcare workers after employment, the condition that made some of them to look for alternative employment.

2.8.2 Delayed Promotion

The assessment of social welfare workforce in Tanzania (2012) established that 60% of Childcare workers staff interviewed during the assessment expressed their concerns that it was too long ago for them to remember when they were last promoted.

2.8.3 Minimal Compensation

Unfortunately childcare workers do not earn what they are worth. Many jobs in childcare come with a low pay grade. Working with stressed out children when receiving a low pay leave most childcare worker drained.

2.8.4 Stress

According to assessment of social welfare workforce in Tanzania (2012), there are few childcare workers compared to the demand at the children home. Childcare

worker have to show compassion to vulnerable children who are in the most hostile situations. According to Cennamo et al., (2008), working with children who have just lost their parents and have no other family members to depend leave one emotionally fatigued on child care workers.

2.8.5 Budgetary Allocation

The Assessment on Social Welfare workforce in Tanzania (2012) showed that 86% of respondents who were social welfare staff across the board suggested that the provision of social welfare services has deteriorated due to lack of sufficient funding and that child care workers are overstretched by working under severe budgetary constraints and some use their own money to follow up cases experiencing delay in disbursements.

2.8.6 Workload

Jacques (2014) noted that, shortages in childcare worker still exist. This of course results in a huge workload for practicing childcare worker. When a heavy workload is combined with low pay, it may become frustrating. The heavy workload is definitely a huge job-related stress.

2.8.7 Knowledge of Laws, Policies and Guidelines

According to the assessment of social welfare workforce in Tanzania (2012), the social welfare staff interviewed indicated inadequacy in their fluency on policies and guidelines governing their rights and practices, for example scheme of services. Martin, (2014) said that, we are all bound by the law and when working as childcare workers we are under scrutiny at all times. Unfortunately the law always wins and one

has to abide. Being caught between children and the law, childcare workers find themselves in a difficult time.

2.9   Empirical Literature Review

Empirical literature review is the analysis of research studies that report the results (what is known) derived from the actual research observation or experimentation as opposed to theoretical literature review which focuses on theory or what is thought rather than experience or application (Matthews C, 2017).

Boote & Beile (2005) defined empirical literature review as publications of what previous researchers' studies found on the subject relationship between the variables under consideration. And empirical literature review give specific details of previous studies on what have been learned and accomplished in the area of study by other researchers and what still needs to be learned and accomplished. The key issues being the problem focused upon, the research methodology used, population studied and the previous study findings and conclusions. In this study, the researcher applied a systematic literature review where the formulated research questions made it easier for the researcher to specify, select and critically evaluate relevant research studies in relationship with the research questions and to collect and analyze data from the selected studies. In systematic review the decision to include or exclude particular studies is clear to readers and to another researcher using the same criteria would likely make the same decision (Okoli, 2010).

Having completed the review of theories and concepts that are relevant to the topic of this study and to the broader areas of knowledge being considered, the researcher had

to establish a comprehensive understanding of what is known about the topic. In establishing what is known about this research topic and provide a rationale for additional or further research, the researchers systematically undertaken the empirical literature review as follows.

USAID (2009), conducted a study on the human capacity within child welfare systems; social work workforce in Africa, under the "Global Health Technical Assistance Project" to inform stakeholders about the opportunities and constraints on building the social work workforce within the child welfare sector for those who work on behalf of highly vulnerable children. The study analyzed the workforce capacity in terms of their availability, education and training of social workers employed in child welfare and the quality of services. The study revealed that, in Tanzania, the department of Social Welfare has historically been understaffed to provide basic social welfare services. The study also revealed the shortage of 50% of qualified social workers in the child welfare workforce and that half of those employed leave their jobs within five years, among other reasons; due to disempowering working conditions such as large caseloads, excessive paperwork and limited resources for meeting even basic needs of clients (USAID, 2009).

Terway, *et al,* (2010), in their report on most Vulnerable Children in Tanzania, reported that in the year 2006 the MOHSW estimated MVC population on Tanzania's mainland was close to 930,000, equivalent to 5 percent of the child population. They reported that through the NCPA for Most Vulnerable Children, the Government of Tanzania designed a multi-sectorial policy to deliver support to these children, including improved access to primary and secondary education (MoHSW, 2008).

Their report highlighted what the guiding documents argued about the serious challenges faced by MVC in entering and remaining in the formal school system, especially those in child-headed households or in households where the head is elderly or critically ill (Terway, *et al,* (2010).

Norton (2010) of Dublin Institute of Technology in the study on development through interaction between adult and child during the early years, treasured the power of interactions and secure attachments in influencing growth of competencies such as coherent unified sense of self, a desire of learning successful relationships and cultured understanding of emotions in the life of the child. The author emphasized on the stable and predictable relationships, both within the family and in the child care settings in practice, policy and in the training of childcare Workers.

Wakia (2010), in her study on "Why are children on street?" a survey in Ethiopia, highlighted the role of Childcare Workers in facilitating family reintegration for children living on the streets, such as to work with both the child and family to determine, whether family reintegration is possible and, is in the child's, best interest. Assisting the family and the child through counseling and support, linking children with schools or vocational training, parental guidance, economic strengthening through entrepreneurship skills training and small grants and links with local organizations such as self-help groups.

Shah (2010), conducted a study on the experience of new workers in the field of child welfare workers in Ontario. The study explored the experiences and workplace realities of new workers in the child welfare in Ontario. The study revealed new

workers training concerns, that, their orientation needed to be more thorough and extensive as specifics of the tasks, and the significance of personal goals, which affects employee retention (Shah, 2010). The study examined how child welfare workers coped with some of the strain and contradictions in their work. However this study did not specifically focused on the child welfare workers' strength in providing the ideal childcare and support services to vulnerable children.

Joseph (2013), conducted a study on the intervention strategies towards addressing the problem of street children in Kinondoni Dar-es-Salaam. The study revealed that despite good services such as education and vocational training, psychosocial counseling and family reunification and efforts to transform street children into self-reliant and productive members of the society especially to ensure all children resume their schooling, most of them struggled to accomplish their goals due to financial constraints and lack of enough trained professionals, lack of coordination and poor working environments. The study suggested a range of interventions that respond to many complex needs of street children of different ages, genders and psychosocial, educational and physical needs.

Mnzava (2009), in the study on Child Protection and Child Social Protection: Institutional Issues and Practice in the Tanzanian Experience, disclosed that, Tanzania lacks a public system for adequately supporting its most vulnerable children. Formal social protection arrangements to reach MVC or their caretakers, are either not in place or insufficient. Statutory social security institutions provide formal social insurance linked to persons employed in the formal sector.

The National Guidelines for Improving Quality of Care, Support, and Protection for Most Vulnerable Children in Tanzania, concluded that "if we ensure that all children and their households are getting good and quality service, enabling them to be protected and receive good care, and then we will be able to see real changes in their lives (URT, 2009). Themselves and their households will be guaranteed a better quality of life just like other people we all have the right to reach our potential as human beings. If we work together with love, we will be able to accomplish this, and we will enable the community to experience love and live happily. All of us together with the children can bring changes. All children belong to all of us, let us care and love them" (MOHSW 2009).

In many reviewed documents (Shah, 2010; Mnzava, 2009; Joseph, 2013; URT, 2009 and MOHSW 2009), it has been seen that interventions towards the care of vulnerable children has been proposed and implemented through multi-sectoral government responsible Ministries, Non-governmental organizations and religious institutions.

However, the relationship between childcare workers' strength in providing child care services to vulnerable children and the inadequate competences, persistent dependency attitude and lack of self-efficacy to vulnerable children who have grown up to youth age in the residential care like Kurasini National Children Home to lead a self-reliant living has remained untouched, undisclosed and unresolved, therefore, appealing for the assessment of the Childcare Workers' strength in providing the child care services to vulnerable children in the country.

2.10 Research Gap

As revealed herein above, worldwide, researchers have made great efforts in studying child care to inform policy makers about the incidence (Saha and Webb, 2005; Brown

et al., 2002; Ranjan, 2001). In Tanzania, to a great extent the research on child matters have focused on childcare issues neglecting other areas of importance. The literature visited (Norton, 2010; Wakia, 2010; Shah, 2010; Mnzava, 2009; Joseph, 2013; URT, 2009 and MOHSW 2009) have indicated that research have been done on the impact of institutional care services on child life and association between poverty, child labour and neglect. Still, there is inadequate information concerning the strength of Childcare Workers in providing care and support to Vulnerable Children in Tanzania. Therefore, the study intended to bridge the information gap by assessing childcare workers' strength in providing childcare and support services to Vulnerable Children in Tanzania, using the Case of Kurasini National Children Home.

2.11   Conceptual Framework

Camp (2001) has defined a conceptual framework in research as a structure with abstract ideas and concepts which the researcher believes can best explain the development of the phenomenon to be studied. The conceptual framework presents an integrated way of looking at problem under study (Leirh & Smith, 1999).

According to Miles and Huberman (1994) a conceptual framework is a visual or written product that explains the main things to be studied, composed either graphically or in narrative form, and the presumed relationship between them. The conceptual framework makes it easier for the researcher to easily specify and define the concepts within the problem under study (Mennecke, & Townsend, 2012). The framework is arranged in a logical structure to aid provide a picture or visual display of how ideas in a study relate to one another (Grant & Osanloo, 2014).

The Conceptual framework below was used in this study. It shows the variables contributing to childcare workers' strength in child care service provision lack of which has contributed to children dependency even at a maturity stage after moving out of the National Children Home in the country. Some of research suggests lack of equipment in the national children home, limited childcare workers, and limited space, poverty and rapid urbanization as the main factors, leading to a continued reliance of vulnerable children at their youth age. However, this study examines the strength of childcare worker towards their daily activities at the Kurasini national children home. Those traits, skills or attributes such as what the employee needs to know to perform the functions of the job, skills required to get along effectively with others, the ability to listen non-defensively, teamwork and customer service skills includes the skills required to lead others and to influence coworkers or to work effectively as part of a team, the ability to effectively organize and manage work and work-related activities. The competences such as ability to direct themselves toward the accomplishment of goals and specific work assignments, including making of effective judgments, the ability to adapt and be flexible as new requirements emerge, and the ability to effectively plan and organize work to achieve required results.

This conceptual framework emphasizes the importance of addressing all the relevant contributory variables, including Childcare Workers' leadership competence, intellectual competences, interpersonal skills, organizational and self-management competences in determining what contributes to optimal child growth and development verses what precipitates child vulnerability within the children home contexts and developing a service response to the needs of vulnerable children.
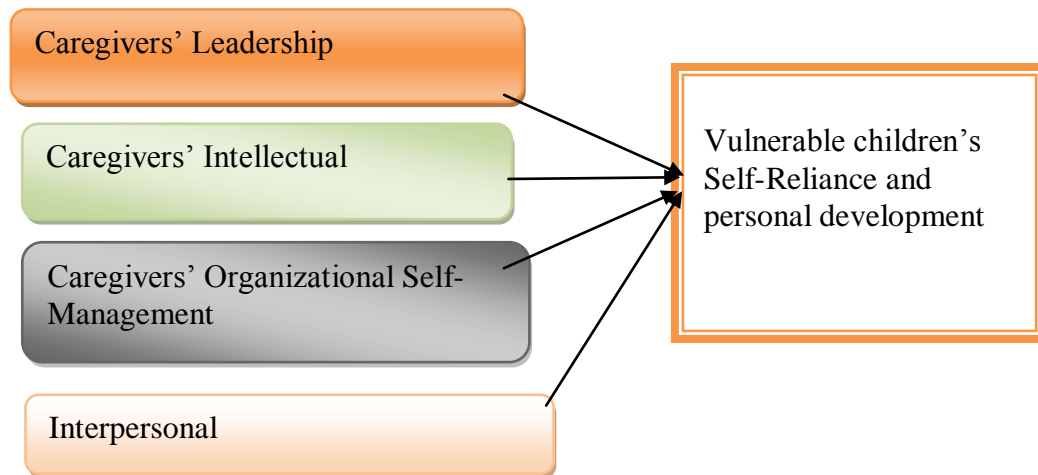
Figure 2.1: Conceptual Framework

Source: Research, 2018 Caption

2.11.1 Definition of the Conceptual Framework Terms used in the Conceptual Framework

2.11.1.1 Intellectual

Intellectual competences can be defined as what the employee needs to know to perform the functions of the job. This can include industry knowledge, training background and expertise. An accountant, for example, needs to be good with numbers. A writer needs to have strong spelling and grammar skills.

2.11.1.2 Interpersonal

Interpersonal competences are skills required to get along effectively with others. These others may be internal (fellow employees) or external (customers) to an organization. There are few positions that do not require at least some level of interaction with others. Interpersonal competencies may include such things as the ability to listen non-defensively, and teamwork and customer service skills. Childcare providers must be able to connect and bond with children to establish trust.

2.11.1.3 Leadership

Leadership competences are skills required to lead others. While managers and supervisors obviously need these skills, even employees who are not directly responsible for others may need strong leadership competencies to influence their coworkers or to work effectively as part of a team. Leadership competencies may include the ability to provide effective feedback, give clear direction or evaluate the performance of others.

2.11.1.4 Organizational

Organizational competences relate to the ability to effectively organize and manage work and work-related activities. Employees with strong organizational competencies are efficient and effective in the work that they do.

2.11.1.5 Self-Management

Employees must also be competent in self-management and able to direct themselves toward the accomplishment of goals and specific work assignments. Self-management competences include the making of effective judgments, the ability to adapt and be flexible as new requirements emerge, and the ability to effectively plan and organize their work to achieve required results.

In this study, the quality of childcare workers' strength is a measure of how well vulnerable children are prepared to confidently lead an independent and self-reliant life after they leave care at the children home (Lewis & Booms, 1983). In the conceptual framework, the researcher illustrated the competences that contribute to

childcare workers strength in providing care and support to vulnerable children. The lack of such competences were thought to be the result of the continued dependency by vulnerable children to the children home even at their adulthood stage after moving out of the children home. During the data collection exercise, the research participants substantiated these competences as necessary for childcare workers as prior indicated in the presented conceptual framework. The conceptual framework made it easier for the researcher to easily specify and define the concepts given in the participants' responses to research questions.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1   Introduction

Babbie (1995), defined Research methodology as the scientific procedures and processes of studying how research is done scientifically in various steps that are generally adopted by the researcher in studying the selected research problem. Babbie (2010) specified the role of the research methodology in explaining the logic behind the methods and techniques employed in the study. Mouton (2001), explains that research methodology focuses on research process and the kind of tools and procedures to be used on the study.

Research methodology relates to grand plan of a particular research project that shows how a researcher intends to conduct the research and how to guard it against internal and external factors which may influence and undermine its validity and acceptability as a knowledge base (Babbie, 1995).

In this chapter, the research focused on research methodologies that were used during the study, area of the study, target population, sample and sampling techniques, data collection techniques and tools, validity and reliability of the instruments, data analysis procedures and ethical consideration.

3.2   Research Design

Research design is a plan that describes how the research was conducted (Dudley, 2005). According to Saleem et al., (2014), a research design is the arrangement of

conditions for collection and analysis of data in a manner that aims to combine relevance to the research purpose with economy in a procedure. Research designs include the survey, experimental and case study design (Mcchester and Ihedigbo, 2014).

In this study, it was considered to be important to adopt a case study design by the researcher. Case study is the research design that entails the detailed and intensive analysis of a single case (Priya, 2014). It is a way of organizing social data for the purpose of viewing social reality and it also examines the social unit as a whole (Cohen et al., 2007). Brown et al., (1977), argues that, case studies are valuable in informing us of conditions that are rare or unusual and thus not easily studied in any other way.

This design is chosen because of its flexibility in terms of data collection, data analysis as well as its depth and breadth of studied variables. Case study design is a qualitative analysis, which involves careful and complete observation of a social unit, a person, a family, an institution, a cultural group or even the entire community. It is a method of study in depth rather than breadth (Kothari, 2004). According to Cozby (2012), case study is a comprehensive study of a social unit comprising of a person, a group, a social institution, a district or a community. It is essentially an intensive investigation of a particular unit under consideration (Kothari, 2004).

This study is descriptive in nature. It focuses on snapshot analysis about the problem of childcare workers' strength in providing childcare services to vulnerable children. It is a pictorial analysis of the role of childcare workers' competence in the upbringing

of competent children, the main purpose of the study being to assess childcare workers' strength in providing child care services to Vulnerable Children in Tanzania. In this study, the researcher used the case of Kurasini National children home involving the sample participants who are the vulnerable children, childcare workers, social welfare officers and human right staff, people who have some connections and/or involved with the children home in some ways. Their experience in the situation under study, their thoughts and opinions were important to the researcher to understand the strengths of childcare workers in providing care and support service to vulnerable children within their real life context (Merriam, 1998).

3.3 Research Approach

In this study a qualitative research approach was chosen as a research methodology because the study is intended to explain the patterns that exist in childcare workers' strength in providing child care services to Vulnerable Children in Tanzania.

According to J Creswell (1998), qualitative research is a naturalistic and interpretative approach, which is concerned with understanding the meanings that people give to the phenomena within their social setting. The qualitative method is based on a small scale sample and uses interactive methods of data collection such as interviews to allow the exploration of new issues and concepts. The terms, which introduce the specific objectives of this study do not suggest any measurement that would require the use of statistical method in data processing.

In this study, the semi structured survey questionnaire was aimed at gathering data capable of being quantified. The quantification aspect would only add value to

qualitative information. However, the unstructured or open ended questions required qualitative information as they reinforce an understanding and interpretation of meaning as well as intentions underlying participants' interaction.

3.4   Area of the Study

The research was conducted at Kurasini National Children's home located at Kurasini in Temeke District in Dar es Salaam city Tanzania. Kurasini National Children home has been into existence since 1968 providing full time care, support and protection to the most vulnerable children referred from different councils all over the country (URT, 2016). The home is selected because it is a National children home owned and managed by the government and is one of which their children were blamed. The children cared in this home were blamed for non-compliance, persistent dependency or over-reliance to the home after resettlement, lack of self-efficacy and proved deviant behavior. The children raised in the home were said to be incompetent and involved in unacceptable behavioral conduct and practices.
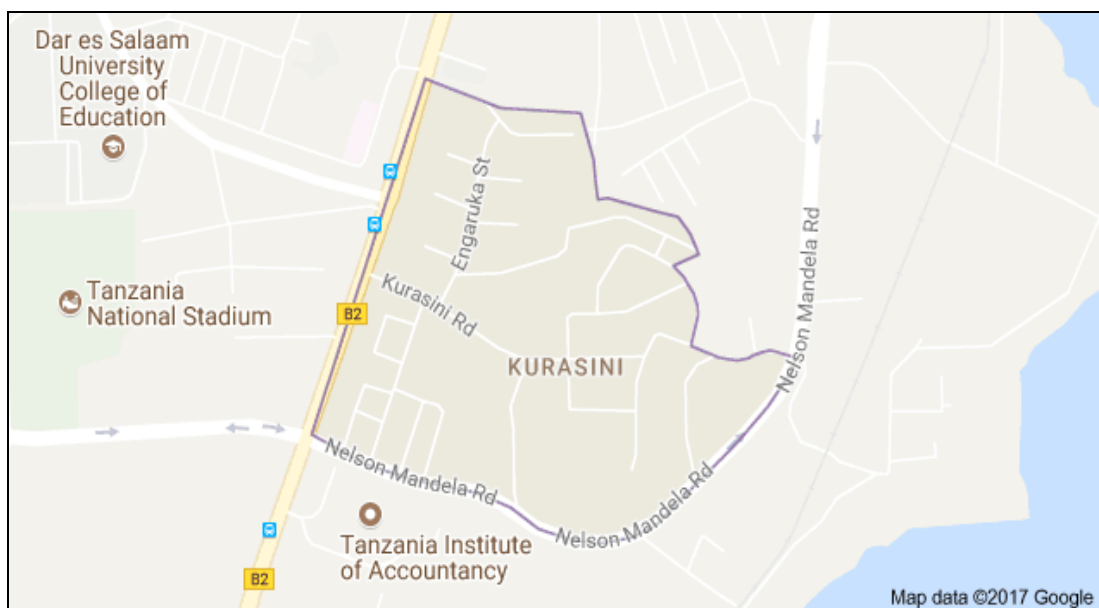
Figure 3.1: Map of Study Area

In this study, the researcher was interested to understand the role of childcare workers' strength in the upbringing of competent children as would be desired of children raised by own parents. Thus, Kurasini National children's home, became a focus of this study to assess the Childcare workers' competences in providing child care services to Vulnerable Children in, Tanzania.

3.5   Targeted Study Population

According to Kothari (2004), population is defined as an entire group of individual or objects having common observable characteristic. It refers to the entire group of people, items or things of interest that the researcher wishes to investigate and from which the sample will be drawn and studied. It is generally a large collection of individuals or objects that is the main focus of a scientific query. It is for the benefit of the population that researches are done. The target population is a group of subjects from whom the researcher expects to draw conclusions about the research topic (Kothari, 2004).

On the other hand, Babbie (2010), defines a population as group of elements or cases, whether individuals, objects or events, that conform to specific criteria and to which we intend to generalize the result of the research. Kumar (2007) describes the population as the electorates from which the researcher selects participants for the research study. The total population of this study was 270 people composed of 20 occupational cadres (10 Childcare Workers, 5 Human rights Staffs, 5 Social Welfare officers) and 250 vulnerable children at Kurasini National Children's home. The type of information or data relevant to this study guided the choice of occupational cadres with rich data on childcare workers' strength in providing childcare and support to

vulnerable children. The decision on number of participants from each (source) category of respondents was made basing on their availability during the study, readiness and willingness to participate in the study and achieving data saturation (O'Reilly & Parker, 2012, Walker, 2012).

3.6 Sampling Techniques

Sampling technique is a definite plan for obtaining sample from a given population. Kothari (2004) refers sampling technique as a procedure that the researcher would adopt to select items for the sample. Sampling technique lay down the number of items to be included in the sample. Marko et al., (2014) notes that, there are two major goals that sampling can achieve. A sample is selected because in most cases it is rarely possible to cover all the individual elements comprising a population of interest due to the need for the possessing the knowledge on competent care and services and other reasons. The choice of every target population or category of respondents for this study was purposive basing on the type of information or themes or perspectives required on the study topic. The purposive sampling technique was therefore, used in this study in selecting an ideal and manageable size of respondents from both categories without biases and ensuring that all respondents have equal probable chance of participation in the study.

3.6.1 Purposive Sampling

The idea behind qualitative research is to purposefully select participants or sites (or documents or visual materials) that will best help the researcher to understand the problem and the research question (J Creswell, 2013). This study employed purposive sampling. The choice of this technique was based on the fact that it caters an

opportunity for specific respondents intended to provide specific information. Mason (2008) argued that purposive sampling is a set of procedures where the researcher manipulates the analysis, approach and sampling activity interactively during the research process to a much greater extent than in statistical sampling. The purposive sampling technique was applied where a researcher has no sampling frame but is sure that there are some participants with strong information needed in study (Robert, 2015).

In this study, the criteria such as the knowledge on child care and support services to vulnerable children and the willingness to participate in the study were used to select study participants (sample) from the existing groups of Human right staff, Childcare Workers at Kurasini National Children Home, and Social Welfare officers of DSW including the involvement of the heads of sections and managers to participate in the study. They were selected because they have direct involvement in child welfare and have information on what happened or is currently going on with the vulnerable children at Kurasini National children home. The information they can provide are mostly be found from their experience and standpoint. The job position was also important due to the fact that other information regarding the study need some specific respondents to provide information depending on the sensitivity of such information. Researchers also used purposive sampling to save time and help to get the target respondents for the particular needed information.

