

## **Empowering Vulnerable Children through Community Involvement**

Mehreen Ashraf\*  
Syed Manzoor Hussain Shah\*\*

### **Abstract**

The impediments on the road to development in developing countries include various socio-economic problems. Amongst them, a grave social problem is posed by vulnerable children living in abject poverty. In a number of these countries, such as Pakistan, viability of community involvement and participation for their support is yet to be fully explored. This paper attempts to address the empowerment of vulnerable children in the paradigm of community involvement in the study area. The study was conducted in the four union councils namely Wahndoo, Kali Subah, Kotali Nawab and Swawa of tehsil Kamoki, Gujranwala. The methods employed were both qualitative and quantitative utilizing interview and structured questionnaires with both open and close ended questions as data collection technique. The study has investigated 40% (51) mothers/guardians of orphans were selected by means of simple random sampling and 200 community members using stratified random sampling. A questionnaire was developed and administered to the community members of Kamoki. The mothers/guardians of orphans were interviewed. The research suggested the need to sensitize and mobilize local community to care and support vulnerable children by strengthening the economic capacity of the mothers/guardians.

**Keywords:** Community participation, orphans and vulnerable children (OVC), empowerment, capacity building, care.

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\* PhD Scholar, Educational Planning, Policy Studies and Leadership, Allama Iqbal Open University, Islamabad. Email: mehreenashraf71@gmail.com

\*\* Dean, Social Sciences, Hazara University, Mansehra.  
Email: drmshah@gmail.com

## Introduction

The term empowerment recurs in various disciplines offering different meanings. Generally, empowerment refers to furnishing of chances to enhance the capabilities of those in need (Alsop et al., 2006). In the broader perspective, it is strife to gain control over factors determining the lives of relatively powerless people. Hence, it is the development and acquisition of power as opposed to the state of powerlessness. Such control is obliged to be attained rather than conferred (Helling et al., 2005). Any program for empowerment must delineate what is anticipated to be attained due to the fact that there is no precise and representative definition of the concept of empowerment (Jackson, 2009). The development of any community, in general, depends on the active participation of the community members (Eby et al., 2010). The concept of community-based empowerment relates to the authorization of power to the community by the community. It involves provision of social services at the neighborhood-level. Community organizations provide services and bring about development effectively through successful sensitization and mobilization of community. Initiatives for empowerment led by community are expected to be owned by local people and have more probability to reach the segments of the community that are neglected or inadvertently excluded by the mainstream services (Orme et al., 2007). In Afghanistan, the Taliban govt. did not approve of girls' education. Therefore, the International humanitarian community-built capacities at the community level to meet the educational needs by running the home-based schools. The use of community mobilization strategy in a project in Hala, Pakistan resulted in the reduction up to 50% in neonatal mortality. Also, 7000 acres of land was re-cultivated after flood in Southern Punjab, Pakistan by the small farmers when seeds and fertilizers were provided to them by UNDP.

Notable among the vulnerable segments of community are children. As vulnerability is the opposite of empowerment, there is a dire need to empower such children by upholding their rights (Kapinga, 2005). The adoption of this rights-based approach instead of needs-based approach resembles women's struggle for empowerment. Being biologically immature, children are considered inherently vulnerable. Considering this perception, children belong to marginalized community. They cannot enact alone in practice in the absence of an adult caretaker or guardian and need legal protection to be empowered. All rights of children including participation rights must be respected in order to protect them in real sense. Vulnerable children, according to FHI document (2001, p.2), are those

