

ACADEMIC WELLBEING OF CHILD VICTIMS OF THE 2011 FLOODS:

A CASE OF MJI MPYA MABWEPANDE

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**A DISSERTATION SUBMITTED IN PARTIAL FULFILMENT OF THE
REQUIREMENTS FOR THE DEGREE OF MASTER OF SOCIAL WORK OF
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CERTIFICATION

The undersigned certifies that she has read and hereby recommends for the acceptance by the Open University of Tanzania a dissertation titled: “**Academic Wellbeing of Child Victims of the 2011 Floods: A Case of Mji Mpya Mabwepande**” in partial fulfillment of the requirements for the degree of Master of Social Work of the Open University of Tanzania.

.....

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.....

Date

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DECLARATION

I, **Abigail Samuel Kiwelu**, do hereby declare that this dissertation is my own work, and that all sources that I have used, quoted, or cited have been indicated and acknowledged by means of complete reference, and that this work has not been submitted before for any purpose at any institution.

.....

Signature

.....

Date

DEDICATION

This work is dedicated to my beloved parents – My father Mr. Samuel Peter Lui Mchamungu Kiwelu and my mother Mrs. Juliet Kiwelu.

ACKNOWLEDGEMENT

First, I thank the Lord our God who has given me strength throughout the course of this work. It was not an easy journey so I do believe that until reaching this point, it is entirely by His Grace. I also use this opportunity to sincerely thank my parents, Mr. Samuel P. L. M Kiwelu and Mrs. Juliet Chovenye Kiwelu for their tireless efforts in supporting me in various ways including morally and financially. Special thanks to my sisters, Naomi and Viola Kiwelu for morally supporting me throughout this journey.

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ABSTRACT

When disasters strike, partners and professionals from both public and private entities work together in providing necessities to the victims (food, shelter and medcare). The effort is done in order to at least address their physical requirements. At this point, the event and its consequences manage to catch the eye of the media and funds are brought in from many parts of the country to assist in the situation. After material needs have been covered to a certain degree “almost everyone goes home” leaving behind the victims who are not prepared to face life “after the after” of the disaster. They may have food but not know what to do to continue having food, have building materials but not know how to sustain those houses, have schools but not know how to cater for other school related needs for children. Generally, they have been removed from their being normal to a state where they feel doomed. This study aimed at exploring the academic wellbeing of child victims of the 2011 floods. Services are supposed to go beyond provision of material, they are supposed to boost the victims’ resilience so as to address their own challenging situation head on. In situations where such services are inadequate, one should expect that the victims’ life will take another form of vulnerability, affecting the families and consequently the children as explained in the findings. The study found that little has been done with regards to provision of psychosocial services. On that account, families continue to be affected socially and economically. Children as members are impacted and this is observed by their underperformance in various aspects of their lives, most importantly, academically. The study also enlightens on several challenges that were shared by service providers directly working in the area. Challenges, which the researcher believes, if taken care of, will improve the quality of services provided to victims of disasters.

TABLE OF CONTENTS

CERTIFICATION.....	ii
COPYRIGHT	iii
DECLARATION	iv
DEDICATION	v
ACKNOWLEDGEMENT.....	vi
ABSTRACT	viii
LIST OF TABLES.....	xii
LIST OF FIGURES.....	xiii
APPENDIX	xiv
LIST OF ABBREVIATIONS.....	xv
CHAPTER ONE.....	1
INTRODUCTION	1
1.1 Background to the Problem	1
1.2 Statement of the Problem	7
1.3 Objectives of the Study	7
1.3.1 Overall Objective of the Study	7
1.3.2 Specific Objectives.....	7
1.3.3 Research Questions	7
1.4 Significance of the Study.....	8
CHAPTER TWO.....	10
LITERATURE REVIEW.....	10
2.1 Introduction.....	10

2.2	Definition of Key Concepts	11
2.2.1	Disaster	11
2.2.2	Psychosocial Services.....	13
2.2.3	Resilience.....	15
2.2.4	Disaster Management in Tanzania	19
2.3	Review of Policy Issues Influencing service Provision to Children who are Disaster Victims.....	21
2.4	Empirical Literature Review.....	24
2.4.1	Psychosocial Impacts of Floods	25
2.4.2	Relationship between Psychological Impacts of Disasters and Academic Wellbeing.....	26
2.4.3	Academic wellbeing of Children affected by Disasters	28
2.4.4	Evidence on Psychosocial Care and Support to Child Victims of Disasters....	29
2.4.5	Challenges faced by Social Workers in Care of Disaster Victims.....	32
2.5	Theoretical Review	34
2.5.1	Social Functionalism Theory	35
2.5.2	The Ecosystems Perspective	36
2.6	Knowledge Gap.....	38
2.7	Conceptual Framework	39
	CHAPTER THREE.....	44
	RESEARCH METHODOLOGY.....	44
3.1	Introduction.....	44
3.2	Description of the Study Area	44
3.3	Research Design.....	44

3.4	Target Population	46
3.4.1	Sample size and Sampling Techniques	46
3.4.1.1	Sampling Procedures.....	46
3.4.1.2	Sample of the Study	48
3.5	Data Collection Methods	49
3.5.1	Primary Data Collection.....	50
3.5.1.1	Interview.....	50
3.5.1.2	Focus Group Discussion.....	51
3.5.2	Secondary Data Collection	52
3.5.3	Data Analysis Procedure	52
3.6	Ethical Considerations.....	53
	CHAPTER FOUR	55
	FINDINGS AND DISCUSSION	55
4.1	Introduction.....	55
4.2	Children’s Social and Academic Experiences after the 2011 Floods	55
4.2.1	Poverty in the Face of Post Disaster Situations	55
4.2.2	Age and Gender in Post Disaster Vulnerability	59
4.2.3	Sense of Security (Home is where the House is vs Home is where the Family is)	62
4.3	Existing Services Provided for the Children in Facilitating their Academic Wellbeing	64
4.4	Challenges encountered by those Providing Services to the Children.....	71
4.4.1	"Day to Day" Based Challenges	71
4.4.2	Lack of Priority from Central Government	73

CHAPTER FIVE	77
SUMMARY OF THE KEY FINDINGS, CONCLUSION AND RECOMMENDATIONS.....	77
5.1 Introduction.....	77
5.2 Summary of Key Findings.....	78
5.3 Conclusion	80
5.4 Recommendations	82
REFERENCES	83
APPENDIX	88

LIST OF TABLES

Table 3.1: Sample Categorization of the Target Population49

Table 3.2: Data Collection Methods Employed for Different Respondent
Categories51

LIST OF FIGURES

Figure 2.1: Ecological Theory.....37

Figure 2.2: Conceptual Framework.....39

APPENDIX

Appendix I: Interview and Focus Group Discussion Guide89

LIST OF ABBREVIATIONS

AAP	American Association of Pediatrics
ANWS	American National Weather Service
CBO	Community Based Organization
CRC	Convention of the Rights of the Child
DMD	Disaster Management Department
HIV/AIDS	Human Immune Deficiency Virus/ Acquired Immune Deficiency Syndrome
IASC	Inter-Agency Standing Committee
IFRC	International Federation of Red Cross and Red Crescent Societies
MKUKUTA	Mpango wa Kukuza Uchumi na Kupunguza Umasikini Tanzania
MVC	Most Vulnerable Children
MSW	Masters in Social Work
NAPA	National Adaptation Program of Action
NASW	National Association of Social Workers (United States)
NCPA	National Costed Plan of Action for MVCs
NGO	Non-Governmental Organization
NSEGPR	National Strategy for Economic Growth and Poverty Reduction
PMO	Prime Minister's Office
PSTD	Post Traumatic Stress Disorder
REPSSI	Regional Psycho Social Initiatives
TASWO	Tanzania Association for Social Workers
TRCS	Tanzania Red Cross Society

UNDP	United Nations Development Program
UNICEF	United Nations Children's Fund
USCCD	United States Commission on Children and Disasters
VAC	Violence Against Children
VICOBA	Village Community Banks

CHAPTER ONE

INTRODUCTION

1.1 Background to the Problem

It is estimated that 175 million children every year are likely to be affected by natural disasters. Climate change being one amongst mega causes of these disasters, it will be the people in the poorest countries, especially children, who will bear the brunt (Save the Children, 2008). Adversity comes in many forms, as a result of environmental calamities, social or political strife, individual acts of omission or commission and many other causes. Due to children's youthfulness and particularly their lack of social power, children are often among the most severely affected by these adverse circumstances (Mann and Boyden, 2005).

Children are among the most susceptible members of a community when catastrophes strike because of their dependent nature as well as their physiologic and psychological vulnerability. Critical gaps exist in the ability to prepare for and respond to the needs of the youngest victims (Garrett et. al, 2007). Studies show that children find themselves among the worst affected in the aftermath of natural disasters and are likely to be adversely affected both as children and in their adult lives (Tanner et. al, 2009).

The unprecedented increase of social problems including events of disasters have attracted international attention for the protection of children and for the promotion of their health and well being. In the UN Convention on the Rights of the Child (CRC), the protection of children exposed to adversity has now become one of the central

priorities of childhood interventions internationally. The convention provides a comprehensive global framework for supporting children in both chronic and episodic conditions of stress.

The social work profession has long been involved with disaster relief, both through the profession's roots in the provision of wartime relief, and its concern with the physical environment of people. Social workers throughout the profession's timeline have helped treat trauma resulting from disasters (Pryce and Pryce, 2000). In social work perspective, the environment is included among physical, biological and social factors influencing the welfare of individuals, groups and populations. Since the late 19th century social workers have intervened in the micro environments of people to improve their health status, residential living environment and social and psychological functioning (Zakour, 1996)

Social work intervenes in disaster management in different ways that affect individuals, families, organizations and community as well. Hence social work practice could take the form of case work, group and community work or social policy and planning (Tan, 2009). Areas of concern of Social Work in disaster situation include; coping with traumatic stress, resource mobilization for disadvantaged and vulnerable groups and coordination of various intervention systems. Although Social Work is involved in psychosocial interventions in disasters, the profession could pay more attention to social development, employing participatory approach (Pyles, 2007).

The profession can play a vital role in enhancing community participation by using its interventions devoted to enhance well being and help to meet basic human needs of

people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed and living in poverty.

In social work research, disasters are seen as a type of collective stress situation, in which many individuals fail to have their needs met through societal processes (Barton, 1969). Disasters are distinguished from other types of collective stress because first of all, disasters are crises situations (Quarantelli, 1998). The approach goes hand in hand with intervention frameworks employed by social work disaster research during crisis.

Dar es Salaam city was subjected to massive flooding following unprecedented downpours which started on December 20, 2011. The flood waters overwhelmed the city's drainage systems, resulting in mass displacement of the city residents, particularly those residing around the Msimbazi River basin. According to the Tanzania Meteorological Agency (TMA), the rains were the heaviest in Tanzania since its independence in 1961.

A rapid assessment of the disaster by the Tanzania Red Cross society indicated that over 200 people were injured, with approximately 2500 people missing, mostly children. The death toll due to the floods reached 40. The total number of people affected by the floods was over 50000 (approximately 10000 families) among which about 10000 people (approximately 2000 families) were displaced. The displaced population was accommodated in temporary displacement/holding centres, most of them primary and secondary schools. Damage to property and infrastructure was massive. Several main roads that link the centre to the suburbs were heavily flooded

and some bridges were destroyed. Personal belongings of the affected households were washed away by flood waters, which took the meandering river course into the Indian Ocean (IFRC, 2012).

The Tanzanian Red Cross Society responded with support from the IFRC and other partners. TRCS focused its support mainly on people displaced to temporary holding and transit evacuation centers. These were essentially availed with first aid relief items; including blankets, mattresses (3 pieces per family), water containers, kitchen sets, soap as well as mosquito nets (3 pieces per family), targeting a total of 2000 households. Construction of temporary shelters targeted 680 households in the re-settlement site at Mabwepande in the outskirts of the Dar es Salaam city, some approximately 30kms away from the City Centre.

Following these floods, other international aid agencies such as UNICEF reached more than 6000 affected residents with drinking water and sanitation and hygiene supplies. An important multi-year and multi-sectoral stand-by arrangement was developed together with the Tanzanian Red Cross. The partnership made sure that response capacity including provision of water, sanitation and hygiene supplies can be immediately activated if an emergency happens.

Being negatively affected by traumatic and unexpected situations such as the floods clearly indicates that memory and concentration are so necessary in learning situations (Streeck-Fischer and Van der Kolk, 2000). From this point, the researcher derived the importance to study and better understand school children who have experienced loss from disasters. When resources across the social ecology are more robust (e. g. family,

and community acceptance, access to school) children can achieve more positive outcomes even in the face of extreme hardship (Rutter, 1985) (Masten, 2001). In addressing disasters in most cases we overlook the fact that natural disasters also do serious harm to children's social, academic and psychological development (Silvermann and La Greca, 2002).

The researcher chose to focus on children because they belong to a group of high vulnerability. By vulnerability the meaning is not the same as poverty, marginalization, or other conceptualizations that identify sections of the population who are deemed to be disadvantaged, at risk or in other ways in need. Poverty for example measures a current status unlike vulnerability that actually involves a predictive quality; a way of conceptualizing what may happen to an identifiable population under conditions of particular risks and hazards.

In studying how children can be affected by disasters, it is clearly not enough to concentrate only on the hazards but also the vulnerability of the group in question. Disasters happen when a natural phenomenon affects a population that is inadequately prepared and unable to recover without external assistance. But the hazards must impact on the groups of people that are at different levels of preparedness, resilience and with varying capacities for recovery. The term vulnerability is efficiently used to describe the condition of such people. It involves much more than the likelihood of being injured or killed by a particular hazard, and includes the type of livelihoods people engage in, and the impact of different hazards on them.

The above is also described particularly as social vulnerability; it is more than the likelihood of buildings to collapse or infrastructure to be damaged. It is crucially

about the characteristics of people and the differential impacts on people of damage to physical structures. The following points on social vulnerability convinced the researcher to consider children as one of the groups that are extremely vulnerable to disasters; Initial wellbeing (children's nutritional, mental and physical health status), Livelihood and resilience (availability of asset patterns and capital, income and exchange options, or any livelihood qualifications to our children), Self protection (the degree of protection afforded by capability and willingness to build safe home or use safe site), Social protection (any forms of hazard preparedness provided by society more generally) and Social, political networks and institutions (role of institutional environment in setting good conditions for hazard precautions, people's rights to express needs and of access to preparedness).

The above points simply led to thinking deeper of a child's vulnerability to disasters. The United States Commission on Children and Disasters 2010 report made an outline of children's unique needs in disasters. The report suggested that children have unique vulnerabilities in disasters that must be addressed in disaster management activities and policies, for example; Children may experience long-lasting effects such as academic failure, post traumatic stress disorder, depression, anxiety, bereavement and other behavioral problems such as delinquency and substance abuse.

