SOCIAL IMPACT ASSESSMENT: COUNTRY SNAPSHOT



TANZANIA



Location: Zanzibar

BACKGROUND

Operating since 1991

Core services

157 children are being cared for in family-like alternative care 1,150 children are being supported through family strengthening services

Supporting services

- 1 pre-school for children aged 3-5 years
- 1 primary school
- 1 secondary school
- 1 medical centre

Methodology

In October 2015, a social impact assessment was carried out at SOS Children's Village programme Zanzibar. It involved interviewing 78 former participants of the programme, as well as carrying out stakeholder interviews with programme staff, community-based organisations and local authorities. This assessment was led by a UK-based external consultant, i.e. The Research Base, together with three local researchers.

The assessment aimed to determine the impact of SOS Children's Villages in Zanzibar, in terms of the following:



Eight dimensions of personal well-being were assessed through interviews with former participants. For each dimension, former participants were given a rating, on a scale of 1 to 4, where 1 is the most positive.

2 Community level

Six dimensions of impact at the community level were assessed, based on desk review and the findings of semi-structured interviews with key programme staff and representatives of other relevant stakeholders. For each dimension, researchers assigned a rating, on a scale of 1 to 4, where 1 is the most positive.

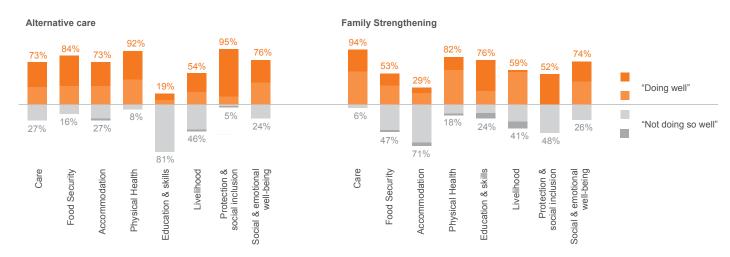
3 Social return on investment (SROI)

This quantified the social impact of the programme in financial terms. It was calculated by comparing the cost of inputs to the financial benefits of the programme for individuals, the community and society.¹

Results

Overall, the findings provide evidence that SOS Children's Villages has had a positive impact on the lives of the children who participated in the programme.

1 Individual level



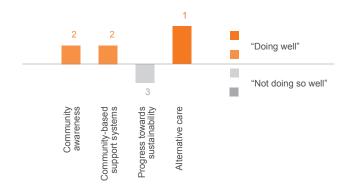
The findings show that former programme participants of family-like alternative care are generally doing well in most of the given dimensions of personal well-being. More specifically, 73% of former participants are performing well in at least 6-of-the-8 dimensions. Former participants are doing particularly 'well' in terms of physical health, food security, social inclusion and protection, as well as social and emotional well-being. They are doing less well in the dimensions of education and training, livelihood and accommodation. It is interesting to note that while former participants have done relatively well in terms of educational achievements, this has not automatically meant that they are highly employable; hence the low overall scores for education and training. Finding employment in Zanzibar too often depends on 'who you know', whereas young people leaving alternative care typically do not have strong social networks and lack relevant work experience.

In the case of family strengthening, 53% are doing well in at least 6-of-the-8 dimensions. Critically, all children are still in the care of their families, indicating that the primary goal of strengthening the family to prevent family separation has been achieved. Encouragingly, former participants are also doing 'well' in terms of their physical health, as well as their social and emotional well-being. While education and training, and livelihood are also a concern for family strengthening, the dimensions with room for improvement are accommodation, food security, and social and emotional well-being.

Overall, stable employment is the biggest long-term challenge for former participants of both alternative care and family strengthening, including those who have received basic education and skills training.

2 Community level

Community awareness is seen to be relatively strong, with the analysis suggesting that key stakeholders are aware of and motivated to improve the situation of vulnerable children and their families.



However, there is still room for improvement in community-based support systems for vulnerable children and their families, whether in terms of civic engagement, community networks or child safeguarding mechanisms. SOS Children's Villages makes a significant contribution to the protection of vulnerable children in the communities in which it works. However, the extent of demand for these services may negatively affect progress towards sustainability.

The weakest aspect of impact on a programme level is progress towards sustainability. SOS Children's Villages is working closely with partners, to increase the sustainability of programme-related activities. However, it is acknowledged that there is more work to be done in empowering communities, as they are not yet strong enough to sustain activities if SOS Children's Villages withdrew its support today. Two additional dimensions on giving and volunteering and next generation benefits were factored in the social return on investment below.

3 Social return on investment (SROI)



^{*}The value of benefits was rounded to the closest integer.

In alternative care, there is a benefit-cost ratio of 1.26:1 which means that an investment of €1 yields benefits worth €1.26. The programme has an SROI of 26% which means that an investment of €1 returns an additional €0.26 on top of the initial cost. In family strengthening, there is a benefit-cost ratio of 56.84:1 which means that an investment of €1 yields benefits worth €56.84. The programme has an SROI of 5 584% which means that an investment of €1 returns an additional €55.84 on top of the initial cost.

The **overall** benefit-cost ratio is 10.28:1, which means that an investment of €1 yields benefits to society of €10.28. The programme has an SROI of 928%, which means that an investment of €1 returns an additional €9.28 on top of the initial cost.

It should be noted that a meaningful comparison cannot be made between the SROI figures for family strengthening and family-like alternative care. The participants in of each service have different starting points and levels of vulnerability. Children entering family-like alternative care lack appropriate care and are particularly disadvantaged. A higher investment in these children including more intense direct support services over a longer period of time is needed. The average duration of stay of former participants in the programme was 16 years, meaning that the organisation invested a larger amount of resources over more than a decade to support these children in every aspect of their development. Had these children not been supported, there would most likely be a cost to society, negatively impacting on the next generation of children and societal benefits. Thus, a higher SROI with family strengthening is to be expected. The children in family strengthening live with their families and the organisation provides supporting services for these families over a shorter period of time. On average, a family received family strengthening services for 5 and a half years.

The way forward

In general, the results for alternative care and family strengthening show that the programme is having a significant impact on children, their families and communities. However, the results also reveal some areas for improvement, that need to be addressed going forward. The main recommendations include:

- There is a need to improve the employability of programme participants, in alternative care and family strengthening, so that they are better able to find their way in the job market. In particular, this requires extending the provision of relevant skills, as well as effective career guidance and opening-up networking opportunities.
- In family strengthening, expectations of programme support should be more effectively managed, so that participating families are better prepared when the time comes to exit the programme.
- Opportunities for partnership in economic empowerment of families should be explored, particularly to 'fill the gap' in securing the required finance.
- Continued investment in capacity-building of care professionals is essential, with a view to promoting the quality of care provided.
- Attention should be given to making sure that a step-by-step leaving care process is followed for each individual participant in alternative care.
- Sensitivity to social and cultural norms should be promoted for children in alternative care, particulalry in terms of gender and parenting, so that participants are empowered to negotiate potentially difficult situations and relationships once they are living independently.

SOS Children's Village Zanzibar and SOS Children's Villages Tanzania as a whole have incorporated the recommendations, learnings and areas for improvement into their planning for the future in order to improve programme quality and the impact of the programme on the lives of children, families and their communities.



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For more information, please contact: pd-service@sos-kd.org