children who are deprived of their right “...to a decent and fulfilling human existence.” The categories of vulnerable children, as mentioned by Audu (2010), include street children, whose one or both parents have died, whose parents or guardians are either chronically or terminally ill, neglected, poor/beggars (including oppressed *almajiris*), those who have old or weak parents, married children who have not yet attained the age of 18 years, children living in homes that are child-headed, HIV infected children, sex workers, domestic servants, trafficked children, children who have been separated or displaced internally, special challenged/disable children or those living with disable parents, children involved in activities against law, those who have unmarried parent(s), and children living with migrant workers like nomads, fishermen etc. For the purpose of this study, the term vulnerable children refer to orphans only. The concept of orphan offers a variety of meanings that varies from culture to culture. Orphans are generally categorized as maternal, paternal, double and total orphans (UNAIDS, UNICEF and USAID, 2004). Considering age and lost parents as the main variables, Smart (2003) states that the age of an orphan could be up to 15 or 18 who has lost mother, father or both parents. For the present research study, paternal orphans currently enrolled in OSP are included. In Pakistan, individuals who are related to orphans by blood usually take the responsibility to fulfill their needs. Audu (2010, p. 6) mentions the definition of a guardian as “any person caring for a non-biological child.” In this study, the term guardian refers to any adult relative of the orphan who has taken the responsibility to keep the orphan for providing care and support within his/her means.

The empowerment of vulnerable children, broadly speaking, enables them to avail their basic rights in accordance with the United States Convention on the rights of the children, 1989 and lead a normal life like other children. This includes their right to education, health facilities, legal security, growth, development, food and shelter. Social networks and support systems have a positive impact on the development of vulnerable children. Social support aims to enhance competence to deal with crisis situations. Social networks provide instrumental, emotional and informational support. Capacity building of basic social safety nets of the community and the extended family could help reduce the difficulties of vulnerable children. Generally, the relatives of orphans and vulnerable children (OVC) provide essential services to them. The second significant safety net after relatives is community. Religious beliefs preaching to help and support those in need are the strong driving forces behind volunteer community involvement and participation to support the vulnerable children (Ngalazu Phiri et al., 2001). However, it is not only the religious

conviction or empathy which motivates them but also the realization that they might need such assistance in the future too (Williamson, 2000).

Since a wide gap exists between the needs of vulnerable children and the government funding in developing countries, the community coping mechanism through providing support and contribution could bridge it (Beasley et al., 2009). Organized communities play a substantial role not only in the identification and selection of VC but also for the generation of funds through local or outside resources to solve their problems (UNAIDS, UNICEF & USAID, 2004; Hunter & Williamson, 2000). Hence, actions can be taken to create a supportive environment (UNAIDS, UNICEF & USAID, 2004) and to mobilize community to channel local resources (Donahue & Mwewa, 2006). In the face of crisis and poverty, community - based empowerment is not only a sustainable solution but cost-effective approach too. The participation of community creates a civic sense to strive for the common good. However, the extent of empowerment relates closely to the economic status of participating community.

Community ought to be responsive, helpful and proactive to provide counseling, support and recreational activities to children at individual level. Community based programmes for the provision of psychosocial support to poverty stricken, violence and HIV/AIDS affected children are worth conducting to diminish vulnerability and enhance resilience (Themba, 2007; Hepburn, 2001). This would result in better social and mental health, improved access to education, increased attendance of individuals, and reduced instances of discrimination and disgrace at the level of household as well as community. (Nyangara et al., 2009). Further, effective systems should be developed to monitor the condition of vulnerable children and to protect them from exploitation. The Empowerment White Paper (2008) confirms that the development of social networks, community spirit and sense of ownership form the basis of strong and self-assured community. There are five common strategies for operational guidance to address the problems of orphans and vulnerable children. These include capacity building of family, activate community-based support, providing basic needs to OVC, ensure the protection of OVC by government and enhance awareness to build a supportive environment in this regard (UNICEF, 2004).

“...whereas interventions like economic strengthening, family strengthening, child protection, and food security and nutrition were associated with improved vulnerability... There is no ‘one size fits them all’ solution to child vulnerability improvement” (Walugembe, 2019, p. 29).