Also during disasters, children may not be able to escape danger, identify themselves and make critical decisions. Children are dependent beings, they depend on adults for care, shelter, food, med care and all other needs. Children are often away from parents, in the care of schools, child care providers, which must be prepared to ensure children's safety.

1.2 Statement of the Problem

School-aged children who are displaced to new schools may face particular challenges in the recovery process. Most of them encounter attendance problems, which lead to negative impacts on their academic performance and wellbeing in general. Severe financial burdens manifested in the lack of financial support for daily needs of the displaced students, worsens the matter (Picou and Marshall, 2007). This study focused on effects of natural disasters particularly on how any efforts that were made to manage them have whether brought any improvement to the lives of children or not. By improvement the researcher was more interested in studying the children's wellbeing after living long (about four years) with the experience of residence shift due to the floods.

1.3 Objectives of the Study

1.3.1 Overall Objective of the Study

The overall objective of this study was to find out on the academic wellbeing among children of the 2011 flood victims.

1.3.2 Specific Objectives

- (i) To explore the children's social and academic experiences after the 2011 floods
- (ii) To assess the existing services provided for the children in facilitating their academic wellbeing.
- (iii) To identify challenges encountered by those providing services to the children.

1.3.3 Research Questions

- (i) What are the children's social and academic experiences after the 2011 floods?

- (ii) What are the existing services provided for the children to facilitate their academic wellbeing?
- (iii) What are the challenges encountered by service providers?

1.4 Significance of the Study

This study was conducted in order to inform on the outcomes of services that were provided to child victims residing at Mabwepande after the 2011 floods. In social work, provision of services is one but finding out of the efficiency of a particular intervention to a vulnerable group is another aspect of more importance. The study brings to light of issues that took place when most stakeholders concluded that they were done with the victims. This study will bring to the knowledge of any interested party, voices of the children and their parents who are struggling in different manners to make their ends meet in the course of getting used to a new life at Mji Mpya, Mabwepande.

To policy practice: knowledge on experiences of children affected by disasters in Tanzania is scant. With most of their matters unknown, these children suffer from inadequacy of services. This study is meant to bring to the attention of policy the experiences of these children and how those experiences impact their academic wellbeing. Making children a priority will have important implications at all levels of government for training, equipment and supplies, since priorities drive investment and resource allocation decisions (UNDP, 2011).

To academicians: As explained earlier, much has been studied on disasters in general, however most of these studies are Western based. The researcher is not suggesting

that there isn't at all anything documented on disaster occurrence in Africa, only that the literature is narrow.

Social Work practitioners and Social Agencies working with Vulnerable Children: This study will make significant addition to evidence used to inform their practice on children affected by disasters. The study intends to inform practitioners on the present gaps on services for these children. The department of social welfare through its district offices in collaboration with development partners also provides a wide range of emergency aid and social assistance with particular focus on securing the fundamental rights and entitlements for vulnerable populations. Vulnerable children as stipulated in the National Costed Plan of Action for Most Vulnerable Children 1 and 2 of 2007 and 2013 respectively. The study intends to explore if efficient psychosocial services is more than provision of food, water, mattresses, tents and basic med care.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter makes a review of existing literature concerning experiences of children affected by natural disasters particularly in their academic wellbeing. What the theoretical literature tells, what other scholars have documented regarding this matter, and what policies say, is the focus of this chapter. This is in line with Creswell (2009) who states that “The literature review accomplishes several purposes. It shares with the reader the results of other studies that are closely related to the one being undertaken. It relates a study to a larger, ongoing dialogue in the literature, filling in gaps and extending prior studies.”

Likewise the assertion on the importance of literature review is supported by the view by Hart, (1998) who explains that “A review of literature is important because without it you will not acquire an understanding of your topic, of what has already been done on it, how it has been researched, and what the key issues are... This amounts to showing that you have understood the main theories in the subject area and how they have been applied and developed, as well as the main criticisms that have been made of work on the topic” (Hart, 1998:1).

In the course of reviewing, this section is divided into several sub sections that altogether give an overall picture on what has already been documented by others on disasters, management and how management has affected the lives of children who were subjected to those disasters in the first place. The review goes through the

following; definition of key concepts, empirical literature review, theoretical review and the conceptual framework.

2.2 Definition of Key Concepts

2.2.1 Disaster

WHO defines disaster as “any occurrence that causes loss of human life, deterioration of health and health services on a scale sufficient to warrant an extraordinary response from outside the affected community? The word disaster implies a sudden overwhelming and unforeseen event. At the household level, a disaster could result in a major illness, death, a substantial economic or social misfortune. At the community level it could be a flood, a fire, a collapse of buildings in an earthquake, the destruction of livelihoods, an epidemic or displacement through conflict. If a disaster takes place at district or provincial level, a large number of people can be affected,(WHO, 2001).

Disasters and other traumatic events, whatever their source or scale, bring with them the potential to cause distress, sometimes that distress is severe. Every person who is directly or indirectly involved in such an event may be affected and many may need psychosocial support. A sizeable minority of people may develop other psychosocial conditions and/or mental disorders for which they require more substantial and, sometimes, sustained intervention, including treatment. Disasters occur when the normal operations are overwhelmed, and critical functions and infrastructure are unable to respond, much less return to normal on their own, thus requiring regional or federal assistance, (Farmer, 2006).

Most disasters result in the inability of those affected to cope (little or lack of resilience) without side assistance. At the national level side assistance comes from organizations such as IFRC, United Nations, various NGOs and government agencies themselves. A limiting factor in disaster response is always the coping capabilities of those affected, improving their resilience when responding to disasters is a key approach to lessening the impacts of a disaster (IFRC, 2006).

Disasters are not normal or routine, they therefore have a significant potential in bringing negative effects to our daily lives. Theoretically, disasters can be seen as complex function of risk and vulnerability (Garrett et. al, 2007). Almost everyone becomes seriously affected as a result people focus less on giving each other support and within this context children experience the aftermath of disasters in different aspects of their lives including academics (Speier, 2000).

The type of disaster this study was interested in belongs to the natural disasters category. These are disasters that often come as a result of natural forces. Natural hazards are natural events that threaten lives, property and other assets. They are mostly predictable since most tend to reappear in the same geographical locations since they tend to correspond to weather patterns or physical characteristics of a particular area (ANWS, 2005). In this study, focus was on children affected by floods that hit Dar es Salaam in December 2011. These children together with their families used to reside at Jangwani slums which put them at very high risks of losing shelter, other assets but also their lives, each time rain pours.

This study was interested to assess the post disaster situation of the children and their families who were affected by the disaster. Literature has it, that many of these

disasters, have serious impacts on households in many dimensions, such as consumption and nutrition, even if the apparent official view is that public action, via the national government, NGOs and the international community, handled the crisis well (Fuente and Dercon, 2008).

2.2.2 Psychosocial Services

Refers to services that aim at addressing the ongoing psychological and social problems affecting individuals, their families and significant others (WHO, 2001). Disasters, conflicts and health have severe psychosocial consequences. The emotional wounds may be less visible than destruction of homes. The term also refers to the close relationship between the individual and the collective aspects of any social entity. Psychosocial support can be adapted in particular situations to respond to the psychological and physical needs of the people concerned, by helping them to accept the situation and cope with it (*ibid*).

The psychosocial impact of a disaster is harder to see than the physical effects yet recovery from it takes far longer (IFRC, 2005). Often when disasters strike, doctors and nurses rush to the scene to treat physical injuries but few psychosocial staff are available at a disaster scene (Halldorsson, 2010). The author further argues that, psychosocial support should be integrated into the overall medical treatment of disaster victims.

Some of key issues in psychosocial intervention to disaster victims according to the Inter-Agency Standing Committee include; observing human rights and equity in which humanitarian actors are called to promote the human rights of all affected

persons and protect individuals and groups who are at a greater risk of human rights violations. Another key issue is participation of local affected populations in the humanitarian response. This enables different sub-groups of local people to retain control over decisions that affect their own lives and to build a sense of ownership of a recovery program (IASC, 2007).

It is added in the document that workers in psychosocial support must also focus on building on available resources and capacities that can be found within all affected groups. Psychosocial service providers must support self-help measures and strengthen resources that are already available. To avoid repetition of services, they are supposed to be as integrated as possible as the opposite can create a highly fragmented care system. When activities are integrated into wider systems, the potential to reach more people is significant and often more sustainable and carrying less stigma (*ibid*).

An evidence on the matter is discussed in a document by WHO on recruiting psychosocial volunteers in Sri Lanka to help address the effects of Tsunami as quoted; *“After the December 2004 tsunami, national Red Cross and Red Crescent societies from numerous countries worked with the Sri Lankan Red Cross Society, making extensive use of local volunteers...All relevant staff and volunteers engaged by the movement were trained according to similar principles, including training in working with cultural resources to provide community support. Because resources were invested in hiring and training staff and volunteers, there is now an enhanced understanding in the country of the positive effects of community-based psychosocial work”*(WHO, 2007).

A cross-sectional study by Murakami (2007) on Integrated Holistic care to treat victims of the Great Hanshin-Awaji 1995 earthquake shows that five years after the incident 37% of respondents confirmed that a link strongly exists between stress they experienced with the earthquake. Ten years after, the number increased to 39%. The results imply that there is a possibility of an existing undiagnosed and unrecognized group of psychosomatically ill patients due to the Earthquake even after many years.

The study also suggests that destruction or damage to victims' houses, job loss, worsening of financial situation and loss of communities lead to psychological pain. In order to care for patients, intervention from a networked comprehensive team is highly needed. Resources from welfare, administration, education, non-profit organizations and mass media must be pooled to create a functional network to give appropriate support. The intervention provided must be on long term basis.

With regards to this study, victims of the 2011 floods lost their shelters and were shifted to Mabwepande, more than 30 kilometers from their previous residences and their work places which has significantly impacted their financial situation. Most interventions as discussed in the first chapter were short term, aiming at provision of basic needs during the first months after the disaster.

2.2.3 Resilience

Resilience is the capacity to withstand stress and catastrophe. Psychologists have long recognized the capabilities of humans to adapt and overcome risks and adversity. Resilience develops as people grow up and gain better thinking and self-management skills and more knowledge (University of Phoenix, 2011).

It refers to the ability to cope with a situation that significantly affects one's life. Children according to New York University Child Study Centre (2006) are able to cope with natural disasters as long as there is support and assistance around them. Factors such as history of behavioral problems, inability of parents to cope and give hope to children, limited social support and friendships, permanent relocation and academic difficulties are few of what can limit a child's resilience.

Studies show that following disasters children experience academic failure, post – traumatic stress disorder (PTSD), depression, anxiety, bereavement and other behavioral problems. However, the mental health effects of disasters are typically overlooked in disaster management and often are not considered until well after an event when it is too late to affect optimal response or recovery efforts (USCCD, 2009).

Children are at special risk for adverse psychological responses to disasters. Children most at risk for prolonged psychological reactions and delayed recovery include those who experienced highly stressful disasters that involved direct life threat; significant loss, separation from parents and intense parental stress reactions (Garrett et al, 2007; Vogel and Vernberg, 1993). Children are particularly vulnerable to the mental health impact of disasters and lack the experience, skills and resources to independently meet their mental and behavioural health needs. Mental and behavioral health effects are of specific concern in children of all ages due to the likelihood of lasting reactions (LaGreca et.al, 2002). Disasters according to Boyden and Mann (2005) are considered as external risks. In their publication, "Children's Risk, resilience and Coping in Extreme Situations" risks refer to variables that increase individual's vulnerability to

negative developmental outcomes. However, there are children exposed to adversities who do not develop problems later. This ability is what is referred to as resilience.

Children are not static but are influenced by their families, community and national institutions. While research often recognizes the effects of these structures on child's development and disaster response, few if not none have examined how each of those institutions interact to influence a child's response after a disaster (USCCD, 2009).

The report on children and disasters continues explaining that, due to a limited access to formal mental health services and treatment following a disaster, communities affected by disasters often rely on persons who are not mental health professionals but who routinely interact with children- such as teachers and school staff, first responders, health care professionals and other helpers that are accessible at that particular moment-to provide basic support services and brief interventions. Most of these individuals don't have the basic knowledge on how to recognize signs of distress, assist children in adapting and coping and identify children who require more advanced care.

In their review on Children, Resilience and Disasters, William et. al (2008) explained that "recent research confirms previous knowledge that most children and young people are resilient, but also are very vulnerable to the psychosocial effects of disasters. Most children are distressed in the immediate aftermath when they gain their sense of safety from adults, predictable routines and consistent support systems. Others may develop serious mental disorders though post-traumatic mental disorders may not develop until weeks, months or years later."

Based on that report, our context doesn't deviate much from the grounds which the report was produced. But then in considering of resilience which is individual based, the researcher hesitates to fall on to the assumption that every child suffers from serious mental disorders as a result of being hit by disasters. Every individual has his/her own ability to "bounce back" after harming events occur and children are no exception in this.

Generally, children who are able to remain hopeful about the future, are flexible and adaptable, possess problem solving skills, and actively try to assume control over their lives are likely to be less vulnerable than those who passively accept the adversity they face (Punamaki, 1987). Being brought up in different families, by different parents/guardians, in different family cultures, the level of resilience differs from child to child. To be proved otherwise, is one of the objectives of this study.

Mohr (2002) identifies four components from the ecological perspective that directly contribute to the socio-historic context on the suffering and healing (or resilience) of a child who has survived a disaster. The components are; the macro system (consisting of the beliefs and values of the culture, e. g. religious beliefs and values), the exosystem (consisting of aspects of the community in which the family lives, e. g, level of violence or level of positive parental involvement), the microsystem (consisting of the immediate settings in which the child receives socio-emotional support, e. g, family and school) and ontogenic development (including individual characteristics related to the child's own development and adaptation, e. g, age, temperament and physical health). The ecological framework of resilience of disaster affected children appears to be consistent with a social functionalist ontology that

posits that human experiences are socio-historically constructed. The framework then helps in understanding that a child's resilience isn't only a produce of the disaster but also other factors including peer and social relationships, moral development and conscience functioning (Pynoos, 2007).

Social workers (as one of service providers to victims) are trained to address less acute mental situations of their clients; the issue then is if they could be active parts of disaster management teams (not that none is being done, they are being so much involved in search teams in bringing families together) they could be of significant help to these children and their families. Social workers can also play an excellent role as brokers, who can be used in linking children who disasters have impacted them severely in their mental systems, to appropriate specialists. Studies also suggest that children do have the capacity to contribute to disaster preparedness, response and recovery activities. In order to promote children's resilience to disasters, we must improve their access to resources, empower them by encouraging their participation, offer support and ensure equitable treatment (Peek and Lori, 2008)

2.2.4 Disaster Management in Tanzania

Tanzania, like many countries in Africa and elsewhere, traditionally responded to emergencies as they occurred- and then did not really address the need again until some further situation presented itself. More recently attitudes have changed; given a greater recurrence of disasters, not unconnected to climate change, and given man-made hazards, the issue of emergency preparedness and response has gained greater importance (PMO, 2011).It is the responsibility of the government of Tanzania to provide for a comprehensive management program that meets the emergency needs of

those who either have been or might be affected by an emergency or major disaster. When the emergency exceeds the government's capability to respond, assistance will be requested from other countries and appropriate regional and International Humanitarian Organizations (PMO, 2011).