3.7   Sample Size and Selection

Sample is the part of the population that helps the researcher to draw inferences about the population (Kothari, 2014). Sample size refers to the number of items to be

selected from the population to constitute a sample (Kothari, 2004). According to Creswell (2013), sample size depends on the qualitative design being used.

Generally, the sample sizes used in qualitative research are not justified (Marshall et al, 2013). There are no well-established published guidelines to allow formal estimation of sample size for qualitative research because qualitative studies generally do not aim to estimate magnitudes and to generalize a larger population, rather to evaluate patterns in a data set (how and why) (Pertti, 2010). There was a need for a researcher to ensure there is enough, but not too much data. Robert (2005) suggests samples of 20 and 30 respondents whereas Mason (2010) suggests a sample of 25-30 respondents.

The researcher decided to use a small sample because the goal of qualitative research is to describe the phenomenon of interest and address the research questions. Apart from the small number that characterizes qualitative research, there is no specific answer to how many participants a researcher should take as a sample size (Creswell, 2013). In line with the above facts a saturation rule has been applied in this study. Saturation occurs when adding more participants to the study does not result in additional perspectives or information (Denny 2009; Sparkes et al. 2011). Charmaz (2006) suggested that you stop collecting data when the categories (or themes) are saturated; when gathering fresh data no longer sparks new insights or reveals new properties.

Glaser and Strauss (1967) recommend the concept of saturation for achieving an appropriate sample size in qualitative studies. Using the saturation rule and lack of

common stand among authors in a qualitative research, the researcher extended to select 50 units in sample that met the criteria of time, resources and saturation for this study.

The sample for this study comes from two main categories of population. The first category of sample participants was comprised of 30 vulnerable children selected from vulnerable children at Kurasini National Children Home. The selection and decision on the involvement of 30 vulnerable children of and above the age of 16 to 25 years was based on their age, their availability during the study, readiness and willingness to participate in the study and achievement of data saturation (O'Reilly & Parker, 2012, Walker, 2012).

The vulnerable children were important in this study because the study mainly focus on the issues influencing their performance (E G Kiambi & M M Mugambi, 2017). They have rich experience regarding care and support services from childcare workers. They are in a good position to describe the types and quality of services provided at the children home. The researcher selected children of 16 years and above on the understanding that they are the category that have stayed longer at the children home and have the higher capability to express their feelings and communicate more details of their life experiences and can make an opinion on the status of childcare workers' strength in providing child care and support to vulnerable children. Sharron D & Margarete (1999) recommended that children of 16 years of age and above can easily understand the purpose of the research study and are able to effectively cooperate during the study. The researcher involved children of 16 years of age and above because they are also the category that was blamed in majority for non-

compliance, involvement in deviant behaviour and resistant to family reintegration and independent living. Their views were therefore, considered very important in assessing the childcare workers' strength in providing care and support to vulnerable children.

Though children below 16 years of age could as well give their testimonies on their childhood experiences and how life at the children home actually appeared to them, but they could not be in a better position to effectively make opinion on establishing own independent living. Children below 16 years did not participate in the study also because very young children required more directions from the interviewer during the study (Bearison, 1991 and Robertson, 1993). Their exclusion was purposive and not otherwise.

The second category of sample study population was based on the participants' occupational cadre comprising of Human rights Staffs, Childcare Workers at Kurasini National children home, and the Social Welfare officers. The selection and decision on the number of study participants from this category was based on the type of information needed on the study topic, their availability during data collection, readiness and willingness to participate in the study and achievement of data saturation (O'Reilly & Parker, 2012, Walker, 2012).

The childcare workers are typically the key informants in this research study. They were expected to have rich and thick data on the types and quality of services provided to vulnerable children (Kudzai E C Munodawafa, 2017). They are also the important source of information on the childcare workers' skills and challenges facing

them in providing childcare and support to vulnerable children. Childcare workers have information to share on the children capability, success and failures of children in starting self-reliant and independent living. During this study, the researcher was able to interview 10 childcare workers who were available at the research site, ready and willing to participate in the study.

Human right staff were involved in this study because of the legal and children rights issues integrated into the care and support to vulnerable children (World Bank, 2013). It was important to get the human rights perspectives from human right staff in assessing childcare workers' strength in providing childcare and support to vulnerable children. During this study, the researcher was able to interview 5 human right staff who were available, ready and willing to participate in data collection.

The participation of Social welfare officers was important in this study because of their supervisory and leadership role over the Kurasini National children home (URT/MOHSW, 2012). Social welfare officers have the responsibility to plan for the orientation and on-job training for childcare workers. They have the responsibility of developing training policies, management guidelines and standard operating procedures for children living in institutions. They are the responsible authority for admission of children into the children homes. They are the responsible authority to provide the running cost for Kurasini National children home and resettlement packages to the older children during reunification process. That being the case therefore, social welfare officers are among the rich data source. Their views, feelings and opinions were very important when assessing childcare workers' strength in providing care and support to vulnerable children. The researcher was able to

interview 10 social welfare officers who were available during the study basing on their roles in the department and in the family and child welfare section and their readiness and willingness to participate in the study.

Table 3.1: Percentage Distributions of Type of Respondents Interviewed

Respondents	Number of respondents	Percentage (%)
Vulnerable Children	30	60
Human right staff members,	5	10
Childcare Workers at KNCH	10	20
Social Welfare officers from DSW	5	10
Total	**50**	**100**

Source: Research, 2018

3.8   Data Collection Methods

Data collection is a process of collecting information from all the relevant sources to find answers to the research problem, test the hypothesis and evaluate the outcomes (Maughan, 2013).

In qualitative studies, researchers collect multiple forms of data and spend a considerable time in the natural setting gathering information. Collection procedures involve setting boundaries for the study and collecting information through four basic types of data collection methods such as qualitative observations, interviewing, documentations and audiovisual materials as well as establishing the protocol for recording information (Creswell, 2013). This study used different methods, and this was done intentionally because no single method was adequate in itself in collecting valid and reliable data on a particular problem. Both secondary and primary data collection methods were used.

Similarly, Cohen et al., (2007), observed that, exclusive reliance on one research method might bias or distort the researcher's findings of a particular reality. Therefore, data was collected using semi structured questionnaire with structured and unstructured questions and in-depth interview, observations, focus group discussions and documentary reviews.

3.8.1 Primary Data Collection Methods

3.8.1.1 Observations

The observation method is the method which provides the study with the opportunity to accumulate rich data and develop an in-depth understanding of the subject under investigation (Kothari, 2004). Observation implies the use of the eyes rather than of the ears and the voice at the area of the study. Observation method is that which is based on things seen. It is a method of data collection in which a researcher observes phenomenon within a specific research field (Bryant (2015), watching or viewing the behavior and systematically recording the results of what has been observed (St John's University of Tanzania's website, 2017).

During this study, the non-participant observation method or direct observation was applied in data collection because the method enables or allows the researcher to be involved in observing the research participants without actively participating in their daily interactions or activities being observed (Maitlis and Liu, 2010). The researcher as a non-participant observer used part of the study times being physically present with the research participants at the children home but at other times the researcher was not present in the research setting, unlike experimental observation (Williams, 2014). In this study, the observation method involved the childcare workers and

vulnerable children because they were the research participants whose behaviour and interactions were under investigation. The researcher planned things to be observed during data collection and therefore designed an observation checklist to guide the process (the observation checklist is attached to the appendices).

The researcher was able to study behaviour and interactions that occurred naturally among childcare workers and between them and the vulnerable children in their real life context and interpret the meaning of those behaviour and interactions. During data collection in this study, the researcher was able to observe the interactions among the childcare workers and between childcare workers and children in order to assess the workers' strength in providing childcare and support to the children and quality of attachment relationship. The researcher observed the mood and movements of childcare workers at the children home when dealing with children issues in order to compare the attachment relationship between workers and children against that of the normal or ideal families.

The researcher observed the behavioural conduct of the childcare workers and children. The researcher observed the childcare workers administration of punishment to children. The researcher was able to observe a childcare worker who was using a stick in administering a corporal punishment to children while kneeling on their knees in public. The relationship between children and care workers seemed not like a parent-child relationship but rather a teacher-pupil relationship. The childcare workers were seen not in positive relationship with children. The younger children and children with disabilities were seen trying to manipulate a hug from their caretakers who were busy with other issues.

The researcher was able to observe different types of services offered and learning activities available at the children home in order to assess the quality of such services and learning activities. Some children appeared to be unsatisfied with the way they were treated by the childcare workers in comparison with the way the workers treat their own children. The researcher observed one child expressing his sad feelings against childcare workers who allowed their own children to use or play with their phones but restrict the children living at the children home to use phones even for study purposes. His expression indicated unhealthy attachment relationship. These also implied that the children were not empowered to use the childcare workers as source of comfort or a secure base from which they could explore their world (Schofield and Beek, 2014).

3.8.1.2 Interviewing

According to Easwaramoorthy and Fataneh (2006), an interview is a systematic conversation for gathering information. A research interview involves an interviewer, who coordinates the interview process and asks questions, and the respondent, who give answers to those questions. An interview can be conducted face-to-face individually or in a group or over the telephone. However, according to Kothari, (2004), interview is a form of data collection method which involves presentation of oral-verbal stimuli and reply in terms of oral- verbal responses.

On the other hand, Alsaawi (2014) described the research interview as a goal oriented conversation between two or more people, through which the interviewer establishes rapport, ask specific, brief and non-ambiguous questions, and the interviewee listens attentively and responds willingly. The research interview gives a flexible and

modifiable statement of inquiry. In addition, nonverbal cues or body language can be used as source of more information leading to a higher level of understanding to the responses.

The main categories of interviews are structured interview, semi-structured interview and unstructured interviews. Structured interview Data collection technique in which an interviewer physically meets the respondent, reads them the same set of questions that are prepared in a particular order beforehand are put in the same order to each interviewee and their responses recorded (Alsaawi, 2014). According to Carter McNamara (1999) in structured interview all respondents will be asked the same questions and asked to choose answers from among the same set of alternatives.

Semi-structured interview is a format of interview in which the researcher wishes to acquire unique, non-standardized and personalized information about how individual views the world (Bernard, 2005). The researcher had a set of themes identified from the data and some key questions to be covered. The interviewer commences with a set of interview themes, but the order of the questions may vary depending on the context of the research setting.

Unstructured interviews are informal. These are used to explore in depth a general area in which the researcher is interested. They are therefore referred to as in-depth interviews. The researcher does not have list of questions prepared beforehand for the research participants nonetheless it calls for clarity in the issues to be explored. The interviewee talks freely on issues related to the area of the topic.

However, in this study, the researcher employed the in-depth interview method with open-ended questions for Childcare Workers, Human rights Staffs, Social Welfare officers as well as for vulnerable children participants. The researcher conducted face to face and telephone interviews with participants. This method was used by the researcher because it provided the required information, attitudes and emotions of the vulnerable children in child care institutions. It was also useful in obtaining information that cannot be obtained by other methods. It also facilitated respondents' perception on competence of Childcare Workers' in providing child care services among vulnerable children. The interviews provided important background information on the vulnerable children and provided them with a space to express their views freely about their living in the Children home.

Accordingly, in this study the researcher completed a survey questionnaire with 30 vulnerable children, distributed self-administered research questionnaire with 10 Childcare Workers, 5 Human rights Staffs, and 5 Social Welfare officers thus bringing a total number of 50 respondents. All three objectives were addressed through this type of data collection method.

3.8.1.3 Semi Structured Survey Questionnaire

Questionnaire is a general term that includes all data collection techniques wherein each person is asked to respond to the same set of questions in an order determined beforehand (Akinc and Saunders, *2015*). Bird (2009), defines written questionnaire as a data collection tool in which written questions are presented that are to be answered by respondents in written form. It is generally a series of written questions for which the respondents have to provide the answers (Gay, 2001). Mathers et al., (2009), argue

that, questionnaire is used when factual information or opinion is needed rather than facts are desired. In this study, interviewer's completed questionnaires were used to collect primary data from 30 vulnerable children respondents; Interviewer completed questionnaire are questionnaire that are recorded by the interviewer on the basis of each respondent's answer hence this researcher recorded the responses from 30 children.

During the data collection self-administered questionnaire with both closed and open ended questions that covered all three objectives were used to gather data from 10 Childcare Workers, 5 Human rights Staffs, and 5 Social Welfare officers. In other words, semi-structured questionnaire was used to enable a large proportion of the desired information to be collected within a short time and with limited resources. The questionnaire facilitated in obtaining the required data related to the subject, the competence necessary for Childcare Workers and types and quality of child care and support services provided to vulnerable children and challenges identified by Childcare workers at Kurasini National Children home.

3.8.1.4 Focus Group Discussion

According to Krueger and Casey (2000), a focus group discussion (FGD) is a research method of data collection that brings together participants from similar background or experience to discuss a specific topic of interest. According to Billson (1989), focus groups are discussions in which the moderator supplies the topics and monitors the discussion. The purpose is to gather information about a specific or focused topic in a group environment, allowing for discussion and interaction by the participants. Focus groups can be used as the sole source of data or as a complement to another research

method such as a survey. A focus group discussion provides an insight on how the group thinks about the issue under study, about the range of opinion and ideas and the inconsistencies and variation that exists in a particular community in terms of beliefs and their experiences and practices (Morgan, 1988).

In this study, the researcher engaged into focus group interviews with two focus groups, with key informants; one composed of eight (8) children above 16 years and the other with eight (8) staff, in order to integrate perspectives from both the children and the staff members participating in the study with regard to the Childcare Workers' competencies, types and quality of services received by children and challenges experienced by Childcare Workers in children homes. This facilitated to get feedback from participants and gather additional input and verified generated data. Each focus group was guided by a moderator (or group facilitator) and the assistant moderator (recorder) who introduced the research topic for discussion and helped the participants to participate in a lively and natural discussion among them. Focus group members were randomly selected from preexisting groups of vulnerable children at Kurasini National Children home, Childcare workers at Kurasini National Children home, and Social welfare staff at the DSW and the discussion was carefully prepared, identifying the main objectives for the meeting, developing key questions, developing session plan and plan how the session was recorded.

The FGD method was used in order to integrate perspectives from both groups regarding the Childcare Workers' competencies in providing child care services to vulnerable children, types and quality of child care services provided to vulnerable children and challenges encountered by Childcare Workers at Kurasini National

Children home. This FGD qualitative research approach was used to gain in-depth understanding of participants' collective views on childcare workers strength in providing child care services to vulnerable children and the underlying factors leading to inadequate competencies to vulnerable children and the meanings behind those views.

The focus groups were used as the unit of analysis whereby the researcher, with the assistant moderator collected the group data, coded the data, presented, analyzed and interpreted emergent themes (Morgan, 1997). When discussing emergent themes the researcher provided quotations made by focus group participants and gave information about number of group members who appeared to be part of the consensus from which the theme emerged (Onwuegbuzie et al., 2009). The researcher also specified the number of group members who appeared to represent dissenting views as well as the participants who did not appear to express any view.

3.8.2   Secondary Data Method

Secondary data are information gathered from other previous studies, e.g. published material and information from internal sources such as raw data and unpublished summaries (Mbogo et al., 2012). The secondary data are those which have already been collected by someone else and which have already been passed through the statistical process (Kothari, 2008).

Based on this research study the researcher used secondary data in order to have the published information concerning how children were taken care and supported, to get the number of childcare workers and children during the study, to get number of

children admitted in the year, number of children reunified with their families in the year, educational training and number of children in school and the gender and age of children at the Kurasini National children home. Also secondary data enabled the researcher to get the right information concerning the operation and management of the Kurasini National children home and types of services provide to children. This has been discussed below in more details under documentary review.

3.8.2.1 Documentary Review

Documentary review entails gathering information from recorded documents (Best and Khan, 2013). It refers to the review of published and unpublished literature especially those considered more relevant and pertinent to the research problem understudy. Review of documents is a process of reading literature with or associated with issues related to what the researcher is studying (Borg and Gall, 2015).

Borg and Gall (1989) argued that often the insights gained through the review of literature saved as much time in conducting the research as the review required. The documentary review for this study came from various sources such as books, admission forms, reports, minutes, Kurasini National Children Home administrative documents, children register books, individual children files, Web-Pages, newspapers, articles, Tanzania government publications and official statistics which provided information regarding children policies and Vulnerable children affairs.

In this study the researcher used the documentary review which included the review of children register books, periodical reports, individual children files in order to check the procedures and the trend of admission and discharge or resettlement and

reintegration of vulnerable children into the mainstream society as well as the children relapsing to children home. The researcher reviewed the children home administrative documents such as policy guidelines, staff job descriptions and the proposed new children home strategic plan in order to check the availability, reliability and the adherence to guidelines and staff functional roles as well as to establishing a way forward for Kurasini National Children home. The literature reviewed during this study have been presented and discussed in length in chapter two of this study.

3.9   Data Processing and Analysis

According to Kombo and Tromp (2015) Data analysis refers to examining what has been collected in survey or experiment and making deductions and inferences. This implies computation of certain measures along with searching for patterns of relationship that exists among data groups (Chamwali, 2007). Data analysis usually involves reducing accumulated data to manageable size, developing summaries, looking for patterns and applying statistical techniques (Cooper and Schindler, 2006).

There are various methods of data analysis that can be used by researchers when they are conducting the research. However, the nature of study and type of data collected are the major aspects to consider during the time of data analysis (Kothari, 2004). In this study the researcher used qualitative research technique in data analysis beginning by identifying themes in the data and relationships between the themes. Analysis of themes is a method for identifying, analyzing and reporting themes within data (Virginia Braun and Victoria Clarke, 2006). The analysis of data proceeded hand in hand with data collection and the write-up of findings (Creswell, 2013). The researcher focused in on some of data and disregarding other parts of it.

Not all documentary information could be used in the study. The researcher aggregated data into small number of themes (Creswell, 2013).

The above method enables both descriptive and in-depth analysis of data due to its flexibility. The researcher began by identifying themes in the data and relationships between the themes. The researcher analyzed data in the form of logical statements and arguments. Qualitative research technique helped the researcher to analyze the findings of the study concerned.

The researcher analyzed data by using qualitative computer data analysis software called Statistical Package for Social Science (SPSS V.20). This software was used because it is the common available and frequently used software by students to process academic data. Information was arranged in themes, coded and processed in terms of frequencies, percentages, tables, charts and histograms. As such, allowed the data to speak for itself in the sense that themes were identified inductively from the data and therefore allowed to emerge naturally from the same data. Thematic groupings were developed based on the initial codes after which the themes were refined and defined so as to come up with the final themes that were used. Major themes developed were the Childcare Workers' competences in providing childcare services to vulnerable children, the respondents' views on Childcare workers' competences, vulnerable children's views whether Childcare workers were helpful, children preparedness to live independently. Other themes were the knowledge of Childcare workers on children vulnerability, child care, child protection and needs of children, the types and quality of child care services provided to vulnerable children by Childcare workers and the challenges facing Childcare workers in providing child

care services to vulnerable children. The table below indicates the arrangements of themes and sub-themes that were developed from the initial codes and used in the analysis of data:

Table 3.2: The Arrangements of Derived Themes and Sub-themes used in the
Analysis of Data

S/n	Main themes		Sub-themes
1	Childcare Workers' competences	1	Competences • Orientation on child related disciplines • Proper orientation into their duties and responsibilities in their respective work • Social work and Early childhood development • Leadership and management skills and interpersonal skills • Training in child protection, needs of children, new laws, guidelines and regulations • Training on behavior change, children character and emotional intelligence • Positive behavior • Understanding on how children grow physically, emotionally, and socially • Skills to handle children basing on their emotional age and needs • Adequate resources for child care • Availability of child care plans and strategies
		2	Children views on childcare workers' Skillfulness • Not responsive to children needs • Discriminative to children • No trusting relationship Helpfulness • No positive relationship • Do not love children • Do not play with children • Do not role model children • Falsely accuse children • Corporal punishment to children • Do not provide opportunity to children to be listened to • Discriminative to children • Not helpful Views on children preparedness

			• Become confident to separate from children home and • Become self-reliant to start independent living
		3	Type of the knowledge • Understanding of the causes of vulnerability and vulnerable children • Understanding of the concepts of child care, child protection and the needs of children
2	The types and quality of child care services	1	Types of child care services • Counseling and guidance and child psychosocial care and support • Family reunification, foster care and adoption of children • Primary education and vocational training • Food, clothes, shelter and medication
		2	Children views on quality of child care services: Children satisfaction of services • Food not good • Food not enough • Medical treatment not fair • Education is better off than street children • Clothes (donation) misappropriated Problems experienced by children • Poor studying conditions • No money to pay electricity • False accusations • Forced to falsely accuse a colleague • Forceful removal to old people's home • Lack of transport to and from school
3	Challenges facing Childcare workers		Challenges • Activities not well financed • Role confusion between social welfare officers at council and childcare workers at the children home upon reunification of children • Lack of costed children future plans and exit strategies • Inconsistent application of standards and guidelines • Inadequate skills and knowledge among childcare workers • Stressful work and lack of motivation • Low pay • Delayed promotions • Few staff compared to demand • Inadequate specialized skills in working with the abused or neglected children

Source: Researcher 2019

3.10   Trustworthiness in Qualitative Research

The methods used by quantitative and qualitative researchers to establish trustworthiness of data differ in many ways. Trustworthiness in quantitative research includes establishing internal validity, external validity, reliability and objectivity. Trustworthiness in qualitative research is about establishing that the study findings are credible, transferable, confirmable, and dependable (Krefting, 1990 & 1991). This being the case therefore, instead of focusing on reliability and validity, qualitative researchers focus on credibility, transferability, dependability and confirmability as further described below in more details:

(a)   Credibility

Credibility is the how confident the qualitative researcher is in the truth of the research study's findings. The method is used by qualitative researchers to establish trustworthiness by examining the data, data analysis and conclusions to see whether or not the study is correct and accurate. For qualitative researchers, credibility is a method that includes researchers taking on various activities that increase probability so that there will be trustworthy research findings (Lincoln & Guba, 1995). Credibility contributes to a belief in the trustworthiness of data through the following attributes: a) prolonged engagement, b) persistent observation, c) triangulation, d) referential adequacy e) peer debriefing and f) member checks (Krefting, 1990 & 1991).

In this study the researcher used more than one method of data collection. Such methods included focus groups and in-depth interviewing, observations and documentary reviews; and used research assistant during data collection involving different categories of participants or sample populations by asking the same research

questions with all research respondents and colleague to look over the study to ensure that the research study findings are credible and determine whether the results seem to align to the data (Knalf & Brietmayer, 1989).

(b)   Transferability

Another method used by qualitative researchers to establish trustworthiness is transferability. In qualitative studies, transferability means the method against which applicability of qualitative research study findings to other research contexts; including similar situations, populations, phenomenon and settings is assessed (Guba, 1981 & 1985). This method is used by qualitative researchers to provide a detailed description of the study problem, study site, study participants and procedures used in data collection to enable other researchers to assess whether or not the study findings can be a good match or representative of others and makes a sense to generalize about the subject of the research (Sandelowski, 1986).

In this study, the researcher used a case study design and selected Kurasini National children home in Temeke District to represent all other children homes in the country. The researcher has given a detailed description of the study problem, study site and of categories of study participants and the significance of their participation in the study.

The findings from this study are expected to represent childcare workers and vulnerable children living and cared in institutions and to give the general position of childcare workers' strength in providing child care services to vulnerable children and the condition of child care services to vulnerable children in the country.

