



**Mid-Term Review Report**  
**Core Program and Ujana Salama Project**



**Quantum Consulting**

**Dar-es-salaam**

**May 2024**

## Table of Contents

<b>Table of Contents</b> .....	<b>2</b>
<b>LIST OF APPENDENCIES</b> .....	Error! Bookmark not defined.
<b>LIST OF TABLES</b> .....	Error! Bookmark not defined.
<b>LIST OF FIGURES</b> .....	Error! Bookmark not defined.
<b>ACKNOWLEDGEMENTS</b> .....	<b>4</b>
<b>ACRONYMS</b> .....	<b>5</b>
<b>EXECUTIVE SUMMARY</b> .....	<b>6</b>
<b>1 INTRODUCTION</b> .....	<b>9</b>
1.1 Femina Hip Context .....	9
1.2 Femina Core Program .....	9
1.3 Ujana Salama Program.....	9
1.4 Purpose of the Mid-Term Review .....	10
Mid-Term Review Scope and Users. ....	10
1.5 Structure of the Report .....	10
<b>2 THEORETICAL FRAMEWORK</b> .....	<b>11</b>
2.1 Evaluative Thinking and Theory-Based Review.....	11
2.2 MTR- review Design.....	12
2.3 Review Design and Geographical Area Coverage .....	12
2.4 Review Principles.....	12
2.5 Unit of Analysis.....	12
2.6 Sampling Procedures and Recruitment Procedures.....	13
2.7 Data Collections Methods and Tools.....	13
2.8 Data management and analysis. ....	15
2.9 Limitations of the Review .....	16
<b>3 FINDINGS</b> .....	<b>17</b>
3.1 Demographic Characteristics of Study Participants .....	17
3.2 Relevance .....	23
3.3 Efficiency .....	24
3.4 Effectiveness .....	25
3.5 Impact.....	26
3.6 Sustainability.....	26

3.7	Ujana Salama Project Results per Indicators .....	28
<b>4</b>	<b>CONCLUSIONS, LESSON LEARNED AND RECOMMENDATIONS. ....</b>	<b>29</b>
4.1	Conclusion.....	29
4.2	Lesson Learned .....	29
4.3	Recommendations .....	30

## ACKNOWLEDGEMENTS

Quantum Consulting is grateful to Femina Hip teams for the opportunity to work on this Mid mid-term review for the Ujana Salama Project in Muheza District. We wish to acknowledge the valuable time devoted by Femina Hip, specifically our sincere appreciation goes to Ruth Mlay (Executive Director), Emmanuel Balibate (Monitoring, Evaluation and Learning Coordinator), Stella Mbuya (Project Coordinator), and Innocent Mawi (Monitoring, Evaluation and Learning Officer) for their time and constructive insights that made our work easier and enjoyable.

Many thanks to the local government authorities working closely with Femina Hip on executing the Ujana Salama project for their valuable support and insights during the data collection process. Many thanks to the Quantum Consulting team members who collected the data for this Review.

Finally, we would like to recognize the young people, Youth Champions, Ujana Salama project staff, community leaders, religious and traditional leaders, teachers, RCH nurses, and the local government authorities for their willingness to participate in and provide the required data for this study.

### **Disclaimer**

The views expressed herein are those of the author and do not necessarily reflect those of the Femina Hip. This report has been prepared based upon an independent review by the consultants.

## ACRONYMS

<b>LGAs</b>	Local Government Officials
<b>GBV</b>	Gender Based Violence
<b>SRHR</b>	Sexual and Reproductive Health and Rights
<b>VAWC</b>	Violence Against Women and Children
<b>DCDO</b>	District Community Development Officer
<b>CCWs</b>	Community Case Workers
<b>SRH</b>	Sexual and Reproductive Health
<b>FGDs</b>	Focused Group Discussions
<b>KIIs</b>	Key informant interviews
<b>NPA-VAWC</b>	National Plan of Action to End Violence Against Women and Children
<b>SIDO</b>	Small Industries Development Organization
<b>VETA</b>	Vocational and education and Training Authority
<b>ILO</b>	International labour organization
<b>EE</b>	Economic Empowerment
<b>DRCHCO</b>	District Reproductive Child Health Coordinator
<b>FP</b>	Family Planning
<b>STIs</b>	Sexual Transmitted Diseases
<b>MTR</b>	Mid Term Review
<b>RF</b>	Results Framework
<b>MTAKUWWA</b>	Ward Child Protection Committee
<b>SE</b>	Sexuality Education
<b>YCs</b>	Youth Champions
<b>ToT</b>	Training of Trainers
<b>GBV</b>	Gender Based Violence
<b>NAIA-AHW</b>	National Accelerated Action and Investment Agenda for Adolescent Health and Wellbeing
<b>NAHDS</b>	National Adolescent Health and Development Strategy
<b>CE</b>	Citizen Engagement
<b>LQAS</b>	Lot Quality Assurance Sampling
<b>SWO</b>	Social Worker Officers
<b>RYO</b>	Regional Youth Officer
<b>TRL</b>	Traditional and Religious Leaders

## EXECUTIVE SUMMARY

### Introduction

The Ujana Salama project is a community-based youth-focused intervention that promote equitable access to quality SRH information and services to in and out-of-school adolescents and youth (13-30) in Muheza district -Tanga Region, through 180 youth champions trained to fight gender-based violence. The project use “Ujana Salama Training Package” and Active learning approach (in-person training, theatre, community dialogue, etc) to increase knowledge and access to new information, stimulate conversations, to engage emotions, perceptions and beliefs that influence participants to change behaviors or take action, contributing to a change attitude within the wider community about SRHR topics. The project reached 13,873 (6,491 Females and 7,382 Males). from 6 Wards of Muheza, Tanga region. To understand the overall performance and results of the core program and the Ujana Salama project and provide insights for future interventions, Femina Hip conducted a mid-term review specifically to assess key project outcome indicators, determine attitude change among youth, and spill-over of knowledge to indirect beneficiaries and community at large.

### Methodology

The review collected primary quantitative data from 283 adolescents and young males and females, comprises of 36 youth champions (Direct Beneficiaries), out of school youth (13-30) – (Indirect beneficiaries) and 20 in school youth club members (13-19). The review collected qualitative data from 26 Key Informants, including representative teachers, Ward Child Protection Committee (MTAKUWWA) members, health care providers, traditional and religious leaders, traditional social workers, and schools and 6 focus group sessions comprises of youth champions, in-school students, and youth who benefited from peer education (cascades).

### Key Findings

The review reveals that Femina Hip and Ujana Salama project is relevant as it is aligned and contributes toward implementation of government policy frameworks related to sexual reproductive health and Rights (SRHR), economic empowerment (EE), and Citizen Engagement (CE), such as The National Accelerated Action and Investment Agenda for Adolescent Health and Wellbeing 2021/22–2024/25 (NAIA-AHW), the National Policy Guideline for the Health Sector Prevention and Response to Gender Based Violence (GBV) (2011), and the National Economic Empowerment Policy (2004).

In respect to proportion in child marriage, the review revealed that 15.9% of interviewed adolescent and young women are married, with 11.1% married before the age of 17, and 88.9% married after the age of 18. The review also found that 35.8% of interviewed teenagers and young women have married or lived with a man as if married, with 12.5% being females aged 13 to 17, and 87.5% being females over the age of 18, suggesting presence child marriage in the Muheza district council.

The DHIS2 data indicates that the percentage of teen pregnancies among mothers under the age of 18 remained constant at 5% from 2020 to 2022. This percentage increased marginally to 6% in 2023. It is especially noteworthy that there was an 11% increase in the first quarter of 2024. The rapid rise could be positively attributed to the advocacy and sensitization efforts on risks of hiding teenage pregnancies done by Ujana salama project which has led to many under 18 aged women seeking SRHR services at Heath care facilities. In comparison, the data gathered from the survey population during Mid Term Review

revealed that 14.5% of young women above 18 years old were pregnant during the interview. Furthermore, the findings revealed that, 8.6% of interviewed adolescent girls and young women became pregnant and gave birth to their first children when they were under the age of 17, compared to 91.4% when they were over the age of 18. Additionally, a proportion of adolescent girls (17.3%) reported having their first child when they were under the age of 17, compared to 82.7 percent who reported having their first child when they were over the age of 18.