Pakistan is a developing country where 24% people are leading a life below the poverty line. Many people cannot afford primary health care and education particularly in rural areas. Children in Pakistan whose basic rights need to be met include orphans, runaway, abandoned and street children leading a destitute life. These children either have inadequate or no access to life skills development prospects. Interventions are, therefore, needed to support, care and provide opportunities for the development of such vulnerable children. The Ministry of social welfare and special education works for the provision of opportunities to marginalized, oppressed and vulnerable faction of the society. In 2004, the Bureau for Child Protection and Welfare was established to work for the constitutional rights of deprived children, children involved in begging, and the gifted ones. Moreover, the National Commission for Child Welfare and Development (NCCWD) ensures the implementation of the UN Convention on the Rights of the Child in Pakistan. The chief social safety nets to respond to the problems of vulnerable segment of the society in Pakistan are the Zakat Fund and Pakistan Bait-ul-Mal (PBM). A number of organizations are working here for the empowerment of orphans. In SOS villages, there are about 10 children in a home. They all live like a family and are looked after by a “mother”. “Aghosh” provides food and shelter to orphans in Northern areas. Among the orphan care institutions, Darul Shafqat is the oldest one. In Balochistan, orphans are mostly cared by madrassas. Eidhi Homes resettle children in foster homes. Other prominent examples include Alkhidmat Foundation, Pakistan Sweet Home, Anjuman Faizul Islam, Kashana Atfal-o-Naunihal, Hira Academy, and Darul Fallah Sulemania. Helping Hand for Relief and Development (HHRD), an international humanitarian organization, is also addressing the problems of orphans through Orphan Support Program (OSP) in KPK, Punjab, Sindh, Balochistan, Gilgit, and Baltistan ([www.hhrd.org](http://www.hhrd.org)). The mission of the program is to fulfill the basic needs of orphan children in the targeted areas. OSP works through clusters as per the region of orphans. A trained social organizer manages one or more clusters of OSP. Due to the contribution of OSP for the empowerment of vulnerable children, this case study was planned as a research strategy to get an in-depth insight into the same from community involvement and participation perspective. Previous researches on OVC were primarily conducted on HIV/AIDS affected families. The present study focuses poverty-stricken orphans and is anticipated to contribute to the discourse on empowerment of vulnerable children by further illustrating the community-based paradigm.

## **Methodology**

The study reports on OSP intervention and presents survey data addressing the economic status of parents/guardians of orphans enrolled in OSP, the opinions of Kamoki community to extend supportive services for vulnerable children, and their awareness regarding interventions to support vulnerable children.

### **Population and Sample**

The study was conducted in the four union councils namely Wahndoo, Kali Subah, Kotali Nawab and Swawa of tehsil Kamoki, Gujranwala. Children had been identified and enrolled in OSP from the community of these four union councils of Tehsil Kamoki. The population of the study consisted of mothers / guardians of orphan children enrolled in OSP, Gujranwala and all 68827 residents of the four union councils of Tehsil Kamoki, Gujranwala: Wahndoo 18433, Kali Subah 16844, Sohawa 16129 and Kotali Nawab 17421 (Punjab Development Statistics, 2008). The sample of the study included 51 (40%) mothers/guardians of orphans supported by OSP chosen through random sampling. Stratified random sampling was used to collect data from the community of the four union councils of Tehsil Kamoki, Gujranwala. The total population of the study area was 68827. To gather information from a big number of people was not possible due to time and resource limitation. Therefore, a sample of 200 people was chosen due to their relevant expertise and role in the community. For this purpose, 50 respondents were selected from each of the four union councils of Kamoki in Gujranwala where OSP was in operation. The sample of 50 respondents included: Community leaders (10); Community leaders i.e., Govt. Officials (10); Religious leaders (10); Teachers (10) and Businesspeople (10).

### **Instrument**

The tools of data collection were interview and questionnaires. A structured questionnaire including both open and close ended questions was administered to gather the desired data from the community of the four union councils of Tehsil Kamoki, Gujranwala. Open ended questions were developed for the survey items that needed much explanation by the respondents. There were 11 close ended and 2 open ended questions in the questionnaire for community. After the pilot study, the value of Cronbach's alpha was calculated to confirm stability. The value calculated was 0.88. The mothers/guardians of the orphans enrolled in OSP, Gujranwala were interviewed. Initially written permission to collect data

from the parents/guardians was sought for from the concerned department of Orphan Support Program in the head office located in Islamabad. A copy of the letter was submitted to their local representative in Gujranwala. The parents/guardians asked various questions about the research project and all the queries were answered in detail. Consent from the participants of the study was obtained and they were informed that their confidentiality and anonymity would be made certain. None of them was forced to participate in the study. Using the quantitative data, end results were tabulated to determine frequency and percentage.