(c)   Confirmability

Confirmability in Qualitative Research means the degree to which the research outcomes could be confirmed or corroborated by other researchers (Baxter, & Eyles, (1997). It is the degree of neutrality in the research study findings, where the findings are based on and accurately portrays participants' responses and not any potential bias or personal motives of the researcher (Sandelowski, 1986). Confirmability involves making sure that the researcher bias does not skew the interpretation of what the research participants said to fit a certain subject matter (Lincoln & Guba, 1985). Qualitative researchers can provide an audit trail, highlighting every step of data analysis that was made in order to provide a rationale for the decisions made so as to establish confirmability of research results. In this study, the researcher derived the data from the participants' responses and presented the same in the analysis but not otherwise.

To establish confirmability in this study, the researcher preserved the research materials and stored the manually collected information from respondents and other participants as an assurance that the researcher has accurately translated the participants' viewpoints into data.

(d)   Dependability

Dependability is the stability of study findings over time (Bitsch, 2005). It involves participants in evaluating the findings, interpretation and recommendations of the study to make sure they are supported by the data collected from the study participants (Cohen *et al.,* 2011). It is a method used by qualitative researchers to show consistency of study findings. It is the extent to which the research findings would be

consistent if the study is repeated by other researchers with the same subject or in a similar context (Krefting, 1990 & 1991). In other words, if a person wants to replicate the study with the same subject or in the same context should have enough information to conduct the study and obtain the similar findings as in the previous study. Qualitative researchers use audit trail to establish dependability, which requires another researcher to review and examine the research process and data analysis to ensure the study findings are consistent and could be replicated (Ary *et al.,* 2010).

According to Guba (1981) another viewpoint of dependability implies traceable variability in the study findings. The variability that can be ascribed to identified sources such as the increasing insight on the part of the researcher, informant fatigue or changes in the informant's life situation. Another source of variability in the study findings stems from the fact that qualitative research looks at the range of experience rather than the average experience, so that a typical or non-normative situations are important to include in the findings (Krefting, 1991).

In the light of the above the researcher went through a number of literatures to make sure that they are consistent with study objective and methodology. The researcher obtained all necessary research permits prior to the study, including the informed consent from the participants and transparently explained the purpose of the research study to the research participants at the beginning of the study. This helped to achieve the trustworthiness and credibility for the research instruments. The instruments such as interviews provided trustworthy data because they drew data from the study participants who were directly interviewed expressing their ideas. These techniques improved the stability of data and hence its trustworthiness.

The above steps helped to ensure that the multiple sources of data collection such as documentary analysis, interviews and observations were conducted under conditions and in an environment acceptable to the participants and therefore ensured that the research process and findings were trustworthy. The researcher ensured the stability of the research findings in the sense that the findings will be made available in hard and soft copies and shared with the research participants and other researchers for learning and reference purposes.

3.11 Ethical Considerations

The ethical considerations that need to be expected during the research are extensive and they are reflected throughout the research process (J Creswell, 2013). Attention needs to be directed towards them prior to conducting the study; when beginning a study; during data collection and data analysis, and in reporting, sharing and storing the data (Creswell, 2013). According to Iacovino (2002 & 2014) and J Creswell (2013) the researchers are bound to ethical considerations in their studies as follows:

3.11.1 Professional Codes of Ethics and Clearance from the University

According to Creswell (2013), ethical considerations prior to conducting the study include issues relating to social work professional standards, seek university approval by submitting a research proposal to the university for review and gaining permission or introduction letter from the university to the research site. In this study, the researcher addressed important ethical issues such as identifying a research problem that will benefit the study population and preparing the research proposal that was submitted to the Open University of Tanzania research supervisor for review and approval whereby the university clearance was granted.

3.11.2 Participants' Informed Consent

Prior to conducting the study, the researchers need to obtain approval from the authorities at the research site to gain access to the site and to research participants. The researcher needs to have participants sign informed consent forms agreeing to provide information during data collection (Creswell, 2013). In this study the researcher ensured that all the necessary permissions from the children home and the participants' informed consent, including the parental consent from those who act in loco parentis were obtained prior to the study.

3.11.3 Disclose the Purpose of the Study to Participants

The researcher needs to explain purpose of the study to research participants at the beginning of the study. This will achieve the trustworthiness and credibility for the research instruments (Creswell, 2013). At the beginning of this study, the researcher contacted the participants and informed them of the general purpose of the study and obtained their informed consent, including the appropriate consent from childcare workers and participating children.

3.11.4 Confidentiality and Privacy of Participants

The researcher should protect the anonymity and identities of participants, their roles and names during the coding and recording process upon data analysis (J Creswell, 2013). In this study the researcher did not use the names, roles and identities of the participants other than the participant or the group as a unit of reference.

3.12   Scope and Delimitation

Simon & Goes (2013) defined the scope of the study as the parameters under which the study will be operating. The scope of the study identifies the research topic the

researcher intends to cover. The authors (2013), defined the delimitation of a study as the characteristics that limit the scope of the study and set the boundaries of the study on deliberately made decisions to exclusion and inclusion during the development of the research proposal (Simon & Goes (2013). Some of the delimitation of this study was the choices of the research problem, research objectives and questions, research approach (qualitative) and the choice of research participants.

This study was limited to Kurasini National Children Home located in Temeke District on issues related to childcare workers' strength in providing child care services to Vulnerable Children in Tanzania. The study narrowed down to include vulnerable children of and above 16 years of age, Childcare Workers at Kurasini National Children Home, Human right staff, and Social Welfare officers. The researcher was interested in the contents or the competences of the courses attended by childcare workers, rather than the level of education attained by the childcare workers.

3.13   Limitation

According to Simon & Goes (2013), study limitations are matters and occurrences that arise in the study, which are out of the researcher's control. They limit the extent to which a study could go and sometimes negatively affect the end results and conclusions that could be drawn. They could also be the weaknesses related to decisions made in the study, which are not within the control of the researcher.

The study was limited by passive respondents who were not be able to respond quickly over the questions posed in their mind that the study needed conclusive

evidence. This study ideally required expansive and extensive justifiable experience based evidence, therefore being limited by passive respondents, posed a challenge to the researcher. To help with the respondents' attitudes, the respondents were assured of anonymity and confidentiality, which in turn encouraged frankness during the interview.

The research study was further be limited in terms of respondents who were corporately identified and limited to the cadres of child care officers also institutions needed at times the mandate and as well have tailored responses. These study limitations were minimized through obtaining clearance from the university, permission from the permanent secretary, informed consent from both the manager of the research site and participants, as well as clearly explaining the objectives of the study and that data from the study will only be used for research purposes and would be strictly anonymous and dealt with confidentiality.

Qualitative research is interpretative, probes attitudes and feelings of participants, includes in-depth interview, focus group discussion and observational research as a systematic data collection method in which the researchers uses all their senses to examine the participants in their natural settings. It was sometimes challenging to the researcher to read participants' minds and imagine why they are doing certain things. To help with this limitation, the researcher used the research assistant in data collection and tested for the differences in the records taken by both during data collection.

The researcher is attending this training course while on the employment. The work and study times conflicted, thus becoming a challenge to the researcher. The limitation

from this conflicting schedule was addressed through time management. The researcher used alternative days such as annual leaves, week-end days, night study times and study leave days or permits to ensure that the research report is effectively and accurately completed and submitted for review.

CHAPTER FOUR

PRESENTATION, ANALYSIS AND INTERPRETATION OF FINDINGS

4.1   Introduction

This chapter deals with data presentation, analysis and interpretation of findings from this study. The main objective of this study was to assess Childcare Workers' strength in providing childcare and support to vulnerable children in the Tanzanian context. This chapter organizes the main findings and the qualitative analysis of the data by a thematic analysis. The data analysis and the discussion of the findings focused on providing answers to the specific research questions so as to achieve the specific objectives of the study, which would in turn assist in accomplishing the main objective of the study.

The purpose of analyzing data is to obtain usable and useful information that could describe and summarize the data, identify the relationships between variables, compare variables, identify the differences between the variables and forecast the outcomes, while interpretation makes the data meaningful in relation to the research problem studied and be able to draw conclusions (Susan, 1994; Jane & Zubin A., 2015). The research questions of the study, which the analysis attempted to answer, were as follows:

(i)   What are the competences necessary for childcare Workers in providing childcare and support to vulnerable children?

(ii)   How is quality of childcare and support provided by Childcare Workers to vulnerable children at Kurasini National Children Home?

(iii)   What are the challenges experienced by Childcare Workers in providing child

care and support to children at Kurasini National Children Home?

This study covered a total of 50 respondents whereby 30 were vulnerable children and

the remaining 20 were comprised of 10 Childcare Workers, 5 Human rights Staff, and

5 Social Welfare officers. The researcher administered interviewer-completed

questionnaire to the 30 vulnerable children and also interviewed them. Likewise, the

researcher interviewed in-depth and also administered questionnaires to the category

of respondents comprising of Childcare Workers, Human rights Staffs and Social

Welfare officers. The study was able to cover the 100% of all respondents.

In order to present the answers to the above research questions, this chapter is

arranged in systematic subsections, the first subsection represented the demographic

characteristics of respondents. The second subsection analyzed the first research

question on the competencies necessary for childcare Workers in providing child care

and support to vulnerable children, the third subsection is comprised of the second

research question on the types and quality of child care services provided by Childcare

Workers at Kurasini National Children Home and lastly the forth subsection analyzed

the third research question on the challenges facing Childcare Workers in providing

child care and support to vulnerable children at Kurasini National Children Home.

4.2   Demographic Characteristics of Respondents

Demographic characteristics are those features, which identify one respondent or

group of respondents from another. According to Akinci and Saunders, MNK (2015),

respondent's characteristics or attributes are best thought of as things a respondent

possesses rather than things a respondent does. In this study the demographic characteristics of the respondents were categorized in terms of variables such as occupation, age, gender and level of education reached. These variables were expected to show whether there was gender equity in providing childcare and support to vulnerable children. It was considered important to determine the most affected gender of children and the general age coverage of vulnerable children at Kurasini National children home to ascertain at what age children were involved in different interventions including education and level of their educational achievements. The distribution of the respondents in terms of occupational cadre, age, gender and levels of education is presented below as follows

4.2.1 General Categories of Respondents

The researcher constructed a question on gender of respondents in order to know their gender profile. The research classified the respondents into two groups. The first group was based on the respondent's occupation. This category of respondents comprised of 5 Human rights Staffs, 10 Child Care Workers and 5 Social Welfare officers. The second category was comprised of 30 vulnerable children living at the Kurasini National Children Home. This gave a total of 50 respondents and they are as shown in the Table 4.1 and Figure 4.1:

Table 4.1: General Respondents by Gender

Category of Respondents	Male		Female		Total Respondents
	No.	%	No.	%	
Children	21	70	9	30	30
Childcare Workers	1	10	9	90	10
Human right staff	2	40	3	60	5
Social welfare Officers	1	20	4	80	5
Total	**25**	**50**	**25**	**50**	**50**

Source: Research Data, (2018)
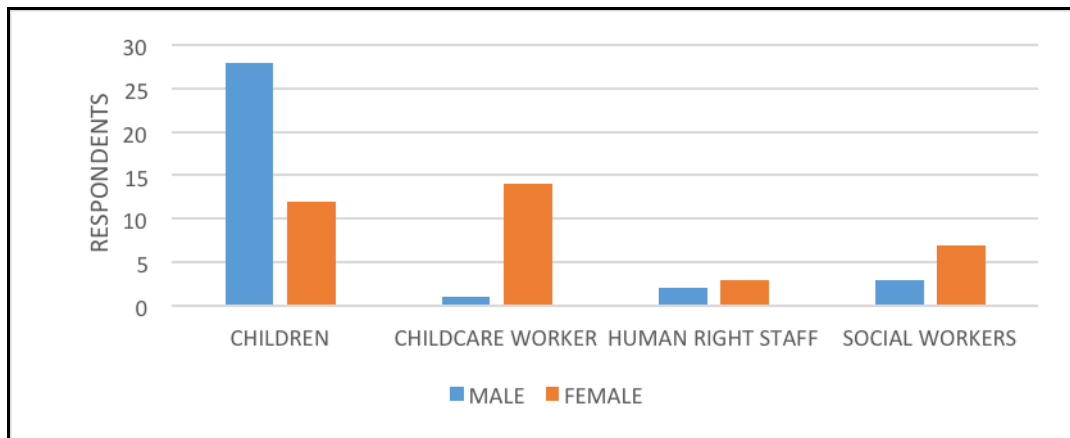
Figure 4.1: General Categories of Respondents

Source: Research Data, (2018)

4.2.2 Staff Respondents by Gender

The researcher formulated a question on gender of participating staff in order to understand their gender characteristic. The researcher found it necessary to assess the gender characteristic of respondents in order to understand whether gender disparities could have relationship with the strength of childcare workers in providing childcare and support to vulnerable children. The researcher considered important to understand the involvement of men in childcare and how gender perspectives impact on men's and women's child caring roles (UNICEF, 2011).

The researcher further developed an inquiry on whether the less involvement of men in child care has impact on the strength of child care workers in the delivery of the desired child care and support to vulnerable children at Kurasini national children home. Garfield and Isacco (2012) discussed that the involvement of fathers in childcare has important consequences for child well-being, especially with regard to issues of nutrition, exercise, play and parenting behaviors, for example, reading and discipline. Yogman (1982) expressed that during infancy, fathers have shown to be

competent and capable of similar successful interactions with young infants and to have similar psychological experiences as mothers. To achieve this, the researcher got on assessing the gender characteristic of Childcare Workers, Human Rights Staff and Social Welfare officers involved in the study.

The study involved 10 childcare workers who were 1 male (10%) and 9 female (90%), 5 human right staff who were 2 male (40%) and 3 female (60%) and social welfare officers who were 1 male (20%) and 4 female (80%) from staff category. The results were as shown in the Table 4.2 and Figure 4.2.

Table 4.2: Staff Respondents by Gender

Category of Respondents	Male		Female		Total Respondents
	No.	%	No.	%	
Childcare Workers	1	10	9	90	10
Human right staff	2	40	3	60	5
Social welfare Officers	1	20	4	80	5
Total	**4**	**20**	**16**	**80**	**20**

Source: Research Data, (2018)
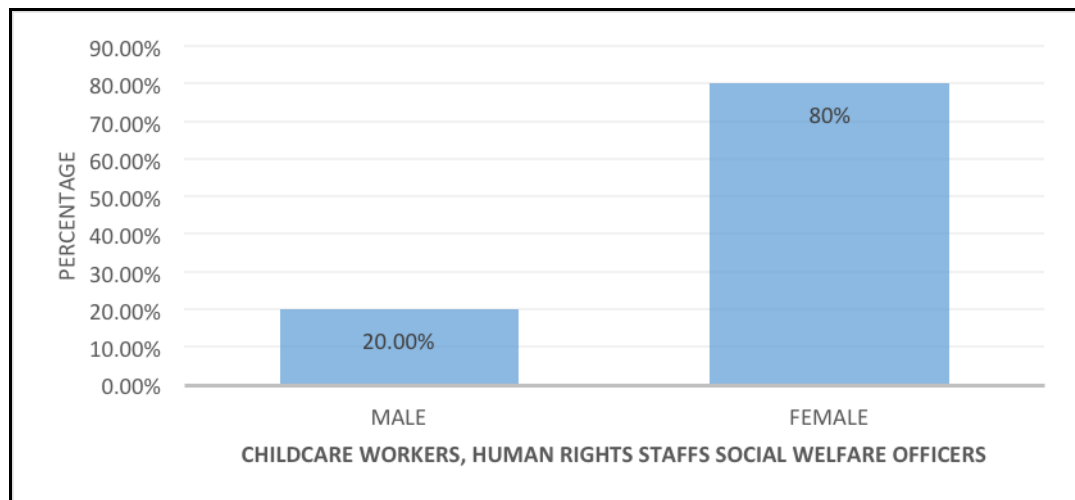
Figure 4.2: Gender of Staff Respondents
Source: Research Data, (2018)

The above results indicate that the staff category has a majority of females by 80% of respondents and a small minority of male by 20% meaning that there are more women involved in the care of children. According to the above referred scholars (Garfield and Isacco, 2012 &Yogman , 1982) men and women are equally important in the caring of children but this study has revealed that men are a small minority in providing childcare. The lack of gender equity as indicated in the findings of this study means a negative impact on the strength of childcare workers in the delivery of the ideal childcare and support to vulnerable children.

4.2.3 Vulnerable Children Respondents by Gender

The researcher developed a question on gender of children in order to understand the gender profile for children participating in the study. The researcher considered it important to examine the gender of vulnerable children in order to determine the most affected gender of children. This study involved 30 vulnerable children who were 21 female (70%) and 9 male (30%), from children category basing on their availability at the children home during the study, readiness and willingness to participate in the study. The results were as shown below in the Table 4.3 and Figure 4.3.

Table 4.3: Vulnerable Children Respondents by Gender

Children's	Frequency	Percent	Cumulative Percent
Male	21	70	70
Female	9	30	100.0
Total	30	100.0	

Source: Research Data, (2018)
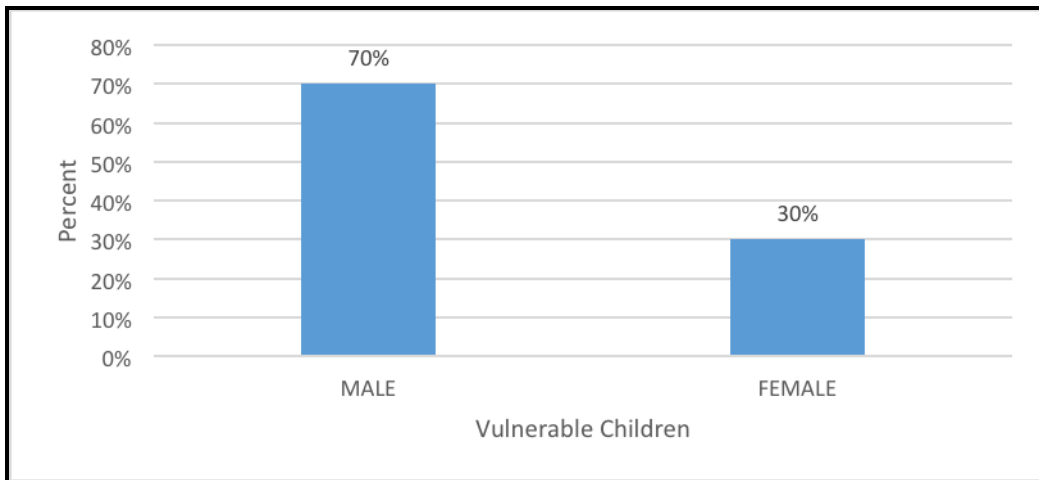
Figure 4.3: Vulnerable Children Respondents by Gender

Source: Research Data, (2018)

The above results indicated that this category of respondents has a majority of males by 70% of respondents and a small minority of females by 30% meaning that most vulnerable children in the children home are males and in this context a large number of male children are more exposed to vulnerability than female children. The findings of this study have shown that there are more male children in the children homes than female children. The findings disagree with the study by Arushi Terway et al., (2010) in the study of child vulnerability in Tanzania where the author presented that there were more female children exposed to vulnerability than male children.

4.2.4 Children Age Distribution

The question on age of children aimed to establish the age range of the vulnerable children involved in the study. This data was important to the researcher because it provides an opportunity in determining the children age maturity to make an opinion in assessing the strength of childcare workers and to assess their preparedness for

resettlement (Linda H et al., 2011). Age can be a determinant of the period of time that the child has spent at the children home. The age is also a factor that can be used to decide the inclusion of children into age appropriate interventions (Munodawafa, 2017, Linda H. et al., 2011).

In this study the age of vulnerable children was important in the evaluation of success of the age appropriate interventions applied to children during the delivery of childcare and support to vulnerable children at Kurasini National Children Home. Age as well influences numerous demographic events such as enrollment of children to school or training and family reunification or resettlement and reintegration into mainstream society. The children involved in this study were grouped into two categories. The first category of the vulnerable children was of the ages between 16-18 years comprising 43.3% and the second category was between 19-25 years at 56.7%. Note that the second age group of 19-25 years was considered as children because they are still dependents on the assistance from the children home and/or live in the children home and receive the same treatment like other children of the lower age group. The findings were as summarized below in the Table 4.4 and Figure 4.4.

Table 4.4: Vulnerable Children by Age Grouping

Children Age category	Frequency	Percent
16-18Years	13	43.3
19-25Years	17	56.7
Total	30	100.0

Source: Research Data, (2018)
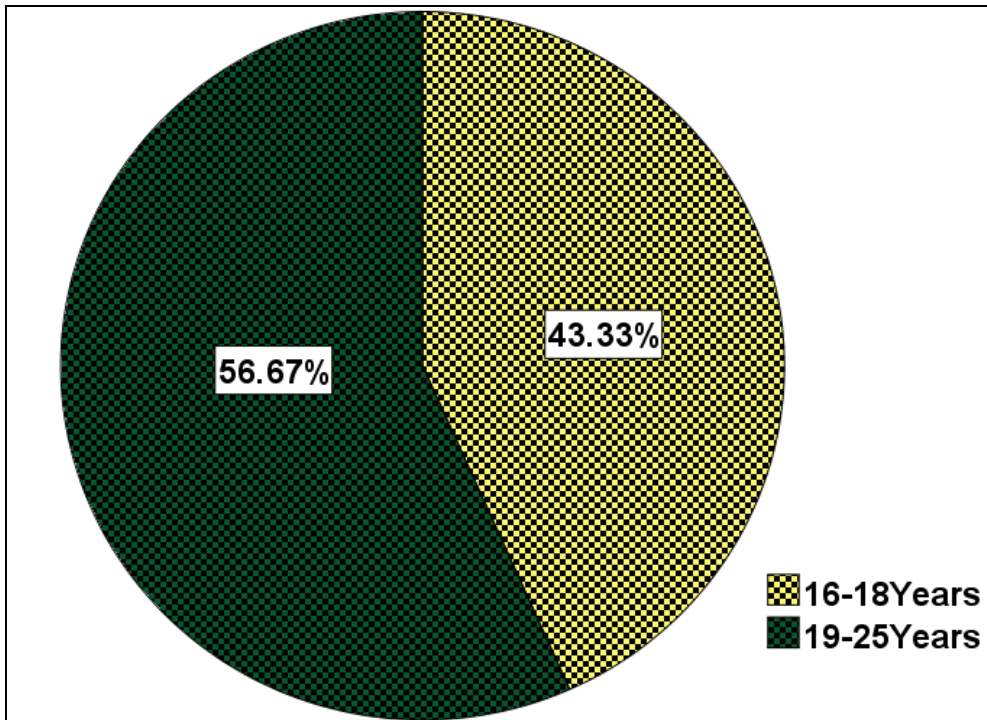
Figure 4.4: Vulnerable Children Percentage by Age Grouping

Source: Research, (2018)

The above findings indicated that the age group of 19-25 years was in the majority by 56.7%. This implies that many children of age group 19-25 years are still depending on the assistance from the children home and therefore raising uncertainty on the effectiveness of childcare workers strength in providing child care and support to vulnerable children.

4.2.5   Children Education Distribution

The question on children education level sought to establish the level of educational achievements for the vulnerable children involved in the study. The researcher assessed the education level of vulnerable children because this characteristic has relationship with children performance in the age appropriate interventions such as

enrollment to school or family reunification or foster care and adoption of children. The level of education or involvement of children in education is an indication of the value attached to education. The level of education can also be used to assess the children preparedness for reintegration into the mainstream society through self-employment or employment into the formal sector.