The Ujana Salama project carried out planned activities and delivered expected output, with some intermediate outcomes seen. The Mid-Term Review revealed that 85.1% of young males and females have access to SRHR information in their communities, with males (43.8%) having more access than females (41.3%), and females over the age of 18 appearing to be ahead (70.5%) in terms of accessing information across age categories. Teachers, mentors, youth advocates, health care workers, parents, and peers were identified as key sources of knowledge by the respondents. On the other hand, the review found that, despite the majority (85.1%) having access to SRHR information, only 48.1% of young people accessed SRHR services, while 41.3% accessed both information and services simultaneously. Conversely 51.9% of youth do not access to SRHR services due to negative attitudes of health professionals, facility locations, and inconveniences of opening hours.

DHIS2 data indicates the significant increase in number of youth accessing SRHR service from 1385 in 2021 to 1903 in 2022 and 2385 in 2023 while from January to march 2024 a total number of 1,801 adolescent youth accessing SRHR services and information in health facility located from six wards where Ujana salama is being implemented.

The results of the review show that 58.5% of the youth had the right knowledge and attitude on economic empowerment, The with 53.7% of males leading the way, followed by females (46.3%), implying that the project has significantly contributed to ensuring young people have improved knowledge and attitudes toward economic empowerment by utilizing the International Labour Organization (ILO) training approach and package - Start, Improve Your Business (SIYB).

The overall percentage of Gender Based Violence (GBV) victims in the previous 12 months was 19.1% of interviewed respondents. However, females scored higher (11.0%) than males (8.1%), with psychological (38.9%) being the most common cause, followed by physical (31.5%), emotional (16.7%), and sexual (13.0%). The review also found that more than three-quarters (76.9%) of GBV victims contacted the NPA, VAWC Committee, the Police Gender Desk, Village Chairpersons, and Executive Wards. In all, 57.4% of GBV victims received post-GBV care support from the Police Gender Desk, Village Chairpersons, and Executive Wards. It was not possible to compare with previous years as the data from Police Gender Desk was missing.

The review also found that 37.8% of the interviewed respondents believe their individual communities embrace GBV, whereas nearly three-quarters (62.2%) believe there is no tolerance for GBV acts in their community. These findings indicate that Ujana Salama has increased the knowledge and skills of young people, local government, NPA/VAWC Committee members, police gender desk, religious leaders, community leaders, and influential people at the Ward and village levels regarding gender equality and GBV prevention. The review also revealed that the percentage of young women in decision-making is 58.2% a positive indication that the program has contributed toward empowering women.

The review found that Femina Hip successfully sustained the program during the review period (July 2023 to June 2024), with an annual budget of around 400,000 euros and is adequately staffed with the right technical skills, experience, and sufficient administrative capacity to deliver its current strategy and existing programs.

### Lessons learned and Recommendations.

- a) The Active Learning approach utilised to deliver the "Ujana Salama Training Package and connecting youth champions with community members at the Ward level and LGAs has effectively addressed the knowledge gap on SRHR, child marriage, and GBV concerns among Muheza youth. More importantly, Femina Hip's extensive experience promoting positive influence among youth provides an opportunity to continue supporting key policies and programs and established itself as a key partner in the delivery and implementation of key government policies. It is therefore recommended that Femina Hip continue to use the "Ujana Salama Training Package" and the active learning approach (in-person training, theatre, community dialogue, etc.) as it has proven to increase knowledge and access to new information, stimulate conversations, engage emotions, perceptions, and beliefs that influence behavior change, and contribute to a change in attitude within the wider community about SRHR topics and reduce Gender Based Violence.
- b) The program can collaborate with Community Development Officers and link youth to the local government authority's 10% loan program for youth, women, and people with disabilities to facilitate youth economic empowerment.
- c) Police Gender Desk in Muheza does not have a system for storing data on GBV cases and destroys all information after 2 years. Femina Hip should consider advocating to the Central Government to include Muheza District as a priority area in the roll-out of the NPA-VAWC reporting system.
- d) The mid-term review showed that 51.9% of youth in the project catchment area do not have access to services due to negative attitudes toward health professionals, locations of the facility, and inconvenience of opening hours, it is recommended that more efforts should be directed to access to services by advocating the Government to consider changing opening hours, increasing numbers of centres and training of healthcare staff on youth-friendly service provision.
- e) There is a need to diversify information sharing on effects of GBV and reporting systems. Femina Hip should increase its awareness campaign by using alternative methods for example posters in public places such as schools, hospitals, and village offices to show proper reporting channels and where victims can get support.
- f) The youth and leaders in the neighbouring Wards desire to be included in the Ujana Salama project. The aim is for them to join the efforts to create youth who are responsible, who will adapt health seeking behavior, and help to combat GBV in their Wards. It is recommended that Femina Hip expand its catchment area to include neighbouring Wards to ensure that efforts made to date are strengthened and sustained.

## 1 INTRODUCTION

### 1.1 Femina Hip Context

Femina Hip is a Tanzanian civil society organisation reaching more than 11 million young people. It has spent the last 23 years listening to, engaging with, and communicating with youth in Tanzania about the topics that matter most to them. Femina Hip works with youth, communities, and strategic partners. It promotes healthy lifestyles, sexual and reproductive health, economic empowerment, citizen engagement, digitalization, and gender equality. It combines media content (such as Fema Magazine, Fema Radio, and social media). Traditionally, Femina Hip worked through in-school extracurricular Clubs, popularly known as Fema (Female and Male) Clubs. Over 20 years, those Clubs have grown to cover 40% of all Government secondary schools across Tanzania. The recent partnership with Irish Aid has enabled Femina Hip to return to working with out-of-school youth after a nine (9) year gap. The organization had decided to work outside of the out-of-school space due to the constant youth migration in search of work.

### 1.2 Femina Core Program

Femina is implementing a five-year strategy (2021-2025) “The Core Program,” that focuses on supporting young women and men who are in and out of school to grow, fulfil their potential, and effect positive change in their lives and communities through a multitude of engagement modalities including; Fema edutainment vehicles (*print magazine, radio, social media, and other digital platforms*), edutainment (*voices, questions, feedback, stories and experiences to be heard. Participatory informal learning*), Fema Clubs (*reading, discussions, and extra-curricular activities*), Training packages (*build the capacity of both teacher/mentors and young people*), SMS and social media, annual Femina Hip youth conference and incentivized awards scheme, voluntary, self-organized networks of Fema Clubs, and ‘Femina Family’ education movement. At the end of its strategy, the core program aims to achieve the following outcomes: -

1. Young people reached by Femina Hip possess a 'growth mindset' that enables them to take informed and intentional action.
2. Relationships between young people and adults are characterized by trust, open exchange, honesty, and mutual respect.
3. Schools embody and practice the 'Femina Family' values.
4. Young people in Tanzania have become better organized.

### 1.3 Ujana Salama Program

The Ujana Salama project is a community-based youth-focused intervention that promote equitable access to quality SRH information and services to in and out-of-school adolescents and youth (13-30) in Muheza district -Tanga Region, through 180 youth champions trained to fight gender-based violence. The project use “Ujana Salama Training Package” and Active learning approach (in-person training, theatre, community dialogue, etc) to increase knowledge and access to new information, and to stimulate conversations, to engage emotions, perceptions and beliefs that influence participants to change behaviors or take action, contributing to a change attitude within the wider community about SRHR topics. Specifically, the intervention entails 1) deepening knowledge and skills on Sexual Reproductive

Health (SRH), focusing on Gender-Based Violence (GBV), violence against women and children (VAWC), positive masculinity, and gender equality, as well as life skills to support economic empowerment among adolescents and youth (13-30); 2) improve knowledge and skills among youth (17-30) on economic empowerment; and 3) strengthen the knowledge of local government, and community leaders at the ward, and village levels, on SRH with a focus on gender and GBV to stimulate conversation and action leading to gender equality.

#### **1.4 Purpose of the Mid-Term Review**

The review aims to enable Femina Hip and its Development Partners to assess the overall performance of the core program and the Ujana Salama project and provide insight into operations and outcomes.