## Results

Mothers/guardians of OSP enrolled orphan children were interviewed and the data collected is presented in this section.

Table 1  
*Educational status of the respondents*

| Sr. No | Educational Status | Percentage |
|--------|--------------------|------------|
| 1      | Primary            | 14         |
| 2      | Illiterate         | 86         |

Table 1 reveals that a clear majority of the mothers/guardians were illiterate.

Table 2  
*Employment status of the mothers/guardians*

| Sr. No | Employment Status | Percentage |
|--------|-------------------|------------|
| 1      | Labour            | 33         |
| 2      | Housewife         | 67         |

Table 2 shows that a majority of the mothers/guardians were housewives.

Table 3  
*Economic status of the mothers/guardians*

| Sr. No. | Statements                   | One | Two | Three | Four or more | None |
|---------|------------------------------|-----|-----|-------|--------------|------|
| 1       | Number of earning members    | 43% | 16% | –     | –            | 41%  |
| 2       | Number of rooms in the house | 41% | 39% | 20%   | –            | –    |

Table3 shows that the highest proportion of the mothers/guardians lived in single roomed houses and belonged to single-income families.

Table 4  
*Number of children supported by OSP*

| Sr. No | Statements                         | 1-2 | 3-4 | 5-6 | 7-8 | 9 or above |
|--------|------------------------------------|-----|-----|-----|-----|------------|
| 1      | Number of children below 18 years  | 17% | 53% | 16% | 4%  | 10%        |
| 2      | Number of children enrolled in OSP | 68% | 32% | -   | -   | -          |

Table 4 indicates that the highest proportion of the mothers/guardians had only one child enrolled in OSP whilst a greater part of the mothers/guardians had 3-4 children below 18 years.

The data below presents a snapshot of the information and participation of the community members of the four union councils of Kamoki, Gujranwala regarding interventions to support vulnerable children (N=200). Further, it provides information about the willingness of the community to extend supportive services for vulnerable children.

Table 5  
*Information of community members about orphan support program*

| Sr. No | Statements                                       | Yes   | No    |
|--------|--|-------|-------|
| 1      | Information about any program for orphan support | 41%   | 59%   |
| 2      | Information about OSP, HHRD                      | 39.5% | 60.5% |

Table 5 shows that around two-third of the community members had no information about any orphan support program in general, or in particular, about OSP, HHRD.

Table 6  
*Willingness of community members to contribute to the program/s for orphan support*

| Sr. No | Statements  | Yes   | No    |
|--------|---|-------|-------|
| 1      | The dilemma of orphans is grave in nature                   | 71.5% | 28.5% |
| 2      | Willingness to contribute to any program for orphan support | 96.5% | 3.5%  |

Table 6 confirms that majority of the community members surveyed agreed that the dilemma of orphans was grave in nature and were willing to contribute to any orphan support program.

**Table 7**  
*Opinion of community members about the kind of services they intended to extend for orphan support*

| Sr. No | Statements                        | Percentage |
|--------|-----------------------------------|------------|
| 1      | Contribute in supporting programs | 33.5%      |
| 2      | Labour/other help                 | 49%        |
| 3      | Monetary help                     | 14%        |
| 4      | None                              | 3.5%       |

Table 7 indicates that nearly half of the respondents intended to provide labour/other services to support orphans.

**Table 8**  
*Recommendations of community members to address the problems faced by orphans' parents/guardians*

| Sr. No | Recommendations                             | Percentage |
|--------|---|------------|
| 1      | Provision of loans with flexible conditions | 68.5%      |
| 2      | Care and support of orphans                 | 11.5%      |
| 3      | Launch schemes                              | 20%        |

Table 8 shows that a clear majority of the community members surveyed recommended the provision of loans with flexible conditions to empower the mothers/guardians of orphans.