Among the 30 vulnerable children who participated in the research study; 4 children who are 13.3% were still in primary school, while the other 2 who are (6.6%) completed Primary education, 4 who are (13.3%) are in Secondary Schools, 8 vulnerable who were 26.7% completed secondary education, 3 children who are 10% were attending Vocational training at the nearby vocational training centers and the other remaining 9 who are (30%) completed vocational training. The results were as summarized below in the Table 4.5 and Figure 4.5.

Table 4.5: Education Levels of Vulnerable Children

S/N	Level of education	Frequency	Percentage
1	Still in Primary school	4	13.3%
2	Completed Primary School	2	6.7%
3	Secondary School	4	13.3%
4	Completed Secondary school	8	26.7%
5	Vocational training	3	10%
6	Completed Vocational Training	9	30%
	Total	**30**	**100%**

Source: Research, (2018)
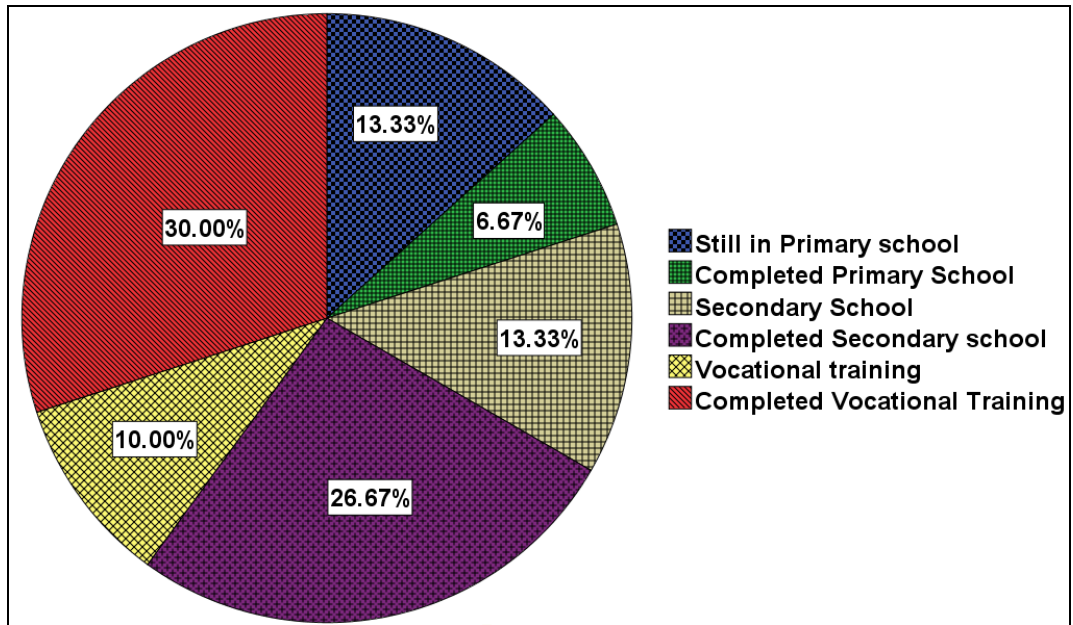
Figure 4.5: Education Levels of Vulnerable Children

Source: Research Data, (2018)

The above findings have indicated that children who have completed secondary education (26.7%) and vocational education and training (30%) were the majority in the category of 30 children who participated in the study. This is also an indication that though 26.7% of children have completed secondary education but they have not yet been provided with the opportunity for further training and the 30% who have completed vocational training have not been reintegrated into the society, either through in self-employment or formal employment.

Despite that children who have completed secondary education were waiting on the childcare workers to decide for their future. The researcher observed during the study that children who have completed vocational education and training seemed to lack assertiveness to start self-employment or to look for formal sector employment through which they could reintegrate into the mainstream society.

The findings of this study indicate that children who were graduating from Kurasini National children home preferred to always remain under the assistance of the home since they don't feel secured when they move away from the home for self-reliant and independent living which is the manifestation of the insecure and unhealthy attachment. The findings of the study agree with Karla Christine McGrath (2013) in her study on "building the stronger children: attachment theory in the context of child protection" where she stated that a child whose attachment to a caregiver is insecure may adapt by clinging to the caregiver in an effort to ensure proximity.

4.3   Competences Necessary for Childcare Workers in Providing Childcare and support to vulnerable Children

The aim of this study objective was to assess the competences necessary for childcare workers in providing child care services to Vulnerable Children in Tanzania and identify the possible solutions on how to improve the quality of care, support and protection for vulnerable children, including services to vulnerable children living in Kurasini National children home. According to Parasuraman, Zeithaml and Berry (1985& 1990), workers' competence is a key element of service quality and that service quality is a measure of how well the level of service delivered meets the requirements and expectations of the customer.

To address this objective, questionnaires, focus group discussions and interviews were used to collect data from Childcare Workers, Human rights Staff, and Social Welfare officers. The participants were interviewed about competences necessary for childcare workers, on types and quality of services provided by Childcare Workers to vulnerable children and challenges facing child care workers in providing childcare

and support to vulnerable children. The obtained results are described below in items 4.3.1 and 4.3.2.

4.3.1 Views of Participants on Competences Necessary for Childcare Workers' in Providing Childcare and Support to Vulnerable Children

The first specific objective of this study was to examine the competences necessary for childcare Workers to perform their job most effectively in providing childcare and support to vulnerable children with reference to Kurasini National Children Home in Temeke District. The researcher developed a question on competences necessary for childcare workers in providing childcare and support to vulnerable children shared with the participants. The researcher's interest was to know the level of understanding of the participants on competences necessary for childcare workers in providing child care and support to vulnerable children as it was thought to have relationship with the effective provision of the ideal child care and support to vulnerable children. The participants were asked to answer the questionnaire, interview questions and participate in focus group discussion basing on their own experience.

During the focus group discussion, the participants showed their worries regarding the Childcare Workers competences and highlighted factors that were impairing the competences of Childcare Workers. The group interview commenced with what qualification a Childcare worker must have in order to effectively perform their daily duties. The majority of participants made a consensus views that "basically the Childcare Workers have the right and required qualifications. However, lack of proper job orientation for new employees or newly posted staff on how to work with the vulnerable children is a factor that lowers the Childcare Workers' competence in

providing the desired childcare services to vulnerable children. Sharing in the focus group discussion, a participating Childcare worker expressed her views that;

> *"Basically, the Childcare Workers have the right and required qualifications. However, the only problem that needs to be addressed is the orientation upon the employment of new staff. The new Child Care Workers have been posted to work with children, but they have not been given the clear instructions on what exactly they are supposed to do with the children. They have not been given the opportunity to work under mentors"*.

The same participant Childcare worker continued to express her views that;

> *"This causes incompetence of SWOs and Childcare Workers because they cannot effectively play their roles since they were not properly oriented into their duties and responsibilities when they were newly employed at their respective areas of work both at councils and at the children home"*.

The above findings concur with the USAID report on Human capacity within child welfare systems; the social work workforce in Africa (2009) that social work workforce in Africa need to be oriented in the skills needed for family-centred child welfare practice since they have been trained in the curricula that do not directly match with what they are supposed to do with children in the practical field. .

The participants continued to express their views on competences necessary for childcare workers whereby one participating Social welfare officer commented that;

> *"Job orientation is important as there is a widespread employment of Childcare Workers who are not trained on child related disciplines. This is*

reinforced by the fact that even those who are trained, go through a training curriculum that puts minimal attention on childcare. Furthermore, there is no on-job training or refresher training to update the staff on the emerging child welfare issues and current social work practices".

The above study findings indicate that childcare workers need to be properly oriented on the necessary competences in working with children through on-job training and continuing education so as to be more familiar with the ways to work with vulnerable children.

This findings correspond with the USAID report on "Human capacity within child welfare systems; the social work workforce in Africa (2009)" that Social work education in Africa is lacking relevance to the African reality and that the graduate students tend to remain not completely familiar with the ways to work with the people.

The participants from human rights perspectives also expressed their views on the competences necessary for childcare workers whereby one participating human rights staff added that;

"Most of the childcare workers are trained in Social Work and Early childhood development and have some experience in working with vulnerable children. But despite those basic training on social welfare related disciplines the childcare workers receive inadequate orientation on the competences necessary for them such leadership, management and interpersonal skills upon their appointment into new assignments including

child care. The childcare workers therefore, need to be trained on such specific skills relevant for their work with children with special needs including the children protection issues, needs of children, new laws, guidelines and regulations in order to have the required competences in providing child care and support to vulnerable children".

The above study findings show that childcare workers need to attend on-job training in supervisory leadership and management, good communication and interpersonal skills to effective in the ways they work with vulnerable children.

The above findings are in line with the study by Nichols (2010) who discussed the importance of the childcare worker to know how to interact with children in ways that support the development of children, ability to think, learn and become independent as well as the workers to be clear of their roles and responsibilities in addressing the specific children needs.

Another participating human right staff when discussing on the question whether the Childcare Workers had the required competences continued to express the following views that;

"To deal with an abused child or who have been bereaved of parents is complex. For example, children have the feelings of mistreatment and feel that the world around is harsh. Childcare workers therefore, need special skills to help to change children behavior and increase their self-awareness and accept their conditions and status. Childcare workers would need to be trained in emotional intelligence so that can they build more awareness and

skills on emotions of the abused children or a child bereaved of a parent as an important aspect in building healthy attachment relationship with children and help them to manage and reduce stress".

The above findings indicates that childcare workers emotional intelligence is a big challenge in empowering childcare workers in providing child care and support to vulnerable children.

The findings of this study concurs with the study by Ashbourne *et al.,* (2012) that emotions are at the center of childcare workers to be more empathetic and able to build a genuine relationship with the children. Ashbourne *et al.,* (2012) emphasized that, emotional intelligence is a necessary aspect for the childcare workers to lead to greater work performance, satisfaction and problem-solving ability and a reduction in stress. The findings also substantiate the conceptual framework with regard to the skillful childcare workers in interpersonal realm to be able to connect and bond with children to establish trust (Nichols, 2010).

The researcher also used an in-depth interview method in the data collection process. Before involving the participants in in-depth interview, the researcher reminded them to freely give their views on the competences necessary for childcare workers and that they should feel free to give their views since there is no right or wrong answers during the discussion (Family Health International, 2004).

Indeed, the majority of the participants in the in-depth interview cited the growth of children into adulthood while still dependent on children home, and then transferred to old people's home as incompetence to Childcare Workers, and among other factors,

this was said to have happened because there were no guidelines on children future plans and exit strategies in place for each child, when they were first received at the children's home. And since most of them had no proper records about the whereabouts of their parents or relatives and have not received any skills for employment, the only alternative for them was to be transferred to old person's home.

During the in-depth interview, a participating childcare worker shared the views on competences necessary for childcare workers and one of them commented that;

> *"The experience has shown that many children at Kurasini children home would prefer to join the Army and become soldiers. This is not because of the love of the Nation but a manifestation of their inner feelings of struggle against their life environment which they have defined as harsh. Children might have the experience of either being abused by a relative or being bereaved of a parent. Due to such children behaviour the childcare workers need to have specialty training in addition to their normal professionally trained skills in order to effectively interact within the childcare environment and enable children to develop positive relationships".*

During the in-depth interview the social welfare officers continued expressed their views on competences necessary for childcare workers whereby one participating Social welfare officer in her own words commented that;

> *"Childcare workers should be able to demonstrate a positive behaviour in their contact with children in order to best teach children on effective interaction within themselves and with others. Those childcare workers should enable the children to share their feelings and trust their caregivers".*

The literature reviewed have concurred with the findings of the study that the childcare workers should model positive open communication, respect and appropriate physical contact to best teach the children on effective interaction with other people (Karageorge and Kendall, 2008).

During the in-depth interview, Social welfare officers continued to give their views on competences necessary for childcare workers and one of them was quoted saying that;

> *"The childcare workers should be able to develop a meaningful caring relationship. That childcare workers need to grow in skills such as the understanding on how children grow physically, intellectually, socially, emotionally and in character and the effects that these developmental changes can have on children behaviour"*

The findings of this study are in agreement with the literature reviewed that the childcare workers need to have special skills (Karageorge and Kendall, 2008). According to Karageorge and Kendall (2008), in their study on "the role of professional childcare provider", the positive relationship between the childcare provider and the children enhance the resilience of children to overcome their hurts and fear associated with maltreatment.

In the in-depth interview the human right staff participants shared their views on necessary competences for childcare workers in providing childcare and support to vulnerable children. One of the participants commented that:

"Childcare workers should have competence on how to handle children in a non-threatening way. The childcare workers should be aware of non-corporal punishment to avoid that they don't cause a sense of insecurity to children. The childcare workers should have skills to handle children the way they present themselves, not how they should be". There are children who are not catching up well with others during their participation in different learning activities at the children home, he cited".

These study findings are in agreement with the reviewed literature (Richards, 2015) where the author argued that childcare workers need to have competences in caring for the vulnerable children basing on their emotional age and needs not on their chronological age because vulnerable children are often delayed emotionally and socially and therefore, may not be able to act their age.

The researcher also used a semi-structured questionnaire during the data collection. In their response to the questionnaire, the respondents who were involved in the study gave their views on the competences necessary for Childcare Workers in providing child care and support to vulnerable children and their opinions are summarized in Table 4:6 and figure 4:6 below. Eleven (11) respondents who are (22%) mentioned lack of proper job orientation to newly hired or newly posted staff on how to work with the vulnerable children as an impediment to their competency. Other 7 (14%) respondents mentioned that the training curriculum did not put emphasis on childcare competences while 5 (10%) respondents said it is employment of persons trained on non-child care related disciplines. 4 (8%) respondents explained lack of resources to implement childcare services to vulnerable children whereas 10 (20%) respondents

mentioned lack of child care plans and exist strategies for each child at the children

home. About 9 (18%) of respondents mentioned the lack of on job/refresher training

to update the staff on emerging social issues and 2 (4%) cited inadequate qualified

staff and 2 (4%) talked about poor facilities and learning activities at the home. Table

4.6 summarizes the findings.

Table 4.6: Respondents' Views about Childcare Workers Competences

Respondent's perspectives	Frequency	Percent	Valid Percent	Cumulative Percent
Lack of proper job orientation to newly hired or newly posted staff on how to work with the vulnerable children	11	22	22	22
The training curricula does not emphasize childcare Competencies	7	14	14	36
Employment of persons trained on non-child related disciplines	5	10	10	46
Lack of resources to implement child care services to vulnerable children	4	8	8	54
Lack of child care plan and exist strategy	10	20.0	20.0	74
Lack of on job/refresher training to update the staff	9	18	18	92
Inadequate number of qualified Childcare Workers	2	4	4	96
Poor childcare facilities and learning activities	2	4	4	100.0
Total	**50**	**100.0**	**100.0**	

Source: Research Data, (2018)
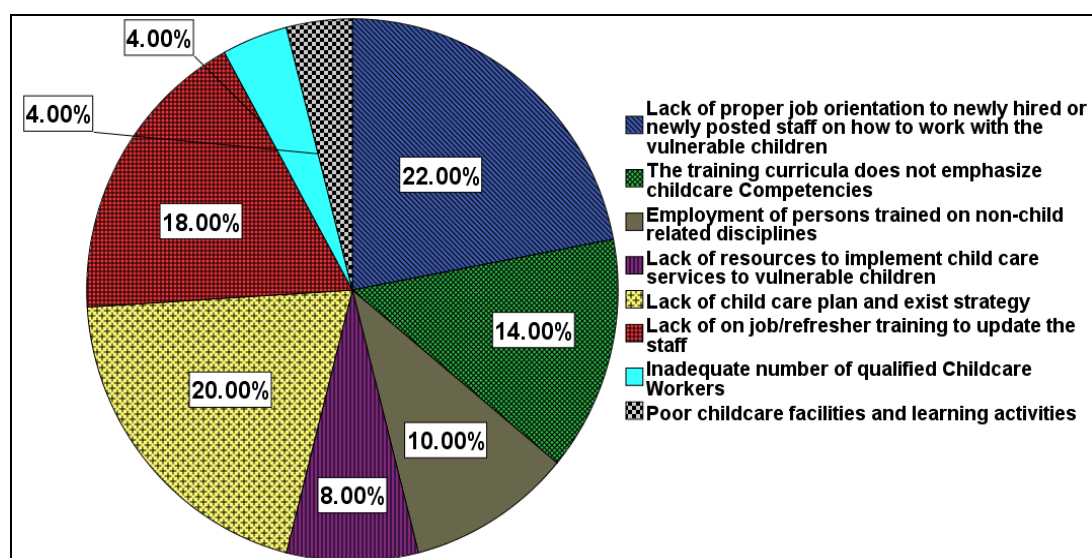
Figure 4.6: All Respondents' Views about Childcare Workers Competences

Source: Research Data, (2018)

The above study findings in table 4.6 and Figure 4.6 indicated that lack of proper job orientation to newly hired or newly posted staff on how to work with the vulnerable children and lack of child care plans and exist strategies for children were identified by participants, among others, as the leading impediments to their competences in providing child care and support to vulnerable children.

The above study findings are supported by Nichols (2010), in the study on the "common core of skills and knowledge for the children and young people's workforce", that there are common core of skills and knowledge that everyone who works with children is expected to have so as to effectively improve life chances for all children including those who are most vulnerable. Nichols (2010) emphasized on the importance of specific skills training for the childcare workers on specific task such as understanding how children develop, grow in character and change in behavior.

The researcher concomitantly used the focused group discussion, interviewers' completed questionnaire and in-depth interview methods in data collection. During the focus group discussion, interviewers' completed questionnaire, and in-depth interview the children who participated in the study were asked to answer specific questions regarding their expectations from Childcare Workers. Children were asked questions whether the Childcare Workers were skillful, helpful and trustfully managing child care services and whether they felt empowered to start self-reliant and independent living. The children showed their worries regarding the Childcare Workers' skills and described factors that represented their views on the service delivery skills of Childcare Workers.

During the focus group discussion with children, the participants expressed their views that "basically the Childcare Workers are qualified to work with children.

However, a constant argument was that the Childcare Workers were not responsive to their needs, they don't love children, and treat them differently from their own children and one child was quoted saying:

>*"The government needs to monitor the discipline of Childcare Workers. The Childcare Workers need to use their education to help us, not just to use their education for their own gain. The Childcare Workers need to encourage us in education and in hygiene. The Childcare Workers need to make the environment here to look like at home but not just like a living place. They are using threats that we would be sent away or taken to Nunge home for the elderly and people with disability". I think some of us; the grown-up children need to be allowed to use telephones to search learning materials from the website, especially for the higher level and college students. But I have seen the child of the mother in-charge is using telephone and her mother is comfortable with her, I don't know what is the difference that makes us to be treated differently."*

The above findings indicate the lack of trust or poor attachment relationship between the children and the workers where children have manifested dissatisfaction with the workers competence in caring. The children's comments imply that children do not trust the childcare workers as a secure base from which they can learn and explore their world.

This study findings correspond with the study by Karla C. M, (2013) on "attachment theory in the context of child protection" that the child with an unhealthy attachment has learned that they cannot rely on their caregiver as a secure base from which they can learn and explore the world and build other healthy relationships.

The researcher also conducted an in-depth interview with the children on the question whether the childcare workers were helpful to ascertain their views on the competences necessary for childcare workers in providing childcare and support to vulnerable children. During the interview children expressed their views that the childcare workers should love the children like parents, have to play with children, should be friends and role model to children, be the leaders to show the way and teachers to teach children on good manners. The same children were of the negative views that the childcare workers at Kurasini National Children Home might have not fulfilled this expectation.

Those children who were dissatisfied with the childcare workers competences had the following reasons to substantiate their views, that; they were falsely accused by the childcare workers of sexually abusing their fellow children. They continued to express their views that the childcare workers were harsh and sometimes give them corporal punishments and that the childcare workers did not give them an opportunity to be listened to. Others participants complained that Childcare Workers were discriminative, selfish and not trustworthy because they sometimes take the donations meant for children to their homes and some donations are being sold to the outside users.

During the interview one child was quoted saying:

"*Although we have adequate childcare workers but they are not helpful because the time they spend with us is very little. Most of the times they are at the center when we are at school, and when we are coming back home from school they are also going home because it's end of their working hours, their time table and our time table doesn't match. This therefore denies us of the time we could spend together with our caretakers to know each other better and develop trust and attachment relationship. Our caretakers does not have any difference with our teachers at school because all the treatment we get at school is what we get when we come back home. They supervise us in same manner (they hold and use sticks) as we are supervised by our teachers at school. They punish us the same way as we are punished by our teachers at school. We meet with them in the hall as we meet with the teachers at school. To me here is like to be at school. I can't call this place a home because we don't have time to enjoy and make stories with our caretakers. The children at home can have time and access to play with their parents and can use their phones and they are not prohibited. At home boys and girls, I mean brothers and sisters are not restricted, they have freedom of interaction but here it is different, we are not allowed to sit or make stories with our sisters because we are doubted we could rape them.*

The above findings indicate that the study participants have experienced less-friendly and inconsistent physical contact with their primary caregivers and thus have learned that they can't count on their caregivers to nurture them. Their expression of views

represents their resistant behaviour to the instructions and restrictions given to them by the childcare workers.

The above findings coincide with the study by Ainsworth & Bowlby, (1991) that the attachment style of children is directly correlated to the experiences they have with their primary caregivers and because of inconsistencies in caregivers attention children are never sure if their needs for care and support will be met. The researcher completed a survey questionnaire with 30 vulnerable children who participated in the study. During the interviewers' completed questionnaire with children, the children were asked to answer specific questions regarding their expectations from the childcare workers. They answered questions as to whether the childcare workers were skillful, helpful and trustfully managing childcare services and whether they were feeling empowered to start self-reliant and independent living.

Table 4.7 and Figure 4.7, present views of the Children on whether the Childcare workers at the Kurasini National Children Home were skillful. The 43.3% of the children's opinion is that the childcare Workers at the children home were not skillful. 26.7% percent of children said the child Care Workers were skillful, while 30% did not have an opinion.

Table 4.7: Vulnerable Children's Views on Childcare Workers' skills

Responses	Frequency	Valid Percent	Cumulative Percent
No	13	43.3	43.3
Yes	8	26.7	70.0
N/A	9	30.0	100.0
Total	**30**	**100.0**	

Source: Research, (2018)
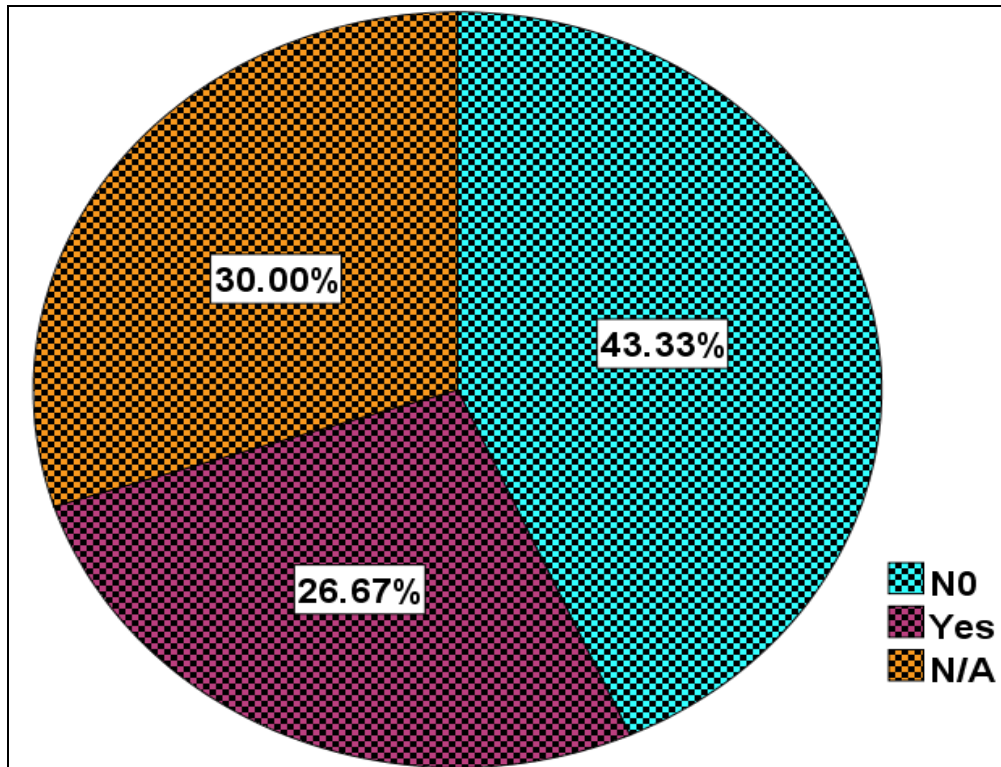
Figure 4.7: Vulnerable Children's Views on Childcare Workers Skills

Source: Research Data, (2018)

The above findings show that about 18 children who were 45% of the study participants have given the negative comments against their caregivers as not skillful meaning that their majority have not developed trusting relationship with the childcare workers to the extent of counting on them as not skillful enough to provide child care and support to them.

