



Now girls know their rights

**Lessons from an intervention on child marriage and
female genital mutilation in Mara Region, Tanzania**

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Foundation for Women's Health, Research & Development (FORWARD)

FORWARD (Foundation for Women's Health, Research and Development) is the leading African women led organisation working on female genital mutilation, child marriage and maternal health in the UK and Africa. For over 30 years we have been committed to safeguarding the rights and dignity of African girls and women. We do this through community engagement, grassroots partnerships, international advocacy, training and research.

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CDF is a not-for-profit organisation that works to promote and reinforce rights of vulnerable children particularly girls by placing children's legal and human rights on the public agenda; creating working forums to empower children, families and the society in general, and developing capacity and skills to address harmful traditional practices.

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Chama Cha Uzazi na Malezi Bora Tanzania (UMATI)

UMATI is committed to empowering youth to advocate for their sexual and reproductive rights and for the elimination of harmful traditional practices. It also works to ensure that young Tanzanians are able to make informed choices about their sexuality and well-being. UMATI has been a leader in this field in Tanzania since 1959, when it was first founded under the name Family Planning Association of Dar es Salaam.

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GLOSSARY

CBO's	Community Based Organisations
Cutting season	The set period of usually one month amongst the Kurya people in Tanzania when girls are forced to undergo FGM. The months are usually November to December.
Excisor	The person (traditionally older women) who performs FGM on the girls/women.
FGM	Female Genital Mutilation
HTP's	Harmful Traditional Practices
Ngariba	Swahili terms for the excisors or otherwise known as cutters.

EXECUTIVE SUMMARY

The current global attention on girls and young women presents an ideal opportunity to increase efforts to improve the human rights of girls and young women in Tanzania.

Child marriage and female genital mutilation (FGM) are deeply entrenched practices in many regions in Tanzania despite the country having signed numerous regional and international human rights agreements limiting or banning it. While the Tanzanian government is working towards addressing this situation, existing laws are inadequate. Millions of girls continue to be affected by and are at risk of FGM, child marriage and early motherhood. They are at risk of violence, vulnerability and lack of options.

A three-year partnership in three districts in Mara Region set out to mobilise multiple stakeholders to promote the rights of girls and young women to be safe from FGM and child marriage, and to enable them to access education. Child marriage and FGM gained national attention during the project phase, resulting in an increase in actors and actions to address these issues.

The project approach was based on the partnership and active involvement of the girls themselves, as well as stakeholders at both the local and national level, which proved instrumental to project achievements.

The lessons learnt offer insight for future intervention; particularly the need to focus actions directly at:

- empowering girls and young women themselves
- addressing community social norms
- providing services for girls and women
- advocating for a better policy environment
- ensuring project partners have the capacity and organisational systems to deliver programmes.

The project successfully instigated change at three levels.

Firstly, girls who participated in project activities developed core skills in leadership, self-confidence and economic independence.

Secondly, there has been a shift in engagement; with traditional leader breaking the taboo of silence surrounding FGM, child marriage and girls' rights. This has brought with it the shifting of social norms.

Thirdly, organisations were able to build their own visibility, develop and provide leadership, and collaborate effectively.

The lessons and recommendations from the project were:

1. POLICY LEVEL ACTIONS

- **Legal reforms:** Tackling child marriage, FGM and rights of girls and young women requires improvement in gender equality within the law.
- **Enact policies on child protection:** Improve the state's ability to deal with and respond to girls at risk. In particular, measures are needed in child protection, and for children and young women in rural areas.
- **Government coordination:** Attaining gender equality and rights of girls will require whole government coordination. It cannot be left to inconsistent actions at a regional or district level.
- **Address education policies on teenage pregnancies and school re-entry:** The current practice of refusing girls re-entry to school following pregnancy amounts to discrimination. There is an urgent need to support girls to return to schools after childbirth and to provide support for their babies.
- **Promote comprehensive sex education in schools:** The failure to promote comprehensive sex education in schools is counterproductive and directly contributes to the high levels of teenage pregnancy and violation of girls' rights.
- **Ensure education, health and other services are accessible to girls and women:** Access to good quality and relevant education improves girls' potential to stay in school and improves their life options.
- **Provision of youth friendly reproductive health services:** Increased efforts must be made to ensure that health facilities provide adolescent-friendly services, where girls and young women feel they can access relevant, confidential information, advice and treatment without being judged.

2. COMMUNITY LEVEL ACTIONS

- **Tackle social norms and practices:** Traditional leaders and custodians of customary and religious laws should be actively involved in tackling FGM and related practices. Actions should include making leaders aware of the law; how to build alliances; the identification of champions for girls and women's rights.
- **Mobilise communities on safeguarding rights of girls and young women:** In many communities, girls and young women do not play an active role in important decisions about their lives. It is imperative for agencies to invest time and resources in building trust among women's communities.
- **Set up local structures to enforce safeguarding of girls and young women:** Community level education and structures are needed so communities are aware of the law regarding FGM and related practices, and how they should respond, such as reporting incidents to the police.
- **Engage respected community members as catalysts of change:** Traditional and faith-based leaders have been shown to be good 'change agents', there is a need for encouragement for them to take responsibility for protecting girls in their community. They need training and support in their advocacy.

3. PROGRAMME LEVEL ACTIONS

- **Design holistic initiatives that address multiple needs and entrenched social norms:** Invest in programmes that are designed to enhance gender equality and girl friendly actions. This should include investing in both the practical needs of girls and young women to access wider development goals, including education and health, as well as supporting actions to enhance girls' engagement.
- **Create spaces for girls to network and to acquire confidence and leadership skills:** Clubs and networks are invaluable in helping to empower girls and young women to act as catalysts for change and to defend their rights.
- **Support and empower parents, boys and men:** They must be supported to challenge discriminatory social norms and resist the pressure to cut their daughters/girls.
- **Ensure evidence based programming:** The use of qualitative and quantitative data, particularly at a programme level, is essential to shape and inform programme actions including policy engagement and community mobilisation.
- **Lobby for laws and policies:** There should be a legal framework that reflects international and regional standards, and tackles the discrimination and gender inequalities that girls and women face.
- **Collaborate and strengthen partnership working:** This should include government agencies, policy makers, media, academics, community based organisations (CBOs) and other stakeholders.

4. DONOR COMMUNITY/DEVELOPMENT PARTNER ACTIONS

- **Tackle broader rights of girls to attain gender equality:** Attention is required to other violations of girl's rights. Funding of programmes should acknowledge the multiple levels of vulnerability and support more holistic approaches, especially in rural areas. This should also include development of life skills and livelihood options.
- **Support the organisational strengthening of governments, local NGOs and CBOs to become more effective in delivering programmes:** This should be an integral part of programme support and organisational sustainability.
- **Ensure more long term funding for programmes that tackle social norms:** Ensuring that adequate provision is built into developing structures and initiatives that offer girls and young women safety, protection and providing services.
- **Promote joint funding and collaborative partnerships with other funders:** This will harmonise efforts and ultimately benefit girls and young women.
- **Promote knowledge sharing and learning among development partners:** Help share learning and programme lessons.





SECTION I: BACKGROUND INFORMATION

1.1. INTRODUCTION

Child marriage and female genital mutilation (FGM) are deeply entrenched in many regions in Tanzania despite the country having signed numerous regional and international human rights instruments. Over one third of girls are known to have married before reaching 18 years old and the prevalence rate of FGM is above 39% among females aged 15-49 years in some regions¹.

Teenage pregnancy and motherhood are closely related to child marriage and FGM in Tanzania. Adolescence presents a great period of transition and risk for girls, including physical changes, which bring about social and cultural pressure. Girls and young women who are affected by FGM, child marriage and early motherhood experience negative maternal health and education outcomes. This results in a vicious cycle of poverty, vulnerability and gender inequality in Tanzania. These practices are fuelled by social norms and structural barriers at national and local levels that can be violations of the rights of girls and young women.

While Tanzania has made progress on many of the Millennium Development Goals, maternal mortality rates, retention of girls in primary and secondary schools, and HIV rates among women remain critical challenges². With Goal 5 of the global Sustainable Development Goals adopted by the United Nations in 2015 focusing on achieving gender equality and empowering all women and girls, this provides added urgency for Tanzania to meet these targets on eliminating FGM, child marriage and realising gender equality of women and girls.

Foundation for Women's Health, Research and Development (**FORWARD**), Children's Dignity Forum (**CDF**) and Chama Cha Uzazi na Malezi Bora Tanzania (**UMATI**) initiated a joint project to address these issues in three districts in Mara Region, Tanzania.

With support from Comic Relief UK and The Sigrid Rausing Trust, the three year project Mobilising Action to Safeguard Rights of Girls in Tanzania set out to tackle the multiple forms of violence that girls and young women face in rural communities.

The project was a direct response to a participatory study led by child brides which revealed high levels of FGM, child marriage and related issues, including domestic violence, early pregnancy and motherhood and lack of economic opportunities for women.

This report shares lessons from the project and provides insights into the project strategies, structures, outcomes and challenges. A variety of materials are presented here, including participant narratives and case studies collected through the participatory evaluation.

¹ National Bureau of Statistics (NBS) [Tanzania] and ICF Macro. 2011. Tanzania Demographic and Health Survey 2010. Dar es Salaam, Tanzania: NBS and ICF Macro.