The government established the disaster management department (DMD) in 1990 to ensure the coordination of disaster management activities in the country. The department now seeks to ensure that in times of disaster, appropriate response systems, procedures and resources are in place to assist those affected and to support them to help themselves. The department is also charged with the responsibility of coordinating disaster preparedness efforts and activities in order to minimize the adverse effects of hazards, through effective precautionary measures and to ensure timely, appropriate and efficient organization and delivery of emergency response.

The department receives initial notification or warning of disaster from multiple sources. When the department is satisfied that an emergency situation that escalates to a disaster exists in any area in Tanzania, the National Disaster Management Committee (NMDC) will be convened. The committee shall then promptly inform the Prime Minister; in turn, the Prime Minister shall inform the President of the United Republic of Tanzania accordingly and advise him/her of the views of the National Committee (Tanzania Emergency Preparedness and Response Plan, 2012).

With these structural changes have come related amendments in government policies and strategies. Disaster risk reduction was identified in both MKUKUTA 1 and 2 strategies to address the challenge of disaster, its mitigation and transition from the

humanitarian assistance to development. The government of Tanzania identified weaknesses in these areas of emergency management and highlighted the need to improve on certain aspects under their cluster 3 sections, covering good governance and the rule of law (NSEGPR, 2010).

The Disaster Management Training Centre of Ardhi University in Dar es Salaam, a long-term partner of national disaster risk management authorities development agencies, carried out an initial assessment study in late 2007. The process was carried out down to the district and community levels to develop disaggregated disaster vulnerability profiles with the aim of identifying strategic priority areas for implementation based on the different elements of national policies.

One of the issues they identified was that there was a split between coordination of, and direct involvement with, disaster management activities. Often the Prime Minister's Office/Disaster Management Department get involved in field operations while the standard operating procedures clearly indicate that their role is to support when lower level capacity requests additional input and coordinate the overall response approach.

2.3 Review of Policy Issues Influencing service Provision to Children who are Disaster Victims

Tanzania has a number of policy statements that are geared towards addressing disasters in terms of preparedness, management and disaster aftermath. There are also good policies and laws formulated with the aim of addressing children issues including education, protection and their wellbeing in general. With regards to this

study, some of those policies and government action documents are being reviewed in order to find out if they give way to the question on the academic wellbeing of child victims of the 2011 floods.

The National Adaptation Program of Action (NAPA) under the Vice President's office, Division of Environment, 2007, stipulates some of the potential barriers in implementing the program on awareness on climate change include; extreme poverty of the most vulnerable groups and limited analytical capability of local personnel to effectively analyze the threats and potential impacts of climate change, so as to develop viable adaptation solutions. This means that when it comes to addressing disasters from preparedness to the aftermath, assisting vulnerable groups (including children) is a challenge because of extreme poverty. Secondly, inadequacy of local personnel who can really analyze a disaster situation long before it actually hits a population.

Several activities have been placed and ranked per priority in the NAPA document. Two of the activities are health and human settlements. In health they specifically planned on ensuring availability of sufficient trained staff at all health facilities. Trained staff for health facilities are meant to meet the medical and also psychosocial needs of victims they attend to. Having an adequate number of doctors, medical attendants, social workers, counselors and others required in health facilities is still questionable. With human settlements the plans are to establish disaster committee and plans at village level. In addition with human settlements is to relocate vulnerable communities to other areas. Relocation has been done to those who used to reside at Jangwani and are now placed at Mabwepande though a question is born on the issue

of shelter quality and if at all a disaster committee has been established there. The NAPA action plan has not stated on its priority sectors the education sector, which I consider to be vital in this matter. If we want children to be able to have the capacity to help in climate change and how to deal with disasters at their potential as much as possible, then the knowledge has to be incorporated in school programs. Moreover, the action plan has not discussed on how children can be involved in addressing climate change. When we don't familiarize children with environmental changes and basic ideas on disasters then helping them when the event happens becomes more difficult.

In the second cluster of the National Strategy for Economic Growth and Poverty Reduction (also known as MKUKUTA) there are plans on improvement of Quality of Life and Social Wellbeing. The second MKUKUTA unlike the first has strategies to ensure rehabilitation and expansion of school infrastructure, provision of school materials in required rations, increasing regular school inspection and provision of school feeding programs. Despite the achievements assessed in the 2013 state of poverty document, there are still challenges in meeting the demand of teachers and learning facilities in most schools. A point in addition to this is that MKUKUTA has not mentioned about improving education services for vulnerable children particularly those directly affected by disasters.

The 2008 Child development Policy highlights the need to protect children living in difficult circumstances, such as orphans, children affected by natural disasters, children who cannot fend for themselves (such as adolescent mothers). The policy states that it shall provide directions on upbringing of children in difficult

circumstances and therefore propose measures to promote their protection- including identifying them and recognizing their needs, setting aside adequate resources for the purpose, providing them with expertise and services which cater for their needs as well as providing them with guidance and counseling.

In the National Costed Plan of Action II, displaced children due to manmade and natural disasters are also categorized as vulnerable children. One of its strategic objectives is to strengthen the capacity of households and communities to care and support both MVC girls and boys. The second specific objective under states on improving access to quality family based care and support, food and nutrition, shelter services and psychosocial support. Among the expected outcomes one is increasing the number of MVC receiving basic psychosocial support interventions and services through different levels of psychosocial support interventions (individual, family community and National) covering each PSS domain (skills and knowledge, emotions and social aspects).

2.4 Empirical Literature Review

This section presents what has been done by other researchers as far as psychosocial interventions for children affected by natural disasters is concerned. The review takes in three issues; the psychological impact of floods to children, ecological perspective of psychosocial interventions for disaster affected children and school based interventions on children and families as response to disasters.

The researcher went through studies conducted on psychological impact of floods to gain evidence base on the matter. That whether other studies prove of the fact that

children can be significantly impacted by floods, which also justifies the need for psychosocial attention for them to retain functioning. Also, studies on psychosocial interventions for disaster affected children are of obvious importance since they shed light on services that have been conducted elsewhere but most importantly, how effective they were on children. Studies on school based interventions on children and families will give a sketch on how families together with schools can work to improve a child psycho-socially in the course of responding to disasters.

2.4.1 Psychosocial Impacts of Floods

Flooding poses extensive social and mental health problems that can continue over long periods of time. This doesn't take place only due to the flooding itself but also because of secondary matters that come up in the course of recovering lives, properties and relationships. Floodings have a potential to challenge the psychosocial resilience of the hardiest of people amongst those affected (Stanke, 2011). Studies have analyzed that flooding is very stressful and that the stress continues for long even after the water has receded. It affects people of all ages causing bereavement, economic problems for families, behavioural problems in children and increased domestic violence are among the few outcomes.

Research suggests further that many people do experience distress temporarily after disasters which can also mean that people have some good degree of resilience. Literature also shows that the experiences of people, who are distressed in the aftermath of all disasters including floods, are not always easy to distinguish from those with common mental disorders. In other words the possibility of occurrence of mental disorders increases and can persist long after the disaster if no effective and

timely psychosocial responses take place to address the situation (Murray et al, 2011). There is a lack of studies which have investigated the impact of flooding on children. However there are indications that children suffer from stress disorders after flooding due to their vulnerability. For example, parent's economic and social wellbeing affects the quality of their parenting. Therefore when parents are disturbed by the event, the effects will manifest to the children. This also means that if the psychosocial requirements of the child are not met promptly and efficiently, the chances are for the problem (mental) to increase (Stanke, 2011).

People's psychosocial needs and mental disorders that might develop of their being flooded bring challenges to the community, public health sector including social workers and specialist mental health care services. Nevertheless recently published results on studies about psychosocial interventions give evidence that psychosocial interventions targeting the resilience resources (for example emotional engagement and social connectedness) of victims, can alleviate the depressive symptoms and improve their positive and cognitive functioning (HM Government Department of Health, 2010).

2.4.2 Relationship between Psychological Impacts of Disasters and Academic

Wellbeing

A number of studies have been conducted and documented on how school performance in children can be negatively affected by traumatic events such as natural disasters. An empirical study by Luwangula and Riedl (2014) clearly revealed that children living in poverty, working children, children with disabilities, children from child-headed households and children in post-disaster situations stand out significantly

in their need for extraordinary educational and psycho-social support in order to succeed in school or in many cases, “simply to stay in school.”

Yule and Gold (2003) made a comparison between exam results of students three years before sinking of a cruise ship Jupiter and the results 10 months after the disaster. They discovered a significant difference between the two and according to their report the effects persisted through the following year and resulted in lower GCSE results than had been originally predicted. A study by Pynoos et.al (2001), found a vivid link between trauma severity and school performance. Their findings showed that young people may experience breakdowns in key attention and task-related skills that can jeopardize academic performance.

The impact of disasters on children’s academic progress and educational outcomes is an area receiving increased though not quite sufficient attention in research literature (Peek, 2008). Disasters often destroy school buildings especially where buildings are of less structural integrity. The loss of schools leaves surviving children with few alternatives for an adequate education (Phillips et al, 2010).

Minor crisis situations may however not lead to severe problems to qualify for intense psychological intervention. Despite that fact those situations still hold potential to disrupt learning capacity. From a clinical point of view, children encountering sudden, dramatic circumstances, there is no doubt that it can greatly influence motivation and learning capacity (*ibid*).

Dyregrov (2004) explains in his article on Educational Consequences of loss and trauma. There are several viable explanations for the decline in school performance

observed following trauma and loss. Some of them are; the stress it is often followed by depression that slows down cognitive functions, it results to loss of motivation fueled by disturbing memories which interfere with concentration and memory. The child's moods stated overwhelm the ability for self regulation and lead to problems with behavioral control and produce disruptive behavior. With such evidence in literature it is clear that the academic wellbeing of child victims of natural disasters is significantly disturbed by unexpected events such as floods. That is the reason why this study is interested in exploring into the lived experiences of these children particularly their academic wellbeing, four years after the disaster and relocation.

2.4.3 Academic wellbeing of Children affected by Disasters

According to Gutman and Vorhaus (2011), higher level of academic achievements result from higher levels of emotional, behavioural, social and school wellbeing. Education is critical for all children but it is especially urgent for children affected by disasters. Education eases the psychosocial impact of disasters by giving a sense of normalcy, stability, structure and hope for the future (UNICEF, 2012). During emergencies or in an emergency aftermath children's enrolment in school can be constrained by situational problems such as insecurity and household poverty, as well as poor educational quality leading to early drop out from school and the breakdown of educational management systems.

Education is a human right, important in itself and also "enabling" access to other rights. The Convention of the Rights of the Child require governments to promote free and compulsory schooling at primary level, access to secondary education on the basis of capacity by every appropriate means. In emergency situations, it may be more

difficult to meet these goals but they can not be ignored. In fact, people displaced by war or high calamity accord high priority to restoring education- they see education as important for the future of their children and of their society.

The biggest constraint to access after insecurity is usually poverty. Even when education materials and books are provided by the school and there are no official fees, the students may lack clothes that are considered decent and can't afford various facilities fees. Instead of attending school, children may have to contribute to the household livelihood (ibid).

2.4.4 Evidence on Psychosocial Care and Support to Child Victims of Disasters

Everyone requires continuation of services on psychosocial support where by many have their needs met through their significant others (family members, friends and communities). Others however do require more attention from primary care services or specialized mental health care. A multi-sector approach that involves communities and families as well as agencies is the best way to deal with the condition. It is important to recognize that family and community assets are vitally important to maintaining and promoting personal and collective psychosocial resilience.

Studies conducted by Shibley, et al (2011) and Brymer, et al (2006) indicate evidence-based intervention principles being vital to adequately addressing the needs of populations affected by disasters. Five intervention principles have been pinpointed as essential elements of immediate and midterm interventions. The principles include; a sense of safety, calming, a sense of self and community efficacy, connectedness and hope. Inadequacy in responding to these issues rises great concern for the body of

research, documenting increased risk of mental health problems in disaster affected children and families (Barenbaum, et al (2004), Attanayake, et al (2009), UNICEF (2011), Shaw, et al (2012), Stoddard and Saxe (2001)).

A strong evidence base supports the claim that secure and consistent care giving relationships are critical in order for children to weather the extreme stressors of disasters (Bowlby (1951) and 1969, Ainsworth (1979), Sveaass and Reichelt (2001), Kliwer, et al (2001), Qouta, et al (2008), Thabet, et al (2009)). As a result a number of psychosocial interventions are oriented toward the family, with the aim of strengthening parent-child relationships and connection.

A study was conducted on 30 families living with severe mental illness in post war disaster in Kosovo (Weine, et al, 2005). The families participated in a therapy aimed to increase compliance with psychiatric medication among war affected individuals and to improve mental health service use among families. Topics for discussions involved during group sessions were; psychosocial causes and effects of relapse; problem solving in response to symptoms; responding to crises; accessing professional mental health services; and building resilience. Findings indicated positive effects on both outcomes, although additional information related to child mental health outcomes would have strengthened the study design.

In another nonrandomized trial that involved a sample from Palestinian territories, researchers assessed the effects that structured activities at nongovernmental organization sites had on child mental health, child hopefulness and parental support (Loughry, et al, 2006). Structured activities included art, sports, drama and puppetry.

The combination of activities was hypothesized to; assist emotional adjustment in hostile environment by providing routine, constructive engagement and opportunities for attachment and expression, positively affect parent-child relations by providing safe, shared outdoor activities and increase children's future orientation. Special attention was on ensuring a contextually appropriate community focus, which entailed the translation of all materials to the local language, the employment of local volunteers as providers, the implementation of cultural activities and the use of community centre as the focal location for all activities. The results showed improvement in child participants in all aspects studied except improvements in hopefulness were not observed; improvements in parental support were reported at one of the sites involved.

In Uganda, researchers investigated effects of a school-based intervention that incorporated play therapy, drama, art and movement to increase feelings of stability and to improve emotional outcomes. In a study by Ager (2011), psychosocial structured activities are integrated with community service opportunities and parental engagement in order to attend multiple levels of ecological needs. In a cross-sectional follow up study, researchers observed that improvements in child well being were significant.

Another cross-sectional analysis of a school-based psychosocial intervention was implemented with children in Gaza during an active conflict period focused on positive aspects of wellbeing, such as good family and community relationships, trust, problem solving and hope. Results from a study by Constandinides, et al (2011) indicated positive effects of the intervention, with durability of at least four years. In

contrast, in a cross-sectional follow-up study comparing intervention participants to community controls in Lebanon, no positive effects were observed among children who received a school-based intervention combining cognitive-behavioral treatment strategies with activities like drawing, creative play and group discussion (Karam, et al, 2008).