The above findings match with the study by Whitney E. Young (2007) on attachment in older adolescent romantic relationship that, children who have been abused in some way by their caregivers do not react in predictable ways to their caregivers and often show conflicting emotions at the same time because they have conflicting feelings about their caregivers.

On the question of whether Childcare Workers were helpful to them, 26.7% of the respondent children's opinion is that the workers at the center were not helpful. 10% percent said the workers were helpful while 63.3% did not have an opinion. These opinions are indicated in the Table 4.8 and Figure 4.8.

Table 4.8: Vulnerable Children's Views on Childcare Workers Helpfulness

	Frequency	Valid Percent	Cumulative Percent
No	3	10	10
Yes	8	26.7	36.7
N/A	19	63.3	100.0
Total	**30**	**100.0**	

Source: Research, (2018)
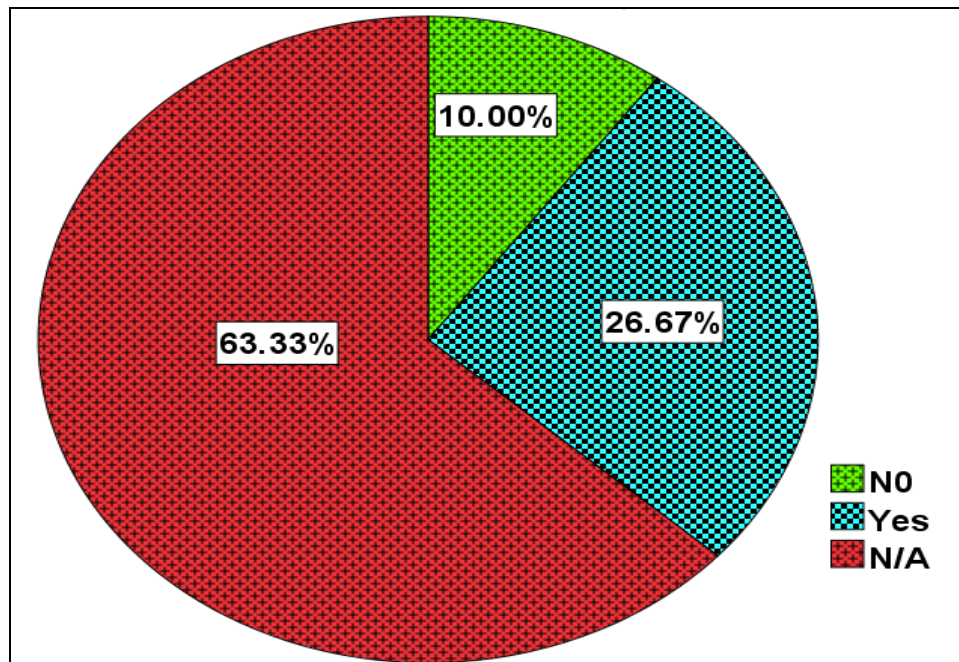
Figure 4.8: Children's Views on whether the Childcare Workers were Helpful

Source: Research Data, (2018)

The above findings show that about 19 children who were 63.3% of the children who participated in the study did not give any views on whether their caregivers were helpful, meaning that their majority were not sure as indicated during the in-depth interview.

The above findings are supported by the work of Ainsworth & Bowlby, (1991) on the attachment theory, that the children who have experienced inconsistencies in caregivers attention are never sure if they will be able to get the attachment they seek. During the interviewers' completed survey questionnaire children were asked a question on whether the Childcare Workers were trustworthy when delivering services to them.

A total of 30 children participated in this study. In answering the question, about 9 children who were 30% of the participants gave their opinion that the donations meant for them from donors were misappropriated by staff of the Kurasini National Children Home. 8 children who were 26.7% of the participating children said the donations were not misappropriated while 13 children who were the highest majority at about 43.3% of the participants did not provide an opinion. These results are indicated in the Table 4.9 and Figure 4.9.

Table 4.9: Confiscation of Donations to Children

	Frequency	Valid Percent	Cumulative Percent
N0	8	26.7	26.7
yes	9	30	56.7
N/A	13	43.3	100.0
Total	**30**	**100.0**	

Source: Research, (2018)
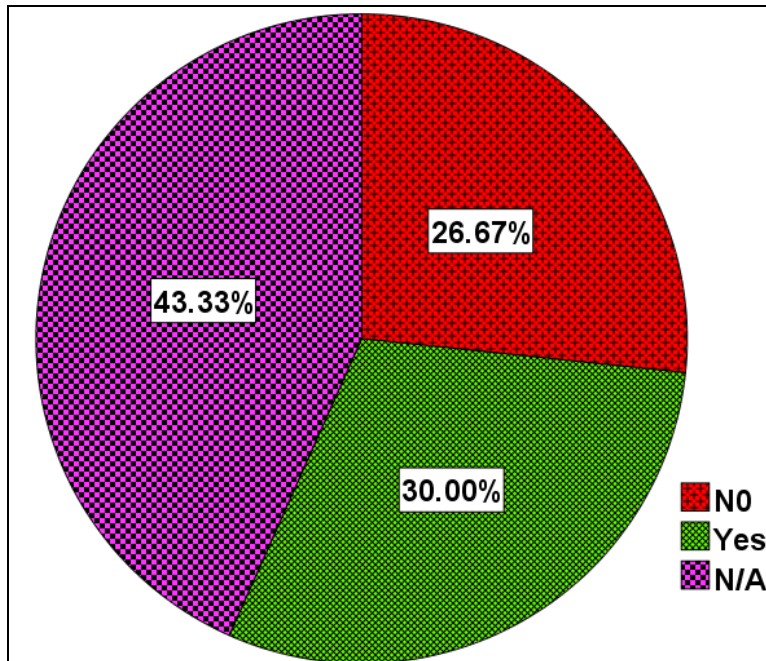
Figure 4.9: Confiscations of Donations to Children
Source: Research Data, (2018)

The above study findings are evidence of the participants' voluntary participation in the study and the freedom of expression where the higher majority of participants at 43.3% exercised their freedom of not giving any views on the childcare workers trustworthiness.

The findings are in line with the study by J Creswell (2013) who argued that the participation in the study should be voluntary and the researcher should explain to the participants that they have the freedom to either answering or not to answering any of the research questions.

During the interviewers' completed questionnaire children were asked an evaluative question on whether they felt empowered to be self-reliant and start independent living. The researcher wanted to assess the children readiness to be self-reliant and independent to interpret how effective the children empowerment process was

accomplished by the childcare workers. The opinions of the children are presented in Table 4.10 and Figure 4.10 where 30% said the children were not prepared to live a life on their own while 70% did not give an opinion.

Table 4.10: Children Preparedness to Independent living

Response	Frequency	Valid Percent	Cumulative Percent
No	9	30	30
N/A	21	70	100.0
Total	**30**	**100.0**	

Source: Research, (2018)
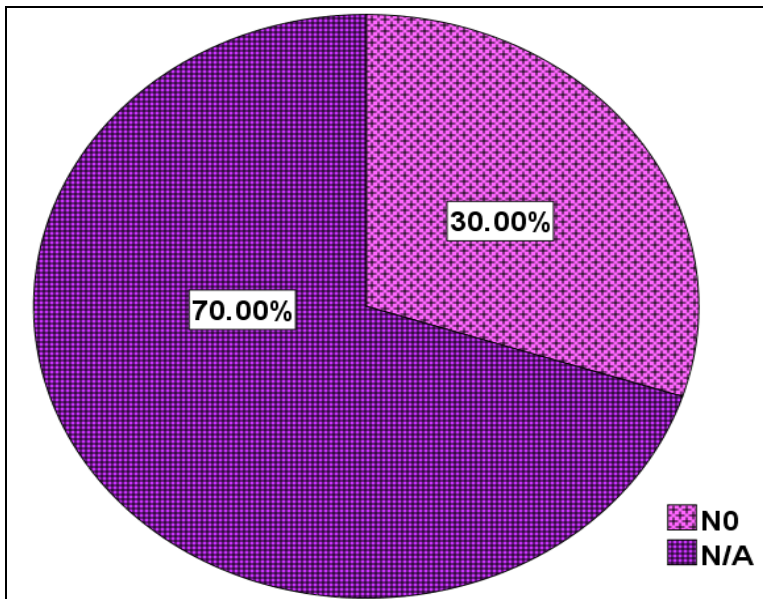
Figure 4.10: Children Preparedness to Live Independently
Source: Research Data, (2018

The above study findings are the reflection of the earlier problems related to the attachment and empowerment processes where now the majority of children are not confident to effectively separate from the children home to become self-reliant and start independent living. A no answer or a silence to this question both indicate a lack

of self-assertiveness and ineffectiveness; meaning that children were not sure if they could be able to be self-reliant and start independent living.

The above findings are in line with the study by Ainsworth & Bowlby, (1991, 1997, 1998) who argued on the importance of the role of primary caregivers in empowering children on how to effectively deal with the separation from the attachment figures and specific implications developed by children towards their primary caregivers due to the underlying lack of trust in the caregivers' availability and sensitivity to their needs.

4.3.2 Knowledge of Childcare Workers on Children Vulnerability, Childcare, Child Protection and Needs of Children

During the study, the participants were asked on what was their understanding of children vulnerability, vulnerable children, child care, protection and the needs of children. The researcher aimed at finding out whether the childcare workers had the desired knowledge regarding the basic, fundamental experiences or environmental conditions essential to optimal child growth and development and how they perceived children vulnerability, vulnerable children, child care, child protection and the needs of vulnerable children.

The purpose of the question was to test what is known by childcare workers about the issues in the subject. The researcher wanted to test childcare workers familiarity, awareness or understanding of the facts, information, description, or skills, which they have acquired through experience or education, by perceiving, discovering or learning on these issues. The researcher involved 10 Childcare Workers in this study. For an

easy presentation and analysis of data the researcher have separated the response into two thematic areas; the first being on the causes of vulnerability and vulnerable Children and the second on child care, protection and the needs of children as discussed herein below:

4.3.2.1 Knowledge of Childcare Workers on the Causes of Vulnerability and Vulnerable Children

According to the NCPA II, Most Vulnerable Children are those children under the age of 18 years falling under extreme conditions characterized by severe deprivation and who are unable to meet their needs in terms of adequate education, health care, food, shelter, HIV/AIDS services, early childhood development services, and emotional and physical protection (MOHSW, 2013 – 2017). The NCPA II (2013 - 17) defined vulnerability as a state of high risk of deprivation or an expected welfare loss above a socially accepted norm, which results from risky or uncertain events and the lack of appropriate risk-management instruments (MOHSW, 2013 – 2017).

In their response to the questionnaire, the study participants gave different definitions of children vulnerability and vulnerable children preferably in the light of the attributes of children vulnerability and vulnerable children. The participants had different views as indicated in the Table 4.11 and Figure 4.11 whereby 2 childcare workers who were (20%) of 10 childcare workers who participated in the study said that the problem of vulnerable children is caused by extreme poverty. another 1(10%) of the participants indicated that lack of parental guidance and support causes vulnerable children. Furthermore, 1 (10%) of 10 participants mentioned rural-urban migration and urbanization as factors causing vulnerable children. While1 (10%)

participants said that, violence against children at home, school, community, work place and in the residential care are a widespread.

On the other hand, 1(10%) indicated that poor policies on children issues were the sources of vulnerable children. Others 3 (30%) participants sighted that HIV/AIDS, death of parents as the cause of vulnerable children and vulnerability. another one (1) (10%) stated that domestic violence and separation lead to vulnerable children. Table 4.11 and Figure 4.11 herein under represents:

Table 4.11: Causes of Vulnerability

S/N	Response	Frequency	Percentage
1.	Extreme poverty	2	20%
2.	Lack of parental guidance and support	1	10%
3.	Rural–urban migration and urbanization	1	10%
4.	Violence against children	1	10%
5.	Poor policies on children issues	1	10%
5.	HIV/AIDS, death of parents	3	30%
6.	Domestic Violence, separation and residential care	1	10%
	Total	**10**	**100%**

Source: Researcher, (2018)
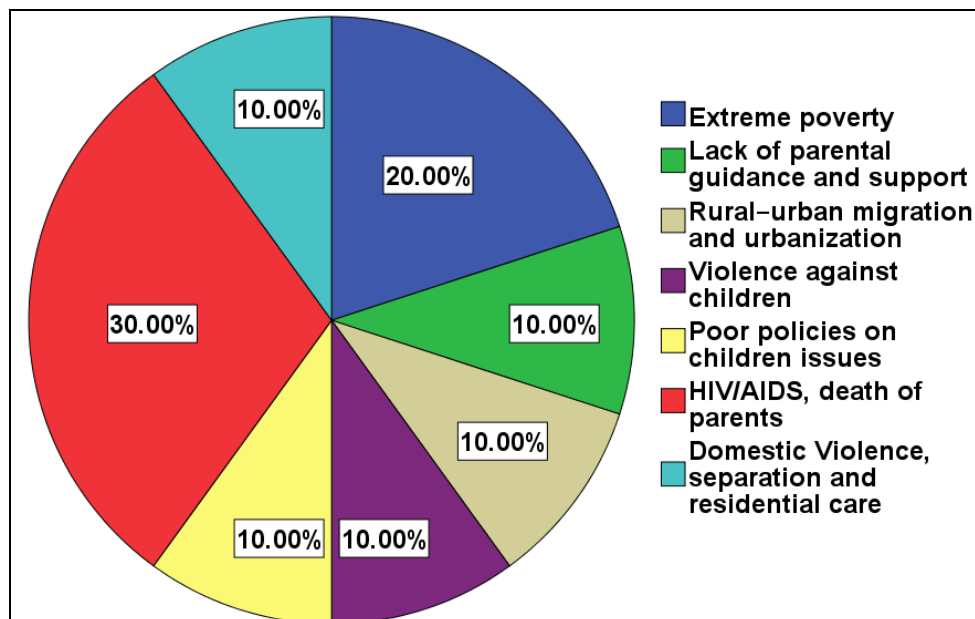
Figure 4.11: Causes of Vulnerability
Source: Researcher, (2018)

According to the above study findings the participants have discussed six (6) of the 14 attributes of vulnerability and vulnerable children suggested by NCPA, indicating that the participants were aware of what constitutes vulnerability and vulnerable children. The study findings are in line with the Tanzania National Costed Plan of Action (NCPA 2013-2017 page no. 1-2), which has stipulated about 14 attributes of vulnerable children among which children living in institutional care were also, mentioned (MOHSW, 2013).

4.3.2.2 Knowledge of Childcare Workers on Childcare, Child Protection and the Needs of Children

In their response to the questionnaire, the participants gave their views on childcare, child protection and the needs of vulnerable children at Kurasini National Children Home. It was revealed during the study that 1 out of 10 participants (10%) were of the view that Childcare Workers did not have a wider understanding of the needs of children beyond physiological ones such as food, shelter, medication, education and clothing. However, vulnerable children, have more needs beyond physiological such as safety and security needs, social needs, self-esteem and self-actualization needs.

While describing child care at Kurasini National Children Home, which is when children are supervised and cared for by a person other than a parent or caregiver (Bennett, 2011), 3 out of 10 respondents (30%) gave poor description of status giving the reasons that, the time the Childcare Workers spend together with children is too short because Childcare Workers normally come to the children home in the morning when the majority of children are going to school and go home in the evening when the children are coming home from school. They stated that, though some of the

Childcare Workers remain at the children home during the night for night's and morning's supervision, the shifting of childcare workers weakens their parental role to children. They highlighted that, Children at Kurasini National Children Home have limited access to Childcare Workers, their contacts are planned unlike the ones the children have with parents. The participants continued to describe that the situation consequently lowers the capability of vulnerable children to start independent and self-reliant life after they complete their time of stay at Kurasini National Children Home.

According to 2(20%) of participants who were the Childcare Workers, stated that child protection at KNCH was good because children have shelter, food, medication, clothes and no child is allowed to intimidate others. Another 1 (10%) of participants expressed their perception that children at KNCH do not feel protected as their majority still remembers how they were treated at their early ages before coming to the children home and feel they have not received what they ought to.

In describing the extent to which the needs of children at KNCH are met, 2 (20%) of the participants were of the view that the needs are adequately met at the center because children are provided with food, clothing, and good sleeping facilities. They added that children are also provided with health insurance to cover the costs for health care. Another 1 (10%) of the participants was of the view that the center has not done enough to meet the emotional needs of children because children at the center exhibit feelings of loss as a result of separation from their parents and have problems in forming relationships with other children. The same participants were of the opinion that the center has not gone far enough to meet the spiritual needs of children.

The participants gave their views on childcare, child protection and the needs of vulnerable children at Kurasini National Children Home are summarized in the Table 4.12 and Figure 4.12.

Table 4.12: Knowledge of Childcare Workers on Childcare, Child Protection and Needs of Children

S/N	The knowledge of Childcare Workers on child care, child protection and needs of Children	Frequency	Percentage
1	No wider understanding of the needs of children beyond physiological needs	1	10
2	Time the Childcare Workers spend with children is too short, so Children have limited access to Childcare Workers	3	30
3	Needs of children for safety and security needs, social needs, esteem needs, and self-actualization were not addressed other than shelter, food, medication, education and clothes only.	2	20
4	Children do not feel protected and remember how they were treated at their early ages	1	10
5	The needs of children are well taken care because they get food, clothes, and good sleeping beds and Health insurance	2	20
6	Children emotional, social and spiritual needs are not addressed	1	10
	Total	**10**	**100**

Source: Research, (2018)
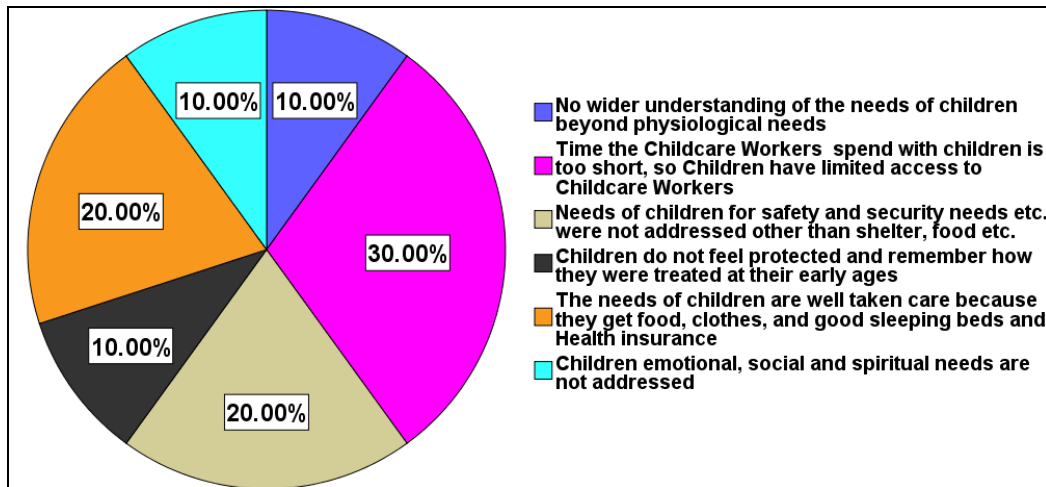
Figure 4.12: Knowledge of Childcare Workers on Childcare, Child Protection and Needs of Vulnerable Children

Source: Research Data, (2018)

The study above findings have revealed that though the Childcare Workers at Kurasini National Children Home have adequate understanding of child care, they do not have a common and adequate understanding of child protection and the needs of children. The study findings have revealed that Childcare Workers have contributed to many children ending up into a prolonged dependence to the children home due to their lower understanding of what exactly were the child protection and needs of children.

The researcher also conducted an in-depth interview with the Childcare Workers, Human right staff, and Social Welfare officers on what was their understanding on terms; child care, child protection and the needs of children. During the in-depth interview with Childcare Workers, Human right staff and Social Welfare officers; the participants expressed their views on childcare that Childcare Workers assume a parental role for the children and this has good and bad sides. In responding to how they view childcare, one child care worker had the following to say:

"It is good because the children call me their Sister. Those who have come recently, call me mother. If they would have known my role and counted me as so, they could have directly come to me when they get hurt but as for now they go to other mothers and are then brought to me for medication".

Another childcare worker said:

"Children have the knowledge that this place is not their home and they understand that we are workers and not their parents. There are children whom we have cared for them and after completing their university studies, they did not invite us to their wedding ceremony. There was another child, whom we prepared for her wedding ceremony but when it came to sharing the wedding cakes, she decided to take the cake to her younger brother and not to us though we were there as parents who have cared for her".

When interviewed on their understanding about child protection a another childcare worker said;

"We are ensuring that they are not abused and that they forget any previous painful experience including neglect, but some still don't feel protected and secured".

The above study findings are the expression that the children in this study have not experienced a positive relationship with the childcare workers to the extent they can't count on them as a secure base and so they don't run to childcare workers in the event of hurt or need for protection or don't involve them in their personal issues such as wedding ceremonies.

The above findings concur with the study by Ainsworth & Bowlby, (1991) that the attachment style of children; whether secure-attachment, ambivalent-attachment or avoidance-attachment is directly correlated to the experiences they have with their primary caregivers.

During the in-depth interview the human right staff were involved to answer the question on child protection where one of them expressed his reservation on child protection at Kurasini National children home saying that:

> *"There are children who run away after staying at the children home. If they were satisfied and feel protected, they could not run away to the street. Something needs to be done to improve our relationship so that children feel safe and secured".*

The above study observation is the manifestation of the unreliable care relationships between the vulnerable children and the childcare workers. These findings correspond with the study findings on attachment relationship by Goldberg (2000) who described that, with other manifestations of the insecure attachment, the child will adapt to the unreliable care relationships by turning away from the caregiver to avoid possible rejection.

During the in-depth interview the study participants were asked to respond to the question regarding the needs of children at Kurasini National Children Home. In the response to the question, one social welfare officer was quoted saying;

> *"Children are given their basic needs, but they are not socially satisfied".*
> *They still are searching for someone to be attached to. Some of the Childcare*

Workers don't give children this chance may be because time is not enough to be with children. People at the dispensary have more time to be with children and children openly talked to them about their problems".