² United Republic of Tanzania, 2014, Country Report of the Millennium Development Goals 2014: Entering 2015 with Better |MDG Scores: accessed on 28 June 2016 www.undp.org/.../MDG/.../MDG%20Country%20Reports/MDGR%202014_TZ.pdf

1.2. THE CONTEXT OF CHILD MARRIAGE AND FEMALE GENITAL MUTILATION IN TANZANIA

FGM & CHILD MARRIAGE DEFINITIONS

FGM involves the partial or total removal of external female genitalia for non-medical reasons. Female genital mutilation is classified into four major types:

- **Type 1 – Clitoridectomy:** partial or total removal of the clitoris (a small, sensitive and erectile part of the female genitals) and, in very rare cases, only the prepuce (the fold of skin surrounding the clitoris).
- **Type 2 – Excision:** partial or total removal of the clitoris and the labia minora, with or without excision of the labia majora (the labia are “the lips” that surround the vagina).
- **Type 3 – Infibulation:** narrowing of the vaginal opening through the creation of a covering seal. The seal is formed by cutting and repositioning the inner, or outer, labia, with or without removal of the clitoris.
- **Type 4 – Other:** all other harmful procedures to the female genitalia for non-medical purposes, e.g. pricking, piercing, incising, scraping and cauterizing the genital area.

Child marriage involves formal or informal marriage, where one or both spouses is below 18 years.

In many communities in Tanzania, FGM is a precursor to child marriage, and closely linked to early pregnancy and early motherhood. Both practices adversely affect the health, rights and development of girls and young women and constitute gender based violence.

Child marriage and FGM are deeply engrained traditions that are fuelled by a mix of social norms on sexuality, social pressure, and structural factors including poverty, lack of options and an ineffective legal framework. The combination of FGM and child marriage in Tanzania results in girls not being able to continue their education, lacking economic opportunities and being vulnerable to maternal health problems as well as domestic violence.

In the last five years there has been increased attention on FGM, child marriage and teenage pregnancy in Tanzania from the government, international development partners and local civil society organisations. This has also helped to highlight the critical situation of girls and young women affected by these human rights violations, and also the lack of effective laws, policies and interventions to respond to these issues.

The Tanzania legal and policy context

Gender-based violence (GBV), gender inequality and discriminatory social norms cause many girls and women in Tanzania to experience physical, sexual and emotional harm and related devastating consequences throughout their life time.

The Tanzanian government has ratified a number of regional and international human rights treaties pertaining to gender equality and rights, including child marriage, FGM and domestic violence. However, the government has not fully met its obligations in effectively tackling these practices through laws, policies and enforcement.

The Constitution of Tanzania includes standards on human dignity, gender equality, it forbids discrimination on the basis of sex and guarantees full participation of women and men in social, economic and political life. Yet a number of existing laws discriminate against women and girls or contradict other laws. For example, the current Law of Marriage Act (1971) allows girls to be married as young as 14 years with parental consent and the approval of the court.³ However this also contradicts The Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (Maputo Protocol) which has been ratified by the Tanzanian government. The Maputo protocol states that the minimum age of marriage is 18. As of July 2016 Tanzania’s High Court ruled that two sections of the 1971 Marriage Act that allows girls to marry at 15 with parental consent and 14 with the permission of a court, were unconstitutional, the government has been ordered to make these changes within one year.

The Tanzanian Sexual Offences Special Provisions Act (SOSPA) of 1998 guarantees equality for women and protects women and children from sexual and other violence, including FGM. However, this is poorly enforced and has many inconsistencies in respect to child marriage.

“SOSPA’s narrow definition of rape leaves married women and girls largely unprotected from sexual violence by their husbands. Under SOSPA, ‘a girl’ is a female under age eighteen, and a woman is a female above age eighteen... SOSPA defines rape as sexual intercourse between a male of any age and (a) a girl or woman who is not his wife without her consent, or (b) a girl, with or without her consent, unless she is his wife who is age fifteen or older.” This therefore means that a child bride of fifteen or older cannot be raped by her husband, irrespective of consent.⁴

National policies on re-entry of pregnant girls to school are equally problematic. A study conducted in 2013 by the Centre for Reproductive Rights revealed the absence of clear legal and policy guidelines on widespread mandatory pregnancy testing in schools, and the barring of teenage girls from re-entering school after child birth.

While there were no circulars, policies, or guidelines issued by the Ministry of Education on mandatory pregnancy testing either prior to admission or during the school year, this was widely carried out at the discretion of individual schools and local authorities.

Some legal protection exists in the 2009 Law of the Child Act which amends the Education Act by adding a clause that: *“Any person who impregnates a pupil of primary or secondary school . . . commits an offence” and is liable to a fine and imprisonment greater than that set out for the other offences listed. This also clarifies the Ministry of Education’s 2003 education rules, by introducing penalties for persons who “marry or impregnate a school girl.”*

The Law of the Child Act also amends the Penal Code to state that *“whoever being on the management or staff of . . . schools . . . takes advantage of his position and commits rape on a girl or woman”* can be imprisoned for life.⁵ The study also reported that over 55,000 girls have been forced out of schools in Tanzania due to teenage pregnancy.⁶

As of early 2016 the government made amendments to The Education Act stating that it will be unlawful for any person to marry a primary or secondary school girl or boy, or for a primary school aged girl or boy to marry any person. This is punishable by up to 30 years imprisonment.

Education and employment continue to be critical concerns for girls in rural areas. Despite the drive towards expansion of primary and secondary education in Tanzania, the quality of education remains poor. Rates of students failing the Primary School Leaving Exam are over half, marking the end of education for many pupils. This can be traced back to the quality of teaching and the learning environment, children’s readiness to learn and general poverty.

Overall, girls drop out of secondary school at a higher rate than boys. Girls are commonly expelled if they become pregnant due to the view that they are a disruption or set a bad example. Although schools are required to re-admit girls once they have given birth, many girls experience stigma, as well as complications securing child care. Vocational training opportunities are becoming increasingly common, but are still in short supply, particularly in disadvantaged and rural areas. Girls also tend to be engaged in more ‘female’ vocational courses such as sewing or cooking.

³ Alvalos et al, 2015

⁴ Ibid

⁵ Centre for Reproductive Rights, 2013, Forced Out: Mandatory Pregnancy Testing and the expulsion of Pregnant Girls in Tanzania Schools. Accessed from www.reproductiverights.org/sites/crr.civicactions.../crr_Tanzania_Report_Part1.pdf

⁶ Ibid

1.3 FGM AMONG THE KURYA COMMUNITY IN MARA REGION

“When you die during circumcision, you are thrown into the bushes and your mother is not supposed to cry.”⁷

The Kuryas are one of the largest ethnic groups in Mara region and are located in Tarime and Rorya districts. Historically Kuryas were pastoralists but many are now farmers. The Kuryas are comprised of 13 clans with each clan led by a male clan leader. The 13 clans have a general secretariat that presides over the affairs of the clans.

FGM is one of the traditional practices in which clan leaders play a significant role in key decisions. The Kuryas practice FGM as a rite of passage signifying the transition from childhood into adulthood. The FGM season takes place at the end of the year, and different clans practice FGM in different years. Clan leaders indicate that this is to let girls mature and increase in number for the next FGM season. Additionally, clan leaders from all 13 clans, for mystical reasons, cannot hold a cutting season in any year ending with number seven for either females or males. Both female and male circumcision take place at the same time.

In preparation for the FGM cutting season clan leaders communicate with ‘seers’ or predictors (‘warooti’). The warooti are believed to receive revelations from the gods about FGM and inform the clan leader, who also consults the gods to enquire whether it is safe to proceed with the cutting season. Different rituals are performed to communicate with the gods. For example, close to the cutting season, the clan leaders slaughter a goat and offer part of the meat to the gods. If the meat is deemed to have been ‘eaten by the gods’, this indicates that the gods agree that it will be safe for the cutting season to take place. If, however, the gods do not ‘eat the meat’ then the clan leaders take further steps to ensure the safety of girls. This could include setting fire to the leaves and branches of a special tree to observe if they burn, which is a sign that it is safe to go ahead with the FGM season. However, if they do not burn then it is a bad sign. Nevertheless, a few clans will allow the FGM season to start while looking out for signs such as girls dying or suffering serious injuries, and if they see any of these signs the leaders of those clans can order that the FGM season should stop.

In some clans if the signs show that it will not be safe to practice FGM that season, clan leaders will placate the gods until their offerings are accepted by the gods. With the gods’ approval, clan leaders set the start date for the season and give instructions to Ngaribas (excisors) on what to do and what not to do during the cutting, e.g. the level of cutting; the sites for FGM to take place; the amount of money to charge each girl who undergoes FGM etc.

During the cutting process, clan leaders are present at the cutting sites to ensure ‘peace and security in the area’ and are supposed to stop unwanted behaviour associated with witchcraft (e.g. people stealing/hiding the cut genitalia). The cut genitalia is given to the parent/guardian who is responsible for taking it away and disposing of it ‘safely’.

⁷ Children’s Dignity Forum, Foundation for Women’s Health Research and Development, 2010, Voices of Child Brides and Child Mothers in Tanzania, A PEER Report on Child Marriage

The sacred role of the Ngaribas in the practice of FGM among the Kuryas

All the FGM excisors are female. The Ngaribas hold this position for a lifetime, unless they fail to honour instructions from the clan leaders. Any cutting done outside the season is regarded as malpractice and the Ngariba will be punished either by being fined or revoking her sacred role. Ngaribas are known to have supernatural powers and receive signs from the spirits. They are supposed to be given and shown the items to be used for the cutting (razor blades and knives) from the gods. Clan leaders are also required to consult the gods before announcing in public the chosen Ngaribas for that particular clan. 40% of women in Mara region have undergone FGM although the prevalence of FGM at national level is 15%.