The main objective is to review the program and project operations to determine the level of efficient and cost-effective project delivery and management, assess key project outcome indicators, and short and long-term outcomes, and choose the initial stages of attitude change amongst the youth and, where possible, spill-over of knowledge to the broader community, which is an indirect beneficiary of the project.

Specific Objectives are:

1. To maintain accurate and up-to-date information about the core programme outcomes status and performance throughout the strategic phase and the project lifecycle.
2. To maintain accurate and up-to-date information about the status and performance of the Ujana Salama project outcomes throughout the strategic phase and the project lifecycle.
3. To review the actual performance of core programme outcomes versus the desired and planned performance within the implementation period.
4. To review the actual performance of Ujana Salama project outcomes versus the desired and planned performance within the implementation period.
5. To assess the progress of the core program through its relevance, coherence with other actors and policy priorities, effectiveness, and efficiency, including opportunities for mainstreaming climate action intervention in future programming.
6. To assess the progress of the Ujana Salama project through its relevance, coherence with other actors and policy priorities, effectiveness, and efficiency, including opportunities for mainstreaming climate action intervention in future programming.
7. To assess the progress of the core program through its impact, key lessons learned, and recommendations to inform future programming.
8. To assess the progress of the Ujana Salama project through its impact, key lessons learned, and recommendations to inform future programming.
9. To determine if corrective or preventive measures are required towards achieving intended project outcomes and overall goal.

#### **Mid-Term Review Scope and Users.**

#### **1.5 Structure of the Report**

The report is organized into five sections: the introduction, which describes the context, program, and project overview; the review objectives and structure of the report; the theoretical framework; the methodology and approach; key findings; and the conclusion and recommendations. The report is supported by additional detailed materials shown in the appendices.

## THEORETICAL FRAMEWORK

### 1.6 Evaluative Thinking and Theory-Based Review

The review applied the Evaluative Thinking approach, The theory-based review, and the Market Systems Development lens to draw on and test the validity of the project theory of change (TOC) or result chain (RC), focusing on what works, what does not work, and why works or does not work and involve collecting evidence to establish whether and how the intervention has produced or not produced the desired changes.

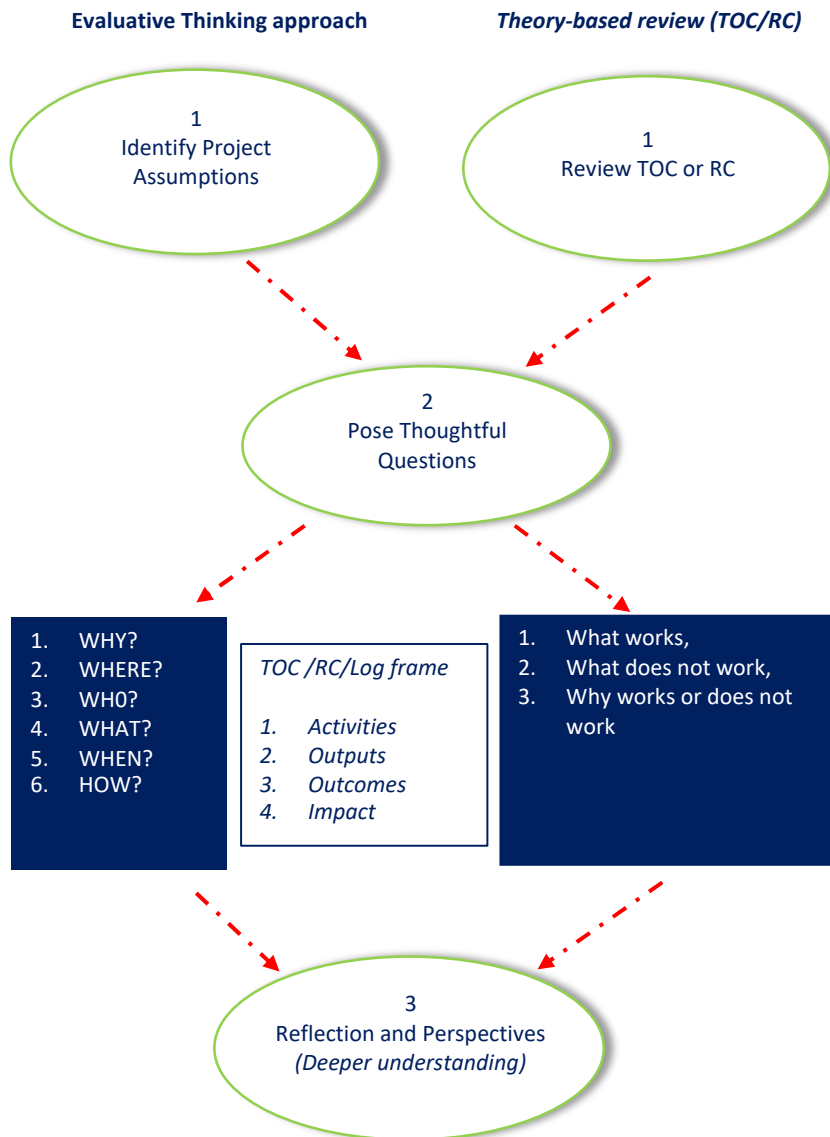


Figure 1: Evaluative Thinking and Theory-based review approaches.

## METHODOLOGY AND APPROACH

### 1.7 MTR- review Design

The review used a mixed-method design, utilizing quantitative and qualitative methods in the Muheza district council, Tanga region. These complementary methods were chosen because they lead to a data collection process that is participatory, person-centered, contextualized, and cultural. Qualitative methods enabled a deeper engagement of youth champions and cascades, providing a platform for an in-depth understanding of knowledge, attitude, and practices and captured information needed for end users on empowering young people in Muheza district council. The evaluation focused on the following indicators.

**Table 1: Key Indicators**

Key Indicators
Proportion in child marriage
Proportion in age women have first child.
% of adolescents accessing SRHR information and services.
% of youth with improved knowledge and attitude on EE.
% in social acceptance of gender-based violence.
% of young women in decision making at local level

### 1.8 Review Design and Geographical Area Coverage

The evaluation was conducted in Muheza District Council in the Tanga region, covering 3 wards: Kwabada, Kigombe, and Tanganyika.

### 1.9 Review Principles

The evaluation approach was designed to uphold ethical principles and conducted according to the principles of:

1. Systematic inquiry (goals focused, objective, not subjective)
2. Integrity, honesty
3. Respect for people and responsibilities for general/public welfare.
4. Broad participation of key stakeholder

### 1.10 Unit of Analysis

The assessment collected data from the following groups: -

1. Youth Champions and Cascades
2. In-school youth club members
3. Out-of-school youth
4. Village leaders,
5. Religious leaders
6. Traditional healers
7. Influential persons

### 1.11 Sampling Procedures and Recruitment Procedures

The review employed Lot Quality Assurance Sampling (LQAS) methodology for quantitative and qualitative data to ascertain the project indicators. The evaluation also employed probability and non-probability sampling techniques to sample the study population in three (3) wards in the district of Muheza. It also assessed what factors enhanced and/or limited the achievement of project targets and documented the results and lessons learned for future programming purposes.

Probability sampling involved a multistage cluster in selecting 6 villages and 236 beneficiaries. The project team obtained a list of wards, while each ward authority obtained a list of villages. From each sampling frame of wards, two (2) villages per ward were randomly selected in Muheza district to yield a total of six (6) villages. Subsequently, sample selection criteria were based on urban, peri urban, and rural areas, and 6 villages were covered to get geographical representation.

#### Youth Champions

Youth Champions were obtained from the project database and were randomly selected from the required number of 36 sample size. A total of 12 youth champions were randomly selected in each of 3 wards.

#### Cascaded youth (13 – 30 years)

180 cascades aged 13 – 30 from selected 6 villages in Muheza district were randomly selected from a database. In each selected village, 30 respondents from youth cascades aged 13 – 30 were randomly interviewed.

#### In school students

Chief Mang'anya secondary school at Genge Street in Muheza District was selected for in-school respondents. 20 students who are club members were randomly selected and interviewed.