Positive effects of a classroom-based intervention have been observed in several trials with war affected children aged 8 to 12 years. A study by Tol, et al (2008) implemented an intervention by trained community paraprofessionals. The intervention was delivered in 15 manualized school-based sessions over five weeks. Sessions included cooperative play and creative expressive elements. In Indonesia, a promising level of effectiveness was demonstrated among participants screened for Post Traumatic Stress Disorder and anxiety. No effects of anxiety, depression or PTSD-like symptoms were observed among participants (*ibid*). Larger improvements were recorded in play school support (social support for emotional problems through playing with others) were associated with smaller improvements in PTSD symptoms (Tol, 2010).

2.4.5 Challenges faced by Social Workers in Care of Disaster Victims

There is the study conducted by Twikirize (2013) in Uganda on the root cause of the challenges facing social workers in executing their function properly. The study used cross sectional study design, and used both qualitative and quantitative methods. Data was collected through questionnaires, interviews and focus group discussions. Both secondary and primary data were collected. The challenges that were found to limit performance of social workers were lack of a legal framework governing duties of

social workers (87% of all respondents), low payment to the employed social work graduates (72%) and lack of appreciation of the role of social work (66%). These were the major challenges that were found in Twikirize's study that were highly faced by social workers in Uganda. The study concluded that in order to overcome these challenges social workers should use developmental approach using empowerment techniques such as education and promotion of income generating activities.

Helen (2010) conducted a study to expose the experiences of social workers who worked with bushfire affected families to understand their role and the context in which they practiced. The research design featured a mixed methodology that included an anonymous on-line survey completed by 22 social workers and personal interviews with six social workers. Narrative data analysis was performed to identify themes relating to the aim of the study. A key finding of the study was that, while social workers frequently work in contexts of uncertainty, the demands placed on practice were exacerbated by the lack of familiarity with geography, weak social networks and lack of enough resources, as well as by higher levels of uncertainty and lack of clarity and detail relating to the event itself. The study concluded that Social workers need to be given the assistance that they need in order to perform their responsibilities effectively.

Okaido (2005) analysed on the role of social workers in the 21st century. The study was conducted in Kenya and about hundred social workers were recruited for the study with the help of convenience and purposive sampling selection. Both questionnaires and interviews were used in collection of data from respondents. The study also explained challenges encountered by social work professionals, about

which, the challenges that could relate to the management of disaster were; lack of professional recognition in disaster management issues (mentioned by 61% of respondents), shortage of qualified social workers (51%), lack of financial resources (48%), lack of government support (45%), high turnover rates of social workers in local authority settings (45%), and poor working conditions (39%). The study continued that many of these social work activities were carried out by non qualified workers and this was one of the factors for strongly challenging the profession.

Baker (2013) conducted a study on the benefits, opportunities and challenges in social work profession. Data were collected through review of different documents and found that some of the challenges include low salary given to social workers that has made many social workers to quit the job, lack of support from both government and community members, shortage of work related equipments as well as weak institution recognition. The study concluded that social workers help the community in different ways; in that case they need to be well taken care of by paying them well and making sure that they are happy and comfortable with their work.

2.5 Theoretical Review

Brewer (2000) explains theory as a set of interrelated abstract propositions about human affairs and the social world that explain their regularities and relationships. Theories of environmental disasters are gradually developing. Recently a number of theoretical perspectives have been developed to analyze human responses (such as coping) to natural hazards. Contained in different sociological theories; conflict theory, structural functionalism and social constructivism perspectives have been used to explain human adjustments to calamitous events (Wenger 1978, Quarantelli 1978,

Mileti 1999). For the purpose of this study, I choose to explain on two theories; Social Functionalism and Ecological theory. I have chosen those two by considering how the concepts they hold actually match the study's assumption on how children's development is dependent of multi factors functioning around a child's life. The choice is also based on how disasters do cause a dysfunction in the systems supporting the child's development (Adeola, 2003). With the rise in natural disasters researchers have been observing how children respond to disasters. A child's cognitive, physical and social development influences his/her understanding of the disaster and potential trauma cause by it (AAP, 1999).

2.5.1 Social Functionalism Theory

This approach makes a macrosociological analysis with a broad focus on social structures that shape the society as a whole. It explains how social order is possible and how society remains relatively stable (Anderson and Taylor, 2009). Societies are seen as coherent, bounded and fundamentally relational constructs that function like organisms with their various organs (or social institutions) working together in an unconscious, quasi-automatic fashion toward achieving an overall social equilibrium (ibid). When one part of the system is not working or is dysfunctional, it affects all other parts and creates social problems, leading to social change. Sudden social change is undesirable because it disrupts this equilibrium. To prevent this from happening, other parts of society must make appropriate adjustments if one part of society sees too sudden a change.

In the case of disasters, functionalists would observe the structures in place that are supposed to help those who were affected by the disaster. Functionalists would try

explaining how the various government agencies perform a positive function in a society which in turn maintains it in balance/equilibrium. When a problem manifests itself, functionalists would point that some part of the system is not working as smoothly as it should and therefore, there is a breakdown of the system. Functionalists refer to this breakdown as dysfunction, in this case particularly referring to various government agencies, and other stakeholders did not provide society's expected services (Anderson and Taylor, 2009). Functionalists attempt to explain social institutions as collective means to meet individual and social needs. On this footnote, it is then expected of different parts of the social system to play their respective roles in at least assuring that children affected by calamities get assistance promptly.

2.5.2 The Ecosystems Perspective

This perspective focuses on the interplay between the person and his/her environment:

“Individuals exist in families, families exist within communities and neighbourhoods. Individuals, families and neighbourhoods exist in a political, economic and cultural environment. The environment impacts the actions, beliefs and choices of the individual” (Rengasamy, 2010).

“The Ecological Perspective uses ecological concepts from biology as a metaphor with which to describe the reciprocity between persons and their environment...attention is on the goodness of fit between an individual or group and the places in which they live out their lives” (Sands, 2001).

Bronfenbrenner (1979) suggests that the theory focuses on interrelation transactions between systems, and stress that all existing elements within an ecosystem play an equal role in maintaining balance of the whole. He suggests four main systems that have different impacts on an individual's life; the micro system, ecosystem, ecosystem and macro system. The micro system refers to those most immediate units of a child's life (family, school, peers) while the ecosystem contains of a more generalized system

referring to the interactional process between multiple Microsystems (for example, effects of spousal relationship on parent-child interactions). The ecosystem refers to settings on a more generalized level which affect indirectly, family interaction on the micro and meso levels (the effects of parents' employment on family interactions) while the macro system has more general contents including political, cultural, economical and social environment.

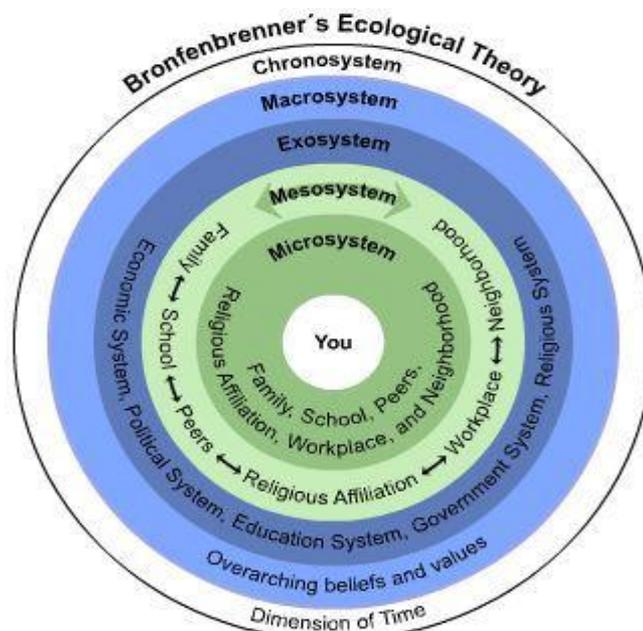


Figure 2.1: Ecological Theory

Source: Nielsen, (2011)

During times of crises, children are especially aware of a parent's worries and stress (AACAP, 2008). Parents must cope with the disaster to facilitate their children's coping ability. Family and social support also influence children's reactions to disaster trauma, while children's response impacts these institutions as well. While natural hazards can affect a person's human capital throughout its entire life, it is at early stages in life when any such impacts most matter if they are not properly and timely addressed. Temporary poor health and child malnutrition can have persistent effects because they tend to resound into further processes of human capital accumulation,

such as school performance, cognitive development and then earnings and productivity. The impact of natural disasters on children's future human capital stock will be realized through the channels discussed above and the choices their parents make on their behalf in the after of an event.

Current applications of this theoretical framework with children in adversity have focused on transactions taking place between risk and protective factors at different socio-ecological levels- that is; family, peer, school, and wider community levels. When resources at any of these levels are compromised, the risk of poor developmental outcomes increases.

2.6 Knowledge Gap

Different scholars have worked on topics relating to the subject matter of this research. In reviewing the studies the researcher noted certain untouched issues that make this study even more significant. Besides studies conducted, there are also policy documents and state guidelines reviewed. Again, some matters that directly relate to this study have not been discussed.

Studies on disasters mostly cover Europe, America and Asia than the African context. This is due to their relatively high frequency of natural disaster occurrence as compared to the latter. Disasters documented in Africa mostly discuss on manmade disasters particularly on effects of civil wars and droughts (which are categorized as quasi-natural disasters).

This research aimed to explore the experiences (academic wellbeing in particular) of children affected by natural disasters (in this case floods). In addition, the studies have

shown in detail on addressing psychological impacts especially PTSD but have not gone to the details on how efficient the psychosocial services provided were in improving the children's academic wellbeing.

Tanzania policy documents acknowledge the fact that a child affected by natural disasters belongs to the category of most vulnerable children. The documents however have not stated clear guidelines on care for children relocated due to disasters and much less on how the care/services help those children academically. There has been much emphasis on orphans, children experiencing VAC and those who can't fend for themselves. This study is therefore meant to address the knowledge gaps mentioned by shading light on measures to be taken to improve or sustain the services provided for children whose vulnerability result from being directly hit by natural disasters.

2.7 Conceptual Framework

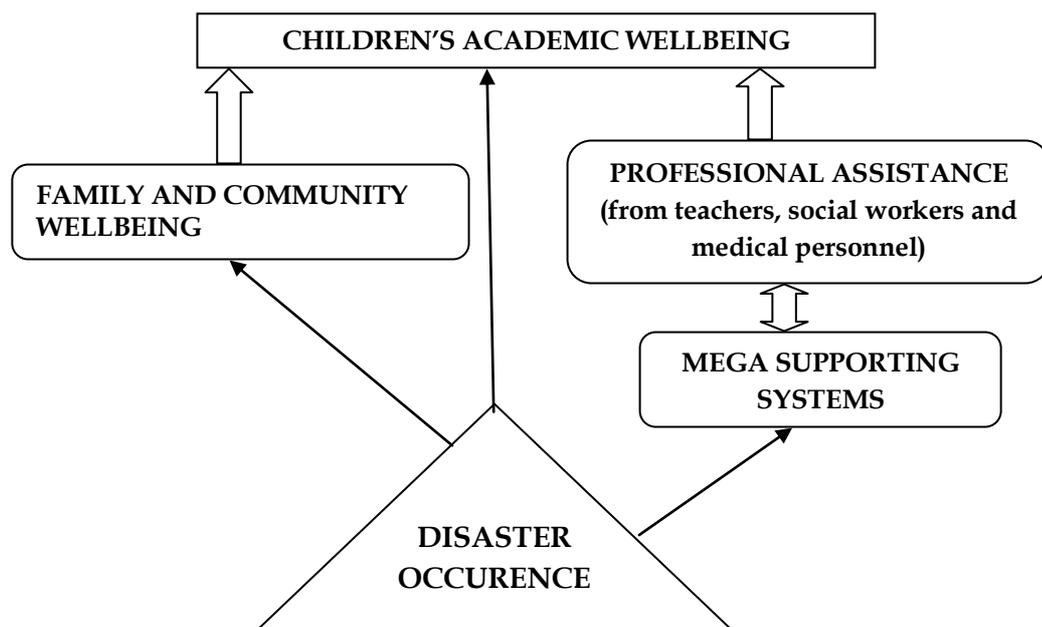


Figure 2.2: Conceptual Framework
Source: Field Data (2017)

Explanation on the Framework used

The figure above presents the concept of the study. Academic wellbeing of children highly depends on three factors; family and community wellbeing, availability of professional assistance and well structured mega supporting systems. By taking into account theories adapted by the study; the ecosystems theory suggests that the wellbeing of any individual (here the child) is dependent of the systems around that child. In the social functionalism theory, wellbeing is dependent on the functioning of structures affecting the individual in question. In this case all parts/elements responsible for a child's wellbeing have to function properly for wellbeing to be realized. From that relationship of the variables is explained below.

Family and community wellbeing: both the family and community are social capitals of which when well invested can be fruitful in terms of child positive upbringing. With regards to this study, this is an independent variable. The expectation is if members of child's family are doing well physically, cognitively, socially, economically and also spiritually, the child will also benefit. For example, when a parent is assured of his/her income, a child's educational needs are met at a satisfying degree (the child will attend school regularly, will have school requirements and will also be expected to perform well). When a community is one that observes the best interests of a child, has recreational areas, mosques/churches/synagogues and when most of its people create fair income, the expectation is that children in that community will also be less vulnerable.

Availability of professional assistance: The presence of an adequate number of well trained teachers at school, adequate professional and para professionals in areas of

health, social welfare and law, child protection teams, gender desks and others (just to mention a few) gives assurance of the protection of the child's best interests. In circumstances where a child is surrounded by such support system besides immediate family members, relatives, friends and other community members, then it is more likely for the child to realize wellbeing in all aspects of his/her life.

Mega support systems: this refers to those support systems from the central and local government. It includes funds from the government, programs, projects, policies and laws. The mega support systems have an impact on the professionals and para professionals mentioned earlier because in most instances the latter also depends on the former. In other words well designed and implemented programs from the central and local government puts its professionals in a better position to serve. Therefore the mega support systems directly affect professional assistance and indirectly affect children's wellbeing.

Disaster preparedness and conditions attracting occurrence: When a community lacks disaster preparedness (putting adequate infrastructure in place, banning residence in risk areas, community awareness on how respond once disasters strike) and when there are conditions (natural or manmade) favoring the occurrence of a disaster, it is then more likely for a disaster to happen. The case in this study looks into people who before the 2011/12 floods, used to reside at areas that the Dar es Salaam had already provided several warnings on. The areas included Jangwani and Kinondoni Hananasif just to mention a few. These are geographically risky areas (particularly to floods) because they are along the Msimbazi river bank. Therefore any settlements close to the area are easily covered by water once it showers. Residents

lose properties but most importantly, the lives of those vulnerable members of such communities.