The economic costs of FGM

Kurya clan leaders decide the fee to be paid by families who have their daughters undergo FGM and how this should be distributed among the clan leaders, the excisors and other elders. Girls undergoing FGM pay between Tshs 10,000 (GBP 3.00) to Tshs 15,000 (GBP 4.50) depending on the clan. For example, among the Timbaru, 50% of the money goes to the Ngaribas, 30% to traditional security guards and 20% to clan leaders. In addition to the fees paid to the cutter, families are expected to host celebrations for the community. Wealthy families can host over 300 people which includes slaughtering cows (costing about Tshs 800,000 (GBP 240.00)). Other costs incurred include buying local brew, drinks, gifts and providing firewood and water. It is a requirement during the FGM ceremony that the blood of animals should be shed by the family as part of the ceremony. Most families are forced to spend huge sums of money as part of the celebratory process.

The changing practice of FGM among the Kuryas

The practice of FGM has changed over years among the Kuryas. Type II FGM was traditionally practiced however since 1984 the practice has started to change, with excisors referring to the “modern version” or Type I, which is perceived to be less severe. The Kurya clans are at different stages of change and clan leaders are beginning to engage in discussions about abandoning the practice of FGM.

The practice of child marriage among the Kuryas

In Mara Region, the prevalence rate of child marriage is the third highest in Tanzania with 55% of women aged 20-24 having been married off before they reached 18 years old. Most marriages are arranged by parents, in particular fathers and often without the consent of the girl. Among the Kurya, bride price plays a central role in child marriage, with some families asking an average of 10 cows for their daughters. Other items or gifts include a blanket for the father, two local cloth (Kitenge) and a large cooking pot for the mother, while the bride sometimes receives a suitcase. Child marriage therefore provides an economic incentive for parents.

⁸ Sources of information Interviews with Mwita Nyasibora; Secretary - Secretariat of 13 Kurya Clans; Sinda Nyangore; Chairperson - Secretariat of the 13 Kurya clans; Chacha Nyantende; Clan leader, Renchoka Clan; Petronila John; Anti FGM campaigner and community mobiliser; Bhoke Mwita; Leader Upendo Girls Network.

⁹ National Bureau of Statistics (NBS) [Tanzania] and ICF Macro. 2011. Tanzania Demographic and Health Survey 2010. Dar es Salaam, Tanzania: NBS and ICF Macro.



Among the Kurya, undergoing FGM signals that a girl is ready for marriage. Girls are made to “rest” for a month after FGM and if they are not in school, they are then married off. Girls often get married within two years of having gone through FGM, as to wait longer is considered bad luck. Girls who do not undergo FGM are often ridiculed and in some cases forced to undergo FGM when they get married.

Divorce among the Kurya is discouraged. There is a common notion that once a girl is married she does not have the option of returning to her parents. This is because families are required to return the bride price on divorce and parents are reluctant or unable to return the bride price. In Mara region, child brides experience high levels of domestic violence with 58% women (15-49) reporting that they had experienced physical violence in the past 12 months.

Research conducted by FORWARD and CDF also identified succession marriage practices in Mara Region. Succession marriages or, Nyumba ntobu, are marriages practiced by older wealthy women who are childless. They pay the bride price for young women to become their “wife”. Any child born to the young woman then belongs to the older woman and the biological father plays no role in the marriage or raising the child. Nyumba mboke is a similar type of marriage where women who do not have sons marry younger girls who are then required to bear children, so they may get a son.

¹⁰ Children’s Dignity Forum, Foundation for Women’s Health Research and Development, 2010, Voices of Child Brides and Child Mothers in Tanzania, A PEER Report on Child Marriage

SECTION 2: BACKGROUND OF THE PROJECT

2.1 PROJECT OVERVIEW AND BACKGROUND

Overview of Mara Region

The project was based in Mara Region, the northernmost region of Tanzania. 23 wards were targeted in three out of the six districts in the region. These were Tarime, Musoma and Rorya. Rorya is a new district and was previously part of Tarime District, both districts share borders with Kenya and cultural practices with similar ethnic groups. The dominant ethnic groups in these districts are the Kuryas, Luos, and Gitas. The primary forms of economic livelihood include agriculture, livestock rearing and small-scale businesses as well as fishing among communities living along the lake. These districts are also characterised by having strong traditional values and allegiance to clan leadership.

The project baseline study conducted in 2011 found that teenage pregnancy, child marriage, rape and sexual harassment are endemic and negate gains made elsewhere in gender equality for girls in education. While numbers of schools have increased, school completion levels for girls are affected by entrenched cultural and structural barriers. Schools are located too far from communities which makes it difficult and dangerous for many girls to attend. Girls reported feeling unsafe due to harassment not only from men, but also from their male colleagues at schools and teachers. Between 2006- 2010, 354 girls dropped out of primary schools in Tarime district alone.

Project Background

A preliminary survey of child marriage in Tanzania conducted in the coastal and Dar es Salaam regions in 2007 revealed varied levels of child marriage. This study was followed by in-depth research on child marriage in Tarime district in Mara Region in 2008. This study used Participatory Ethnographic Evaluation Research (PEER) methods, where members of the target community are trained to carry out in-depth conversational interviews with trusted individuals they selected from their own social network.

This PEER study informed the project design, helping to identify the challenges girls and young women face, the nature of prevailing social norms and areas for intervention. The choice of the three districts was because the pilot study found high levels of child marriage in these districts and strong links to other forms of gender-based violence. UMATI and CDF had also recently initiated programmes in Musoma Rural and in Tarime on sexual and reproductive health and child rights and participation.

The three year project (2010-2014) entitled **Mobilising action to safeguard the rights of girls in Tanzania** was informed by the findings of the PEER study and pilot intervention conducted in Tarime. The research findings indicated that girls and young women had poor knowledge on their rights and entitlements, and that the majority had experienced multiple forms of violence. The findings concurred with the prevailing notion that child marriage, sexual violence, early pregnancy, FGM and domestic violence were endemic violations in Mara region that adversely affected girls and women. This influenced the choice of Mara Region as the project intervention site.



2.2 PROJECT AIMS AND OUTCOMES

The overall aim of the project was to advance the realisation of the rights of vulnerable girls in rural communities in Tanzania, specifically their rights to education, freedom from violence, sexual and reproductive health and to improve their access to economic opportunities.

The project outcomes that the project set out to attain are as follows:

- Increased financial independence of 150 vulnerable girls and young women at risk of, or affected by child marriage, gender based violence (GBV) and early motherhood in Tarime, Musoma and Rorya districts;
- Increased ability and confidence to access support services and related entitlements among 1,500 girls and young women at risk of, or affected by child marriage and early motherhood in Tarime, Musoma and Rorya districts;
- Girls and young women (10-25) experience an increase in protection of their rights in relation to GBV; particularly, FGM and child marriage;
- Enhanced organisational capacity and visibility of project partners CDF and UMATI.

The six deliverables/outputs defined for the project included the following:

- Training young women and girls on multiple skills: leadership, entrepreneurship, vocational and advocacy skills, sexual and reproductive health (SRH), and rights;
- To mobilise and sensitise key community leaders, parents, government and non-government organisations on women and girls' rights and entitlements;
- Community outreach to increase awareness of women's rights, SRH, FGM and child marriage;
- Networking and collaboration with partners and stakeholders at all levels;
- Signposting and referral of women and girls to services such as family planning and legal advice and support;
- Establishing and supporting the running of girls' clubs and networks for young women involved in economic activity.

2.3 PROJECT PARTNERS

This project was based on collaboration and partnership at local and international level. FORWARD identified the two implementing partners in the project because of the expertise that they brought; specialism in child rights, child participation and provision of sexual and reproductive health services and programmes.

FORWARD (The Foundation for Women's Health, Research and Development) is the leading African women led organisation working on female genital mutilation, child marriage and maternal health in the UK and Africa. For over 30 years we have been committed to safeguarding the rights and dignity of African girls and women. We do this through community engagement, grassroots partnerships, international advocacy, training and research.

Children's Dignity Forum (CDF) works to promote and reinforce the rights of children, particularly girls. It aims to do this by placing children's legal and human rights on the public agenda and by creating forums through which children, families and society in general are empowered. It also provides young people with the capacity and skills to address harmful traditional practices, such as child marriage and FGM. CDF is based in Tanzania, and has worked in close partnership with FORWARD since it was founded in 2006.

Chama Cha Uzazi na Malezi Bora Tanzania (UMATI) is committed to empowering youth to advocate for their sexual and reproductive rights and for the elimination of harmful traditional practices. It also works to ensure that young Tanzanians are able to make informed choices about their sexuality and well-being. UMATI has been a leader in this field in Tanzania since 1959, when it was first founded under the name Family Planning Association of Dar es Salaam.

FORWARD provided technical expertise, capacity development and facilitated global networking as well as overseeing the disbursement of funding and donor reporting. Local partners brought local expertise and knowledge, and implemented the project locally. This cooperation allowed the local project partners to enhance their visibility, improve their technical and organisational capacity and their recognition as experts on child marriage and girls' rights programming in Tanzania.

2.4 METHODOLOGIES USED FOR PROJECT DESIGN, IMPLEMENTATION AND EVALUATION

Using participatory ethnographic evaluation research to inform project design

PEER is a qualitative participatory research methodology that is particularly effective when working with marginalised groups and on sensitive issues. In this PEER approach, 24 young women aged 16-24 from Tarime district, mostly child brides and child mothers were trained to carry out in-depth, conversational interviews with three friends whom they selected from their own social networks. The study addressed the themes of daily life, child marriage, its impact on lives of girls and provided key recommendations for this project.

PEER methodology was selected because it allowed researchers to gain insights into real-life experiences, community perceptions and prevailing social norms. At the same time, peer interviewers built their own knowledge base while gaining experience in the design of research questions, conduction of interviews and data collation. Working with marginalised people like themselves, in a well-supported group, increased participants' confidence to speak about their own experiences and needs. The network young women formed during the peer process and stakeholder consultations empowered them to feel confident and motivated to take action.