### 1.12 Data Collections Methods and Tools

During the review process, both primary and secondary data were collected. This method met the assignment requirements and the assessment principles of qualitative and quantitative data collection methods. Data were collected through documentary review, focus group discussion (FGD), key informant interviews (KIIs), and questionnaire survey. A detailed description of how data were obtained is given in the following subsections:

#### Documentary Review

Secondary data was collected through a documentary review. The review team reviewed relevant documents<sup>1</sup> of the project, previous reviews and reviews, secondary quantitative data from health facilities located in the respective wards, and wider literature on Tanzania's youth and civil society operations.

---

<sup>1</sup> Femina Hip Strategy 2022 -2024, Ujana Salama Proposal and Results Framework

### Survey - Champions and Cascades

A sample of 283 adolescent girls attending primary and secondary school responded to questions on various issues related to SRH, GVB, Economic empowerment, and women's participation in decision-making.

**Table 2: Survey - Champions and Cascades**

Respondent Group	Sample Size
Youth champions – Direct Beneficiaries	36
Out of school Youth (13-30 years) – Indirect Beneficiaries	227
In school youth from clubbers members (13-19 yrs)	20
Total	283

### Focus Group Discussions (FDGs)

FDGs were conducted with project participants who had received direct support from Femina Hip. FDG rolled around SRH, GVB, Economic empowerment, and women's participation in decision-making with a special focus on outputs and potential immediate outcomes of the intervention to gather what worked and what did not and how to improve the intervention delivery approach. Each FDG session consisted of between 6 to 8 participants. 6 FDGs were engaged in the discussion where 2 youth champions, 1 school student, and 3 cascades. The 3 FDGs with the cascades were meant to gauge and assess if knowledge has been spill-over to the wider community.

**Table 3: Focus Group Discussion Respondents**

Respondent Group	Sample Groups
Youth champions	2
In school youth from clubbers members (13 -24 years)	1
Out of school Youth (13-30 years) - Cascades	3
Total	6

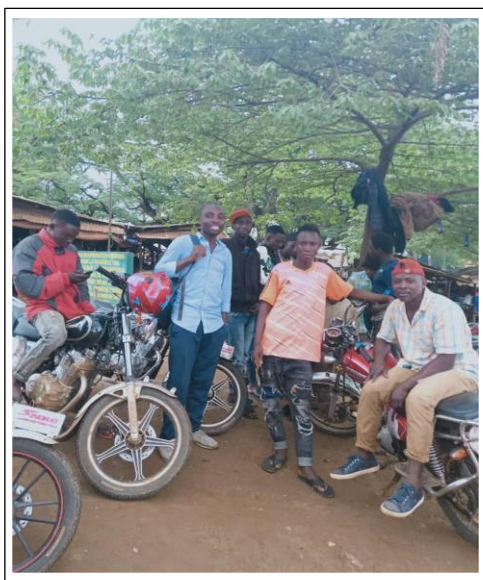


Figure 2: FDG youth champions Boda Boda



Figure 4: FDG youth champions in Tanganyika

### Key Informant Interviews (KIIs)

KIIs were conducted with key informants with first-hand knowledge of the intervention design and implementation to provide in-depth qualitative data on the implementation processes, outputs, immediate outcomes, what worked and what did not, achievements, and challenges. This category of respondents included project staff, Local Government staff, Police Officers, Social workers, Teachers, Healthcare workers, and Community leaders. A sample of 26 respondents was purposefully selected by their professional or participation in the project. Specifically, individuals who have been actively engaged in their role for at least the past 6 months, and preferably 12 months.

**Table 4: Respondents Group**

Respondent Group	Sample Size
Regional Youth Officer -	1
Reproductive and Child Health Coordinators	1
Social Worker Officers (SWO)	4
Police gender desk focal person	1
Head Masters	1
Mentor	1
MTAKUWA, NPA/VAWC	1
Ward Committee representatives' members	2
Village committee representatives' members	2
Health facilities in charge in charges	2
Village leaders	2
Religious leaders	4
Traditional healers	2
Influential persons	2
Total	26

### 1.13 Data management and analysis.

Based on the nature of the data collected, two types of analyses were employed: descriptive and quantitative. Data collection was done electronically using tables/ Android devices. Before downloading the data from the cloud server, all Android devices were checked to ensure all completed questionnaires were uploaded to the server. The dataset was downloaded in a .csv (Comma comma-separated value) format and then exported from Excel to Stata version 15 (STATA Corp Inc., TX, USA) for cleaning and analysis. The analysis involved running descriptive statistics to describe the characteristics of the data set. This included univariate analysis of frequency and percentage response distributions and central tendency and dispersion measures. Later, inferential analysis using appropriate methods (e.g., t-tests, Analysis of Variance, Chi-Square Test) was conducted. Additionally, bivariate analysis was used to assess the difference in indicators by age, sex, and council. Variables with a p-value <0.05 were statistically significant. Figures and tables were used to present the findings.

The qualitative analysis involved content analysis of the qualitative data collected through focus group discussions and qualitative questionnaire responses, including theme analysis and keyword coding. The analyses proceeded through three main steps: preparing and organizing data, creating categories/themes, and coding, presentation, and interpretation. Data were presented in tables, figures, and charts. Content analysis was conducted to detect themes and patterns in participants' textual responses.

### Triangulation and Quality Control

This review involved three triangulations: methodological, data, and investigator. Methodological triangulation was achieved using different data collection methods described above. Data triangulation was conducted by comparing different data sets from the other instruments. Investigator triangulation occurred when a diverse team of researchers brought their perspectives and expertise to the assessment.

#### 1.14 Limitations of the Review

The assessment faced some limitations mitigated by employing mixed methods in data collection and analysis and the diversity of geographical areas. To mitigate these challenges, we developed a realistic methodology given the short timeframe, which provided the most valuable data possible in the time allotted. Fundamental limitations are highlighted as follows: -

**Time for data collection.** The time given to collect data was limited, resulting in collecting data from a small sample of beneficiaries and participating stakeholders. However, this limitation has been mitigated by surveys, in-depth interviews of champions, cascades, and documentary reviews of reports.

**Respondents' availability.** The data collection team encountered cultural norms that do not allow female parents to give consent on behalf of their children. The team had to utilize various strategies to gain consent, including additional information about the data collection process and confidentiality. Sometimes, the enumerator had to wait for the father or an adult male family member or reschedule visits.

**Logistics.** Geography and logistics limited the areas where teams could visit, and surveys could be conducted. It was a long distance from one study area to another since the areas were very scattered, resulting in delayed fieldwork. The team had to travel early in the morning or spend the night at study sites to finish the work.

**Internet Connectivity.** Unreliable network and internet connectivity and frequent power cuts (electricity) affected communication among team members and delayed data synchronization. The team had to travel to locations where the network was reliable.

## 2 FINDINGS

### 2.1 Demographic Characteristics of Study Participants

Two hundred eighty-three adolescents and young people participated in the review; females were 47.3% and males were 52.7%. The mean age of respondents was 23 years. Most of the respondents were from rural settings (48.4%), and over three-quarters were peer educated youth (cascades) (89.1%). 44.9% of participants had a boy or girlfriend and sexually active. (Details by sex and age category are summarized in Table 4).

**Table 4: Demographic Characteristics of Respondents**

Variable	Sex		Age group				Geographical location								
	Female,n (%)	Male,n (%)	F, 13-17 yrs,n (%)	F, 18+ yrs,n (%)	M, 13-17 yrs,n (%)	M, 18+ yrs,n (%)	Rural Female, n (%)	Peri Urban Female, n (%)	Urban Female, n(%)	Rural Male,n (%)	Peri Urban Male,n (%)	Urban Male,n (%)	Rural	Peri Urban	Urban
Sex	134 (47.3%)	149 (52.7%)	30 (22.3%)	104 (77.7%)	22 (14.7%)	127 (85.3%)									
Geographical settings							67 (50.0%)	25 (18.7%)	42 (31.3%)	70 (46.9%)	28 (18.9%)	51 (34.2%)	137 (48.4%)	53 (18.7%)	93 (32.9%)
Type of participants	Youth Champions,n (%)	Cascade n (%)													
	31 (10.9%)	252 (89.1%)													

#### Results Indicator 1. Proportion in child marriage.

The results in Table 7 show that 15.9% of interviewed adolescent and young women are married, where 11.1% of 15.9% are married below 17 years old, and 88.9% are above 18 years old. The review reveals that 35.8% of interviewed adolescents and young women have experienced marriage or lived together with a man as if married, of which 12.5% are female between 13 and 17 years, while 87.5% are female above 18 years. The Review further intended to know at what age adolescents and young women have experienced their first marriage or lived as if married; the findings show that 27.3% of 12.2% (married or lived together with a man as if married) are below 13-17 years while 72.7 are above 18 years. These findings suggest that child marriage in the Muheza district council has been significantly low.