The above study findings represent the outcome of the limited understanding of childcare workers regarding the development of childcare interventions that could address the needs of vulnerable children from the holistic perspectives.

The above study findings correspond with the NCPA II for MVC (2013-2017) which stated that most of the programmes that are designed to help Most Vulnerable Children in Tanzania mainly focus on meeting their material and intellectual needs but less on meeting their emotional and social needs and therefore, making the interventions inefficient in promoting the total health and well-being of MVC (MOHSW, 2013).

4.4   Quality of Child Care Provided to Children by Childcare Workers at Kurasini National Children Home

The second objective of this study was interested to assess the quality of care provided to vulnerable children at the National Children Home. Under this study objective, the researcher wanted to understand the types of services provided to vulnerable children and the quality which includes Childcare Workers' skills and ability to provide the desired services, dependably and accuracy, willingness to help children, the knowledge and courtesy of Childcare Workers and their ability to convey trust and confidence, provision of caring, individualized attention to children. The researcher also wanted to understand the views of vulnerable children about their living in

Kurasini National children home. To address this objective the study attempted to find out the types and quality of services received by children at the National Children Home. Secondly data was collected on the views of the children on the care services provided since they are the targets of childcare services provision. The respondents were asked to answer the questionnaire based on their own experience. The obtained results are described below subsections:

4.4.1 Types of Child Care Services Provided to Vulnerable Children at Kurasini National Children Home

The majority of the respondents at (18) 36% mentioned the services provided being the basic needs such as food, cloths, shelter and medication. About (15) who were 30% of the respondents mentioned primary education and vocational training while (10) 20% mentioned the provision of family reunification as they said family re-unification was important due to the reasons that children basically must be raised in a family. (7) 14% of respondents talked of counseling and guidance, especially for those children who have experienced substance abuse and others who were sexually abused.

In their response on the types of services provided to children at Kurasini National Children Home a significant majority of respondents corroborated the views in the Questionnaire that children were provided with basic needs such as food, shelter, medication, clothes, early childhood care, education, parental guidance and counseling, psychosocial care and support and recreational activities. Children were informally oriented into daily routine, self-hygiene, appropriate relationships on how to relate well with others like brothers and sisters, life skill education, to know their rights and responsibilities and respect of others. The respondents' views regarding the

type of services provided at the KNCH are indicated in the Table 4.13 and Figure 4.13.

Table 4.13: Child Care Services Provided to Vulnerable Children

SN	Response by respondents	Frequency	Percentage
1.	Food, clothes, shelter and medication	18	36%
2.	Primary education and vocational training	15	30%
3.	Family re-unification	10	20%
4.	Counseling and guidance and psychosocial support	7	14%
	Total	**50**	**100%**

Source: Researcher, (2018)
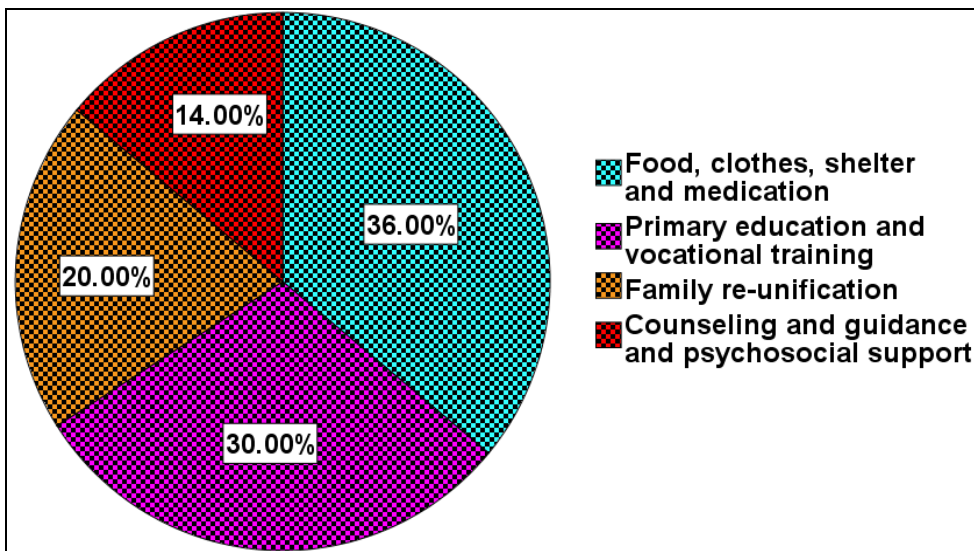
Figure 4.13: Child Care Services Provided to Vulnerable Children
Source: Research Data, (2018)

The above study findings in the Table 4.13 and Figure 4.13 are the manifestation that the majority of the study participants did not have a broader understanding of the holistic nature of the needs of children beyond the material and intellectual needs (NCPA/MOHSW, 20I3). The above study findings also explain the reasons as to why the child caregivers in this study were not able to address the needs of vulnerable

children from the holistic perspectives. The information from the reviewed literature (McLeod, 2017) adds to the above study findings where the author described the needs of children beyond the material and intellectual needs and included safety and security needs, social and emotional needs and esteem and self-actualization needs.

4.4.2 Quality of Child Care Services Provided to Vulnerable Children at Kurasini National Children Home

According to Lewis and Brooms (1983), the quality of services is defined as a measure of how well the level of delivered service corresponds to the requirements and expectations of the customers. When the expectations are greater than the performance of the service provided, then the perceived quality is not satisfactory and can generate almost certainly customer dissatisfaction (Parasuraman et al., 1985).

To address this objective the study attempted to find out the views of respondents on the quality of services provided to children at the National Children Home. The data were collected on the views of respondents with regards to children views about their living at the National children home, their Satisfaction with Services and problems they face at Kurasini National Children Home. The services that were mostly mentioned by the children were the medication, education, food and clothing. The views of children are indicated below in the items 4.4.2.1 to 4.4.2.4 and Tables 4.14 to 4.18 and Figures 4.14 to 4. 18.

4.4.2.1 Views of Children about their Living in the Children Home

The study involved 30 children who are living at Kurasini National children home. Children had mixed perceptions regarding their life in the children home. There were some of the children who have shown appreciation to their leaders and the Centre for

the educational services they got regardless of the challenges encountered and some who have shown their dissatisfaction. During the interview about 6 children who were (20%) of participants expressed their satisfaction while 24 children who were (80%) of participants were dissatisfied with the life at Kurasini National children home.

4.4.2.2 Satisfaction of Children with Services Provided at Kurasini National Children Home

During the interviewer's completed questionnaire, the researcher asked the children if they were satisfied with the services provided at the home and their response is as shown in the below cross-tabulation table. The cross Tab as presented in the Table 4.14 and Figure 4.14 indicate the proportion of respondents mentioning a particular issue to present their satisfaction or dissatisfaction. The majority gave their opinion at 30% that the food provided at the home was not good and that it is mostly half cooked. 23.3% said that they stay hungry in school because they are not given pocket money to buy food and the hunger is aggravated by the fact that since there is not enough food in the Kurasini National children home they also come to school hungry.

Thus, the 53.3% above indicated the dissatisfaction with food quality and its availability. Medical treatment for the children was also said by 13.3% of the children to be based on favoritism apart from not being good. A small number of children at 6.7% said they were not given bus fare for transport to school. This may reflect the small number of the children attending school. Another 6.7% of children opined that food and clothing meant for them were misappropriated by the staff at the home. However, the remaining 20% of the children; 10% said they were better off than those

children who were in the streets and 10% said they were getting education something they had dreamed of.

Table 4.14: Children's Views on Satisfaction with Services at the KNCH

Satisfaction with Services at the KNCH	Responses	
	N	Percent
No school fare	2	6.7%
Stay hungry in school no money/food at KNCH not enough	7	23.3%
Treatment not good and based on favoritism	6	20%
Food is bad mostly half cooked	7	23.3%
Yes, I'm getting education, the dream of my life	3	10%
Yes, I have everything and I'm better off than those in the streets	3	10.0%
The workers take our food and clothing for themselves	2	6.7%
Total	**30**	**100.0%**

Source: Research, (2018)
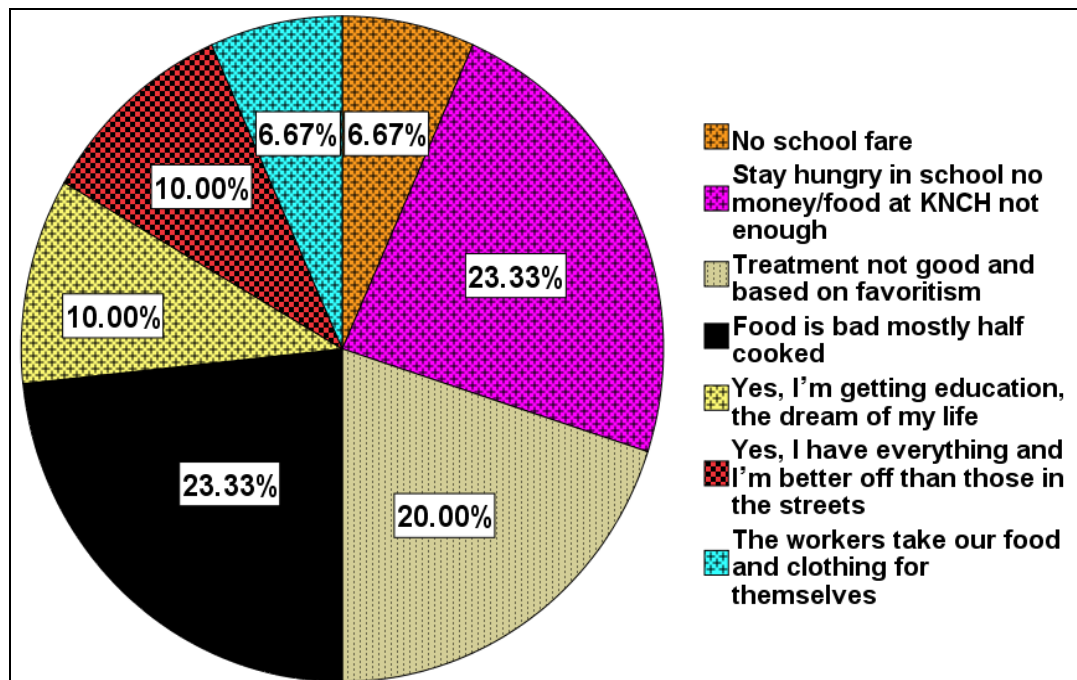
Figure 4.14: Children's Views on Satisfaction with Services at the KNCH
Source: Research Data, (2018)

The study findings in the Table 4.14 and Figure 4.14 is the indication that the quality of services provided to the vulnerable children at Kurasini National Children home do

not meet the requirements and expectations of the children and therefore is not satisfactory.

The study findings concur with the discoveries made in the reviewed literature (Parasuraman et al., 1985) that when the customer expectations are greater than the performance of the service provided, then the perceived quality is not satisfactory and can generate customer dissatisfaction.

4.4.2.3 Problems Experienced by the Children at the KNCH

During the interviewer's completed questionnaire, the researcher asked the children if there were problems they face at Kurasini National Children Home. The Table 4.15 and Figure 4.15 present the opinion of the respondents regarding the problems they face at the children home in a frequency table. The Table 4.15 and Figure 4.15 present whether the respondents experienced a problem at the center. In their response as shown in Table 4.15 and Figure 4.15, 40% of the children said there were no problems whereas a majority of respondents at 60% said there were problems. This is followed by frequency tables in respect to the individual problem experienced.

Table 4.15: Experiencing Problem at KNCH Center

	Frequency	Valid Percent	Cumulative Percent
NO	12	40.0	40.0
YES	18	60.0	100.0
Total	30	100.0	

Source: Research, (2018)
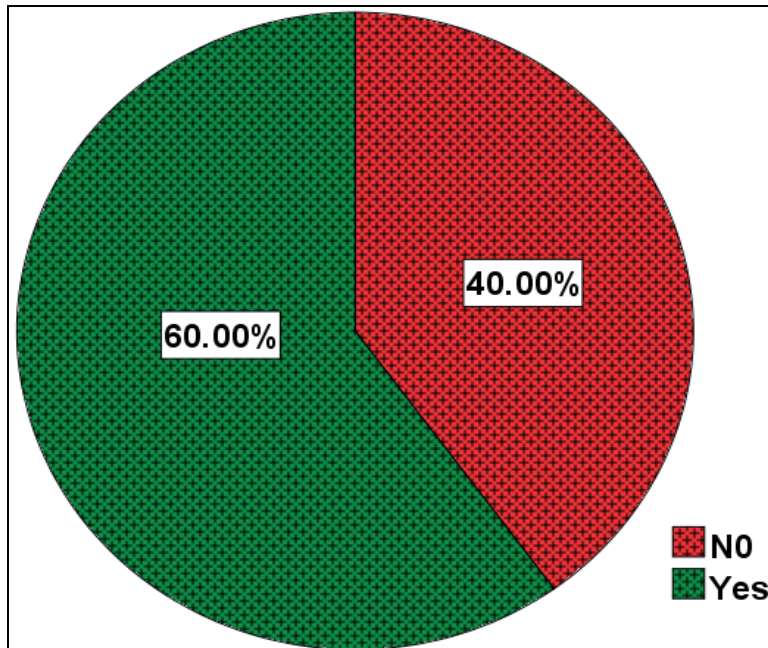
Figure 4.15: Experiencing Problem at KNCH Center

Source: Research Data, (2018)

Following the response of a majority of respondents at 60% in the Table 4.15 and Figure 4.15 that there were problems at Kurasini National children home, the researcher attempted to find out the types of problems experienced by children. The frequency the Table 4.16 and Figure 4.16 show the type of problems experienced by the children at the KNCH. About 23.3% of children complained of poor studying condition especially at night because there was always no money to pay for electricity.

Another problem that was largely mentioned was that of false accusations, this attracted about 26.7% of the complaints, 10% about being forced to falsely accuse a colleague of sexual abuse, 30% of the complaints were about being forcefully removed to old people's home. Finally, 10% of the children mentioned lack of fare for transport to and from school.

Table 4.16: Types of Problems at the KNCH

Problems at Center	Responses	
	Frequency	Percent
Poor studying condition no money to buy electricity	7	23.3%
Falsely accused	8	26.7%
Forced to falsely accuse a colleague of sexual abuse	3	10%
Forcefully removed to old people's home	9	30%
No fare to and from school	3	10%
Total	**30**	**100.0%**

Source: Research, (2018)
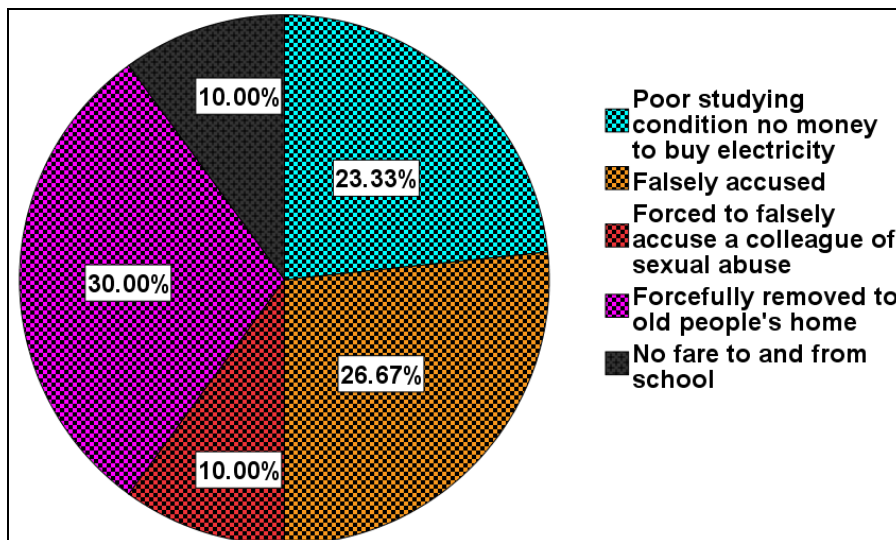
Figure 4.16: Types of Problems at the KNCH

Source: Research Data, (2018)

The study findings in Table 4.17 and Figure 4.17 are the indication that children at Kurasini national children home were not raised to trust on their caregivers and thus, indicate that the services provided to the children at the home did not meet their requirements and expectations. The study findings are also a manifestation that the childcare workers were not able to establish a trusting relationship between them and the children (Laura & Stuart, 2006).

The study findings suggest that the children do not trust on the childcare workers presumably because the childcare workers were not sensitive and responsive to the needs of children (Schofield and Beek, 2014). The study findings are in agreement with the study by Laura & Stuart (2006) which described that children who have learned to associate the caregiver with relief and reward, and/or learned to trust that the caregiver will be reliable and responsive to their needs are securely attached and confident in the presence of their primary caregiver. The above study findings signify the childcare workers weakness in providing childcare and support services to vulnerable children.

The researcher also conducted an in-depth interview with children to ascertain their views on the quality of services provided to children at Kurasini national children home. The interview in this study provided views of children about their living in the children home, their satisfaction with the services provided and the problems they face at the children home.

During the interview with the vulnerable children at Kurasini National Children Home, one child was quoted saying:

> "*Although some of us don't know the whereabouts of our families and not satisfied with the feeding here at the center, but we are thankful because we have an opportunity to be trained and to be in school and one day we will enjoy life, though we have few trainers who can help us on various vocational training activities. This home has given us the opportunity that our own parents could not have given us*".

On the same issue another child said;

> *"We are very grateful with the training we are getting here through learning activities though sometimes the center does not have enough food and it has limited space for games. I will start my own business because I now know how to prepare a garden, feed chickens and care of a milk cow".*

The above study findings indicate that despite the limitations around their lives, the study participants are empowered and have developed a positive thinking about their ability to make change and gain mastery over their personal issues. The study also revealed that the participants were eager to learn and prepare themselves for self-reliance despite of the challenges they were facing at the children home.

The study findings concur with the study by Zummerman (2000) who defined empowerment as a psychological process in which individuals think positively about their ability to make change and gain mastery over issues at individual and social levels including self-perception of competence, personal control and positive self-image.

However, another participant who was dissatisfied with the life at Kurasini National Children Home was quoted saying:

> *"Food and dormitory is bad, we are falsely accused of abusing our fellow children, we are given corporal punishments, we are not given opportunity to meet with the higher authorities to listen to our problems and needs. The higher authorities do not regularly visit us, and the school fees and fare to school is a problem here".*

Another study participant continued to express his dissatisfaction with the quality of services provided at Kurasini National Children Home and was quoted saying that:

"The caretakers are selfish because the donations given for us here are taken away. We don't have enough medicine but the little we get is sold to outside users. The caretakers are not responsive to our needs; they don't love us, and treat us different from their own children. We are afraid of the caretakers because they are using threats that we would be sent away". The government should closely monitor the discipline of the caretakers here".

The above study findings indicate that the children in this study were treated (during some of their early development stages) in a way that does not seem to fulfill their attachment requirements and expectations. The study findings are a typical representation of a negative relationship between the children and their caregivers. The study findings also signify a poor connection or unhealthy attachment relationship between the children and their caregivers.

The above study findings correspond with the reviewed literature (Karageorge and Kendall, 2008), where they discussed the importance of positive relationship between child care provider and children in providing child welfare services, (Nichols, 2010) who discussed the importance of the worker to know how to interact with children in ways that support the development of children, and Ainsworth (1970) who concluded that children attachment styles are the result of early experiences and interactions with their primary caregivers.

4.5 Challenges experienced by Childcare Workers in Providing Childcare and Support to Vulnerable Children at Kurasini National Children Home

This research objective was aimed at understanding the challenges facing Childcare Workers in the course of providing child care services to the vulnerable children at the National children home. This study attempted to identify some of the challenges facing the Childcare Workers during childcare service provision in the implementation of government intervention strategies in building the capacity of vulnerable children to reach on the level of self-efficacy. In the interview with the Human rights Staffs, Childcare Workers and Social Welfare officers with regards to the challenges facing Childcare Workers in the course of their duties, their responses reflected that sometimes things were beyond the capability of the Childcare Workers in many aspects.

Since the activities at the Children Home were not well financed, it was sometimes very difficult to reintegrate children because of the related cost of family tracing and children reunification package. The Council Social Welfare officers do not provide any follow up support after admitting children at Kurasini National Children Home. The role of tracing family and relative has not been clearly defined between the both Social Welfare officers at Council levels and Childcare Workers at the National children home. In addition, there was no budget allocated for resettlement of children from both the MOHCDGEC and PO-RALG. These situations mostly cause many children to grow up to young adults at the children home without proper empowerment for them to start an independent and self-reliant life. This was aggravated by a confusion of roles between the Councils Social Welfare officers and

the childcare workers in preparing the children for reintegration they are youth. During the interview, the participants discussed the challenges facing childcare workers in providing childcare and support and they had different views. One human right staff was quoted saying that:

> "*There are no clear costed future care plans and exit plans for the Children at the home. The children are growing to young adults while still living at a place that was meant for a temporary care*".

The above findings indicate that the children were growing to young adults while still living at the children home due to the lack of costed future care plans and exit plans for children at the children home. The above findings concur with the report by SOS Children's Village International (2014), that due to the lack of operating standards in place (including child care plans and exit plans) or inconsistent application of standards, the Vulnerable Children in Tanzania are either not prepared or insufficiently prepared for leaving care.

Another participating social welfare officer commented that:

> "*Children were meant not to grow at the children home but to be reintegrated through family reunification, foster care and adoption*" *and costed child resettlement. To achieve this childcare workers and council social welfare officers should be conversant of and apply the available key policy guidelines, operating procedures and the children homes regulations. Everyone working with children is expected to have skills and knowledge on child development and how it can be supported to improve life chances for the vulnerable children*"

The above study findings indicate that the child care and support services is provided below requirements and expectations due to the inadequate skills and knowledge among the childcare workers regarding child development, child development programme designs and on the available guiding laws and key policy guidelines.

The above study findings are supported by the study conducted by Nichols (2000) wherein the author discussed the importance of understanding how children develop in all realms of life including physically, emotionally, intellectually, socially and how they grow in character and change in behaviour.

During the interview the childcare workers continued to share on the challenges facing them in providing child care and support to vulnerable children at the children home. One childcare worker commented as following that:

> *"The work with vulnerable children is stressful, the childcare workers do not receive any incentives or motivation for the extra working hours, there is no overtime or extra duty payment, there are no training opportunities for child care workers after employment and to make the situation more complex, the children interventions are under-resourced.*

The above study findings indicate that the childcare workers were not satisfied with the working conditions including the inadequate government resources towards vulnerable children care interventions. The above findings correspond with the report of MoHSW (2012) on the assessment of social welfare workforce in Tanzania that social welfare workers receive low pay, are delayed in promotion, they are few

compared to demand and work with children who have undergone frustrating experience.

In their response to the questionnaire, the study participants gave their views on the challenges facing childcare workers in providing child care and support services to vulnerable children as shown in the Table 4.17 and Figure 4.17. About 4 (8%) respondents said that Government inadequate allocation of resources in the implementation of vulnerable children interventions and lack of training to Childcare Workers on how to help vulnerable children was among the challenges. (9)18% respondents said that inadequate supervisory and management skills to work with vulnerable children at the KNCH was the challenge, 7(14%) respondents said that lack of team spirit among childcare workers and individual personality of vulnerable children were also the challenge, 9(18%) said that lack of transparency among the Childcare Workers and lack of trust among children and their caregivers were the challenges facing the implementation. The remaining 21 (42%) respondents were of the view that inadequate specialized skills in working with the abused or neglected children was the greatest challenge to providing services to vulnerable children.