When a disaster strikes, it hits the whole community but at different degrees depending on difference in levels of vulnerability. This means the most vulnerable groups existing in a community are the ones mostly affected. Disaster effects do not exclude systems (from local to national) supporting the community. The effects upon systems can be infrastructural or financial. When a disaster hits a community, for example the floods, it forces various stakeholders to shift their attention to the area. The central government through the Prime Minister's Office Department for Disaster Management is forced to gear their concern to reacting to the impacts of the disaster on that community. The scarce resources available will be assigned to respond to needs born by the event.

With regards to the case in this study, the central and local government (Dar es Salaam Regional Commissioner's Office, then under Mr. Said Sadick) had to incur some "unexpected costs" to move the affected residents to safety. Due to scarcity of resources, professional assistance will also be limited to assisting people to meet the basic requirements for living, such as food, shelter and med care during the period just after the disaster.

In other words, when disasters hit communities where preparedness is low, all professional systems of assistance are forced to meet service costs that are high. Scarcity of resources (finances and number of staff) significantly influences the way professionals, paraprofessionals and other workers in provision of psychosocial

services function. As briefly explained above, services will mostly cater the immediate physical needs; other needs and the continuum of services provided remains in question.

As disasters pose serious impacts on communities, the aftermath is directly experienced by families. Depending on the level of vulnerability, a family's potential to comfortably provide for its members' needs can be significantly reduced or drawn away by disasters. This results to unsatisfactory fulfillment of children's needs, as they are fully dependent on their families. The Mabwepande case for instance, families had to be relocated from Jangwani, a place closer to the city center, where people could simply move to for work, business, schooling and other socio-economic activities. The relocation meant significant changes to their lifestyle (change of business, change of work place, change of school) leading to psychosocial issues requiring psychosocial attention.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter aims at describing the research design and what plan the researcher had and the data collection methods the researcher employed (i.e. procedures of inquiry) during field work, as well as interpretation and analysis procedures. In the methodology part of this study, Nygaard (2008) insists on the point of showing how a researcher approached the answer(s) to the research question. This is not enough as it is also important to explain the rationale behind choosing that particular approach and not the other (*ibid*). Therefore, discussion in this chapter will focus on that.

3.2 Description of the Study Area

Mabwepande is a ward located at Kawe division and is one of the 27 wards of Kinondoni district in Dar es Salaam region. Mabwepande is bordered by the Indian Ocean to its East, Goba ward to its South, Bagamoyo district to its North and Kibaha district on its West. The area is approximately 12.12 square kilometers with a total population of 23419 people, 3346 households. The area is both rural and urban with various economic activities ranging from small scale agriculture, small business, medium and large scale business, fishing, stone quarry, animal husbandry and other petty business.

3.3 Research Design

This study is qualitative, descriptive and contextual in nature. In explaining the choice of research design, the researcher opt not to differ from what Creswell explains as he

discusses that, one of the factors determining choice of design is the research problem. He argues that, when a topic is new or when *a topic has never been addressed with a certain sample or group of people*; a qualitative research is useful. He insists that if a concept or phenomenon needs to be understood because little research has been done on it, then it merits a qualitative approach (Creswell, 2009).

The qualitative and descriptive nature of this study corresponds with what has been explained above as it intends to find out on academic wellbeing of children affected by disasters who have been placed at Mabwepande for hardly five years (therefore, little is known here). The existing literature strongly convinces that little is known on that particular group (*a topic has never been addressed with a certain sample or group of people*) (Burns and Grove, 2001).

Another reason as suggested by the same author is personal experiences. Researcher's own personal training and experiences also influence their choice of approach. Qualitative approaches allow room for innovativeness and are good for issues that relate to marginalized people and an interest in creating better society for them and everyone (*opcit*). Again the proposed study qualified in that category because it was meant to address a marginalized group -children affected by natural disasters. That gave the researcher another reason to choose a qualitative approach.

Mouton (1996) describes a contextual study as one with a phenomenon under investigation, studied for its intrinsic and immediate contextual significance. This paper is about children who were affected by disasters to the extent that them, together with their families had to be evacuated from where they used to reside (Jangwani,

Kigogo and Kinondoni Hananasif) to Mabwepande. The interest in particular was the child victims' academic wellbeing.

3.4 Target Population

“Population refers to all the elements (individuals, objects or substances) that meet certain criteria for inclusion in a certain universe” (Burns and Grove, 2005:40). Merriam (2004) defines population as the aggregate of all cases sharing at least one common characteristic that can be further subdivided into strata according to specific criteria. The idea behind qualitative research was to purposefully select participants or sites that would best help the researcher understand about the problem and the research question (Creswell, 2009).

The population of this study comprised of flood victims' (school going) children, their parents, school teachers from the area, members of local government authority (all of these from Mabwepande). The population also involved social service practitioners working in NGOs (particularly World Vision). The study also involved social workers and officials from the Department of Social Welfare under the Ministry of Health, Community Development, Gender, Elderly and Children and the Prime Minister's Office Disaster Management Department.

3.4.1 Sample size and Sampling Techniques

3.4.1.1 Sampling Procedures

According to Cohen et al (2000) sampling is one of research procedures involving the analysis of a population chosen for the study. It is not a common practice to have the whole population in a research project. Sampling saves time and costs. Merriam

(2004) suggests that the purpose of sampling is to ensure accuracy in the generalization of results.

This study employed purposive sampling procedures. These are convenient because they guide a researcher to select certain individuals from a population subjectively and deliberately (Merriam, 2004). The researcher used purposive procedures of sampling to have individuals with valid information about psychosocial services to children affected by natural disasters and if at all the services have improved their academic wellbeing.

Therefore purposive sampling was applied to all categories of respondents; the children, their parents/caregivers/guardians, teachers, local authority officials and service providers. Sampling in this study was less hectic because every household within Mji Mpya is a family of victims that have been relocated after the floods. The area the researcher visited only has new residents (either in houses or huts or tents) who all happen to be victims of the incident. Information about interviews with children and parents was at the local government office within the area, a week before the actual exercise.

During days of data collection, the researcher held interviews with children and parents (those who agreed voluntarily) who visited the local authority office for their errands. Respondents for focus group discussions were obtained from their working areas; the two groups of school teachers (one with two men and two women and the other with three men and one woman) both from the newly built primary school by World Vision. The discussions were held on a weekend after an appointment was set

between the researcher and the school's head teacher in collaboration with a leader from the local authority.

Another focus group was that of local leaders from Mji Mpya Mabwepande local government office; the group was formed by those who were found on duty (and had prior information) during data collection. The group had one woman and three men. Like with teachers, social workers and welfare officer from World Vision and Kunduchi Ward respectively were purposefully picked based on experience they had with the incident in 2011. The same applied with those from the Department.

3.4.1.2 Sample of the Study

A sample represents the actual characteristics of the whole population (Cohen et. al, 2000). Best and Khan (1992) argued that the size of an adequate sample depends upon the nature of the population of interest for the study. In this study sample selection will consider different factors (though the mainly considered factor is the qualitative nature of the study so respondent type based on richness of information is vital) including information required, purpose of study and timeframe.

The sample here will be purposefully selected based on the fact that they are "information rich" and illuminative. This means, they offer useful explanation of the phenomenon of interest aimed at insight about the phenomenon and not empirical generalization about a sample to a population. (Norman, et al, 2000), (Gretchen, et al, 1995), (Sharan, 2009). The summary of the sample for this study is as shown in the Table presented 3.1.

Table 3.1: Sample Categorization of the Target Population

Respondents	Sample Size
School going Child Victims of the 2011 floods (currently residing at Mji Mpya Mabwepande)	15
Parents and caregivers (of the child victims, also residing at Mji Mpya Mabwepande)	06
School teachers (focus groups) (From the newly established Mji Mpya Primary School)	02
Local government authority officials (focus groups) (From Mji Mpya Mbwepe)	01
Service providers in NGOs directly working in disaster areas and children (From World Vision, Bunju, Dar es Salaam)	03
Social welfare officers (Kunduchi Ward SWO and Department of Social Welfare)	04

Source: Field Data (2017)

3.5 Data Collection Methods

The data collected in a qualitative study includes more than words; attitudes, feelings, vocal and facial expressions, and other behaviors are also involved. This approach encourages the kind of flexibility so important to the qualitative researcher who can change a line of inquiry and move in new directions, as more information and a better understanding of what are relevant data are acquired (Blumer, 1999).

“Data in qualitative research is collected in the field, at the site where participants experience the issue or problem under study... This up close information gathered by

actually talking directly to people and seeing them behave and act within their context is a major characteristic of qualitative research” (Creswell, 2009:175).

3.5.1 Primary Data Collection

Focus Group Discussions and in-depth interviews were methods applied for primary data collection. Rivas (2011) suggests that when the research question is about beliefs, perceptions, feelings, ideas about a particular topic or concept or intervention or illness; interviews and focus group discussions fit best as sources of information. This is because the methods guarantee getting in depth information of the experience the subjects have about their experiences, academic wellbeing and the services they have received after the disaster. Primary data collection methods gave room for participants to provide historical information on the phenomenon being studied.

3.5.1.1 Interview

According to Creswell (2003), an interview is a data collection method instrument based on a series of questions to be answered by interviewees. He explained further that the approach represents a conversation where one person, the interviewer, seeks responses for a particular purpose from the other person; the interviewee. Interviews allow a researcher to exercise control over the line of questioning, and its flexibility helps the interviewer to gather detailed information. Interviews however are time consuming and expensive (sometimes some devices such as recorders are used so that information is captured to bits).

With this method the researcher was able to obtain information on perceptions and experiences about how the children cope daily since they have been placed in camps

at Mabwepande. With the aid of tools such as an interview diary and a recorder the researcher efficiently recorded the proceedings. This method was used when gathering information from children, parents and social work practitioners.

3.5.1.2 Focus Group Discussion

This is another primary method applied in data collection. The focus is a small group of people talking about a specific topic. This method was chosen to enable the researcher to complement the responses from individuals in interviews and to get the views of people in a group. They are conducted by having a topic to discuss and each group must have a chairperson and a secretary to take notes. A recorder was also necessary here in order to record the whole discussion for further analysis. This method was applied when the researcher wanted to get information from the local leaders and teachers.

Table 3.2: Data Collection Methods Employed for different Respondent Categories

Respondents	Data Collection Method Used	Sample Size
School going Child Victims of the 2011 floods (currently residing at Mji Mpya Mabwepande)	Interview	15
Parents and caregivers (of the child victims, also residing at Mji Mpya Mabwepande)	Interview	06
School teachers (groups) (From the newly established Mji Mpya Primary School)	Focus Group Discussion	02
Local government authority officials (groups) (From Mji Mpya Mbwepe)	Focus Group Discussion	01
Service providers in NGOs directly working in disaster areas and children. (From World Vision, Bunju, Dar es Salaam)	Interview	05
Social welfare officers (Kunduchi Ward SWO and Department of Social Welfare)	Interview	04

Source: Field Data (2017)

3.5.2 Secondary Data Collection

The method includes the use of previous (both published and unpublished) documents also known as review of documents (written or audio-visual materials). The literature and relevant documents on this topic have been reviewed before and after primary data collection in the field. The method provides an opportunity for participants to directly share their reality (Creswell 2007, Merriam 1998, Bogdan and Biklen 1992).

This method has been specifically of importance to this study because the population selected included social agencies that were in one way or another involved with service provision to the victims at Mabwepande. Workers from these agencies (in this case World Vision) have shared some of the information verbally (through interviews) but also they were able to communicate information on the services provided via written documents. Such sources incorporate wide and inclusive data and up to date information on the problem. Documentary findings have been used to compare the findings and other responses from interviews and focus group discussions.

3.5.3 Data Analysis Procedure

The approach used for this study is qualitative therefore the data collected has been analyzed qualitatively. Data that was collected from Focus Group Discussions, interviews and documentations has been analyzed using qualitative techniques of data analysis. Through content analysis of the data I have searched for general patterns by grouping the data into meaningful categories or themes. In other words I have discussed the data gathered in a thematic manner mostly guided by the research questions. These have been interpreted so as to draw conclusions on the academic

wellbeing of children affected by natural disasters. Together with the themes of information there are actual quotations of respondents' views and opinions.

3.6 Ethical Considerations

Ethical consideration in doing research is highly valued as it promotes the integrity of research. Moreover, ethical behavior helps to protect others, minimizing harm and increasing the sum of good (Israel and Hay 2006). In conducting this study, reasonable attention was given to ensure ethical consideration throughout the data collection and producing this document. First of all, anonymity was highly observed throughout the study. In doing this, names of those who were interviewed and participants in focus group discussions were not disclosed. Anonymity was observed in order to protect the informants.

Moreover, in ensuring trust to the informants, they were provided with necessary preliminary information before either the interview or group discussion began, and were also given chance to ask questions in case of any doubt or clarification required. I explained to them the academic nature of my study and that it has absolutely nothing to do with either spying or any intentions that would be harmful on their part at present or even in the future. Along with this, informants were asked to give their consents verbally to voluntarily participate in the study. I recall one of the residents who seemed ready in the beginning but after explaining about my intentions refused to participate, I had to agree and continue only with those who were willing to. The consent most importantly included recording their voices by the researcher for transcription then analysis.

Lastly but not least, all procedures were followed before the actual data collection. These were such as to obtain a written proof for data collection from my supervisor and submitted to the Coordinator for the MSW program. Then after I had to process a research permit from Kinondoni Municipal Council; a permit that would allow access to Mabwepande. After the municipal permit I had to visit the ward office so as to officially be allowed to conduct my study within the area.

CHAPTER FOUR

FINDINGS AND DISCUSSION

4.1 Introduction

Included in this chapter are findings from the field; in other words, what respondents shared as far as the study is concerned. Data search in the field was guided by the research questions, which were particularly used in structuring interview guides that were used in collecting information from different groups of respondents. Data collected is discussed in terms of thematic areas that correspond with the research questions. Key respondents in this study were children; other respondents included parents, teachers, members of local council at Mabwepande (Mji Mpya) and social service providers from non-governmental agencies.

4.2 Children's Social and Academic Experiences after the 2011 Floods

4.2.1 Poverty in the Face of Post Disaster Situations

Disasters bring persistence to poverty; it comes with loss of assets, stunting and lower educational attainment in the long run. This is according to a review conducted by Fuente and Dercon (2008). Also, in a paper presented by Drolet (2014), she states that those who live in areas most vulnerable to natural disasters are usually poor and as survivors, they are left with no access to resources.

In the first objective of the study, I wanted to explore the children's social and academic experiences after the 2011 floods. With every respondent that I interviewed, poverty became part of our discussion. Further, the objective focused on information regarding how the children find it (either negatively or positively) being shifted from

their former residences to where they are currently (Mji Mpya). I asked questions ranging from life before the incident, life immediately after the floods and life over the years after being shifted to Mabwepande. As a researcher I also discussed the matter with their parents in order to get a bigger picture on how life is for them at the area.