**Table 6: Proportion of Child Marriage.**

Variable	Status				Proportion of child marriage	
	Single n (%)	Married n (%)	Have a boy/girlfriend n (%)	Other, n (%)	Female Married, n (%) 13-17 yrs, n(%)	Female Married, n (%) 18+ yrs, n(%)
Relationship status	99 (34.9%)	45 (15.9%)	127 (44.9%)	12 (4.2%)	3 (11.1%)	24 (88.9%)
Ever been married or lived together with a man as if married		48 (35.8%)			6 (12.5%)	42 (87.5%)
Age when got a first child					15 (27.3%)	40 (72.7%)

Source: Calculation based on field survey, 2024

In line with the quantitative results, the qualitative findings also showed that Ujana Salama may have positively contributed to reducing child marriage through community sensitization and engagements of religious leaders, community leaders, and influential people.

*“Previously, the cultural norms in our community were oppressive towards girls. Some parents prevented their daughters from going to school because they wanted to acquire income through marrying off their daughters. But after the Ujana Salama project sensitizing us on child protection and violence against children the situation has changed, and most of the girls attend school.” (KII, Chief Mang’anya Secondary School)*

**Result Indicator 2: Proportion in age women have the first child.**

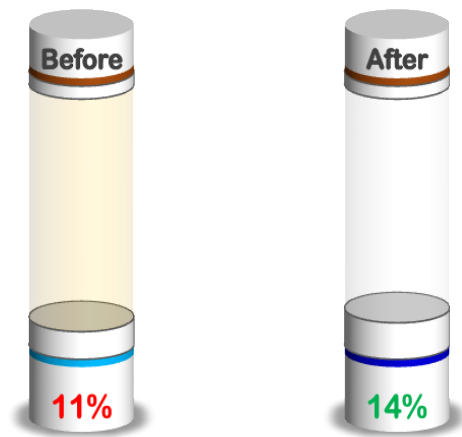
The findings show that (8.6%) of interviewed adolescent girls and young women have ever been pregnant and delivered their first child at the age of below 17 years old, while 91.4% have the same experience at the age above 18 years old. These findings indicates that within a one-year period (April 2023 to March 2024) and there has been 3.7% increase from 10.6% to 14.3% in the number of adolescent girls below the age of 20 seeking ANC services compared to the previous years of 2020 to 2022.

The DHIS2 data indicates that the percentage of teen pregnancies among mothers under the age of 18 remained constant at 5% from 2020 to 2022. This percentage increased marginally to 6% in 2023. It is especially noteworthy that there was an 11% increase in the first quarter of 2024. The rapid rise could be positively attributed to the advocacy and sensitization efforts on risks of hiding teenage pregnancies done by Ujana salama project which has led to many under 18 aged women seeking SRHR services at Heath care facilities. In comparison, the data gathered from the survey population during MTR revealed that 14.5% of young women above 18 years old were pregnant during the interview.

The project conducted sensitization sessions and behavioural change events in school through Fema clubs targeting communities to reduce teen pregnancy and early marriage” **(KII, Chief Mang’anya Secondary School)**

**Table 7: Proportion in age women have their first child.**

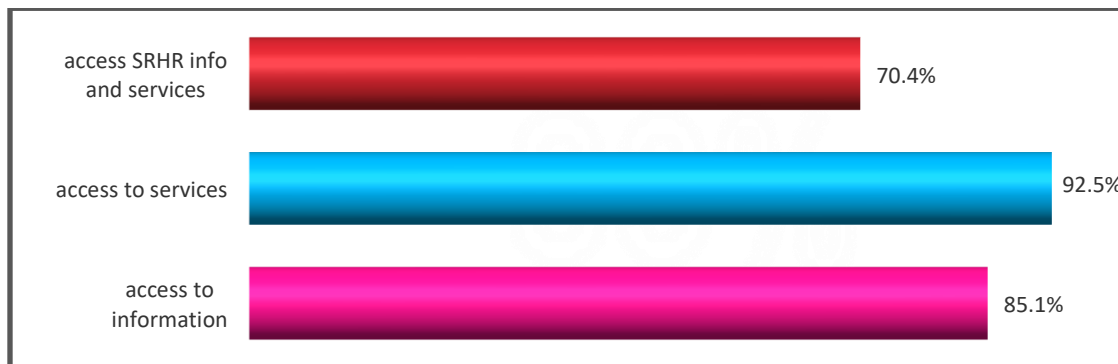
Proportion in age women have their first child		
Variable	13-17 yrs, n (%)	18 - 30 yrs, n (%)
A10. Have you ever been pregnant and delivered?	9 (8.6%)	60 (91.4%)
A11. Are you pregnant now?	0	10 (14.5%)
A12. How old were you when you got your fist child?	12 (17.3%)	57 (82.7%)



**Figure 3: Calculation based on field survey, 2024.**

**Result Indicator 3: Percent of adolescents accessing SRHR information and services.**

Access to information and services among young people was among the priorities in the Ujana Salama project. The review focused on three (3) areas: access to information (i.e., puberty, menstruation, Family Planning, STIs, etc.), access to services, and access to both SRHR information and services. The MTR findings reveal that 85.1% of young males and females have access to SRHR information in their localities, where around half (43.8%) of males were revealed to have more access compared to females (41.3%), with females above 18 years old appeared to be leading (70.5%) on accessing information across the age categories. The primary sources of their information are teachers/mentors, youth champions, health care workers, parents, and peers. The review reveals that despite the majority (85.1%) having access to SRHR information, only 48.1% of young people accessed SRHR services, while 41.3% accessed information and services simultaneously. In line with the quantitative results, the qualitative findings also showed that religious leaders positively perceive SRH advocating to the people they lead. For instance, during the KII in Tanganyika ward, a Muslim religious leader has become the agent of change to advocate for young people to access SRH information and services.



**Figure 4: SRH Information and Services**

These findings imply that the Ujana Salama project has significantly ensured youth access to the right information and services. Based on youth vulnerability to SRHR and GBV issues, this review recommends scaling up the knowledge and skills of SRH and GBV to all wards and hamlets levels since most of the young people out of the catchment area wish to have the same intervention. The review further recommends that more efforts should be directed to access to services where the majority (51.9%) of young people do not have access to services despite having access to information, with the main reasons of negative attitudes of health professionals, locations of the facility and inconvenience opening hour.

“Girls who fear going to go the health facility are those aged 15 or below; they are afraid to go for FP, and if they get pregnant, they hide, afraid of how the community will think of them.” **Teen mother Tanganyika village, Muheza**

“The project gives us knowledge on SRH, which helps young people achieve their goals by preventing teenage pregnancies in our community.” **(FGD youth champion – Muheza)**

“We are seeing increasing utilization of sexual and reproductive health services in our community. However, some adolescents do not attend health facilities” **(FGD, DRCHCO – Muheza).**

#### **Result Indicator 4: Percentage of youth with improved knowledge and attitude on EE.**

The knowledge and attitude on economic empowerment (EE) were measured among respondents 13 – 30 years. The indicator was measured based on adolescent responses to several questions about financial management, saving, positive masculinity, and managing personal budgets. The results show that the majority (58.5%) of the young people interviewed have the right knowledge and attitude on economic empowerment, with 53.7% of males taking the lead, followed by females (46.3%). The review learned that some of the project youth champions had been capacitated using ILO’s EE model, other youth trained in economic empowerment, and facilitated linkage to VETA and SIDO. The project further learned that some participants have joined groups such as tailoring and VICOBA. These findings suggest that the Ujana Salama project has contributed significantly to ensuring young people have improved knowledge and attitudes toward economic empowerment. The review recommends that in collaboration with the District Community Development Officer (DCDO), the project should go the extra mile to link young people to district 10% loans, which is facilitated by the local government, instead of only providing knowledge since the majority of young people are not fully aware with this available opportunity. Also, the review recommends strengthening the capacity of youth to improve their livelihood status by increasing their knowledge and skills of economic empowerment.