Table 4. 17: Challenges Facing Childcare Workers in Services Provision

Respondent's perspectives	Frequency	Percent	Cumulative Percent
Government inadequate allocation of resources	4	8	8
Inadequate supervisory and management skills	9	18	26
Lack of team spirit among childcare workers	7	14	40
Lack of trust of children to their caregivers	9	18	58
Inadequate specialized skills in working with abused or neglected children	21	42	100
Total	**50**	**100**	**100**

Source: Research, (2018)
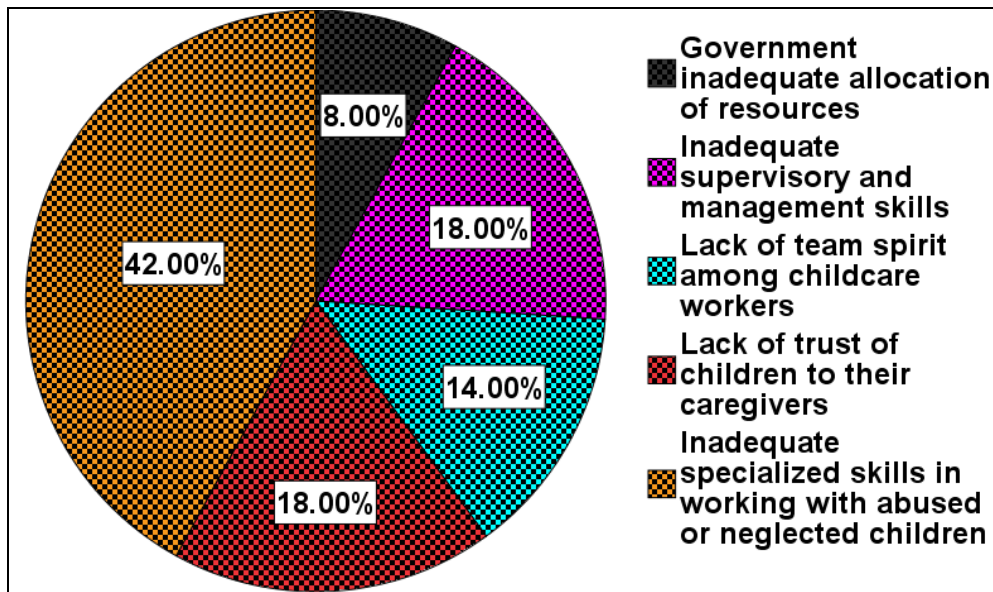
Figure 4.17: Challenges Facing Childcare Workers in Services Provision

Source: Research Data, (018) 2

The study findings in the Table 4.17 and Figure 4.17 symbolize the factors that affect the childcare workers' strength in providing child care and support services to vulnerable children including the abused or neglected children. The findings indicate the inadequacy in the competences necessary for childcare workers in working with vulnerable children.

The above findings concur with the reviewed literature (USAID, 2009), that child welfare workers in Africa, leave jobs due to dis-empowering working conditions such as limited resources for meeting even basic needs of clients and Shah (2010), revealed the new workers training concerns, that, their orientation needed to be more thorough and extensive as specifics of the tasks. Another report on the assessment of social welfare workforce in Tanzania (2012) revealed the inadequacy in the child welfare workers fluency on policies and guidelines governing their rights and practices.

However, the studies reviewed in this study did not focus specifically on the childcare workers' strength in providing child care and support services to Vulnerable Children in Tanzania.

4.6   Summary of Chapter Four

The presentation and discussion of research findings in this chapter has made the researcher in this study to successfully assess the Childcare Workers' strength in providing child care services to Vulnerable children in Tanzania basing on the findings from the field which has uncovered the reality of the real experience and therefore provide grounds to establish the general conclusion of the study.

CHAPTER FIVE

SUMMARY, CONLUSION AND RECOMMENDATIONS

5.1   Introduction

This chapter presents the summary, conclusion and recommendations derived from the study findings. The study summary includes background, literature review, methodology to data collection and analysis of the findings. Finally, the chapter makes recommendations to different stakeholders on childcare and support to vulnerable children and a way forward for further studies.

5.2   Summary of the Findings

This study was conducted at the National Children Home at Kurasini in Temeke District. The purpose of the study was to assess Childcare Workers' strength in providing childcare and support to Vulnerable Children inTanzania. Based on the purpose of the study, three specific research questions as stated in chapter one and chapter four of this study guided data collection and analysis of the findings. A qualitative study design was applied and semi-structured interviews; focus group discussions, observation and documentary review were used in data collection. The empowerment theory and attachment theories formed the theoretical framework of this study. The findings of this study are expected to bring about more awareness to the government, community, NGOs, Faith Based Organizations and child welfare stakeholders regarding the strength of Childcare Workers in providing child care and support services to vulnerable children. The findings also suggest to best deal with the problem of Vulnerable Children In Tanzania through strengthening childcare workers capacity in providing child care and support services to vulnerable children, allocation

of adequate resource, advocacy, foster care and adoption of children, family reunification and empowerment of older children and support to families in extreme poverty and the marginalized groups in the society. This study employed purposive sampling method and tools of data collection were semi-structured questionnaires with closed and open ended questions, in-depth interview guides, focus group discussion, observation and documentary methods.

On the question of childcare workers' strength in providing care and support to vulnerable children in the country, the findings showed that there was inadequate trained personnel and those who are available had limited understanding of the phenomenon of child care, child protection and the needs of vulnerable children. Most of them did not adequately defined vulnerability and the concept of vulnerable children, as well as what were the ideal care services required for them. There were no proper records on social and historical background of children and their families of origin. This also revealed that, Childcare Workers need capacity building training on childcare and to improve their understanding of the operational standards and key guiding policies.

The study revealed that the Childcare Workers' strength in providing the ideal childcare services to vulnerable children is diminished by the inadequate orientation of the newly hired staff and the lack of specialized in-service or refresher training to staff working with vulnerable children.

It was also revealed that challenges in implementing resettlement of children in Tanzania were influenced by; lack of resettlement guidelines, undefined roles between

childcare Workers and the Social welfare officers at the originating District councils and inadequate budgetary allocation from the government in facilitation of family tracing, child-family home visitations and resettlement packages.

The respondents pointed out that inadequate allocation of financial and human resources to childcare services institutions have affected the empowerment of children into responsible adults and the resettlement of children. Psychosocial support and care, counseling and guidance, vocational skills and resettlement packages to children were pointed out as an empowerment towards children resettlement and strengthening children's self-confidence to attempt self-reliance and independent living.

On the other hand, it was revealed that lack of trust among vulnerable children on their caregivers has made them to doubt on the services provided to them by childcare workers. Due to these uncertainties in the relationships, some children have lost confidence on their caregivers and make it difficult for them to assertively accept any person involved in them, even workers from the Government institutions and social welfare. Some children perceive resettlement and family reintegration initiatives not as an empowerment to them but as a punishment or a mechanism of getting rid of those who were not wanted at the children home.

The study findings revealed that Staff at Kurasini National Children Home are committed in resolving the issue of Childcare Workers' strength and inadequate competence for vulnerable children through education and training for Childcare workers, improving the organizational supervisory and management skills and

interpersonal relationships and strengthening child care interventions such as family reunification and child resettlement packages which are now not well functioning.

The study has revealed a lot of challenges to Childcare Workers in achieving the objective of optimal child growth and development. It was reported that, sometimes things were beyond the capability of the Childcare Workers in terms of management skills and resources. The activities at the Children Home were not strategically planned and well financed. Sometimes it has been very difficult to reintegrate children because of poor interpersonal relationships among Childcare workers and between them and children.

The absence of resettlement guideline including child care plans, exit strategies and unclear roles and responsibilities between the Council Social Welfare officers and Childcare Workers at Kurasini National Children Home in empowering and facilitating children for resettlement were reported to cause difficult times to Childcare Workers when it comes to family tracing, home visit, family reunification and resettlement packages to children. The Council Social Welfare officers do not provide any follow up or support after admitting children at Kurasini National Children Home.

The role of home visits, family and relative tracing has not been clearly defined to both the Social Welfare officers at Councils and Childcare Workers at the children home, therefore, there has been no adequate budget for family tracing and resettlement of children from both the MOHCDGEC and PO-RALG, the situation that mostly cause many children to grow up at the National children home without proper

empowerment for them to start independent and self-reliant life. The role to empower these children for adulthood life is being confused between the Councils' Social Welfare officers and the Childcare Workers at children homes. This can be due to inadequate supervisory and management skills of Childcare workers and for both the mother Ministries. The roles of the Ministry of Health, Community Development, Gender, Elderly and Children (MOHCDGEC) on one side and the President's Office-Regional Administration and Local Government (PO-RALG) on the other side, in the reunification of children and allocation of resources would need to be clearly defined.

The findings of this study have revealed that Children at the KNCH do not have clearly defined and budgeted future child care plans, a condition which makes them to grow to adulthood while still at the children home, a place which was meant for temporary or short-term care. The study findings have evidently blamed the authorities responsible for Kurasini National Children Home for their failure to planning for the future of children, the condition that has been causing children to loss trust and become adults while still dependent at the home. It was also reported during this study that, there were times children at Kurasini National Children Home wanted to be joined with their families/relatives but failed to do so because the Children Home Management did not have a budget to facilitate their reunification.

The study findings also revealed that family tracing and child reunification did not succeed sometimes because of lack of proper children records within the responsible authorities, and the role overlaps between the Childcare Workers at the National children home and the Social Welfare officers from the District Councils where children originated.

5.3   Conclusion

Given the background of the study, description of the study problem, identified study methodology and the study findings as presented and discussed in chapter four, it can be concluded that the responsibility of care for vulnerable children does not end with the Childcare service providers at the children home only. Rather, it goes as a chain that involves different actors including decision or policy makers on issues of children to provide supervisory role, managers of children homes and those involved in provision of daily care services to vulnerable children. It begins with the authorities responsible for planning and budgeting, formulation of regulations and guidelines and allocation of adequate resources for child maintenance, education, family tracing, family reunification and child resettlement packages. The failure of any actor in the chain would mean a failure to the whole system or chain.

The case of Childcare Workers at Kurasini National Children Home has manifested these facts that the weakness in the provision of child care and support services to vulnerable children has been caused by multiple reasons. The reasons include the lack of orientation to newly hired staff, dissemination of guidelines and standard operational procedures. There was inadequate training to the Councils' Social Welfare officers on their roles as far as the records keeping, follow-up and resettlement of vulnerable children are concern and on the roles of Childcare Workers on the other hand. Inadequate allocation of resources by both PO-RALG and MOHCDGEC, lack of specialized on job training to hired Childcare Workers and Social Welfare officers in councils, educational and training backgrounds of Childcare Workers, leadership, organizational and individual self-management and interpersonal relationships also were pointed out.

The capacity building training for Childcare Workers on issues related to their roles and responsibilities in the care and support of vulnerable children including children living in residential care like children at Kurasini National Children Home were not given a paramount importance. The training that could improve their understanding on child care, child protection and the holistic nature of needs of children, children home regulations, policy guidelines including the Law of the Child Act and training of Childcare Workers on child developmental issues. The training on attachment relationships between children and their caregivers and community and on child psychosocial care and support were thought could sustainably enhance the strength of Childcare Workers in providing child care and support services to vulnerable children in the country.

5.4   Recommendations

This study has established that the Childcare Workers' strength in providing childcare and support to vulnerable in Tanzania is not given its due attention. The policy guidelines such as the National Guidelines for Improving Quality of Care, Support, and Protection for Most Vulnerable Children in Tanzania that was formulated to guide child care service provision to vulnerable children in the country is not widely disseminated to reach the front-line staff including Childcare Workers working with vulnerable children in approved residential children homes and the Social Welfare officers in the councils.

The enforcement of policy guidelines is almost not taking place in the respective places. The rights and needs of vulnerable children including those living in institutional care are seen as marginal to development plans in the local and central

government budgets. The demarcations on the roles of Childcare Workers working with children living in institutional care and council Social Welfare officers have not been well established or not laid down, therefore weakens their cooperation and causes overlaps in the implementation of their roles and duties in working with vulnerable children placed in institutional care. Childcare Workers and council Social Welfare officers operate differently without the commonly agreed roles and approaches to intervention strategies in working with vulnerable children. The Childcare Workers and Social Welfare officers in councils are not given induction course on issues of vulnerable children or well oriented on the roles and responsibilities upon their first appointment or new job placements.

The case of Childcare Workers at KNCH has well represented the situation of children living in institutional care in the country and therefore calls for the attention of government and child-concerned NGOs and FBOs, child welfare implementing Partners and Training institutions that produce Childcare Workers or Social Welfare officers and to individual Childcare Workers to take deliberate actions to address the factors affecting Childcare Workers' strength in providing desired child care and support to vulnerable children in the country. Basing on the ongoing discussed scenarios, the following are the recommendations centered toward the strengthening of Childcare Workers' competences in providing childcare and support to vulnerable children in the country.

5.4.1 Recommendation to the Government

There is a need for the government to prepare and give directives to ensure that a Care Plan for each child in the institutional care is compulsory. There is a need to change

the mind set of all those who are concerned with vulnerable children. The Department of Social Welfare as the supervisor need to change their mind set and consider children in the children homes as children in need of special attention and confidently prepare them for the self-reliant and independent living and send-off them the way other children are sent-off. There is a need for the Department of social welfare to conduct a deliberate or special induction course to social welfare staff responsible for child welfare and Childcare Workers to improve their understanding on the care for children with special needs, child protection and ensure that children are able to get their holistic needs being physical needs, social needs, spiritual and emotional needs.

There is a need for the government to conduct orientation of newly employed staff to give them a special and deeper understanding of the type of vulnerability and vulnerable children and the work they will be involved in with vulnerable children as from the beginning when the child is admitted, as well as giving them the daily operational guide and ensure that Childcare Workers upon taking a new work or post with children are given clear instructions and descriptions of their roles with children on what exactly they are supposed to be doing or not doing with the children and also get time to work under mentors.

There is a need for the government to formulate and disseminate Standard Operational Procedures (SOP) to guide Social Welfare officers and Childcare Workers in implementing their roles including admission in residential care and resettlement of vulnerable children. There is a need for both PO-RALG and MOHCDGEC to allocate adequate resources for family tracing, reunification and child resettlement packages.

There is a need for the government to enforce the implementation of children homes' regulations to ensure proper admission of children to children homes and resettlement of children. There is a need for the Department of Social welfare to conduct on-job training to Social Welfare officers and Childcare Workers on emerging social welfare issues and new policy directives and leadership.

The government should put in place a contractual framework to be entered into between the council's Social Welfare officers and children home managers at the point of admission of children for effective implementation of their roles with regard to family tracing, reunification and children resettlement packages. The councils where children originated should have the primary responsibility to facilitate children resettlement in terms of budgetary assistance to facilitate family tracing, resettlement packages and follow-up support to the reunified children.

The government should support families in extreme poverty to reduce conditions that lead to child vulnerability through small income generating activities. The Government should consider giving motivation and incentive to Childcare Workers and/or giving special care or recognition to child caretakers. They are working with children with special needs; therefore, due to the nature of their work they need to be given special care. They work extra time but are not paid overtimes allowances.

Lastly, the government should ensure effective coordination of efforts from all child welfare partners in order to easily evaluate their efforts in terms of child caregivers' skills, quality of service, resources allocation and coverage. For example, to form a child protection committee comprising of representatives from Social welfare,

community development, local government/councilors, non-governmental and faith-based organizations that would identify, organize and coordinate all child welfare actors in the area/district.

5.4.2   Recommendation to Non-Government Organizations

Non-Government Organizations should know the social welfare guiding policies and assist in dissemination to their forums and ensure adherence to it. Non-Government Organizations should enhance community participation in childcare workers capacity strengthening. Non-Government Organizations should collaborate among themselves and complement government efforts in staff capacity building to increase their competence in providing desired child care services to vulnerable children. Non-Government Organizations should participate in community awareness rising regarding the care and protection of children rights including children living in institutional care. Non-Government Organizations should invest in childcare workers capacity strengthening and production of qualified personnel to complement the role of government in protecting the rights of vulnerable children.

5.4.3   Recommendation to Faith Based Organizations

Faith Based Organizations should continue on sensitization of members and the general community on widely acceptable moral standards including care for the vulnerable population in the community. Faith Based Organizations should help the most vulnerable population in the community including families in extreme poverty and vulnerable children. Faith Based Organizations should collaborate with government in providing childcare services to vulnerable children.

5.4.4 Recommendation to Community Members

The community should take the issue of child care as a collective responsibility and believe in community parenting where children in the community will have caretakers more than their own biological or adoptive parents such as members of the extended family, close friends or other parents in the community who help each other with their children. The community should cooperate in implementing interventions established to protect children rights including capacity development for personnel working with children in need of special care. The community should take deliberate actions to help most vulnerable children in the community including paying visitations to children living in institutional care like KNCH. The community should report to responsible authorities all incidents of child abuse or child abandonment and neglect and make follow-ups on children rescued through community involvements.

5.4.5 Recommendation to Childcare Workers

Childcare Workers should look for more educational opportunities to educate themselves to the best of their abilities and use their education for the benefit of all, particularly children placed under their care. Childcare Workers need to understand that children's needs go beyond food, education, clothes, medication and sleeping place to emotional, social, safety, esteem, spiritual and self-actualization. Childcare Workers in the delivery of services to vulnerable children should look for their clients' satisfaction and treat them with courtesy. Childcare Workers should deliberately set adequate time of interacting with children under their care. Childcare Workers should be empathetic, give children assurance and be responsive to the needs of children.

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APPENDICES

Appendix I: Questionnaires

INTRODUCTION

I am Simon B. Panga, a student enrolled for a Master's degree in Social Work of the Open University of Tanzania. I kindly request your participation in this research study regarding Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. The results of this study will help me in the completion of part of my academic field which will be submitted in partial fulfillment of the requirements for the attainment of the Master's degree in Social Work. Feel free to participate and any information you will provide will remain confidential. I am interested collecting data about Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. I have Selected Kurasini National Children Home in Temeke District in Dar es Salaam as a Case Study. I would like to ask you few questions and would be very grateful if you would spend a little time talking with me. However, your name will not be indicated anywhere on this paper. Your participation is voluntary, and you are not forced to answer any questions you do not want to answer. Do I have your permission to continue with questions? Yes…………

No…………..

If yes, please participate with me in answering the following questions:-

1. How old are you?

i)   16- 18 yrs   (   )

ii)   19 – 25 yrs   (   )

2.   What is the Region that you were born? …

3.   When you were first admitted at Kurasini National Children Home?

4.   Why were you brought to Kurasini National Children Home?

i)   Poverty/hunger   (   )

ii)   Physical violence/sexual harassment   (   )

iii)   Family conflict, Separation (   )

iv)   Peer groups (   )

v)   Death of parents (   )

vi)   Others (specify)   ....

5.   What are your current basic needs?

i)   Food, shelter, clothes   (   )

ii)   Education   (   )

iii)   Medication   (   )

iv)   Security   (   )

v)   Self - employment   (   )

vi)   All the above (   )

vii)   Others, specify

6.   What is your level of Education:

i)   No education   (   )

ii)   Have not completed primary school (   )

iii)   Still in school   (   )

iv)   Completed primary education   (   )

v)   Secondary education   (   )

vi)   Others (specify)

7.   What is your opinion about the life at Kurasini National Children Home?

8.   Are there any problems that you face during your stay at Kurasini National Children Home?

(   ) Yes

(   ) No

9. If yes, please indicate

i)

ii)

10. What kind of Services is provided to you by Childcare Workers at National Children Home?

11. Are you satisfied with the services you receive at Kurasini National Children Home? Please explain in relation to your answer

If Yes, please explain………………………………

If No, please explain why ……………………………………

12. Do you think Childcare Workers are skilled enough to provide child care services?

i)

ii)

iii)

13. If it happens you get an opportunity to be resettled with your family, will you be ready?

YES   (   )

NO   (   )

Explain in relation to your answer ………………………………………..

Yes: Explain……………………………………………………………………

No: Explain ………………………………………………………………….

14.   What are your future plans?

15.   Do you remember any time in the history of your stay at Kurasini National

Children when you were mistreated?

Please, explain in relation to you answer;

i)

ii)

16.   What is your opinion regarding your ability to start a self-governing,

independent and self-reliant life after your discharge from Kurasini National Children

Home?

(   ) Excellent

(   ) Good

(   ) Fair

(   ) Poor

If the answer for the 14 above is "Fair or Poor" what are the deficiencies?

17. What would you recommend to the Government to do regarding the care to

Vulnerable Children at Kurasini National Children home?

i)

ii)

18. What are your comments to the Family and Community members in order to

reduce the plight of vulnerable children in the country?

i)

ii)

19. What would you recommend to the Childcare Workers to do in order to make the life better for children here at Kurasini National children home?

i)

ii)

iii)

20. Do you think the Kurasini National Children Home lack anything they would need in order to provide childcare services that would help children grow into responsible and caring adults?

Please, explain in relation to your answer;

QUESTIONNAIRE FOR CHILDCARE WORKERS

1.0 INTRODUCTION

I am Simon B. Panga, a student enrolled for a master's degree in Social Work of the Open University of Tanzania. I kindly request your participation in this research study regarding Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. The results of this study will help me in the completion of part of my academic field which will be submitted in partial fulfillment of the requirements for the attainment of the master's degree in Social Work. Feel free to participate and any information you will provide will remain confidential. I am interested collecting data about Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. I have Selected Kurasini National Children Home in Temeke District in Dar es Salaam as a Case Study. I

therefore, would like to request you to kindly assist me by filling in the questionnaire hereunder as accurately and frankly as possible. I ensure you that the information provided will be used for the indicated purpose only. However, your name will not be indicated anywhere on this paper. Your participation is voluntary, and you are not forced to answer any questions you do not want to answer.

2.0 PARTICULARS OF THE CHILDCARE WORKER

2.1 Name and Address

Name (optional)………………………………………………………

Department …………………………………………………..

2.2 Position Held (Please indicate current designation); ………………………

2.3 Education Background and Specialization

2.3.1 Qualifications (your level of education and training)……………………………..

2.3.2 Area of specialization …………………………………………

2.4 Working Experience

2.4.1 How long have you worked with vulnerable children? ………….

2.4.2 Were there any specified functions you performed while working with vulnerable children?

3.0 GENERAL INFORMATION ON KURASINI NATIONAL CHILDREN HOME

1. When was the Kurasini National Children Home established? ………………………………

2. What was the purpose for the establishment Kurasini National Children Home? ……………

3.Do you feel that you have the necessary and enough competencies or skills that you need in providing the desired childcare services to enable children grow into responsible, self-governing, self-regulating, caring and self-reliant adults who can provide for themselves after leaving the children home?

(   ) Yes

(   ) Partially

(   ) No

If Yes, please explain with indicators ……………………………………..

 If the answer is "Partially" or "No", what are the deficiencies?

4. What is your understanding on these terms; vulnerability, vulnerable children, child care, protection and the needs of children at the National Children Home?

5. What are the specified empowerment/learning activities and specific services provided for children at Kurasini National Children home? ………

(a). Learning activities provided at Kurasini National Children home …………

     (i)……………………………………………………………………………

     (ii)……………………………………………………………………………

     (iii)……………………………………………………………………………

(b). what is the quality of the learning activities?

   (   ) Excellent

   (   ) Good

   (   ) Fair

   (   ) Poor

If the answer to above 6(b) is "Fair" or "Poor", what are the deficiencies?