From the responses, effects of the floods cut across both economic and psychosocial arena. All mentioned categories finally impact academic wellbeing either in a primary or secondary manner. From a general picture, families, particularly children have been significantly affected by the happening of the event and also by the way they were treated after the floods.

Transferring families from one residential area to another one that is more than 30 kilometres away automatically brings economic and of course psychosocial implications to the families particularly poor families. The families of people taken to Mabwepande due to the 2011 floods are mostly those of poor urban citizens who couldn't afford to get themselves places that wouldn't have made them vulnerable to heavy rains in the first place. As explained in the introductory chapter, middle or high income earners can not risk living with their families in such areas. Even the respondents themselves explain that the places they used to live were only good because they could afford them as one says:

“I personally thank the government for sending us here, honestly speaking, the area wasn't safe for us at all but we stayed there by then since we had no other option considering the economic hardships. Whenever you look at the sky and see that it is cloudy you begin to worry because you know you might not be able to settle once it pours. It takes guts and perhaps lack of sense of smell to choose to have your meals outside the house, it was extremely smelly and we were

continually exposed to garbage. Now that I have been here for almost three years, when I look back I see how gross it was.” (Parent Interview, June, 2015)

The quotation above only proves that life before Mabwepande was only “stomached” because of poverty. These are the families of people without any formal education enough to get them absorbed in formal employment. They mostly depend on small scale business for a living.

“...I used to plait for 15000Tshs per head. With such I would be assured of meals and at least buy stuff for my family”(Parent interview, June, 2015).

“...I used to sell merchandise near by the City Centre”(Parent Interview, June, 2015)

“...I did small scale agriculture particularly with vegetables and sold them”(Parent Interview, June, 2015).

A point I am making here is that, the transfer to Mabwepande Mji Mpya has brought a very big change to their lives which so far is not economically potential. Taking the three quotes above it can be seen how life has changed. Note the words “used to” in their sentences, meaning that at present it isn’t the same:

“I like it here for some reasons but life has become very tough for me...cash flow is at its minimum point...when I plait here I may hardly make 2000Tshs and my clientele here is small, very small as compared to Hananasif where I was previously. I need help.” (Parent interview, June, 2015).

“This is Mabwepande...we all have areas where most of us can have vegetables right outside his/her door...what do I do next? If I decide to sell vegetable as I used to, to whom will I actually sell them? I am stuck.” (Parent Interview, June, 2015).

The situation in the families has not spared children as a matter of fact, they are equally hit by it. There are cases of drop outs, unsuccessful school transfer process, failure to enroll for secondary school, early pregnancy; just to mention a few. These

cases fall under more or less the same formula; parent financially unstable, the system not accepting such for them to provide services/to being able to have an academically comfortable life, child left vulnerable and is received by conditions that make him/her even more vulnerable.

“I attended primary school at Mpunguni...was class three just before the floods. I was then taken to Tanga to my grandparent and did not continue with schooling due to poverty. My father died last year. It has been difficult to process school transfer (50 thousand needed for the transfer) and mother can't afford that amount of money. Mother was able to secure petty part time jobs before residing at Mabwepande unlike how the situation is now. I sometimes engage in child labour as I work together with my mother in clearing plots and cleaning houses when the owner of the land needs so. We get paid and mother takes the money in order to run daily household activities. Sometimes we spend a whole day without food.” (ChildInterview, June, 2015).

I met another case of which a child, 10 years old, has not been able to carry on with schooling because the efforts to transfer him to a nearby school have not been fruitful.

In his own words:

“...I was supposed to be enrolled to a nearby school here, my mother was told that the process can cost up to 50000Tshs. It was easy with my siblings who began schooling here. I have no idea why there are such costs but what I know is that my mother can not afford that much now. As a result I don't attend school, I'm home helping my mother with work for us to earn.” (Child interview, June, 2015)

Another one, a girl aged 17, pregnant and has stopped her training. Her father is a type that doesn't care and doesn't live with them. Her mother, who used to manage petty business before they were brought to Mabwepande, is currently ill.

“Life was growing tough on me, sometimes I didn't have money for transport or even for food. Then I met this man, who worked as a bodaboda driver. He promised me a lot including marriage. I was fully taken by that fantasy, we had a relationship that resulted to my condition...he didn't want to know a thing about it, I took the matter to the local government but this guy was nowhere to be found. He fled the area and information around has it that he has a family elsewhere. I

can no longer continue with training so I do certain activities to secure some income, I know that's better than nothing. I only agreed to date the man due to this hardship. I wouldn't otherwise.” (Child Interview, June, 2015)

According to the local authority in the area the case is just one amongst a good number of girls dating and finally been deserted by bodaboda drivers and other men of that caliber. One may ask why bodaboda is a common case. The drivers are perceived as people who earn a good amount of cash on a daily basis, most of them are young with a potential to woo teenage girls and finally land them into trouble.

4.2.2 Age and Gender in Post Disaster Vulnerability

In conducting this study I met shocking cases of children heading their households. This time not due to orphanhood as often is the case but parents aren't around for financial reasons. Children ranging from the age of 7 to 13 are left in their parents' house at Mabwepande, the parents head back towards the city centre to earn a living and make arrangements to buy stuff for the children or send cash to another adult at Mabwepande for the children.

In a focus group discussion with teachers they revealed how that life style has distorted children academically. They said there are children who take care of themselves everyday because the parents couldn't live in that area where cash flow is below a satisfactory level. With that there is nobody to monitor their academic progress. Self monitoring for children that age is almost ideal than real. Even if these children maintain a perfect attendance in school, much shouldn't be expected from them in their performance. They do not enjoy their parents' daily presence at home as other children.

Additionally another group of teachers informed that children whose parents don't reside at Mabwepande don't fully attend classes during Mondays and Fridays. Children this kind according to the teachers, are many to the extent that in several instances classes on Fridays have to end at midmorning (because many will leave to go see their parents) and on Monday have to begin late (because many will be returning to Mabwepande from their parents).

Female parents and guardians believe that "something is missing" in other words they feel they have not been empowered enough for them to independently take care of their families. Why independently? Due to the hardships as discussed earlier, in some families men had to leave and go closer to or exactly in the areas they resided before (in this case there are others who left with their wives so that they fetch together as discussed in an FGD with teachers). Upon leaving, men agree with their families to come see them in a week or two and during his absence send cash to run household matters.

There happens to be two things involved according to female parents and Mji Mpya's local authority. There are families that a father has left and they are financially benefiting from that and other families where the father's leaving has done more harm than good:

"Due to the economic circumstances as I've shared with you, my husband and I agreed that he leaves us here so that he can work more comfortably. His work place is very far from here, he used to board a bodaboda which is not less than 1500Tshs from here, then board a bus which is not less than approximately 1000 Tshs. At his work place he'll need to eat and approximately that can amount to 2000Tshs. In total my husband could spend about 7000Tshs daily, about 42000Tshs weekly. That was expensive as I compare with the amount he earns, so we

agreed that he stays there and visit us weekly. As far as finances are concerned, that manner of life has made my family benefit a little more than it used to previously.” (Parent Interview, June, 2015).

“...so my husband left and I am here with the kids, during the first few weeks things were okay, he would send me cash and would visit. As time went by that wasn’t the case, I try to call him and he says he doesn’t have money, business isn’t at its best and excuses of that kind. I had a gut feeling that something is not right then somebody we know informed me that my husband is having another woman he takes care of. I have taken the matter to the Local government here but my efforts have not been that fruitful...my family and I are suffering.” (Parent Interview, June, 2015)

I asked the local government to find out on what they knew about such families and their response to the matter was, rumor had it that such may be happening but as an authority they didn’t have any official information from a reliable source. On the other hand however the local government agrees that there is a convincing possibility of men establishing other families out there for different reasons, some being “too personal” and they can’t efficiently intervene.

Some women in the area are widows; in rural and poor urban contexts widowhood by itself significantly drains a woman’s economic strength. This kind of situation is far worse when the same individuals have their houses (sub-standardly constructed) brought down by floods. These are the same houses that they earned income from by renting some of the rooms within the houses. Currently these women live on mercy of their relatives in order to take care of the families; they have not yet been able to generate other activities for income.

“The house we had together with my late husband couldn’t survive the floods because it was sub-standardly constructed. Sincerely speaking, my husband’s death plus losing the house (source of income) to floods shook the family’s economic ability. I took my children to Tanga then

brought them to Mabwepande and can't take them to school (because some did not attend "pre-primary" education for financial reasons). I used to earn from the house that I used to rent before it was destroyed by the water. I am yet to earn anything here for a living. I survive with the help of my close relatives. Business can not be efficiently conducted in the area."(Parent Interview, June, 2015).

"I am a hair dresser but can not do that and realize big profit margins as compared to my life before. Some families live here temporarily and go back to town from time to time mainly due to economic reasons." (Parent Interview, June, 2015).

4.2.3 Sense of Security (Home is where the House is vs Home is where the Family is)

Another information along with that as shared by teachers is that there is always a small group of pupils enrolled on temporal basis. As I was listening I wondered if at all those children will ever be able to at least averagely perform if strict interventions don't take place.

"There is this small group of pupils that we usually enroll "temporarily" especially during rainy seasons. What happens is that on sunny days the child together with his/her family live in the area or close to the area they used to live before the 2011 floods. We are not very sure of the children's progress there because most parents who do this aren't cooperative enough until it rains. So when it showers heavily they come take their place here and bring their child to school swearing not to go back to the previous residence...to every teacher's surprise, when it's sunshine again, the child is no longer there" (Focus Group Discussion, Teachers, June, 2015).

In the social work profession, particularly when discussing on practice with children, one would normally come across the phrase, "for the best interests of the child". The phrase guides practitioners in decisions they make concerning children. Not only practitioners but also parents, guardians and anyone else left with custody of children. In the course of discussing with teachers more questions rose, as in wanting to comprehend the idea more; of whose interest is that "nomadic" lifestyle? But again,

do these parents ever discuss with their children at least for the sake of knowing their feelings regarding their unsettlement? At least the teachers and I were sure that teachers are not at all involved when such decisions are made; only when “trouble” comes and they are supposed to go back to Mabwepande.

The discussions enlightened me that the mega matter of concern is the potential economic benefit of being closer to the City Centre as they used to. For children it is only an opportunity for them to meet their old schoolmates, apart from that, it is the parents’ decisions that no one has the right to question.

During the interviews I conducted with children I also wanted to find out on how they felt of their new residence despite the challenges they shared with me. What I found out is that they were comfortable there because the area (Mabwepande) according to them has fresh air (as compared to where they used to live), spacious enough for them to play comfortably and as children they feel that they can, together with their families actually establish their lives there as one child said;

“...I understand there are many challenges here but again as much challenging as it is here I wouldn’t prefer going back to Kinondoni...even when it happens someone tells us that our house at Kinondoni has been reconstructed and my family decides to go, I would better think of staying here because I don’t want to lose our house and land here because at least I am sure that this area here is ours” (Child Interview, June, 2015).

As unbelievable as that statement may sound, those are words from a child who is hardly 12 years as I asked him to imagine if he was given an opportunity to go back to their previous house. The same feeling is reflected by other children as I was trying to find out of their sense of security in the area.

Response is not the same for all children, in social work practice this is termed as individualism; a principle in Social Work that states on the uniqueness each individual has and that behaviour and actions must not be generalized for any reason. On that account, other children had different wishes;

“I live with both my parents, one of my siblings dropped out of school... I still wish to go back to our previous residence but can’t because it has been brought down. Our house is now here” (Child Interview, June, 2015).

4.3 Existing Services Provided for the Children in Facilitating their Academic Wellbeing

In the course of data collection I found out that there is less as far as professional attention is concerned when it comes to psychosocial services. Service provision here was mostly material based, meaning provision of building materials, food, building a school and a hospital. This doesn’t mean that it is nothing; it rather means that something important is forgotten.

Visiting the area I discovered a number of issues beyond what the media informed. More than 1000 families were taken from slum areas of Jangwani, Kigogo, Mburahati and Mbagala. Amongst the 1000, about 600 families were shifted first and were provided with plots. The remaining 400 went to Mabwepande later. The first 600 households were the ones who began by settling in camps and were provided basic necessities by both the government and private agencies.

The division of households has affected service provision to date. Besides provision of plots for settlement, the first 600 were given cement bags and other basic material for construction, they also have other services such as water and electricity. Houses that

now belong to this first group are located near by a health facility and a primary school that was constructed together with teachers' houses by World Vision. These houses and services are clearly demarcated from settlements of the last 400 households by a bridge. After crossing the bridge, one can clearly see the difference between the two groups.

Members of the 400 households only enjoyed the privilege of being provided with areas/plots to construct houses. Unlike the others, these were not provided with any building materials, they have no electricity, they had no water for a long time until recently. As compared to the 600, these are not close to the school nor to the health facility.

“The 420 families have done almost everything on their own except for the plots. It has been difficult for our children to be enrolled in school...particularly for the primary school pupils. The 420 households were informed that the Regional Disaster Committee has no more funds to run that exercise so they were informed if they needed to have a relocation they'll have to do it independently. This has significantly affected service provision on our side.” (Parent Interview, June, 2015).

Taking the matter in terms of levels of vulnerability, children under the 400 households are more vulnerable than their counterparts in the 600. Some of these families still live in tents even several years after the disaster. If Social Workers (or social welfare officers) were to pay more service provision visits to this area, they would definitely come up with two different results of assessment from the two sets of households.

Referring to a common tool for assessing children's needs and potentials/resources known as CSI (Child Status Index), children from the 400 households would require more attention compared to the others. The tool identifies seven major areas of child

needs to be assessed, namely; shelter/housing, psychology, education, health, food and nutrition, economic empowerment and security. In the seven areas, assessment is done by numbering from 1 to 4 where 1 stands for the worst condition (a notion that services are immediately required) and 4 refers to a better condition (a notion that the child is not needy, s/he is rather resourceful). If I was to assess these families using the tool; children from the 600 households would rank “4” in shelter and housing while their fellows would rank “1”. In psychology, education, health, food and nutrition and economic empowerment; the former would rank “3” while the latter would rank “2”. In security, they would fall under “2” if I were to particularly assess a child who does not live with his/her parents regardless whether the child is in the 600 or the 400 (refer to FGD with teachers above).

Sadly, neither the children, parents, teachers nor the local authority were aware of any party in the name of social workers or social welfare officers to assist them in what they encounter daily. They only recall of being provided with building materials, mattresses, nets and food during their first days at Mabwepande. Service provision as far as social work is concerned, must go beyond provision of material stuff. Service provision by social workers was supposed to highly consider of the psychosocial requirements of these children together with their families.

It is an understandable fact that service delivery to vulnerable populations particularly children and youth is never a “one man show”. Different service providers are expected to “knit” their efforts to provide all basic services in a holistic manner (Dzikure, 2010). According to the SADC Minimum package of services for orphans and other vulnerable children and youth (2011), the coordination of services formed

by a linkage and referral system result to a backbone for the delivery of comprehensive services for children.