Using rapid PEER to explore experiences of girls in the project

At the end of the project, a Rapid PEER study was carried out with 12 girls and young women who had participated in the project mainly from Musoma Rural and Tarime districts. This complemented the external project evaluation and also helped to amplify the voices of young women. The Rapid PEER took place over one week and addressed two thematic areas; daily life of girls in the community, and experiences of girls in the project and the impact of these on their lives. The quotes and insights from this Rapid PEER have been used throughout this report. The peer researchers identified and agreed on a number of issues and went on to develop prompts which they used in their interviews.

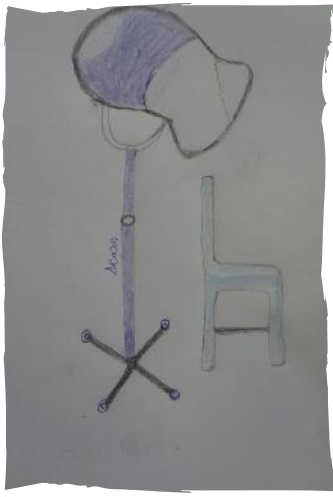
Using Photovoice to share insights on girls' experiences

Photovoice combines social action with participatory photography and digital storytelling. Participants were trained to use cameras and take photographs as a means of expressing their views about their community, as well as the impact of the project on their life. The project incorporated two Photovoice sessions, one at the beginning of the project and one as part of the project evaluation phase.

In the first session, girls took part in a 10 day programme that combined Photovoice training with more general confidence-building exercises. The girls were encouraged to keep diaries recording their thoughts and experiences. They learnt to take photos and use drawings, dance and drama to express their thoughts and feelings about difficult issues affecting them. As well as being fun, the training gave the participants new ways to communicate among themselves and with others over the course of the three year project and beyond.

A second training session at the project evaluation stage involved 10 girls and young women who were guided through activities including storytelling, drawing, photography and filming. They dealt with a range of themes from how they came to be involved in the project, their life stories, changes to their self-esteem and their pride in what they had accomplished over the course of the project.





Pictured above are three of the girls' drawings. On the left is a representation of the hair salon one of the girls opened using skills and financial support gained from her participation in the Rorya Girls' Club. In the centre is the sewing machine that another participant learnt to use through her involvement in the Tunaweza Girls' Network. On the right is an example of a self-portrait the girls were asked to draw, using different colours to depict their emotions and thoughts. The girl drew her self-portrait, indicating how confident she is now to express herself in different forms, as well to talk about herself and issues affecting her.

At the conclusion of the four day workshop, each girl presented her work and achievements to an audience formed of fellow participants, CDF and FORWARD project staff, and several external consultants. Each of the girls showed a real increase in self-confidence from the start of the project, talking eloquently about the impact of the training workshops and their wider life experiences. The girls said they would use the techniques they had learnt during the trainings to disseminate information to their families and communities.

2.5 PROJECT IMPLEMENTATION FRAMEWORK

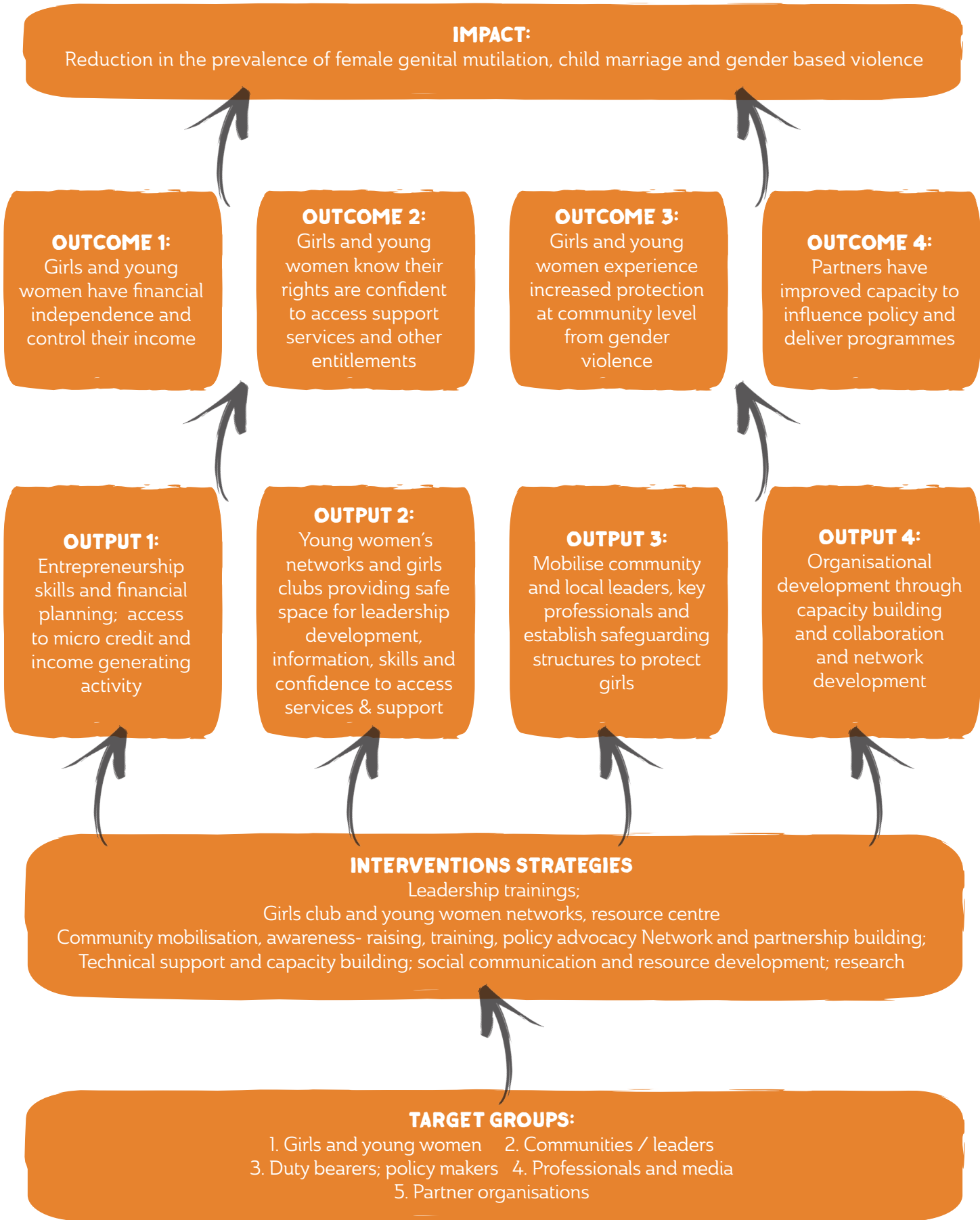
The project Theory of Change (ToC) (a comprehensive description and illustration of how and why a desired change is expected to happen in a particular context.¹¹) was based on what is known as 'the social-ecological model' which focuses on the ultimate aim being to stop violence before it begins so prevention means looking at and understanding the multiple levels of issues and prevention interventions. Our focus was on three levels of intervention: individual girls, relationships and society with a focus on social norms, support services and the policy environment. It used a rights based approach by enabling girls to have information, skills and confidence to demand their rights.

The programme was primarily targeted at women and girls considered at risk of child marriage, FGM and associated practices. Other targets included those who were responsible for shaping the lives of girls and women, such as community leaders and local government officials; as well as statutory services such as the police, health and education officials.

Diagram 1 provides the framework that was used in the project, the intervention strategies, key outputs and outcomes.

¹¹ www.theoryofchange.org/

DIAGRAM 1: THEORY OF CHANGE UNDERPINNING THE PROJECT



SECTION 3: PROJECT APPROACH, ACHIEVEMENTS AND CHALLENGES

This section provides insights into what happened during the project, and the changes that took place as a result.

3.1. PROJECT STRATEGIES AND ACTIVITIES

a. Creating safe spaces through girls' clubs and networks

A total of 33 girls' clubs were established in the three districts involving over 700 members. The aim of the clubs was to provide safe spaces for members to meet, access information, support each other, share personal experiences and give each other guidance and advice.

The clubs were and still are open to girls and young women aged between 13 to 18 years who have experienced or are at risk of child marriage and FGM, as well as those interested in championing girls' rights.

Four young women's networks were set up, namely Tuamke Network (Rorya); Tunaweza Network (Tarime) and Umoja Network (Nyamwanga-Tarime) and Sister to Sister Network (Musoma Rural). The networks helped to coordinate and mentor the activities of the clubs in the districts, forming a supportive system for sharing information, experiences and services. The clubs and networks met once a week. Each girls' club has membership of between 15 to 25 girls and their activities are as follows:

- Training on sexual and reproductive health and rights, family planning, childcare, and ways to combat FGM, child marriage and child pregnancies, as well as promoting the right to education;
- Life skills training including leadership and confidence building;
- Mobilising community members including parents, village and traditional leaders, on girls' and women's rights;
- Recruiting new members by visiting parents and persuading them to allow their girls to join the clubs and networks;
- Annual girls camp bringing together girls from different clubs and networks;
- Entrepreneurship training;
- Signposting girls and young women to support services, including encouraging girls to report cases of gender based violence.

The training topics were identified by club and network leaders through annual camps, in consultation with the project partners and during monitoring visits. External facilitators were sometimes used, but often partners provided trainers from their own organisations.

b. Provision of entrepreneurship training and start-up capital

The project trained 189 young women and girls in entrepreneurship development and vocational and leadership skills, mainly older network members.

Although UMATI had not initially planned to run entrepreneurship training, 45 young women were trained in response to girls' demands. Over 180 young women were supported by CDF to start their own businesses. After the training programme, girls and young women were given start-up capital to undertake income generating activities (IGA's). The IGAs included gardening (farming), running tea-rooms, hair salons, tailoring and selling second-hand clothes.