  (c). Services provided for children at Kurasini National Children home

(i)…………………………………………………………………………………

(ii)…………………………………………………………………………………

(iii)…………………………………………………………………………………

6. Do you feel that the services you provide at Kurasini National Children home adequately enable children to grow into responsible, caring and self-reliant adults?

(   ) Yes

(   ) Partially

(   ) No

If the answer to 7 above is "NO" or "PARTIALLY", what are the deficiencies?

7. Are there any policies that guide service provision to the children in the home?

(   ) Yes

(   ) No

8. If the answer to 10 above is "YES", please mention; …………………..

9. How effective are the policies in guiding service provision to the children?

(   ) Excellent

(   ) Good

(   ) Fair

(   ) Poor

10. If the answer to 12 above is "Fair" or "Poor", please, indicate what the deficiencies are;

11. Does Kurasini National Children home have family reunification or resettlement programme?

(   ) Yes

(   ) No

If yes, how successful is the programme?

If No, briefly explain what the challenges are

12. Are the children ready to reunite with their families/communities when their time to stay at the Kurasini National Children Home is over?

(   ) Yes

(   ) No

If No, why ………………………………………………………………….

13. What are the successes stories that you can proudly tell about Kurasini National Children Home as an intervention to reduce the plight of vulnerable children in the country?

14. What are the challenges that you face in providing services to vulnerable children at Kurasini National Children Home? Explain briefly

15.In your opinion, what could be done to address the challenges you explained in question 14 above to make Kurasini National Children Home be able to help children under their care to grow into responsible and caring adults to provide for themselves?

16. What is your opinion regarding the ability of the older children or youth to start a self-governing, independent and self-reliant life after the discharge from Kurasini National Children Home?

(   ) Excellent

(   ) Good

(   ) Fair

(   ) Poor

17.   If the answer to 31 above is "Fair" or "Poor", what are the deficiencies?

18. What are your recommendations/requests to the Government regarding what could enable Childcare Workers to provide the desired childcare services to vulnerable children? Explain briefly…………………

19. What would you recommendation to the Civil Society organizations regarding the provision of the desired childcare services to vulnerable children Vulnerable Children?

20. What are your recommendations to the family and community members in order to reduce the problem of Vulnerable Children in Tanzania?

i)

ii)

iii)

Thank you for your cooperation.

Appendix II: Questionnaire for the Social Welfare Officers and Human Rights Staff

1.0 INTRODUCTION

I am Simon B. Panga, a student enrolled for a Master's degree in Social Work of the Open University of Tanzania. I kindly request your participation in this research study regarding Childcare Workers' competence in providing desired child care services among VULNERABLE CHILDREN IN TANZANIA. The results of this study will help me in the completion of part of my academic field which will be submitted in partial fulfillment of the requirements for the attainment of the Master's degree in Social Work. Feel free to participate and any information you will provide will remain confidential. I am interested collecting data about Childcare Workers' competence in providing desired child care services among VULNERABLE CHILDREN IN TANZANIA. I have Selected Kurasini National Children Home in Temeke District in Dar es Salaam as a Case Study. I therefore, would like to request you to kindly assist me by filling in the questionnaire hereunder as accurately and frankly as possible. I ensure you that the information provided will be used for the indicated purpose only. However, your name will not be indicated anywhere on this paper. Your participation is voluntary, and you are not forced to answer any questions you do not want to answer.

2.0 RESPONDENT'S PARTICULARS: -

2.1 Name and Address

Name (optional)……………………………………………………

Department …………………………………………..

2.2 Position Held (current designation); …………………………………………

2.3 Education Background and Specialization

2.3.1 Qualifications (level of education and training)……………………………..

2.3.2 Area of specialization …………………………………………………

2.4 Working Experience

2.4.1 How long have you worked within the Child Welfare System??

2.4.2 Were there any specified functions you performed within the Child Welfare System?

3.0 GENERAL INFORMATION ON KURASINI NATIONAL CHILDREN HOME

3.1. When was the Kurasini National Children Home established?

3.2. How long have you known the Kurasini National Children Home?

3.3 What was the purpose for the establishment Kurasini National Children Home?

3.4. What learning activities are provided for children at Kurasini National Children home?

3.5 What is the quality of the learning activities?

      (   ) Excellent

      (   ) Good

      (   ) Fair

      (   ) Poor

If the answer to above quality of the learning activities is "Fair" or "Poor", what are the deficiencies? ……………………………………………………………………….

3.6. What specific Services are provided for children at Kurasini National Children home?

3.7. Do you feel that the services provided at Kurasini National Children home adequately enable   children to grow into responsible, self-governing, self-regulating and caring adults?

(   ) Yes

(   ) Partially

(   ) No

3.8. If the answer to 3.7 above is "NO" or "PARTIALLY", what are the deficiencies?

3.9. Are there any policies that guide the establishment and management/services provision to vulnerable children in the children home?

(   ) Yes

(   ) No

 If the answer to 3.9 above is "YES", please mention such policies;

(i)……………………………………………………………………

(ii)……………………………………………………………………….

(iii)…………………………………………………………………………………

……

3.10. How effective are the policies in guiding service provision to vulnerable children?

(   ) Excellent

(   ) Good

(   ) Fair

(   ) Poor

If the answer to 3.10 above is "Fair" or "Poor", what are the deficiencies?

3.11. In your opinion, how is the competence of the Childcare Workers at Kurasini National children home in providing the desired childcare services to the vulnerable children.

( ) Excellent

( ) Good

( ) Fair

( ) Poor

If the answer to 3.11 above is "Partially or "No", what are the deficiencies?

3.12. How would you describe adequacy of the qualified Childcare Workers at Kurasini National children in terms of size versus number of vulnerable children cared in the home?

( ) The right size

( ) Large size

( ) Small for the number of children

3.13. What is your opinion regarding the ability of the Childcare Workers at Kurasini National Children home to prepare vulnerable children to start a self-governing, independent and self-reliant life after their discharge from the Children Home?

( ) Excellent

( ) Good

( ) Fair

( ) Poor

If the answer to above 3.13 is "Fair" or "Poor", please explain why you think so!

3.14. What are the successes stories that you can proudly give about Kurasini National Children home as a public and national intervention to reduce the plight of vulnerable children in the country?

3.15. What are the challenges that Kurasini National Children Home has encountered in an effort to reduce the plight of vulnerable children in the country?

3.16. What intervention strategies that you could recommend to the government to ensure children in institutional care grow into responsible, self-governing and self-regulating adults

Thank you for your cooperation

Appendix III: Focus Group Guide: Staff Members Participating in the Study

The following is a guide: This research method will bring together the eight (8) staff members participating in the study to discuss the research topic in which a researcher as a moderator will supply the discussion questions and monitor the discussion. The participants' informed consent will be obtained and confidentiality of information will be assured to each participant. The participants will be provided with an opportunity to ask any questions. All discussion questions will be asked in a given order to maintain the flow of discussion.

The discussion will start by establishing ground rules among which will include that during the discussion there will be no right or wrong answers since every idea will be counted, that the researcher is interested in knowing what each of the participants have to share and therefore, they must be frank and free to share their point of views and that participants shall respect of each other's views and whatever is discussed in the group should not be repeated to the people outside the group. The group setting will be organized in a circle and have each participant to introduce themselves as well as the researcher and my role as a moderator to introduce the topic of the discussion.

After the introduction, the researcher will introduce the discussion questions as the following:-

1. What do you think about Childcare Workers' competence in providing desired child care services among vulnerable children in the country?

2. To what extend do Childcare Workers fulfill their obligation to vulnerable children in the country?

3. To what extent has intervention practices provided to children at Kurasini National Children Home has improved life of vulnerable children after leaving the Children Home?

4. Do you think the Childcare Workers have the required competences to greatly help in making vulnerable children grow into responsible adults and self-governing, self-regulating and able to provide for themselves?

5. Quality service is one of the targets in each organization. To what extent do Childcare Workers at Kurasini National Children Home provide quality services? What has been improved this year as compared to the previous years in terms of Quality service?

6. Briefly explain challenges facing Childcare Workers in providing services to vulnerable children?

7. To resolve the Challenges identified in Qn.6, what would be your suggestions?

8. Let's summarize some of the key points from our discussion. Is there anything else you would like to share?

9. Is there any question?

   Thank you for taking time to participate in this discussion.

FOCUS GROUP GUIDE: EIGHT (8) CHILDREN ABOVE 16 YEARS

The following is a guide: This research method will bring together the eight (8) children above 16 years participating in the study to discuss the research topic in which a researcher as a moderator will supply the discussion questions and monitor the discussion. The participants' informed consent will be obtained, and confidentiality of information will be assured to each participant. The participants will

be provided with an opportunity to ask any questions. All discussion questions will be asked in a given order to maintain the flow of discussion.

The discussion will start by establishing ground rules among which will include that during the discussion there will be no right or wrong answers since every idea will be counted, that the researcher is interested in knowing what each of the participants have to share and therefore, they must be frank and free to share their point of views and that participants shall respect of each other's views and whatever is discussed in the group should not be repeated to the people outside the group. The group setting will be organized in a circle and have each participant to introduce themselves as well as the researcher and my role as a moderator to introduce the topic of the discussion.

After the introduction, the researcher will introduce the discussion questions as the following: -

1. What types of services you were provided at Kurasini National children home have helped you?

2. What do you think about the care and services you received from the staff at Kurasini National children home?

3. To what extent has the services provided to children at Kurasini National Children Home has improved life of children after leaving the Children Home?

4. Do you think what could have been added to the services you received that could help you to grow into responsible adult and self-governing, self-regulating and self-reliant?

5. Quality service is one of the targets in each organization. What do you think about the quality of care and services you received at Kurasini National Children Home?

What has been improved this year as compared to the previous years in terms of Quality service?

6.Briefly explain challenges facing vulnerable children as a result of Childcare Workers ' personal behaviors in providing services to vulnerable children?

7. To resolve the Challenges identified in Qn.6, what would be your suggestions?

8. Let's summarize some of the key points from our discussion. Is there anything else you would like to share?

9.   Is there any question?

Thank you for taking time to participate in this discussion.

Appendix IV: In-Depth Interview for Vulnerable Children at Kurasini National Children Home

The following is a guide: The participants' informed consent will be obtained and confidentiality of information will be assured to the participant. The participant will be provided with an opportunity to ask any questions. All discussion questions will be asked in a given order to maintain the flow of discussion.

The discussion will start by establishing ground rules among which will include that during the discussion there will be no right or wrong answers.

This will be followed by the introduction as the following:-

I am Simon B. Panga, a student enrolled for a Master's degree in Social Work of the Open University of Tanzania. I kindly request your participation in this research study regarding Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. The results of this study will help me in the completion of part of my academic field which will be submitted in partial fulfillment of the requirements for the attainment of the Master's degree. Feel free to participate and any information you will provide will remain confidential. I am interested collecting data about Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. I have Selected Kurasini National Children Home in Temeke District in Dar es Salaam as a Case Study. I would like to ask you few questions and would be very grateful if you would spend a little time talking with me. However, your name will not be indicated anywhere on this paper. Your participation is voluntary, and you are not forced to answer any questions you do not want to answer. Do I have your permission to continue with questions?

If yes, please participate with me in answering the following questions:-

1.   How old are you? (Probes, on generation)

2.   What is the Region that you were born? …………………………………

3.   When you were first admitted at Kurasini National Children Home? ………

4.   Why were you brought to Kurasini National Children Home?

5.   What are your current basic needs?

6.   What is your level of Education?

7.   What is your opinion about the life at Kurasini National Children Home?

8.   Are there any problems that you face during your stay at Kurasini National Children Home?

9. What kind of Services is provided to you by Child Care Workers at National Children Home?

10. Are you satisfied with the services you receive at Kurasini National Children Home? Please explain in relation to your answer

11. If it happens you get an opportunity to be resettled with your family, will you be ready?

YES   (   )   NO   (   )

Please explain in relation to your answer

12. What are your future plans?

13. What is your opinion regarding your ability to start a self-governing independent and self-reliant life after your discharge from Kurasini National Children Home? Please explain why you think so!

14. What would you recommendation to the Government to do regarding the care to Vulnerable Children?

15. What are your comments to the Family and Community members in order to reduce the plight of vulnerable children in the country?

16. What would you recommend to the Childcare Workers in order to make life better for children here at Kurasini National children home?

17. Do you think Childcare Workers lack anything that you would like them to have so that they provide better services to children at Kurasini National Children Home? Please Explain

18. Do you think the Kurasini National Children Home lack anything that you would like them to be having so that they provide better childcare services? Please Explain

19. Do you remember any time in the history of your stay at Kurasini National Children when you were mistreated? Please Explain

20. What would you recommend to Kurasini National Children Home to do in order to help children to grow into responsible and caring adults? Please Explain ……

Thank you for taking time to participate in this discussion.

Appendix V: In-Depth Interview For Childcare Workers, Social Welfare Officers and Human Rights Staff

The following is a guide: The participants' informed consent will be obtained and confidentiality of information will be assured to the participant. The discussion will start by researcher's self- introduction and establishing ground rules among which will include that there will be no right or wrong answers during the discussion since every idea will be counted, and that the researcher is interested in knowing what each of the participants have to share. The participant will be provided with the freedom to answer any questions. All discussion questions will be asked in a given order to maintain the flow of discussion.

The following is the self-introduction of the researcher:

I am Simon B. Panga, a student enrolled for a Master's degree in Social Work of the Open University of Tanzania. I kindly request your participation in this research study regarding Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania. The results of this study will help me in the completion of part of my academic field which will be submitted in partial fulfillment of the requirements for the attainment of the Master's degree. Feel free to participate and any information you will provide will remain confidential. I am interested in collecting data about Childcare Workers' competence in providing desired child care services among Vulnerable Children in Tanzania.

I have Selected Kurasini National Children Home in Temeke District in Dar es Salaam as a Case Study. I would like to ask you few questions and would be very

grateful if you would spend a little time talking with me. However, your name will not be indicated anywhere on this paper. Your participation is voluntary, and you are not forced to answer any questions you do not want to answer. Do I have your permission to continue with questions?

If yes, please participate with me in answering the following questions:-

1. What is the purpose for the establishment of Kurasini National children home?

2. What types of services are provided to children at Kurasini National children home?

3. To what extent the objectives for the establishment of Kurasini National children home have been achieved?

4. What are the normal daily duties of the Childcare worker at the National children home?

5. What qualification a Childcare worker must have in order to effectively perform their daily duties?

6. What is your understanding on these terms; child care, protection and needs of children at the National Children Home?

7. What challenges do the Childcare Workers face during the delivery of their daily duties? Why?

8. What measures have been put in place in addressing the challenges that have been encountered by Childcare Workers when implementing their duties?

9. What would you recommend to the Department of Social Welfare or the Ministry of Health, Community Development, Gender, Elderly and Children to improve service provision to vulnerable children at Kurasini National children home?

10. What is your opinion regarding the ability of the children who have been graduated from Kurasini national children home in starting independent and self-reliant living?

11.What is lacking that you would like to suggest to be added to improve the services provided to vulnerable children at the National children home that would enable them to grow into responsible adults and able to provide for themselves?

12. Let's summarize some of the key points from our discussion. Is there anything else you would like to share?

13. Is there any question?

Thank you for taking time to participate in this discussion.

Appendix VI: Observational Research Checklist for the Researcher and the Research Assistants

The following is an observation checklist: The researcher planned things to be observed during data collection and therefore designed an observational checklist to guide the process. This observational checklist will guide the researcher and the research assistants during the data collection to achieve the following:-

1. To observe and understand the participants' world by being physically present at the research setting.

2. To observe the daily normal duties of childcare workers at Kurasini national children home

3. To observe services provided to children at Kurasini National children home

4. To observe and learn about the activities/issues that the participants may have difficulties talking about during the interview or in their response to the research questionnaire.

5. To verify participants' nonverbal expression of feelings

6. To determine who interact with who in the study setting and how

7. To learn what is important to the participants at the research setting

8. To verify what is learned from the participants during the interviews

9. To verify the findings derived from one source of data with those from another source or method of data collection

10. To observe participants' behavior to determine how they react to certain issues

11. To observe how participants express themselves in certain situations

12. Observe the participants to determine whether behavioural infraction occurs and the situations or activities which precipitate certain infractions

13. Learn how much time is given to or spent in various learning activities

14. Observe how the food is prepared and share among children

15. Learn how the participants interact at the research setting and how their daily activities are organized and prioritized

16. Learn what makes appropriate research questions and how to best ask them

Appendix VII: Research Clearance Letters

THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF HEALTH, COMMUNITY DEVELOPMENT, GENDER, ELDERLY
AND CHILDREN,
(COMMUNITY DEVELOPMENT)

Phone: 255-26-2963341/2963342/2963346
Fax 255-26-2963348
Emai: ps@communitydevelopment.go.tz
Website:www.mcdgc.go.tz

(All letters should be addressed to
the permanent Secretary)

University of Dodoma,
Faculty of Social Science
and Humanities,
Building No. 11,
P.O BOX. 573,
40478 DODOMA

Ref. Na. ....

23/02/2018

THE VICE CHANCELLOR,
OPEN UNIVERSITY OF TANZANIA
P.O BOX 23409
DAR ES SALAAMA

RE: RESEARCH CLEARANCE

The above subject refers

Reference is hereby taken to your letter of 07/02/2018 regarding the above subject.

The permit has been granted for Simon B. Panga to conduct a research on the assessment of

childcare workers' competence in providing child care services among vulnerable children in

Tanzania at Kurasini National Children Home as you so requested.

This office will provide the necessary support if any. Hope I will be informed when the student is

done and perhaps share with me the research findings.

Best wishes

D. D. Lumelezi
For **THE PERMANENT SECRETARY**

CC: THE MANAGER
    KURASINI NATIONAL CHILDREN HOME
    D'SALAAM ------- Please provide the necessary support

THE OPEN UNIVERSITY OF TANZANIA

DIRECTORATE OF RESEARCH, PUBLICATIONS, AND POSTGRADUATE STUDIES

P.O. Box 23409 Fax: 255-22-2668759Dar es
Salaam, Tanzania,
http://www.out.ac.tz

Tel: 255-22-2666752/2668445 ext.2101
Fax: 255-22-2668759,
E-mail: drpc@out.ac.tz

07/02/2018

To Permanent Secretary

Ministry of Health, Community Development, Gender, Elderly and Children

P.O.Box 573

Dodoma

Tanzania

RE: RESEARCH CLEARANCE

The Open University of Tanzania was established by an act of Parliament no. 17 of 1992. The act became operational on the 1st March 1993 by public notes No. 55 in the official Gazette. Act number 7 of 1992 has now been replaced by the Open University of Tanzania charter which is in line the university act of 2005. The charter became operational on 1st January 2007. One of the mission objectives of the university is to generate and apply knowledge through research. For this reason staff and students undertake research activities from time to time.

To facilitate the research function, the vice chancellor of the Open University of Tanzania was empowered to issue a research clearance to both staff and students of the university on behalf of the government of Tanzania and the Tanzania Commission of Science and Technology.
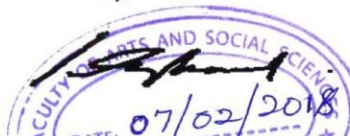
The purpose of this letter is to introduce to you **Mr.Simon, B. Panga;HD/A/326/T.13,**who is a Master student at the Open University of Tanzania. By this letter, **Mr.Simon, B. Panga** has been granted clearance to conduct research in the country. The title of her research is **"Assessment of Childcare Workers' Competence in Providing Child Care Services among Vulnerable Children in Tanzania".** The research will be conducted in Temeke district (Kurasini National Children's Home).The period which this permission has been granted is from 02/01/ 2018 to 26/02/2018.
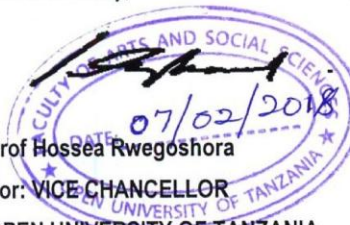
In case you need anyfurther information, please contact:

The Deputy Vice Chancellor (Academic); The Open University of Tanzania; P.O. Box 23409; Dar es Salaam. Tel: 022-2-2668820

We thank you in advance for your cooperation and facilitation of this research activity.

Yours sincerely,

07/02/2018

Prof Hossea Rwegoshora

For: VICE CHANCELLOR

OPEN UNIVERSITY OF TANZANIA

ZANZIBAR AIDS COMMISSION
PEMBA.

Tel: +255 2452508, P.O.Box 189 Pemba - Zanzibar, Tanzania - Email: zacpemba@gmail.com

SVPO.P/ZAC/TR.10/VOL.II/12   09/08/2017

Kwa yeyote anaehusika

YAH: KUFANYA UTAFITI JUU YA MASUALA YA UKIMWI KWA ND.
MOH'D JUMA KHAMIS

Tafadhali husika na mada ya hapo juu .

Mtajwa hapo juu ni mwanafunzi wa Chuo Kikuu Huria tawi la Pemba , akisomea shahada ya uzamili ya ustawi wa Jamii (Master of Art in Socio Works) . Kwa hivi sasa anafanya utafiti juu ya masuala ya UKIMWI yanayoangalia changamoto zinazowakabili watu wanaoishi na maambuki ya Virusi vya UKIMWI

Mada yake ni muhimu sana na inaweza kusaidia kupata taarifa za msingi ambazo zinahitajika katika kupanga mipango mbalimbali ya kuwafikia watu wanaoishi na maambukizi ya virusi vya UKIMWI

Kwa barua hii , tunaomba umpatie mashirikiano yatakayomuwezesha kukusanya taarifa za msingi ili kukamilisha utafiti wake

Natanguliza shukurani za dhati kwako nikitegemea kwamba utampatia mashirikiano

Ahsante

....

Ali Mbarouk Omar
/ MRATIBU – TUME YA UKIMWI - PEMBA

Fight AIDS
Piga vita UKIMWI

The Open University of Tanzania
Pemba - Branch
P.O.Box 227,
Tel: +255 024-2452072
Fax: +255 024-2452223
E-mail: drcpemba@out.ac.tz

Chuo Kikuu Huria cha Tanzania
Kituo cha Pemba
S.L.P 227
Simu: +255 024-2452072
Fax: +255 024-2452223
E-mail: drcpemba@out.ac.tz

07/08/2017

To:

~~DIRECTOR~~ *COORDINATOR*

ZANZIBAR AIDS COMMISSION (ZAC)

Pemba Office

REQUEST FOR PERMISSION TO CONDUCT RESEARCH FOR MR. MOH'D JUMA KHAMIS REG. NO. PG 20150752

The Open University of Tanzania is a Public University which was established by Act of Parliament No. 17 0f 1992. The above mentioned student is our student taking Master of Social work. According to our regulation, all students taking Master of Social work must conduct research in this respective field as compulsory for them to graduate.

On this ground we write to request your office to allow this student to collect data in southern of Pemba Island. His research topic is **TO ASSESS CHALLENGES FACING PEOPLE LIVING WITH HIV IN SOUTHERN OF PEMBA ISLAND**. He expects to be in filed from 10th August to 30th September 2017.

Your permission to conduct this study will be greatly appreciated.

For any query you may contact us through drcpemba@out.ac.tz or 0777 424 767

Thank you

The Open University of Tanzania

NASSOR A. SULEIMAN

Acting Director

Pemba Coordination Centre

Appendix VIII: Plagiarism Report

ASSESSMENT OF CHILDCARE WORKERS' STRENGTH IN
PROVIDING CARE AND SUPPORT TO VULNERABLE
CHILDREN IN TANZANIA: A CASE OF KURASINI NATIONAL
CHILDREN HOME IN TEMEKE DISTRICT