Vulnerable children, including key respondents to this study, live in families, of which we expect are supported by communities which are supported by broader national and global support systems. The package by SADC suggests that, children and youth are best cared for at the family and community levels. In cases where the immediate support systems (family and community) are impaired (such as the case of floods and emergent shifting of residential areas), other external levels of support must be considered. What is stated by SADC does not differ from the ecosystems theory:

“Individuals exist in families, families exist within communities and neighbourhoods. Individuals, families and neighbourhoods exist in a political, economic and cultural environment. The environment impacts the actions, beliefs and choices of the individual” (Rengasamy, 2010).

Results of this study however seem to diverge, though to a small degree, from what is stated in the ecosystems perspective. It is a fact that when families and immediate communities fail, then we expect assistance from national systems available. Results of the study to a larger extent correlate with the Social Functionalism theory which explains how social structures work together to shape the society as a whole.

This means that when one part is impaired the whole systems impairs. When the government as the primary service provider to communities and the major employer of service providers, insufficiently facilitates service provision, such insufficiency will manifest in the whole system (as it will further be discussed below in the challenges encountered by service providers, particularly social workers). In this study it was found that, assistance was provided only in the first few months after the disaster.

Additionally, services/interventions provided were only material stuff as explained earlier.

In an interview with a social worker from World Vision Tanzania, he said that his agency only made sure that there was a new primary school established together with houses for teachers. His response did not differ much from what the Social Welfare officer from Kunduchi ward said. He said that after they were assured that the flood victims had basic necessities and that their children were guaranteed of education, his justifications to continue visiting the area were almost nil.

It is clear that, the quality of response during and after disasters is not sufficient. The response available is so much on material support; which brings another concern and that is post disaster monitoring and evaluation. Observation from the field and documentary review suggest that more attention should be given to post-disaster monitoring and evaluation of the long term impacts of the disaster and the response. As said multiple times, once physiological needs are met, priorities change. Attention of disaster relief teams turn to matters other than the victims. Therefore, those previously affected by a disaster, continue to be specifically vulnerable.

This means, service provision was only material based; distributing things that are tangible and countable. Both children and their parents were only given what would enable them to survive (food, clothing, shelter and med care). There wasn't a continuum of care and support that would address their social, emotional, spiritual and psychological wellbeing. This refers to a kind of support that influence their social environment in which they began living in. it is also a support for the emotional and

social aspects of a child's life, so that s/he lives with hope and dignity. The support is professionally known as psychosocial support.

The study tried to find out of any psychosocial initiatives that were taken in order to ensure continuum of services even after the basics were provided; even after the government and media lost their attention in the area and found almost none. For that reason, families have found their own ways of addressing the problem, where we have seen a man or both parents living away from children. The researcher is convinced that what brings families apart is more than what meets the eye. It is more than the economic reasons as some parents and local leaders suggested (though I do not totally disagree). It is the frustration within family members that draws them apart and leaves the children to suffer the consequences.

In Dar es Salaam, men from Mabwepande are not the only ones having an unsatisfactory income and working far from their families. Distance is not enough of a justification to leave a family behind and not to mention establishing a new one elsewhere. Frustration, lacking resilience and coping skills can be more than enough to justify this. Victims were not prepared to cope; they were not provided with intangible services worth enough that would enable them to generate basic requirements continually and comfortably. Inadequacy of psychosocial interventions has evidently affected parents therefore children have not been spared from the consequences.

Provision of psychosocial services also requires sustainability, as they are expected to leave long term benefits for children. Continuum of adequate services is supposed to

be guaranteed to children in need continuously over time. The National Guideline for Psychosocial care and support services for most vulnerable children and youth in Tanzania (2014) directs that, it is important to strengthen the capacity of families and communities to deliver the services needed by children to ensure long term sustainability. The guideline continues by stating that, the services should include empowering children with livelihoods, self reliance skills and opportunities that will ensure income earnings and generation.

When it comes to “empowering children with livelihoods, self reliance skills and opportunities, the study discovered that there are slight (but noticeable) efforts done. For example during an interview with a parent, she shared that some private service providers near by the victims’ residential area have lowered their service prices for survivors of the floods.

“Our house was brought down during the floods. Together with my family we came to Mabwepande independently. I have two daughters. The eldest failed her form 2 exams due to transport challenges. The young one is at Godeni which is nearby...the private school lowered fee prices for us survivors.” (Parent Interview, June, 2015).

Currently, there are small groups of trainers that visit the residents and train them on small and medium income generating activities. Men and women are trained to design clothing such as *batiki* and make candles and home detergents. Others are encouraged to engage in cooking locally common bites such as *maandazi*, chapatti, *vitumbua* and others of such category. They are also trained to work in self help community groups well known as VICOBA (Village Community Banks) in order to promote a saving culture. Engaging in economic activities can significantly assist in coping, accepting the new life and gradually getting back on truck, at least economically. According to

the community leader, the trainings have been helpful to them. If the families will reap the fruit of the current efforts, then children will directly benefit.

Others have to fetch for such services far from Mabwepande as one girl I interviewed shared that, since she got pregnant she had to quit formal schooling but was accepted at KIWOHEDE (Kiota Women's Health and Development) so as to train as a tailor. Such skills if she pays enough attention will be useful to her and her family in terms of income generation and empowering her.

Commitment in economic activities through consultations and involvement of individuals, families and community members in general suffering from poverty situations is one of key elements in poverty eradication (Drolet, 2014). Such activities are carried out by private groups and not professional social workers who would have assisted the survivors to gain self confidence and to perceive their life more positively. The interventions are not carried out by social workers/social welfare officers for reasons that will be discussed below.

4.4 Challenges encountered by those Providing Services to the Children

4.4.1 "Day to Day" Based Challenges

In a documentary review on social workers in addressing disaster situations it was found that one of social workers' duties is disaster management and they have an important role to play in managing disasters (from preparedness, responding during disasters and mitigation during post disaster situations). In theory that is how it is supposed to be; practically on the other hand, there are certain challenges encountered by practitioners which lessen their efficiency in this part of practice.

A study by Kyando (2015) on contribution of social workers in disaster management found that social workers assist communities and families in identification of hazards, vulnerabilities, the probability of hazards to become disasters, assessing communities capabilities to manage disasters, reduction of risks, community organization into developing plans and undertaking actions to reducing risks.

The objective was to find out the challenges encountered by those providing psychosocial services to the children after the disaster (as explained earlier, focus was to assess continuum of services). As brokers of services for vulnerable populations, social workers are active members of Disaster Management teams, they link responses with private agencies particularly NGOs, UN agencies and corporate agencies that in such matters respond in what they call corporate social responsibility. This well woven link of services works very well during the first weeks/months after the disaster. As explained earlier, after the basics have been supplied, it also means closure of business.

In interviews with social workers, it was evident that there are challenges encountered by practitioners. The challenges, they said, force them to the idea of not really prioritizing activities related to disaster victims who at least, already have shelters. When it comes to provision of psychosocial services, social workers are the ones to link and engineer the process but then one of the challenges they encounter is, their number is so small as compared to the number of clients in need.

In Dar es Salaam, particularly Kinondoni Municipality, Social work practitioners have been distributed to almost every ward. In wards that social workers have not been

deployed, then community development officers are in charge. Mabwepande is under Kunduchi ward, one of the wards that have a Social Welfare Officer. The Social Welfare officer is responsible for Kunduchi, Tegeta, Boko, Bunju, Madale and other areas located just before Bagamoyo. Everyday, he has to address individuals and families that visit his office from morning to office closing hours.

When interviewing him he said, the least number of clients that visit in a day is ten. He is also responsible to visit and assess Day Care centres and schools for young children. Along with that he also pays visits to NGOs/CBOs (particularly those that are on process of establishment) to assess if at all they meet the criteria required. Those are some of the activities to be conducted by one social welfare officer in a ward. In a somewhat overwhelming situation, to think of what to be done to at least assist families and children at Mabwepande Mji Mpya, is not a priority; unless the particular family shows at his office.

Results from the interviews are supported by data from a study that applied mixed methods in finding out challenges social work practitioners encounter in addressing disaster and post disaster situations. The study revealed that, one of the challenges is poor working conditions. Social welfare officers are faced with overwhelming community needs and on top of that they are low in number (as explained in the interview above).

4.4.2 Lack of Priority from Central Government

The primary guideline for response in disasters is the Disaster management Act of 2015 (replacing the Disaster Relief Coordination Act) and Disaster Management

policy of 2004. In the policy; responsibilities for each party responsible in the disaster management team are well stipulated. Responsibilities by both public and private partners were clearly set in the policy.

What I found to be challenging is that, there are no guidelines in the document that explain to practitioners regarding provision of support beyond material support. In what has been outlined as instructions for the ministry responsible for health (where most social welfare officers in public service work under), there is nothing related to psychosocial support. There are four responsibilities as outlined below;

- (i) Assist in locating health and welfare workers to aught personnel assigned to shelters.
- (ii) Assist the Committee in obtaining casualty information from within the disaster area.
- (iii) Provide technical assistance for shelter operations related to food, vectors, water supply and waste disposal.
- (iv) Assist in the position of medical supplies.

The outline of responsibilities for welfare workers has only paid attention to the physical needs of victims and not what happens after they are provided with the physical needs. The Disaster Management Act on the other hand, mentions of establishing and maintaining directory and inventory for life support and “critical infrastructure” for disaster management operations. Critical infrastructure as used in the Act refers to processes, systems, facilities, technologies, networks, assets and services essential for health, safety, security or economic wellbeing and effective function of the Government and Community.

I went further in wanting to find out more about critical infrastructure; particularly how the Act has prioritized the consumption of disaster funds. It was found that, the funds for disasters will be used for provision of essential commodities to victims and prevention, mitigation, preparedness, response and recovery from disaster and any other activities related to disaster management.

We therefore lack a state plan for service provision after the victims have “settled”. Or, it is better stated that the plans, guidelines and Act are not adequate enough for situations “after the disaster event is no longer news”. Social workers/welfare officers are supposed to work with diverse groups after the aftermath of a disaster. Working with diverse groups does not only mean planning of services for survivors but also looking out for the welfare of vulnerable groups among the survivors and in this case, children. Without well set guidelines it is challenging for service providers to find a “justification” to even place those services in activity plans (Interview, Social Welfare Officer, June, 2015).

Thinking critically of the explanation, one has to recall of a plan of action for Most Vulnerable Children in Tanzania, NCPA, which its second phase is currently on implementation. In the plan, displaced children due to manmade and natural disasters are also categorized as vulnerable children. Among the expected outcomes of the plan, one is increasing the number of MVC receiving basic psychosocial support interventions and services through different levels of psychosocial support interventions (individual, family community and National) covering each PSS domain (skills and knowledge, emotions and social aspects). One may ask him/herself, if the NCPA recognizes these children, why the inadequacy?

In an interview with a social worker, the study found that displaced children as termed in the plan are not “MVCs of priority”. Many proposals for funding and activities carried out by both public and private partners are directed to orphans and to VAC victims. In other words, that category of children can not get sufficient funding for their services.

Challenges found from the study go in line with what was suggested in the conceptual framework. The framework proposed that, when there is poor disaster preparedness, the mega systems for disaster management also become weak. The study findings have shown that, Tanzania has guidelines for disaster management but we lack adequate technical know how in handling issues related to psychosocial support particularly to children. With such inadequacy, professionals as explained above, lack enough justifications for provision of services to the group in question. If a matter has not been prioritized by state policies, then it can not be easily warranted when it comes to funding for its activities.

The findings also have not diverged from the theories adopted by the study (Eco Systems theory and Social Functionalism theory). In the Eco systems theory, the political environment, where policies are enacted, affect communities, families and individuals in the families. Inadequacy of guidelines for psychosocial services in post disaster situations has negatively impacted the community of survivors at Mabwepande, the families within and the children. The Social Functionalism theory believes that the strength of the whole system depends on the strength of each part of the system and the vice versa is true.

CHAPTER FIVE
SUMMARY OF THE KEY FINDINGS, CONCLUSION AND
RECOMMENDATIONS

5.1 Introduction

The general focus of this study was to find out the academic wellbeing of child victims of the 2011 floods. In addressing this concern, the study involved different categories of informants, key being children who were affected by the 2011 floods in Dar es Salaam. These children together with their families were shifted from their usual areas of residence (Jangwani and Kinondoni Hananasif) to Mabwepande Mji Mpya. The reason for this mega shift was based on how evident it was that the areas were more vulnerable to flood destruction than others in the city.

Towards approaching the answer to the study's research question, I used interviews and focus group discussions to children, parents, social welfare officers, groups of teachers and that of local government leaders respectively. I also used documentary review so as to obtain secondary information regarding research questions the study had. Interviews were conducted to fifteen children, six parents and seven social workers/welfare officers (three of them being from World Vision). Focus group discussions were used for two groups of teachers and a group of community leaders.

The study was guided by two theories; ecosystems theory and social functionalism theory. The former focuses on the interplay between the person and his/her environment; that all existing elements within an ecosystem play an equal role in maintaining balance of the whole. With this theory the researcher was able to

critically analyze how systems within the community can “come in handy” in situations such as what is experienced by those children. When the government in Dar es Salaam paid attention to the matter, both public and private partners worked to rescue the situation and put the children and their families in a place they considered to be better. In the analysis it can also be seen how changes in the systems can directly or indirectly affect the children. When a parent for instance “drops” economically due to the shift, children can not be spared from the consequences.

The latter (social functionalism) explains how social order is possible and how society remains relatively stable. In the assumption that every part/segment in the society is functional then social order is possible. The whole society’s wellbeing depends on the wellbeing of each of its segments. In analyzing, this theory came in line with the findings of this study because it has been clear that inadequacy of psychosocial services has impaired the wellbeing of families at Mabwepande.

The following is a summary of what informants presented as responses to the study’s research questions. The responses are categorized into; the extent to which the disaster has affected the children’s academic welfare, existing psychosocial interventions for children and challenges encountered by those providing psychosocial services to the children.

5.2 Summary of Key Findings

The 2011 floods followed by moving to Mabwepande have significantly affected children and their families. The families are drowning in poverty, women and children have been more impaired economically and there is loss in the sense of security to

some children in the area. This study found that the informants can not efficiently perform in business as they used to before moving to Mabwepande. Additionally, the study also discovered from the informants that some men have left their families at Mabwepande to move closer to the city centre for economic purposes but in the long run, ended deserting their families.

The researcher was also informed that, some children have lost their sense of security (the question of whether home is where the house is or where the family is). A group of teachers informed the researcher that, children spend their Mondays to Fridays at Mabwepande (alone without their parents) for schooling then leave on Friday afternoons before school hours end to rush to their parents who have relocated closer to the city centre.

The lifestyle is not user friendly to children when it comes to excelling in school. The separation in families, the frustration their mothers go through and loneliness for those who do not live with their parents are factors that drain out whatever academic potentials that these children had. With the ones that were interviewed, they wished they went back to where they used to be, only that they are not sure of their “geographical safety”.