*“The project provided knowledge on economic empowerment to young people, which helped them participate in and form entrepreneurship groups to strengthen their economic capacity. For instance, we have formed a tailoring group to increase our income. This has helped raise confidence in participating in community activities and reduce teenage pregnancies.” (FGD youth champion – Muheza).*

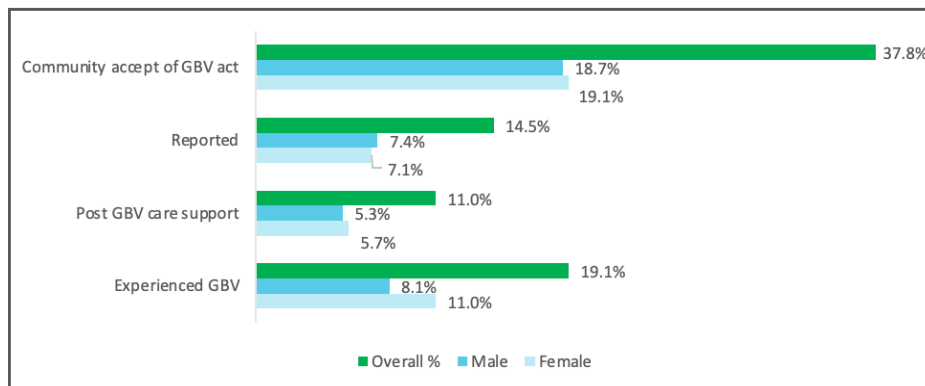
**Result Indicator 5: Percentage in social acceptance of gender-based violence.**

The review engaged youth champions, cascades, and students in in-depth discussion to understand their experience with GBV, support, report issues, and community acceptance of GBV acts in their respective communities. The overall percentage score for the GBV victims in the past 12 months was significantly low, only 19.1% among interviewed respondents. Specifically, females scored high (11.0%) compared to males (8.1%), in which most (38.9%) cases were generated by psychological, followed by physical (31.5%), emotional (16.7%), and sexual (13.0%).

The review findings indicate that more than three-quarters (76.9%) of GBV victims reported to various areas such as the NPA/VAWC Committee, the Police gender desk, and Village/ *Mtaa* Chairpersons/executives. Overall, 57.4% of GBV victims received post-GBV care support from health facilities, Village/ *Mtaa* Chairpersons/executives, and the police gender desk. The review further learned that only 37.8% of the interviewed respondent still perceive their respective community accepts GBV, while almost three-quarters (62.2%) perceive no tolerance for GBV acts in their community. In addition, during the project implementation period, it was documented that more than 31 cases have been identified. Still, only 21 (76.7%) cases were reported, with only 11 (52.3%) cases reaching the police or court level.

The review learned that most cases are not reported but even reported, end up at the family level to agree with perpetrators, and if the case reaches the court, the victim tends to disappear (no show), hence no evidence, and the case is closed. These findings imply that such efforts have been made by Ujana Salama to strengthen the knowledge and skills of young people, local government, NPA/VAWC Committees members, police gender desk, religious leaders, community leaders, and influential people at the Ward and village levels on gender equality, and prevention of GBV.

**Figure 5: Gender-based violence.**



**Source: Calculation based on field survey, 2024.**

This review comments on more engaging of Community Case Workers (CCWs) at the village level who will be supporting the report of VAC and GBV cases and providing support to VAC and GBV victims at a lower level where most cases happen. This review also recommends strengthening GBV reports and support by using posters in public places such as schools, hospitals, and village offices to show proper reporting channels and where victims can get support. It was articulated by the youth cascades during the FGD (Pangalawe village) that before the project, they used to have inadequate knowledge of GBV and VAWC. With the coming up of the knowledge, they have been able to accept any GBV acts in the Pangalawe community.

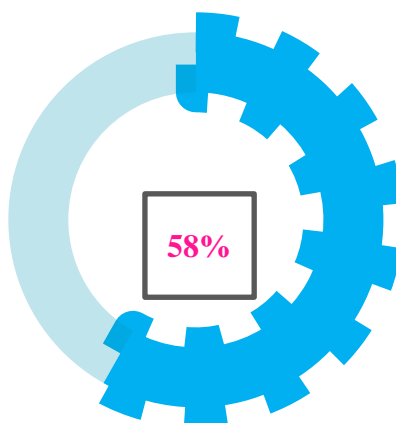
“We identify the groups that are in danger of experiencing gender violence. We educate them about violence. It is then easy for them to report the cases. Our strategy is to ensure they are educated and most come here when the cases happen. We take them to the social welfare officers and the police who have a gender violence desk.” (KII, **Ward Executive Officer-Tanganyika ward**).

“GBV cases have been significantly reduced, and immediately reporting cases compared to before project implementation after been engaged to provide education and information” (KII, **District Police Gender Desk focal -Muheza district**)

**Result Indicator 6: Percentage of young women in decision-making at the local level.**

The women in decision-making at the local level were assessed through various questions such as whether women and young people were able to participate in decision-making, being members of any groups or committees in your school or village in the last 12 months, and input provided during decision-making processes in group/committee. As Figure 7 below indicates, overall, the percentage of young women in decision-making is 58.2%.

**Figure 6: Young Women in Decision-Making**



**Source: Calculation based on field survey, 2024**

The review learned that the project has identified and trained committees to support in reporting of GBV cases to the police gender desk, engaged community leaders, religious leaders, and influential persons actively in various community dialogues, and encouraged youth males and females to participate in elections and decision-making platforms at the local level. The review recommends that the Ujana Salama project should keep this good effort to empower women at the local level for their voices to be heard.

## 2.2 Relevance

### DEFINITION

*The extent to which the objectives of a development intervention are consistent with intended beneficiaries' requirements, country priorities/strategic initiatives, and partners' and Development Partners' policies.*

### *Relevance to government policies, frameworks, and guidelines.*

The review learned that Femina Hip is in line with government policies and existing guidelines in its three priority areas: Sexual Reproductive Health and Rights (SRHR), Economic Empowerment (EE), and Citizen Engagement (CE). Youth Connect through implementing core activities with Fema Clubs and the Ujana Salama project. Key policies and guidelines that Femina Hip is aligned with include (i) the National Accelerated Action and Investment Agenda for Adolescent Health and Wellbeing 2021/22 – 2024/25 (NAIA-AHW) builds on the National Adolescent Health and Development Strategy and lays down catalytic and accelerated actions and investments. The NAIA-AHW anchors on six pillars: (1) Preventing HIV; (2) Preventing Teenage Pregnancies; (3) Preventing Sexual, Physical and Emotional Violence; (4) Improving Nutrition; (5) Keeping Boys and Girls in School; and (6) Developing Skills for Meaningful Economic Opportunities, (ii) National Policy Guideline for the Health Sector Prevention and Response to Gender Based Violence (GBV) 2011, (iii) and the National Economic Empowerment Policy (2004).

In addressing the youth challenges in the Muheza district, Femina Hip, through the Ujana Salama project, is relevant in addressing SRH information and services, young women in decision-making, gender-based violence (GBV), economic empowerment, and early marriage.

### *Maintaining project activities in line with project design, objectives<sup>2</sup>, and expected outputs since the inception.*

Based on the review of project documents and data collected from the key informants (KIs), the project's objectives have not changed, and its rationale is still valid and relevant. According to the information gathered during the KIIs, the Ujana Salama project is currently even more applicable as SRHR, economic empowerment, and GBV challenges among the young people in the Muheza district have been increasing.

---

<sup>2</sup> The overall objective of the project is to; (i) improve knowledge and skills among youth aged 13-30 years on sexual reproductive health and rights SRHR including Life skills, gender, prevention of Gender Based Violence (GBV), and financial management skills, (ii) increase knowledge on positive masculinity, (iii) and strengthen the knowledge of local government and community leaders at Ward and Village levels to stimulate conversations and actions leading to gender equality.