Two clubs and one network were given an equivalent of £200 to purchase materials for their businesses, this included sewing machines, restaurant chairs and tables. CDF also linked these groups to the Small Industries Development Organisation which provided the girls and women with further mentorship.

c. Provision of information on child marriage, FGM and human rights of girls

The girls' clubs and networks provided a channel for distributing information and resources on FGM/child marriage and related issues. The Tarime Girls Resource Centre was established to provide training, information dissemination and engagement with key professionals and other stakeholders.

d. PEER outreach

Using the PEER education model, club and network members were trained to provide outreach to their peers on rights and related entitlements. A total of 810 girls were trained, who then reached out and shared their learning with a further 1,698 girls and young women via the clubs and networks.

Club and network members cascaded their training and information to a further 4,683 girls and young women, resulting in a measurable increase in awareness of sexual and reproductive health matters, girls' rights and entitlements, and how to access local support services. Membership identity cards were distributed to clubs and networks, in response to requests by girls to have formal recognition of being part of the project.

This resulted in three key benefits. First, formalising girls' club membership served to develop a sense of solidarity between the members, clubs and the networks. Secondly, the cards gave club members greater credibility and authority within their communities. Thirdly, it helped to increase girls' sense of confidence and safety when taking part in lobbying activities and when distributing information in their communities.

e. Mobilising community members, gatekeepers and key professionals

Community mobilisation was a critical strategy aimed at addressing the social norms and pressure put on girls. The girls' clubs, networks and project staff organised different public meetings in schools, market places, at people's homes and at community venues.

A total of nine community-wide campaigns were conducted. Over 4,000 community members, including traditional and faith leaders were reached through the multiple events, community conversations, stakeholder meetings, campaigns and awareness-raising activities. Other duty bearers targeted by the project included 330 professionals such as teachers, health workers, police officers, district and government officials, and local staff from NGO and community based organisations.

f. Media campaigns and development of communication materials

Media and communication materials were critical to the project's public awareness and engagement on the issues. Both CDF and UMATI engaged different media outlets, at both district and national level, to raise awareness of the issues. All partners initiated the use of social media and digital media to raise the profile of the issues and share learning. In the final year of the project, an animated film on FGM was developed in Swahili and provided wider coverage of FGM. It is estimated that more than 100,000 people were reached as a result. Raising the profile of these organisations and their work allowed them to gain credibility within communities.

g. Signposting and access to support services at local level

The Masanga Rescue Centre was set up during the project by the Catholic Church in Masanga, a town in Tarime District, in direct response to girls and young women fleeing their homes to escape FGM during the cutting season.

A partnership was established between our project and the Centre with support from the United Nations Population Fund (UNFPA) to cater for the growing number of girls seeking refuge from FGM. Over 600 girls sought shelter in 2015, compared to 350 in 2013, and 208 in 2012. Girls enrolled in the Centre were given shelter, clothes, food and security. Parents were required to sign consent forms for their daughters to stay at Masanga Centre. Where girls have run away without their family's consent, the Centre helps to reconcile girls with their families with the support of the Local Authority Social Welfare office.

During the one month stay at the centre, girls take part in an alternative rite-of-passage ceremony, learn about their sexual and reproductive rights, and receive psycho-social support. Other direct support services that girls were able to access included the Police Gender Desks where officers had received training on working with vulnerable girls and young women.

h. Engaging in national and global level advocacy

The Tanzania Ending Child Marriage Network (TECMN) was established in Dar es Salaam, with CDF providing secretariat support and FORWARD providing technical assistance and financial support. The network has 30 members from both international and national organisations and provides a platform for sharing programme lessons and advocacy action against child marriage in Tanzania. CDF is a member of Girls not Brides global network, and TECMN is the Tanzania chapter of this global partnership. This has created a platform for regional sharing on child marriage programming.



3.2. WHAT CHANGES WERE BROUGHT ABOUT BY THE PROJECT?

Change in capacity and confidence of girls and young women

“Previously, I was not even able to stand in front of my class to answer questions, but now I am able to stand in the village and start educating people in the community. After the education I got from CDF within the club I became confident, I respect myself and make my own decisions without dependence on men.” (In-depth interview with Sister to Sister Network Member)

Girls shared insights on the changes that the project had brought into their lives. Predominant changes were increased confidence and their ability to engage with others. Girls and young women reported that a strong sense of solidarity had developed among the girls within the clubs and networks, spanning across clans and villages.

“It has joined girls from different communities to form the group, to discuss things concerning them and raise their voices in groups.” (Interview with Tunaweza Girls Network Member)

Girls reported that the confidence of other girls involved in the project had increased significantly, enabling them to advocate for their rights within their families and with community elders. Girls stated that they would not hesitate to report abuses to the relevant professionals. They also reported that they use their collective voice to advocate for change.

“I participated by defending girls’ rights and led them in doing group work since 2011 to now. For example, there is a girl who was in standard seven and was living with her grandmother because her parents passed away, but she was forced by her grandmother to go and find money from men so as they could not get money to buy food. Later on the girl got pregnant and she was not aware and never went to the clinic for check-ups until was her seventh month when we were educating on childhood pregnancies and marriages door to door. We met her and educated her on the importance of going to the clinic. We told her the works done by our club. She was interested to join our club. She became member of our club and started visiting the clinic. She was 15 years then and was educating others on the effects of unsafe sexual intercourse on young girls, reproductive health and gender education.” (PEER researcher, Musoma)

“In our family, we were not allowed to correct our father, and whatever he said, we had to obey him. After the education provided from the project, I can now correct my father when what he says is wrong, and convince him to change his ideas.” (Peer Interview, Musoma)

“The project has built confidence among us girls, and we can educate others on our basic rights. In Kurya society, it is not easy for a girl to defend her rights in front of her family, or the village leaders, but I can now talk to my family about anything without fear.” (Peer Interview, Tarime)

“Girls’ camps have helped us in respecting and understanding ourselves. We also have more respect from the community and we are now invited to various village meetings to teach people on health, gender issues, FGM, life skills and the effects of childhood pregnancies and early marriage.” (Focus groups discussion with Girls Network, Tarime)



CASE STUDY 1

Nekemi is a 14 year old girl advocate in Ngambo village, Musoma. In 2011, Nekemi's father died while she was in primary school and life became very difficult for her mother.

"One day an old woman living in the next village visited our home and had a conversation with my mother. After a few days, my mother called me and asked me to sit next to her and she started telling me that a marriage has been arranged for me. She explained to me that she had already been paid money for my bride price so that the following week she will be marrying me off to that old woman. I said no but my mother told me that she had to do that in order to get money for sustaining the family."

Nekemi got married at 12 years old to an old woman. Her duty in that marriage included bearing children. She had to drop out of school. Nekemi was forced to have sex with men who paid money to her so called 'husband' (the old woman).

Nekemi's case was reported by the girls club members to the project, project partner UMATI, and the project coordinator reported the case to the Village Executive Officer and the Ward Executive Officer.

A case was filed against Nekemi's mother and the female 'husband'. The court decided to end the marriage and order Nekemi to return to school. Her mother was punished with three months' imprisonment and a fine. The woman husband escaped before she was caught.

Nekemi joined the girls club in her school and she is now advocating for girls rights in her school and community. Her return to school set an example for many girls. The girls' club programme really helped her to regain her confidence and enabled her to return to normal schooling.

"I really thank UMATI for introducing such a lovely project in our community. It is helping girls to understand their rights and empowering us to have confidence and make our own decisions on the matters like marriage. I am now a committed member to my club."

"We are working together strongly to spread the information and reach girls as much as we can. We have developed a slogan which says 'together we can end child marriage' of course we have ended my marriage and through time we can stop the practice from happening in our community."

Encouraging and enabling young women to access support services was a key objective of the information sharing and peer-to-peer education.

As of August 2014, a total of 110 girls reported accessing sexual and reproductive health services, while 30 girls reported accessing legal aid and 76 cases were reported to the Police Gender Desk in Tarime, indicating knowledge of and trust in this support system.

"UMATI has helped us to provide much education to the community about methods of family planning. There is a certain woman, who was 27 years old. She had eight children, but I educated her on family planning methods and she has started using the injection method." (PEER Interview, Musoma)

“I have benefited a lot from being part of the Tunaweza Network. I have received training on SRH and I know very well about my body now. For example, I know how to prevent pregnancy and where to get services in Tarime. So I am taking pills because I don’t want to get pregnant. I am not afraid or ashamed for taking contraceptives. I am confident about my decision and in talking about it. I even advise my friends and other women in my community to use contraceptives.”

(Interview with Young women’s network leader, Tunaweza Network)

“Society understands that gender-based violence is not a good thing. When a person is sexually abused there are places to go to report it, like the Police Gender Desk, the village offices and village leaders.”

(PEER Interview, Tarime)

“Girls now consider FGM as abuse due to the associated effects, for example failure to get sexual desire, and pain and bleeding when delivering. We network members ask for more effort to be employed to fight against this sexual abuse. Reproductive and gender education has helped girls to know their basic rights, like to be listened to and respected, to live and be free. Before the project, girls were not aware of these rights, so many thanks to UMATI for bringing these changes.” (PEER Interview, Musoma)

“One day I went to provide teachings in the church, I was confident and I talked without any fear. People understood me and when they ask me questions I answered them correctly and in detail. It was about the education I got from the project. Also on the issue of FGM there were boy students who agreed that girls must be circumcised because they see it as good thing and were not aware of its effects, but I have educated them when we meet in school clubs. They have understood and they are educating their parents not to circumcise girls and when they get their children they will never circumcise them, because of this UMATI project.” (PEER researcher, Musoma)

Change in community attitudes towards FGM, child marriage and rights of girls

FGM and child marriage are deeply linked to entrenched social norms on gender roles. Girls tend to have limited say in matters affecting their lives. Some of the shifting social norms that were mentioned by the girls included changing attitudes towards girls within the wider community. Club members reported that their views were being listened to and were more respected.