The study found that, there was more of provision of materials than services that are intangible. There was consideration for distribution of food, clothes, building materials (for some families) and other tangible stuff for the families that were affected by the floods. A few months later when the families were considered to have settled there, those services were significantly reduced.

Informants shared that they were not prepared for the move, they were not prepared for life at Mabwepande. Everything according to them happened very fast they were left not knowing where exactly to begin, what path they should take but most importantly how to cater for the academic needs of their children (tuition fee is free but other expenses have to be taken care of by the parent).

Private companies and organizations have played a role at least in this part; by building a primary school within the area and lowering fees for the victims (as explained in the analysis). In terms of psycho social domains, there are two; cognitive and interpersonal, the two are interdependent. Building a school can help meet the cognitive domain but with poor social, emotional and spiritual wellbeing, the intervention used is not psychosocially complete.

Providers of psychosocial services to clients (particularly children in this case) are members from vast professions and disciplines. The study however was interested in finding out the challenges particularly encountered by social workers/welfare officers. Some of the challenges found included inadequate number of social welfare officers as compared to the people in need of their services, lack of guidelines of psychosocial services during post disaster, lack of priority for children affected by disasters in national plans for MVCs.

5.3 Conclusion

This study has been able to enlighten experiences (particularly the academic wellbeing) of child victims of the 2011 floods. In theoretical terms of social work practice, it is clear that children affected by disasters belong to the group of most

vulnerable children and that them together with their families deserve psychosocial attention. Psychosocial services are meant to help these groups boost their resilience and be able to move forward more positively. Findings of the study have shown the degree of inadequacy in provision of the services and how that has affected the children in a number of ways specifically in progressing academically.

The study has also revealed that even though we have policies on disaster management and plans for Most Vulnerable Children, there is a gap in terms of guidelines for services for victims during post disaster, most particularly after provision of material needs. Children and their families do require a great deal of psychosocial attention to gradually assist them to normalize their situation and live positively. Inadequacy in provision of psychosocial services has led to having people who still think of going back to where they used to reside earlier and others actually moving and living in the areas because life in Mabwepande is “impossible”. When parents are unsettled, children become double unsettled.

On theoretical relevance, both social functionalism and ecosystems theory have helped in understanding; one, the importance of different circles of support for the child can be helpful to a child in need (family, friends, teachers, private companies and organizations), two, how impairment in one or several parts of the system can disturb the system as a whole. Lack of guidelines for service provision after material provision for instance, have led to disturbance to the level of families even creating unsettlement in some of those families as explained earlier.

5.4 Recommendations

This study focused on the academic wellbeing of child victims of the 2011 floods. A researcher interested to conduct a study related to this will have to consider a few contextual issues that will make his/her study really address an existing knowledge gap.

One can choose to focus on a different group of key informants; this study was interested in children affected by natural disasters. Another study may choose to focus on those affected by manmade disasters (such as children found in refugee camps in Nyarugusu) or the same natural disasters but to children who did not have the privilege of being shifted to areas that are less vulnerable to destructions. Another contextual issue to consider is time; it has been seen in this study that though psychosocial services were inadequate there is some progress though gradual. With time if the same study is to be conducted, it may have different results.

Last but not least is the area of study; Kinondoni, Dar es Salaam. The study has shown how family income has been shaken by relocating to Mabwepande. It is very possible that the economic “drop” has been caused by the nature of economic activities in the urban. Most of activities that were shared by the parents needed them to be somewhere close to the city centre and not in the outskirts of it. If this study is to be conducted in the rural areas where economic activities are different, the study may not share what has been reported by this study.

REFERENCES

- Ager, A., Akesson, B., Flouri, E., Okot, B., Mccollister, F., & Boothby, N. (2011). The Impact of the school-based Psychosocial Structured Activities program on conflict-affected children in Northern Uganda. *Journal of Child Psychol Psychiatry, 52(11)*, 1124 – 1133.
- Barkan, S. E. (2013). *Understanding and changing the Social World*. Minnesota: University of Minnesota Libraries Publishing.
- Boyden, J., & Mann, G. (2005). *Children's risk, resilience and Coping in extreme situations*. London: SAGE Publications Inc.
- Chem, C., & Lee, W. (2012). "Damages to school infrastructure and development to disaster prevention Education strategy after Typhoon Morakot in Taiwan". China.
- David, S. (2004). "Are we Ready and Willing to Address the Mental Health Needs of Children" Implications from September 11th. *Official Journal of the American Academy of Pediatrics, 113(5)*, 1251 – 1278.
- Denzin, N. K., & Yvonna S. L. (2000). *Handbook of Qualitative Research (2nd edition)*. London: Sage Publications.
- Garret, L., & Andrew M. P. H. (2007). Children and Megadisasters: Lessons Learned in the New Millenium. *Advances in Pediatrics Journal, 54(1)*, 189 – 214.
- HFA, (2011). The Hyogo Framework for Action in Asia and the Pacific: regional synthesis report 2011-2013. Tokyo, Japan.
- International Save the Children Alliance (2008). Disaster Mental Health Subcommittee, Disaster Mental Health Recommendation: Report of the

Disaster Mental Health Subcommittee of the National Biodefense Science Board, ed. US Department of Health and Human services Washington, DC, USA.

LaGreca A. M. (2008). *Children and Trauma Update for Mental Health Professionals*. Washington, DC: Sage Publications Inc.

LaGreca, A. M. (2002). *Children and Disasters: Future Directions for Research and Public Policy*. Washington DC: Sage Publications Inc.

LaGreca. A. M. (2002). *Helping Children Cope with Disasters and Terrorism*. Washington, DC: Sage Publications Inc.

Martine, G., & Guzman, J. M. (2002). Population, Poverty and Vulnerability: mitigating Effects of Natural Disasters. Environmental Change and Security Project Report, Washington DC, USA.

Masten, A. S. (2001). Ordinary Magic: resilience processes in development. *American Psychologist*, 56(3), 227-238.

Merriam, S. B. (2009). *Qualitative Research: A Guide to Design and Implementation*. San Francisco: Jossey-Bass.

Mitchell, T., Shepherd, A., Lewis, K., Lenhardt, A., Jones, L., Scott, L., & Muir-Wood, R. (2013). The Geography of Poverty, Disasters and Climate Extremes in 2030. A report examines the relationship between disasters and poverty. Berlin, Germany.

Mohr, R. D. (2002). Technical change, external economies and the Porter hypothesis. *Journal of Environmental economics and management* 43 (1), 158-168.

Murakami, N., Ozasa, Y., Muramatsu, S., Nakayama, S., Fukunaga, M., & Nakai, Y. (2007). "The Health of Victims of the Great Hanshin-Awaji Earthquake: A

- Psychosomatic Perspective. *Japanese Journal of Disaster Medicine*”, 12(2), 129 – 143.
- New York University Child Study Centre, (2006). *Caring for Kids after Trauma, Disaster and Death: A Guide for Parents and Professionals 2nd Edition*. New York: New York University Press.
- Peek, L. (2008). Children and Disasters: Understanding Vulnerability, developing capacities and promoting Resilience. *Children and Youth Environment* 18(1), 1-29.
- Phillips, B., & Jenkins, P. (2010). The Role of Faith Based organizations after Hurricane Katrina. *American Psychological Association*, 2(1), 215-138.
- Punamaki, R. L. (1987). Psychological stress of Palestinian mothers and their children in conditions of political violence. *Quarterly Newsletter of the Laboratory of Comparative Human Cognition*, 9(3), 116-119.
- Pyles, L. (2007). “Community organizing for post disaster social development. Locating Social Work” *International Journal of Social Work* 50(3),321-333.
- Pynoos R. S. (2008). Effectiveness of a school-based group psychotherapy program for war-exposed adolescents: A randomized controlled trial. *Journal of the American Academy of Child and Adolescent Psychiatry*, 47(9), 1048-1062.
- Rivas, C. (2011). *Coding Qualitative Data. Researching Society and Culture (3rd Ed)*. London: Sage Publications Ltd.
- Rutter, M. (1985). Resilience in the face of adversity: protective factors and resistance to psychiatric disorder. *The British Journal of Psychiatry*, 147(6), 598-611.
- Sinclair, M. (2007). Education in Emergencies. *Journal of Commonwealth Education Partnerships*, 5(1), 52 – 56.

- Speier, A. H. (2000). *Psychosocial issues for children and adolescents in disasters*. Washington D.C: American Psychiatric Publishing.
- Streek-Fischer, A., & Vander, K. (2000). “Down will come baby, cradle and all”: Diagnostic & Therapeutic Implications of Chronic trauma on Child Development. *Australian and New Zealand Journal of Psychiatry* 34(6), 903-918.
- Tan, A. (2009). Community Development Theory and Practice: Bridging the gap between “Micro” and “Macro” Levels of Social Work. Paper presented at the North America Association of Christians in Social Work Convention, Indianapolis, Indiana.
- Tanner, T. (2011). *Children and Disasters: Understanding Impact and Enabling Agency*. Institute of Development Studies, Brighton, UK.
- The John Hopkins and International Federation for Red Cross and Red Crescent Societies, (2006). *A report of International Federation of Red Cross and Red Crescent Societies. Public Health Guide for Emergencies*, Geneva, Switzerland.
- UNDP, (2011). *Disaster Management Project (2011-2015) Policies in Mainland and Zanzibar*, Ministry of Internal Affairs, Dar es Salaam, Tanzania.
- UNICEF ,(2011). *Tanzania Annual Report*. Retrieved on 13th June, 2011 from: https://www.unicef.org/about/annualreport/files/Tanzania_COAR_2011.pdf.
- UNICEF, (2011). *Tanzania Evaluation Report on Strengthening National Disaster preparedness and response Capacity*. Dar es Salaam, Tanzania.
- URT, (2004). *Tanzania Disaster Management Policy*. Dar es Salaam, Tanzania Government Printers.

- URT, (2005). National Strategy for Growth and Reduction of Poverty paper phase I. Ministry of Finance and Economic Affairs. Dar es Salaam, Tanzania.
- URT, (2007). National Adaptation Program of Action, final report Ministry of Environment and Forest, Dar es Salaam, Tanzania.
- URT, (2007). National Costed Plan of Action Phase I. Evaluation Report of MVC Department of Social Welfare. Ministry of Health and Social Welfare, Dar es Salaam, Tanzania.
- URT, (2008). Child Development Policy (2nd Edition).Ministry of Community Development, Gender and Children. Retrieved on 11th June, 2008 from: [http://www.cdfz.org/files/Child%20Development%20Policy-2008%20English%20Version%202010%20\(2\).pdf](http://www.cdfz.org/files/Child%20Development%20Policy-2008%20English%20Version%202010%20(2).pdf).
- URT, (2010). National Strategy for Growth and Reduction of Poverty paperphase II.Ministry of Finance and Economic Affairs.Dar es Salaam, Tanzania.
- URT, (2011). Report of an integrated Disaster Management Training Manual for Tanzania. Vice-President's Office –Department of Environment, Dar es Salaam, Tanzania.
- URT, (2012). Tanzania Emergency Preparedness and Response Plan. Final report, Dar es Salaam, Tanzania.
- URT, (2013). National Costed Plan of Action II (2013).Evaluation Report of MVC Department of Social Welfare. Ministry of Health and Social Welfare, Dar es Salaam, Tanzania.
- URT, (2015). *The Disaster Management Act 2015*, Dar es Salaam, Tanzania Government Printers.

Zakour, M. J. (1996). Disaster research in Social Work. *Journal of Social Science Research, 22(1)*, 7-25.

Zakour, M. J. (2007). Vulnerable populations and the Multidimensionality of disasters. Paper presented at the International Seminar on Disaster Planning, Management and Relief, St. Michael, Barbados, Caribbean.

Zakour, M. J., & Harrel, E. B. (2003). Access to disaster services; Social Work Interventions for vulnerable populations. *Journal of Social Science Research, 30(2)*, 27-54.

APPENDIX

Appendix I: Interview and Focus Group Discussion Guide**A: Interview Guide for Children**

1. Where did you reside with your family before coming to Mabwepande?
2. May you explain briefly how your house was?
3. How do you compare where you used to live then and where you are now?
4. Which school were you attending before the floods?
5. What was your experience there?
6. How did you perform then?
7. What was your experience when you first joined your new school?
8. Do you have friends there? How long did it take you to have friends?
9. How do you find school now? Do you like your teachers?
10. Do you in any way feel that you would have performed better in your previous school? Why do you think so?

B. Interview guide for Parents and Caregivers

1. Where did you reside with your family before coming to Mabwepande?
2. What do you do for a living?
3. May you explain briefly how your house was?
4. How do you compare where you used to live then and where you are now?
5. How was your child's academic behavior before the incident?
6. Did s/he enjoy schooling there? Why do you think so?
7. Do you think there are any changes with your child's academic behavior? Why?

8. What does your child do/how do you help your child cope with changes affecting his/her schooling?
9. How do you compare child-teacher relationship then and now?

C. Focus Group Discussion for Teachers

1. What is your teaching experience?
2. Have you ever taught children with special needs or requiring any special attention?
3. Are the children here any different from others you have taught in the past? Can you explain how different?
4. How do you grade them in terms of academic performance?
5. Have you noticed any difference over time comparing with when you begun teaching them? If yes, elaborate the difference.
6. Can you explain how you relate with the parents and guardians of these children?
7. What are the infrastructural challenges in working with these children?
8. Are there any professional related challenges? If yes, specify (lack of collaboration, ethical dilemma, competence issues e. t. c?)
9. What cultural issues found in the community stand as bottlenecks against serving children?
10. Which challenges have you encountered specifically from the children?

D. Interview Guide for Service Providers

1. What is your experience in the field?
2. What is your experience in dealing with disaster aftermath?

3. Which services did you provide to meet the children's and their families physical needs?
4. Were there any procedures used to screen for psychological complexes in children?
5. What do you do in the course of helping children with their psychological needs?
6. What do you do in helping them address their social needs particularly school-related?
7. What programs does your agency have that aim at facilitating the children's academic wellbeing?
8. What are the infrastructural challenges in working with these children?
9. Are there any professional related challenges? If yes, specify (lack of collaboration, ethical dilemma, competence issues e. t. c?)
10. Are there any structural related challenges (nature of organization, availability of policies and laws guiding service provision, funds e. t. c)?
11. What cultural issues found in the community stand as bottlenecks against serving children?
12. Which challenges have you encountered specifically from the children?

E. Focus Group Discussion for Local Authority Officials

1. What services did you have in place immediately after the incident?
2. What other services have you put in place with time? Any improvement of the already existing services?
3. What role does your office play in helping to improve the lives of victims?

4. In your opinion, does the socio-economic environment here cater for the children's psychosocial needs?
5. Does your office have any plans for service improvement to implement in the near future as far as children's welfare is concerned?