## **Discussion**

The demographic information provided enough rationale that the poverty, illiteracy, and meager income made the concern of orphans' support complicated and a heavy burden for the women-headed families. This poverty of mothers/guardians limited their capacity to support their children. The support mainly financial and material was provided by OSP. It wasn't, therefore, a comprehensive support. The "link between poverty and vulnerability seems well established" (Smart et al., 2006, p.9) and hence, the improvement of economic condition of such families would be beneficial. The community ought to ensure that the orphans are accepted and the basic facilities, such as health care and education are available to them (Nyangara et al., 2009). The OSP interventions targeted facilitation through health care, education, life sustenance and psycho-social uplift. Within these objectives, the participation of OSP to empower orphans was encouraging. The community members had less information about any program for orphan support which was one of the reasons for the low participation of community to support orphans. Organization of awareness

programs for community could enhance their support for orphans. The sensitization of community heads results in escalating the efficacy of community-based empowerment of VC. If local headmen and chiefs consider the participation of community to support OVC and households as a priority and they regularly contact the implementers and programme managers, such community-led initiatives are more likely to be effective (Beasley et al., 2009). In order to increase community participation, a proposal for fund raising may be developed to conduct awareness programs and sensitize the community of Kamoki, Gujranwala. Volunteers could be best utilized through motivation and training (Nyangara et al., 2009).

There exists a strong potential in the community of Kamoki, Gujranwala to support vulnerable children. NGOs may explore the possibility of people here to work with for the empowerment of vulnerable children. The present case study leads to a consensus that participation of community is needed to look for long-lasting solutions of the problems of marginalized women-headed families of Gujranwala at the grassroots level. The community members intended to provide labor / other support to orphans like for the construction of community-based orphan homes, free boarding schools for orphans etc. Efforts may be made to effectively include all the stakeholders from the community for the best results of any such projects in future. While initiating a policy to protect, support and develop vulnerable children, the government of Pakistan may also ensure the active participation of different stakeholders and NGOs like Helping Hand for Relief and Development. If government and other parties are committed and provide the desired support to the community-based organizations, they would be able to provide a chance of better livelihood to vulnerable children thereby ensuring a decent future (Urassa, 2007; Mekuriaw, 2006). The findings indicated that life sustenance support could be provided to vulnerable children on monthly basis that might address their problems in a better way. The results of present study also revealed that the provision of loans with flexible conditions may lead to the empowerment of the vulnerable orphans' families. This is in strong agreement with what has been recommended in the Family Health International document (2001). The economic empowerment of parents/guardians is the solution that would prevent children of such families from resorting to menial jobs for subsistence income (Dela Luna, 2018; Makufa, 2017).

The present study was limited to looking at the prospects of community participation for the empowerment of vulnerable children. Further research to find out the relationship between economic status of a

community and increased instances of vulnerable children is recommended. Moreover, a larger sample for survey could enhance the data to provide insight into innovative approaches for addressing the problems of OVC in future.

## **Conclusion**

Children belonging to poor families in Pakistan, like other developing countries, are deprived of their rights to education, food, health services, growth, development and even protection from abuse and violence. In 2015, the reports of children being sexually abused on large scale in village Hussain Khan Wala, district Kasur of Pakistan over a period of several years showed the failure, inter-alia, of neighbourhood watch (NCHR, 2018). In such circumstances, there is a need to look for active community involvement instead of solely depending upon government and acknowledge our civic responsibility to save children. Community-driven empowerment refers to commitment and means of a community to support by planning and organizing different activities. When a community raises its internal resources besides generating external resources, it is a sign of expanded organizational capability. Such participation and organization at grass root level is needed to provide support to orphans and their fostering households. The Kamoki community was responsive and could be mobilized to work with funding organizations in order to implement community-based orphan support programmes. The results indicated that the dilemma of orphans was grave in nature and OSP contributed for their support. In future, the initiatives of OSP could draw on community strengths to identify households and for providing educational facilities. However, school enrollment of VC could not solve the problem alone. Community-based life sustenance support could be provided to vulnerable children on monthly basis for the reason that cash transfer to poor households needing orphan support can have multiplier effects and raise long-term living standards (Egger et al., 2019; Handa et al., 2018). The interventions of any governmental or non-governmental organization complemented with community structures may preferably be on the capacity building of poverty-stricken families of vulnerable children through loans with flexible conditions and micro financing schemes following the South Asian model of Bangladesh.

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