“One 9-year old girl who had been married off to a husband in Nyakanga village was rescued and given education by girls’ club members; now she is one of the active peer educators.”

(Interview with UMATI Project Coordinator, Musoma)

“There is a certain girl who was supposed to be circumcised because her sisters were circumcised. However, she refused and wanted to take her father to the police. Her father was surprised that this young girl should have so much confidence.” (PEER interview, Tarime)

“There was a certain girl who was studying in Kamnyonge Secondary School who was raped and died. The Regional Commissioner and District Commissioner ensured that those who had committed this act were arrested. This shows that even the leaders are in the frontline to defend our rights.” (PEER Interview, Musoma)

“Excitement in FGM ceremonies is now reducing, to the extent that those who still promote it feel that it is no longer popular. Girls now have self-confidence to refuse being cut, and are increasingly seeking refuge at the Masanga centre. We anticipate that during the next cutting season, more at-risk girls will refuse to be cut after being educated by our peer educators. Upendo Girls’ Group has been approached by two girls who were running away from forced FGM, and has assisted the girls by advising them to seek refuge at the Masanga centre.” (In-depth interview, Upendo Girls Network member)

“We are no longer considered as a burden to parents or as beggars and loiterers in the community, as we are now operating small businesses like tailoring, selling charcoal, selling second-hand clothing and are even seen as a mirror of success in our society. We are valued as comparable to other children who have not faced the same plight and are seen as economically productive and respectable members of society. We are regarded as role models to the young ones and have increased our self-esteem.” (Focus groups discussion with Network Members)

“Adult women and men are now more aware of girls’ and young women’s basic rights, especially their right to receive an education. Gender violence has greatly decreased in the community. New opinions in the community on the appropriate marriage age for girls have been channelled and transmitted by citizens’ representatives to the Constitutional Reform Parliament. This is a positive sign.” (In-depth interview, District Community Development Officer, Musoma District)

“Gender education, offered to girls and to the community in general, has raised awareness on girls’ rights. Girls and young women can now engage with adults in dialogue on cultural issues and they educate girls on gender violence. Therefore, there is increase in reported cases of rape, child marriages and child pregnancies.” (In-depth interview with Police Gender Desk, Tarime)

While most of the changes in the project were more evident among girls and young women, it was noted that there were changes in the wider community too. Boys, men, adult women and men also expressed having witnessed changes in attitudes towards girls rights, FGM and child marriage.

Engagement with respected community members and traditional leaders has started to yield results. In 2013, 30 elders from 13 clans committed to abandoning FGM, nearly double the number of the previous year. The interview with Mwita Nyasibora, a clan elder from Tarime provides further evidence of this shift in thinking. It was a direct outcome of the project.

INTERVIEW WITH TARIME CLAN LEADER

“Traditional leaders’ awareness of the rights of girls and young women, including their right to education, has been raised greatly. We now have better knowledge of the negative effects of FGM and the need to abandon the tradition.

Young boys are congratulating traditional leaders for changing their mentality towards FGM and child marriages, and this has led to the young men more frequently attending meetings called by the clan leaders to discuss clan issues.

We know that FGM has been greatly reduced. Clan leaders are now encouraging adults to engage in dialogue with their daughters on traditional customs that affect girls and young women.”

(Mwita Nyasibora, Utimbaru clan, Nkongole ward, Tarime, 16th August, 2014)



Similarly an attitude shift has been observed in the community, moving towards more open discussion on sensitive subjects such as FGM and reproductive health between parents and children.

“People in my community [now] understand that sexual and reproductive rights is doing sex willingly without being forced. We have educated people in different places like churches, mosques, in village meetings and in schools and the use of family planning has increased.” (PEER Interview, Musoma)

“As a male parent, I am now freely discussing sensitive sexual issues that were not traditionally discussed with my sons. After attending the sensitisation seminars, our sons feel more comfortable to reveal that they enjoy sex with their non-cut wives. In the past, they would never talk about such issues with adults because, after all, they were not allowed to marry uncut women, nor even to discuss the tradition of FGM with their parents.” (Ward Executive Officer, Nyegina Ward, Musoma)

“Involving men has led to one of our male teachers from Etaro primary school becoming a guardian mentor in our girls’ club.” (PEER Interview Musoma)

Throughout the project, particular attention was paid to traditional and religious leaders. At the start of the project, traditional leaders were targeted as a general group. However, it became clear that a more successful approach was to focus on specific leaders who showed an interest in the campaign. These leaders were then targeted as project advocates; a group that proved critical in working with those resisting change.

“Increased co-operation between relatives to discard the traditions of FGM and child marriage includes my own experience. Before, my brother discriminated against me because I refused to cut my daughters. But after the project intervention and after seeing my daughters’ good performance in school, he decided to follow my example and stopped forcing his daughters to be cut. Religious leaders are now openly advocating alternative rites of passage to FGM amongst their followers, and there is less peer pressure to perform the practice.” (Pastor Mtatiro, Kukirango Ward, Musoma)

“Now the community understands both gender and reproductive issues because both men and women participate in health education meetings and seminars. Women deliver at the health centre, and are able to get information while they are there. Men always make sure women get to the hospital early enough. Men have changed after the education provided to them by UMATI. They are now in the frontline to defend women’s rights, where in the past they were not doing so.” (PEER Interview, Musoma)

Data from Tarime District Council showed a 59% reduction in the number of girls undergoing FGM across eight clans. Three clans in the district indicated that they did not practice FGM in the 2014 FGM season.

The number of girls cut during the FGM season had reduced substantially from 3,417 in 2012, to 1,402 in 2014. The police reported an increase in reported cases of gender based violence, and 109 reported cases of girls refusing child marriage. There was a decrease in the number of girls reported to have dropped out of school and those from teenage pregnancy from 302 in 2011, to 195 in 2014 (Tarime District Reports, 2014).

Increased financial independence of young women

Traditionally, families and in-laws view girls in the project communities as an economic burden, whether they are unmarried, married and pregnant, or mothers. Economic empowerment of young women and child mothers was identified as an important strategy in securing the independence and access to assets for girls and young women. 65 girls who are now running active income generating activities (IGAs, such as small businesses) participated in the evaluation and shared their experience.

“There was a girl whose father tried to force her to become a domestic worker when she had finished primary school. However, she rejected this because of the education she had got from the project. She asked for support from her uncle and started a small business and took part in business training. Her business has expanded, and she is now the one who feeds her family.” (PEER Interview, Tarime)

“The clubs have helped girls by keeping them busy with work, helping them find employment and develop economically. Also, society has benefited from these clubs. Girls’ capacity has been built by enabling them open businesses and earn income. Girls are happy about the existence of the project because it has enabled them to open their own businesses.” (PEER Interview, Tarime)

“Girls have been given entrepreneurship education and capital for small business ventures from the project. One girl in my ward who had become pregnant had been forced by her parents to look for the man who was responsible for the pregnancy, but after the project’s intervention, the parents stopped harassing her and accepted her; now she owns a small business venture that earns her enough income to sustain the whole family, who now depend on her economically.”

(In-depth Interview, Ward Executive Officer, Nyegina Ward, Butiama)

A total of 75% (140) of the girls taking part in IGAs reported increases in their income over the course of the project. Over half reported earning TZS 50,000 (GBP 20) or more per month through their enterprises. In interviews, 65 girls reported that these IGAs had become their main source of income. And 102 of the 187 girls and young women reported that they had increased confidence to make independent financial decisions, and to spend money on things important to them and their children.



CASE STUDY 2

Kurwa is 19 years old and one of the young women advocates against child marriage and FGM in Tarime. Kurwa's dreams of finishing school like her brother, came while she was in primary school.

"My parents did not want me to continue my school. When I was nine and in primary school they wanted me to be cut and get married. Though I didn't want that - they forced me in to it. I was ignorant, I didn't know where to go and seek help to stop it, and I went on refusing while at home with no success."

Two months after going through FGM, Kurwa was married off and that ended her education.

"I wanted to study but my father told me that girls are not supposed to go to school. Rather they should get married because if they are educated, parents will not benefit. I cried my eyes out with no help, my father confirmed his decision by telling me that he had already received bride price (cows) from a man who wanted to marry me."

The marriage was very abusive and after six months she escaped and started working as a house maid. She learned tailoring from her employer. But Kurwa was forced to leave her job and her village because her husband knew where she was and threatened to force her to come back.

Looking for safety she moved to Tarime where she was introduced to Tunaweza young women's network by the Tarime Ward Executive Officer, her mentor. She joined the Network and had an opportunity to attend different trainings on FGM, child marriage, child pregnancy, sexual reproductive health and to take part in the income generating activities.

Kurwa is now one of the leaders of Tunaweza network, a PEER educator and an active advocate. She has mentored several girls and young women and reached more than 3,000 people through her community based outreach and advocacy.

Kurwa also benefited from the vocational and entrepreneurship skills training where she was supported to buy a sewing machine and given financial support to start an IGA group. Kurwa became the trainer for other girls and young women. She has trained 10 girls and young women on tailoring and earns a comfortable income from the tailoring business.

"I am now very confident in my ability and myself, I will work hard and expand the business and someday I will have my own house and tailoring shop."

On many occasions Kurwa has been called upon by girls in crisis. A most distressing story was when she was called to support a girl whose husband had slashed her legs with a machete; she managed to bring the girl to Tarime hospital for services and reported the case to the police.

"We don't stop our campaign until things get improved for girls in our community, our motto in our network is 'Together we can make change' and I believe we can."

Strengthened capacity of implementing partners to advocate for girls rights

A key ethos of the project was to get many more stakeholders involved in safeguarding the rights of girls. This required working in partnerships at all levels of the project.