### *Relevance to young people's needs.*

Significant signs of relevance were visible when the youth champions and cascade engaged in discussions through FGDs and in-depth interviews. The discussions were lively, and the enthusiasm was perceptible. The youth champions and cascades believe that the Ujana Salama project is significantly addressing their SRH, GBV, and economic empowerment needs and will continue to help them improve their knowledge and skills on Life skills, gender, prevention of Gender Based Violence (GBV), and financial management.

Quoting an in-school adolescent girl from Chief Mang'anya Secondary School, Muheza District, she remarked, " *We are encouraged to stay in school, and teachers are the ones who provide SRHR information. When I receive this information, I feel safe and not disturbed.*"

To complement the perception-based quantitative survey questions, the qualitative review sought to understand the perception of religious leaders of SRH among young people in the Muheza district. The qualitative findings show that most of the religious leaders interviewed agreed and supported Ujana Salama's initiative towards addressing SRH, GBV, and economic empowerment knowledge to young people in the Muheza district. A Religious leader in Kigombe Village is quoted saying.

*"Sexual reproductive health is important; even those who are sexually active engage without awareness of the consequences of casual sex. It's important to provide reproductive health education so they can understand and avoid risky behavior."*

The Ujana Salama project has been pivotal in Muheza district in reaching young people (13 – 30 years) through Youth Champions by providing awareness on sexual and reproductive health, gender-based violence, young women's decision-making, and child marriage. The project beneficiaries and government stakeholders confirm the relevance of the Ujana Salama project.

### *Linkages between activities, outputs, and expected outcomes.*

Capacity building and strengthening of Youth Champions (YCs), mentors, and cascades to increase awareness in SRH has resulted in increased awareness and knowledge and uptake of SRH services, meeting the required output and improved demand. The approach of Training of Trainers (ToT) of Champions and respective training of cascades SRH-related issues was achieved within the six targeted wards in Muheza district. The KIIs in Region and District noted wishing this component would increase coverage to other wards.

## **2.3 Efficiency**

### **DEFINITION**

*A measure of how economic resources or inputs (funds, expertise, time, etc.) are converted to results.*

### *Budgets and Results*

The findings revealed that the Ujana Salama project is about halfway in terms of execution, and the budget was about half spent. Therefore, the review can conclude that the results have been achieved at an acceptable cost and on time. The review learned that the funds allocated for the project have been used

correctly and are used to address project outcomes. From the activities implemented, the value for money has been observed in the results of this project intervention. For human resources, the project has the suitable capacity to achieve the project goal.

## 2.4 Effectiveness

### DEFINITION

*The extent to which the development intervention's objectives or outputs were achieved or rare expected to be achieved.*

The project's effectiveness has been assessed in a broader social, technical, and organizational context while considering the internal factors and limitations associated with it. More importantly, the review has examined the relationship among goals, outcomes, activities, and inputs to explain the project's effects and possible impacts. The review shows that Femina Hip has (i) reached a significant number of 13,873 (6,491 Females and 7,382 Males) in-school and out-of-school youth in Muheza, Tanga, (ii) increase accessing SRHR information and services (increased to 72% in May 2024 from a from 64% in June 2023), (iii) increased awareness to report VAWC and GBV (76.9% of GBV victims reported cases), and (iv) enhanced local government, religious leaders and community leaders' understanding of gender and GBV to spark discussion and action toward gender equality (31 trained of which (4 Female 27 Male).

### *Assessment of Effectiveness by comparing Results with Results Framework.*

#### *Increase awareness on negative effects of and reporting of incident GBV and VAWC.*

The project provided youth champions with the technical ability to reach out and engage with the community in discussing and identifying social-cultural barriers that impact the lives of youth. Prior to the project youth did not involve themselves in GBV prevention actions. Following the start of the Ujana Salama project 180 youth who were trained as peer educators cascaded the knowledge to a further 13,693 youth. The peer educators also conducted 10 Community theatre and dialogues which involved community leaders. This has been a new way of engaging the communities in discussing the issues they are facing led by youth.

During the review the participants (adolescents and youth) reported having experienced GBV and had limited access to information and post-GBV support. Ujana Salama, through training on SRHR with a focus on S/GBV/VAWC, interactive sessions between youth champions and magistrates, coaching and mentorship on SRHR, S/GBV/VAWC, and community dialogue which engaged youth, community members, and community leaders, have brought significant positive changes in the social behavior change among young people in Muheza district council.

During the fieldwork, some of the project beneficiaries also said that information provided by Ujana Salama helped to create awareness and report VAWC and GBV cases against perpetrators to NPA VAWC/MTAKUWWA committee members at the village level, police gender desk, teachers, and social worker officers. It also ensured that youth were well connected with health care, gender desk, social welfare, judiciary, and existing NPA VAWC/MTAKUWWA committees.

### *Economic empowerment*

The review revealed that the project has brought some immediate and tangible changes using an adapted International Labour Organization (ILO) training model and package to train youth champions with the receipt of financial management skills among youth now managing their finances and better planning their incomes. The review learned that Youths had been capacitated to actively seek various economic opportunities, such as district council loans with low interest rates, which helped them to open joint businesses such as tailoring.

### *Strengthen the knowledge of local government, religious leaders, and community leaders about gender and GBV to stimulate conversation and action that leads to gender equality.*

The review noted that the Ujana Salama project has engaged and trained community leaders, religious leaders, and LGAs on SRH, GT- SE, life skills, GBV prevention, and response. Also, the review learned that existing structures and committees were identified and trained to support Project intervention. In this, the project - oriented NPA/VAWC committee members ensure they're well-linked with youth champions, familiarized with their roles and responsibilities, and develop action plans for following up on reported cases of GBV. The review further finds that community, religious leaders, and influential persons actively engage in community dialogues to promote positive behavior change in their communities. The project has strengthened the stakeholders' knowledge, but the Hamlet-level leaders have not engaged directly. The review revealed a knowledge transfer gap for sharing information among other leaders.

## **2.5 Impact**

### **DEFINITION**

*The totality of the effects of a development intervention, positive and negative, intended and unintended.*

Although the project implementation is halfway through, the review indicated that the impact is already felt in Muheza district's project catchment areas. Overall, Femina Hip and, in particular, the approach of establishing clubs for in-school and out-of-school youth whereby Femina Hip conducted TOT of Champions have imparted the change in mindset that has enabled young people to make informed and intentional actions promoted equitable access to quality SRH information and services to in and out of school adolescents and youth (13-30) in Muheza district Tanga Region. Participating Champions have adopted better social norms and practices (*i.e., avoiding abusive cultural and traditional norms and increasing access and use of SRH information and services*).

## **2.6 Sustainability**

### **DEFINITION**

*The continuation of benefits from a development intervention after completing major development assistance, the probability of continued long-term benefits, and the resilience to risk of the net benefit flows over time.*

### Ujana Salama Project Sustainability

The Ujana Salama initiative appears well received and adopted by the youth champion, communities, and stakeholders. The project has helped to improve community individuals (such as religious leaders, influential people, and community leaders), as well as NPA/VAWC committees, by providing them with knowledge and skills that would enable them to alter and embrace project initiatives. There is a good indicator of sustainability since the project's operations appeared reasonably practicable due to widespread social acceptance among community beneficiaries, including those not (directly) involved in the initiative.

The FGDs with the youth cascade revealed that the development of this type of project can only be self-sustaining if the communities are fully engaged throughout all stages. The sustainability of community beneficiaries significantly impacts the sustainability of project activities. As it appeared, the project has been improving the capacity of youth champions, religious leaders, prominent people, and NPA/VAWC committee members to enhance their capabilities in SRH information and services, GBV and VAWC, and economic empowerment.

### Femina Hip Core Program Funding

Femina Hip successfully sustained the program during the review period (Nov 2022 to Jun 2024), with an annual budget of approximately 400,000 Euros. Most funds have been provided as core support from the Irish Embassy in Tanzania (50% of the Core budget, the remaining 50% covered funding for the Ujana Salama Project). Core funding has provided a solid basis for Femina Hip operations over the review period and has been a precondition for its current and future success.