The project inception coincided with new interest by UNFPA to address FGM and child marriage. CDF developed partnerships with UNFPA and their collaborating partners including Tanzania Media Women's Association (**TAMWA**). They provided training for journalists, which resulted in improved media reporting on FGM and child marriage and national awareness raising of the issues.

Religious institutions, particularly the Islamic and Christian communities, became strategic partners in the project supporting the project advisory bodies as well as support services through the Masanga Centre. Their strategic involvement in the project was useful for the project's implementation and undoubtedly contributed to its successes.

The East Africa Conference on Child Marriage which was organised by FORWARD and CDF in 2013 to disseminate lessons from the project provided a platform for over 100 participants to share learning on child marriage across the sub region. A number of subsequent interventions including a follow up consultation in Uganda were directly attributed to the project.

The project implementing partners CDF and UMATI reported enhanced staff and organisation capacity, as well as improvement in governance. Both organisations stated that they had benefited from close partnership working. They had also acquired skills and experience, which they continue to apply in the planning and management of new projects.

This capacity developments included:

- Improved monitoring, evaluation, reporting, learning and sharing, with more confidence and at a lower cost;
- Improved preparation of organisational work plans and general organisational planning;
- Greater focus and understanding on girls programming;
- Better ability to articulate the issues to duty bearers. Better proposal development, using lessons learned from the project;
- Improved financial management systems;
- Stronger local, district/regional, national and international partnerships, which helped to raise the profile of CDF's work, especially at national level through the End Child Marriage joint campaign (August 2014).



3.3. PROJECT CHALLENGES AND CONSTRAINTS

“During the project, one day I went to school to provide education to my fellow girls. I faced challenges because I asked permission to the teacher but he refused until I gave him some money because he said even us we were given allowance. I had no money, so I went back home.” (PEER Researcher, Musoma)

Some of the key challenges faced by the programmes are outlined below:

Limited project funding

In some meetings, village leaders and traditional elders were sometimes either absent or only gave limited cooperation because they could not be paid allowances due to the project’s limited budget.

Budget resources were strained by over-demand for project services, limiting the resources available for community outreach work. Budget lines were not created for local monitoring visits by the network supervisors resulted in challenges in supervision and support for the girls’ clubs and network members.

Under-budgeting also limited participant’s ability to travel to remote villages. Peer educators cited a lack of funds to cover transport costs as a particular constraint to their outreach work in remote wards and villages.

“The poor transport available, and the lack of money for transport were a big challenge in the project. We lack means of transport to get us to other villages. UMATI should provide more transport allowance to make this easier for us.” (PEER Interview, Musoma)

Limited engagement of boys and young men

The exclusion of boys as a specific project target group was raised on several occasions due to the entrenched patriarchal norms which favour male decision making in key issues. While male leaders were targeted, boys as future decision makers and fathers were cited as missed opportunities. Though UMATI targeted boys in their programmes, this was not adequate.

Inequitable gender roles and responsibilities of girls and young women

Peer educators had little free time to attend training sessions because of their responsibilities at home. This was especially true for mothers and for married girls and women. It also took a long time for communities to begin to understand the value of the training that the girls were receiving and to accept its messages. For the first two years, many participants did not feel accepted or supported by the communities.

“The main challenge we had is that we didn’t have enough time to educate others because of family responsibilities. We didn’t have enough time to provide lessons to people, especially people who were not motivated to get such an education.” (PEER Interview, Tarime)

The general expectation that girls and women to not speak in public and do not assert themselves presented another challenge. This was not helped by the notion that unmarried girls have no morals.

“We were abused and despised as when you reach the place before even starting teaching them they start to abuse you and you are told to go and educate your father and mother. We were also called prostitutes. We were not given permission by our parents because they believe we are not going for the teachings but we are after men.” (PEER Interview, Musoma)

Limited access to support services at the local level

The increase in girls' awareness of their rights and entitlements was not adequately met by support services available. The large number of girls seeking protection at the Masanga Centre, the first support centre for girls seeking refuge from FGM in the project catchment area, quickly outstripped its ability to cope. As a consequence, it was not always possible to provide a place to every girl that requested refuge at the Centre, nor to provide the necessary psychosocial support.

Poor enforcement of existing laws

The lack of political will in addressing the co-existence of customary laws and civil laws in Tanzania were huge barriers. This creates an ambiguous situation in which traditionalists can promote and validate the continuation of harmful practices as they are supported by customary laws, usually to the detriment of girls and women. In addition, where structures and services exist to support and enforce state laws, these are too weak to effectively protect women's rights. For example, there was little, if any, police protection available when families removed girls from the Masanga Centre.

Resistance of change from some community members

Many of the peer educators experienced resistance from community members who still held entrenched views about rights of girls and women. There was limited understanding of safeguarding of girls rights, and the rights of girls in general.

"There are no changes, because men are still threatening girls' rights in reproductive health. They despise the female gender and say that reproductive health is only a woman's concern."

(PEER Interview, Musoma)

"People refused to participate when we were carrying out training, so we lost a lot of time. Many people did not want to take the condoms in public, and so followed us after the sessions to get condoms in private. The girls carrying out training were chased away, abused, and others were not given permission by their parents to attend training sessions." (PEER Interview, Musoma)



SECTION 4: LESSONS LEARNT, CONCLUSION AND RECOMMENDATIONS

4.1. LESSONS LEARNT AT INDIVIDUAL AND BENEFICIARY LEVELS

Focus on the context of girls' and young women's lives and the amplification of their voices

"Girls are now confident, they can teach others, they know their rights and they are capable of doing something great. They know the effects of FGM and beliefs in harmful myths are decreasing."

(PEER Interview, Tarime)

It is critical to ensure that the voices of girls and young women are heard in the communities in which they live. Girls and young women must therefore be at the heart of any intervention on realising the rights of girls.

The use of participatory research methodologies to inform project design, review and evaluation meant that each activity responded directly to the experiences, needs and context of girls and young women in the project areas. The success of this project was in large part due to the commitment of the girls themselves to support change for themselves and their peers.

At the same time, a focus on the multiple forms of abuse girls' face helped to ensure that the project responded to the diverse issues and concerns they experience.

These participatory methods highlight and celebrate the fact that women themselves are experts with direct experience of child marriage and FGM. Recognition of this raises girls' and young women's feelings of self-worth, who in turn support each other to raise their collective voice to influence decision-making at the family, local, national and even international levels.

Invest in safe and separate spaces for girls to create multiplier effects

The girls' clubs, young women's networks and the resource centre provided a platform for girls to learn, share experiences and acquire skills in a safe space. Providing separate spaces for married girls and child mothers, and clubs for girls in school, helped reach those who were considered hard to reach or marginalised, helping to scale up outreach to girls.

Invest in empowerment and leadership development of girls and young women

Building the self-confidence, public-speaking skills and knowledge base of girls and young women is central to their evolution as agents of change and leaders. Leaders of girls clubs and networks should be adequately supported as their advocacy work can put them at risk of harm. This support should include access to counselling and group support. Often girls can be exposed at the national level and will need training to engage with the media. There is also a need to provide opportunities for leaders to connect for self-development. Income generation and economic independence are key enablers to girls and women realising their rights.

The initial PEER survey revealed poverty and economic insecurity to be major drivers of child marriage and FGM in the Mara region. The survey also shed light on how economic dependence impacts adversely on girls decision-making in sexual and reproductive health matters. Programmes for girls and young women should aim to address these realities.



This project provided an opportunity for girls to access skills, capital and generate independent income and assets, and these actions were considered to be a success. As well as providing skills in local market research, business-skills training, including book-keeping, financial management, sales marketing and customer skills that were contributors to their businesses, it improved young women's confidence and ability to negotiate and make decisions, both within their families and in their communities.

However, it became clear that women need more capital to enable them to break even in their businesses and then to sustain their earnings.

CASE STUDY 3

Anna is a young mother from Tarime whose life was changed by this project. As a member of the Tunaweza Network, she used her income-generation money to establish her own business. She could then support her children. With her new confidence and economic independence, she bought land and built a house in which she now lives with her family.

Before the project, Anna was dependent on her abusive husband to support her children. She said she was ignorant about sexual and reproductive health rights and options for family planning.

Through the project, she gained confidence, new skills and information about herself and her rights. She is now supporting other girls and young women and coaching them on economic activities so that they can achieve economic independence and realise their rights.

4.2. LESSONS LEARNT FOR COMMUNITY LEVEL PROGRAMMING

Adopt participatory engagement strategies to reach community stakeholders and leaders

Participatory engagement strategies are key to tackling gender inequalities and realising the rights of girls. This participatory process helped to focus community stakeholders on the wider issues affecting girls and young women, including successfully mobilising peer-to-peer influence, even among older community members who were positively influenced by the girls' and young women's advocacy.

The project capitalised on the role of traditional and community leaders by engaging in consultations and discussion sessions, as well as including leader representatives on the Project Advisory Committee and in community-level child protection structures. However, engaging these leaders was challenging, especially where they were accustomed to receiving payment from other development actors. More work needs to be done to find a means of overcoming such expectations, including highlighting the non-monetary benefits.

Raising community and parental awareness of social norms to ensure widespread, sustained behavioural change

Meaningful and sustainable change in beliefs and behaviours requires time. Training sessions, particularly for girls and women, must fully explain all the issues and this usually takes an extended period. Particularly when some participants may be illiterate, extra time is required to process the facts presented. But just as important, participants should be given the opportunity to work through the difficult emotions likely to be stirred by the information provided.

Some groups will require multiple interventions over a long period of time, in the beginning working on gaining their trust and only then moving forward slowly, ensuring all participants continue to feel involved. Equally, however, project staff must be aware of the time constraints that girls and young women face. Helping girls to manage their time in order to be able to take part in project activities is fundamental.

Engaging the media

The media play a critical role in raising the profile of the violations of girls' rights as an important social issue, increasing public awareness and accountability. The media can be a powerful means of advocacy, lobbying, education and creating an open environment for effective change. Collaborating with and building capacity of media professionals was vital for the project, resulting in improved reporting, coverage and visibility for the issue of girls and young women, particularly on FGM and child marriage in Mara region.

Enforcement of the law

Enforcing the law on harmful traditional practices requires a holistic effort involving education campaigns and the sensitisation of all actors, including traditional and political leaders (to reinforce the social norms against HTP's), police (to prevent, protect and arrest), judiciary and other civil servants (to prosecute) and parents and girls (to report violations to the police). The only way to ensure the full enforcement of the law is to ensure that it is seen by all to be effective and implemented every time there is a violation.

Address provision of support services at local level

Raising awareness on the rights and entitlements of girls and young women at the local level should be done in parallel with action to ensure that appropriate services are available and able to meet increased demand from girls and young women. When such services are not provided by duty bearers, creating a demand for services can be counterproductive.

Interventions must incorporate a range of approaches with actors at multiple levels to create meaningful and sustainable change

This project has shown that no single approach can be used to tackle the complex and inter-related causes of harmful practices. Working in a holistic fashion allows the different approaches adopted to be mutually reinforcing, strengthening each individual approach as well as the project's overarching objectives.

Individuals are more likely to change their attitudes and behaviour when they experience pressure or support from multiple actors, on multiple levels. The project achieved successful outcomes by simultaneously engaging girls, their families, their communities and other decision-makers to initiate change.

The project drew on the rich array of experiences of a wide range of actors, including service providers, traditional leaders, and community members of different social standing and levels of literacy, as well as the girls and young women themselves.

The additional support of indirect stakeholders such as teachers, police and health professionals helped to create an enabling environment in which girls could reject child marriage and FGM.

4.3. LESSONS LEARNT FOR ORGANISATIONAL-LEVEL PROGRAMMING

Cooperation between multiple partner organisations, drawing on different expertise and levels of influence to address complex social and policy issues

A key success factor in this project was the complementary strength of a partnership between multiple organisations. FORWARD provided international-level expertise and capacity building.

The project partners were also able to build relationships with other partners to respond to emerging issues beyond the budgetary scope of the project. Of particular note in this regard is the Masanga Centre. As a result, the project resulted in strengthened links and new partnerships with important local actors.

Capacity building in local implementing organisations

The efficient joint management of multi-partner projects requires strong project management and monitoring skills, financial management, communication, advocacy and ongoing learning of new approaches. Proper monitoring tools had to be in place from the project inception, ensuring the accurate recording of vital project information to facilitate the smooth implementation and evaluation of project performance, as well as to ensure cost-effectiveness. Together the project partners developed a robust monitoring, evaluation and learning plan which added to the skill set of all the partners and which they were able to apply in other projects.



CONCLUSIONS AND RECOMMENDATIONS

The three year intervention enabled girls in rural communities in Mara Region to know about their right to be safe from FGM, child marriage and to access education.

Child marriage and FGM gained national attention during the project phase, resulting in an increase in actors and actions to address these issues.

The project approach, based on partnership and active involvement of the direct beneficiaries and stakeholders at individual and collective level, proved instrumental in the project achievements.

The lessons learnt from the project provide further insight for future interventions and demonstrate the need to focus actions at the level of empowering girls and young women; addressing community social norms and provision of services and enabling policy environment as well as ensuring that project partners have the capacity and organisational systems to deliver programmes.

The project has shown the benefits of a holistic approach to working with girls and young women. The evaluation demonstrated the need to consolidate and upscale the gains from the project.

The project clearly showed that challenging harmful traditional practices which violate the rights of girls and young women is complex. It requires sustained and multi-level actions and engagement of different sectors such as education and healthcare. The following recommendations are informed from the evaluation and provide policy and programme actions.

1. POLICY LEVEL ACTIONS

- **Legal reforms:** Tackling child marriage, FGM and defending the rights of girls and young women requires improvement in gender equality within the law. There is a need for greater government leadership and commitment to respond better to the situation of girls and young women by addressing the contradictions between existing human rights based laws and traditional laws. The Sustainable Development Goals provide added impetus for the government of Tanzania to meet Goal 5 on gender equality and empowerment.
- **Enact policies on child protection:** Strengthening capacity and creating more responsive systems for girls at risk. Introducing child protection structures to support girls and young women, especially those in rural areas. This includes social services, Gender Desks and police at regional, district and ward levels to respond to the girls and young women's needs.
- **Government coordination:** Fulfilling the rights of girls requires government coordination of actions at all levels, supported by civil society. This support must be sustained and long term. The project received collaboration at district level but this was not consistent throughout the project phase.
- **Address education policies on teenage pregnancies and re-entry:** Current practice of refusing girls re-entry to schools following pregnancy and childbirth amounts to discrimination. There is a need for urgent action to support girls to return to schools after childbirth and to provide support for their babies.
- **Promote comprehensive sex education in schools:** The failure to promote comprehensive sex education in schools is counterproductive and directly contributes to the high levels of teenage pregnancy and violation of rights of girls.
- **Ensure education, health and other services are accessible to girls and women:** Access to good quality and relevant education improves girls' potential to stay on in school and improves their agency and life options. This includes addressing concerns about safety for girls when travelling, and in-school measures like sex-segregated toilets.
- **Provision of youth friendly reproductive health services:** Increased efforts must be made to ensure that health facilities provide adolescent-friendly services, where girls and young women feel they can access relevant, confidential information, advice and treatment without being judged. Young girls, in or out of marriage, must have access to family planning advice and sexual health services.





2. COMMUNITY LEVEL ACTIONS

- **Tackle social norms and practices:** Traditional leaders and custodians of customary and religious laws should be actively involved in tackling practices that reinforce girl's vulnerability. Actions should include improving their knowledge of the law; alliance building; identification of champions and creating spaces to facilitate dialogue, critical analysis and inter-generational reflections.
- **Mobilise communities on safeguarding rights of girls and young women:** It is imperative to invest time and resources in building relationships of trust with women's communities, to facilitate reflection and behavioural change.
- **Set up local structures to enforce safeguarding of girls and young women:** These should be established at community level to reinforce the protection of girls and create wider awareness about accountability for girls' rights, including making people actively report violations to the police, including FGM and child marriage and other forms of gender violence.
- **Engage respected community members as catalysts of change:** This project has proven the value of targeting traditional and faith-based leaders, catalysing them into 'change agents', motivating them to fulfil their responsibility to protect girls in their communities. In order to do this, it is necessary to educate these community leaders about the merits of abandoning harmful practices and to train and support them in their advocacy.

3. PROGRAMME LEVEL ACTIONS

- **Design holistic initiatives that address the multiple needs and entrenched social norms underpinning the vulnerability of girls:** This should include investing in both the practical needs of girls and young women to access wider development goals, including education and health, as well as supporting actions to enhance girls' individual and collective voices and engagement.
- **Create spaces for girls to network and to acquire confidence and leadership skills:** Clubs and networks are invaluable in helping to empower girls and young women to act as catalysts for change and to defend their rights. With the support of professionals, clubs and networks can provide safe spaces in which members can share experiences, concerns and ideas with their peers, offering mutual support to overcome challenges.
- **Support and empower parents, boys and men:** They must be supported to challenge discriminatory social norms and resist the pressure to cut their daughters/girls. This is because change can only be sustained at the community level.
- **Ensure evidence based programming:** The use of robust qualitative and quantitative data, especially at a programme level, is essential to shape and inform programme actions including policy engagement and community mobilisation efforts.
- **Lobby for laws and policies:** There should be a legal framework that reflects international and regional standards and tackles discrimination and gender inequalities that girls and women face.
- **Build on local structures and mechanisms:** This includes engaging community leaders such as faith and traditional leaders. Enable and empower them to use their trusted and respected position in the community.
- **Collaborate and strengthen partnership working:** This should include government agencies, policy maker's media agencies, academics, CBOs and other stakeholders. Due to the nature of the challenges and extent of the problem of FGM and child marriage, it brings added value to strengthen collective actions at all levels of operation.



4. DONOR COMMUNITY/DEVELOPMENT PARTNERS ACTIONS

- **Tackle broader rights of girls to attain gender equality:** Tackling child marriage, FGM and girls' rights requires attention to related violations including sexual and reproductive health and rights. Funding of programmes should acknowledge the multiple levels of vulnerability.
- **Support the organisational strengthening of governments, local NGOs and CBOs to become more effective in delivering programmes to girls and young women:** This should be an integral part of programme support and organisational sustainability. Improved capacity of key actors will bring added value in sustaining programmes that are effective and meet the needs of girls and young women.
- **Support multi-faceted interventions:** All interventions should promote partnership development and have greater potential for meeting the multiple and diverse needs of girls and young women. This should also include development of life skills and livelihood options.
- **Ensure more long term funding for programmes that tackle social norms:** Ensuring that adequate provision is built into developing structures and initiatives that offer physical support (safe homes), psychological support (counselling), legal and medical support.
- **Promote joint funding and collaborative partnerships with other funders:** This will harmonise efforts and ultimately benefit girls and young women.
- **Promote knowledge sharing and learning among development partners:** Help better share learning and programme lessons.



FORWARD is an African diaspora women's campaign and support charity. As well as working with local partners in Africa, FORWARD operates in the UK, delivering training to professionals, raising awareness about FGM and working in schools to support girls at risk of or affected by FGM. FORWARD works closely with communities and youth groups, as well as advising a variety of organisations and policy makers on the issues of FGM and child marriage. You can find out more about FORWARD's work by visiting our website: www.forwarduk.org.uk

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