Femina Hip also secured funding of EURO 700,000 from GIZ and signed a 2-year project agreement to implement the Kijana Jitambue project targeting to improve knowledge about SRHR and promote access to services for in-school adolescents (aged 13 to 19 years) in the Tanga Region.”

The Femina Hip Strategic Plan runs from 2021 to 2025 and has a US \$10,000,000 million budget. From 2021 to 2023, Femina Hip secured a total of US \$5,581,384.53 million. The current is mainly funded by the Irish Embassy in Tanzania, which has committed EURO 200,000 until June 2024. This implies that Femina Hip has secured 55.8% of the strategic budget to date, with a shortfall of 44.18% for Femina Hip to accomplish the strategy 2021-2025. Further, there is no committed funding beyond the year 2025.

From discussing with management and reviewing the fundraising strategy, Femina is currently employing various fundraising models to shift from being 100% donor-funded to engaging with multiple donors (i.e., Enabel, GIZ, and seeking funding from Foundations) to fill the funding gaps. Additionally, Femina has earmarked to engage with 6 Bilateral funders: the Netherland Development Organization - SNV, the United States Agency for International Development (USAID), Global Affairs Canada, the Foreign, Commonwealth & Development Office (FCDO), the Swiss Agency for Development and Cooperation (SDC) and European Union.

Management should enhance its resource mobilization efforts to cover the funding gap for the current strategic period to ensure initiatives in the strategic plans for 2021 to 2025 and beyond are secured for implementation. The Management has a well-developed existing resource mobilization strategy. However, it lacks 1) a detailed explanation of how the prioritized Donor's current strategic initiatives are likely to contribute to the Femina Hip Strategy and (2) a detailed implementation plan with specific

timelines to engage with each identified donors. The Management should develop a detailed implementation plan and continue with its concerted efforts of engaging with potential funders while proactively exploring funding opportunities for earmarked projects responding to its strategy.

### **Organizational sustainability – Human Capital**

Femina Hip is adequately staffed with an appropriate governance structure and organization structure to fit the purpose of the organization and deliver its strategy. The overall understanding of the organization is that Femina Hip is sustained – It has the right technical skills and experience and sufficient administrative capacity without a significant amount of external support. The organization is run by an experienced Executive Director who is supported by the Director of Program who oversee program delivery and Director of Operations who oversee finance and administration matters.

Over the years, Femina Hip has built a strong technical/professional team supported by effective staff with the necessary organizational/administrative skills. Femina Hip will continue to find and recruit an appropriate team to innovate and produce high-quality work.

### **2.7 Ujana Salama Project Results per Indicators**

The findings of this review have been grouped according to the project's objectives and respective indicators in the project's Results Framework (RF).

### 3 CONCLUSIONS, LESSON LEARNED AND RECOMMENDATIONS.

#### 3.1 Conclusion

- The youth champions believe that the Ujana Salama project is significantly addressing their SRHR, GBV, and economic empowerment needs and will continue to help them transform their communities' behaviours towards sexual reproductive health and rights including Life skills, gender, prevention of Gender Based Violence (GBV), and financial management skills.
- The Ujana Salama project has played a significant role in ensuring youth access the right information. However, more efforts should be directed to access to services where 51.9% of young people still do not have access to services despite having access to information, with the main reasons being negative attitudes of health professionals, locations of the facility, and inconvenience opening hour.
- The project has strengthened the knowledge of LGAs and community leaders at Ward level to stimulate conversations and actions that have the potential to lead to gender equality. Still, the Hamlet-level leaders have not directly been engaged which has led to a knowledge transfer gap.
- Some of the project locations are hard to reach during rainy season, this makes timely implementation of activities difficult due to unavailability of vehicles. This review suggests the project includes the availability of a vehicle in its next implementation phase.

#### 3.2 Lesson Learned

The lessons learned emanate from Femina Hip value creation and institutional knowledge complimented with strong experiences in dealing with youth.

- The Active Learning approach utilised to deliver the "Ujana Salama Training Package and connecting youth champions with community members at the Ward level and LGAs has effectively addressed the knowledge gap on SRHR, child marriage, and GBV concerns among Muheza youth. More importantly, Femina Hip's extensive experience promoting positive influence among youth provides an opportunity to continue supporting key policies and programs and established itself as a key partner in the delivery and implementation of key government policies. It is therefore recommended that Femina Hip continue to use the "Ujana Salama Training Package" and the active learning approach (in-person training, theatre, community dialogue, etc.) as it has proven to increase knowledge and access to new information, stimulate conversations, engage emotions, perceptions, and beliefs that influence behavior change, and contribute to a change in attitude within the wider community about SRHR topics and reduce Gender Based Violence.
- Police Gender Desk in Muheza does not have a system for storing data on GBV cases and destroys all information after 2 years. Femina Hip should consider advocating to the Central Government to include Muheza District as a priority area in the roll-out of the NPA-VAWC reporting system.
- The mid-term review showed that 51.9% of youth in the project catchment area do not have access to services due to negative attitudes toward health professionals, locations of the facility, and inconvenience of opening hours, it is recommended that more efforts should be directed to

access to services by advocating the Government to consider changing opening hours, increasing numbers of centres and training of healthcare staff on youth-friendly service provision.

- There is a need to diversify information sharing on effects of GBV and reporting systems. Femina Hip should increase its awareness campaign by using alternative methods for example posters in public places such as schools, hospitals, and village offices to show proper reporting channels and where victims can get support.
- The youth and leaders in the neighbouring Wards desire to be included in the Ujana Salama project. The aim is for them to join the efforts to create youth who are responsible, who will adapt health seeking behavior, and help to combat GBV in their Wards. It is recommended that Femina Hip expand its catchment area to include neighbouring Wards to ensure that efforts made to date are strengthened and sustained.
- The approach used to connect youth champions with youth in communities, specifically at the Ward level and Local Government Officials (LGAs), has been essential for addressing SRHR, child marriage, and VAC/GBV challenges among youth in the Muheza community. In several cases, issues are now being addressed more efficiently and faster for example, GBV cases being reported to the police gender desk, as per interview with OCD, with the help of youth champions and LGA officials.
- Through continued engagement and capacity development on SRHR information, economic empowerment, and GBV, young people have benefited extensively from increased knowledge through awareness-raising activities conducted by the project team.
- Femina Hip has a good relationship with the government due to its vast experience in driving positive influence on youth. More importantly, Femina Hip has effectively supported key policies and programs that make it a key partner and integral part of delivering government policies and programs. Femina should leverage this unique position to deliver donor strategies that depend on the government's programs.

### 3.3 Recommendations

It is recommended that Femina Hip: -

- Continue to use the "Ujana Salama Training Package" and the active learning approach (in-person training, theatre, community dialogue, etc.) as it has proven to increase knowledge and access to new information, stimulate conversations, engage emotions, perceptions, and beliefs that influence behavior change, and contribute to a change in attitude within the wider community about SRHR topics and reduce Gender Based Violence.
- It is recommended that more efforts should be directed to access to services by advocating the Government to consider changing opening hours, increasing numbers of centres and training of healthcare staff on youth friendly service provision.

- The project engages with a Community Development Officer and add activities, including linking youth to the 10% loans provided to Youth, Women, and People with Disabilities by the Local Government Authority to facilitate the economic empowerment of youth.
- To increase awareness of the effects of GBV and the importance of reporting incidents, Femina Hip should increase its awareness campaign by using posters in public places such as schools, hospitals, and village offices to show proper reporting channels and where victims can get support.
- Link project activities with accessible economic opportunities and access financial initiatives (e.g., Community Microfinance Groups, Grants, etc.) and other income-generation continued at the community level to foster an environment in which the community can continue with project activities long after the phase-out, eventually contributing to beneficiaries' financial sustainability.
- Explore the following options to develop a diversified portfolio of projects.
  - I. Strategically engage with Development Partners to fund the core program while equally contributing to delivering Development Partner country's and or regional strategy goals.
  - II. Form a strategic alliance with international NGOs and create consortium projects to deliver their strategy.
  - III. Source for earmarked projects that partially contribute to the core budget.
  - IV. Divestiture part of the institution to advisory services, use its institutional knowledge and expertise to provide advisory services on Gender equality, SRHR, and Economic Empowerment to the Government, Development Partners, NGOs, and the private sector in general.