

Peer Evaluation Report

Submitted to:

Chiedza



For a Peer Review of the Project Titled:

"Integrated Continued Access to Education for Orphans and Vulnerable Children in Harare South District"

Submitted by



AIDS Counselling Trust

15 Rowland Square, Milton Park, Harare, Zimbabwe

Evaluation Contact Persons

Benedict Gundani

pm@actzimbabwe.org.zw

benmgundani@gmail.com

+263713390060

Privilege T Murambadoro

privilegetmurambadoro@gmail.com

+263772982037

Supported by The Egmont Trust

ACKNOWLEDGEMENTS

We would like to express gratitude to The Executive Director of Chiedza- Spiwe Chakawa- and Chiedza management for allowing us to participate in the evaluation of the project. We especially thank Fortunate Shadaya, for providing oversight on the entire evaluation process. Also, we thank all staff members, stakeholders and beneficiaries for willingly providing information and support. We would also want to thank Mr Nyikahadzo (ACT Zimbabwe Executive Director) and ACT staff members who provided significant guidance. We specially want to appreciate the case studies conducted by Mr Decent Moyo as part of this evaluation. Last but not least; we thank Egmont Trust for providing the funds for the evaluation exercise.

EXECUTIVE SUMMARY

The project's overarching objective was to improve the lives of households with OVC it supports in Harare South. The project was implemented between September 2020 and September 2023 and funded by Egmont Trust. This report presents findings on the evaluation conducted in July 2023. It examined the extent to which the project achieved its stated objectives, the appropriateness and effectiveness of project design, how the project has improved the lives of the people, and it enabled Chiedza and partners with information for better programming in the future. The evaluation adopted a participatory approach involving stakeholders at different levels of project implementation and beneficiaries. Quantitative data from a total of 61 sub-samples of OVC aged 9-17, 45 caregivers and 15 vocational students were analysed. The evaluation also employed other methods of data collection including focus group discussion and key informant interviews.

Highlights of Findings

- Results suggest improved access to education, health, psychosocial support, rights and protection services and these varied significantly across selected background characteristics. OVC who participated in this evaluation fared better on schooling, access to birth certificates, and knowledge about critical topics like HIV/AIDS.
- Findings showed that the majority of OVC rated the services that they received very satisfactory/satisfactory. Also, the majority reported the best condition possible for education, health, psychosocial, and rights and protection. The general well-being of most OVCs was either high or medium, thus reinforcing the findings that OVCs were in better conditions than they used to be. These are factors indicating better livelihood for OVC who participated in the program.
- The SILC component has produced more desired results. Results on the SILC strategy were positive on beneficiaries and were rated as satisfactory. There is a need to scale up these successful strategies in future programming efforts.
- The vocational component has generally helped the beneficiaries realize their potential as many attested to finding new jobs and opening their businesses.
- Key challenges that need to be addressed in future programs on OVC are the unavailability of market linkages, lack of sustainable start-up capital and the issue of reintegrating children into other schools among other challenges.

Overall, the project performed well in increasing access to OVC to needed services, which translated to improved well-being and livelihood of the beneficiaries. Future programming should

aim at scaling up using tested strategies that have produced desired results, and making concerted efforts to incorporate sustainability plans at both the partner and the beneficiary levels.

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ACRONYMS & ABBREVIATIONS

ACT	Aids Counselling Trust
AIDS	Acquired Immune Deficiency Syndrome
FGD	Focus Group Discussion
HIV	Human Immunodeficiency Virus
IGA	Income Generating Activities
ISAL	Internal Savings and Lending
M & E	Monitoring and Evaluation
NGO	Non-Governmental Organisation
OSSG	Out-of-School Study Groups
OVC	Orphans and Vulnerable Children
SILC	Savings and Internal Lending Communities

1 INTRODUCTION

1.0 Introduction

In July 2023, Aids Counselling Trust Zimbabwe (ACT) with the permission of Chiedza funded by the Egmont Trust, evaluated a project implemented by Chiedza which is providing care and support to orphans and other vulnerable children (OVC) in Harare South. This report focuses on the overarching outcomes, emerging issues, and lessons learned from the evaluation study of the OVC program. It presents summary information across the project about beneficiaries, their intervention exposure, and key findings from the outcome assessments, as well as program information from the case studies. This report further includes recommendations on how to bridge the gap between what is currently done and what programs might do to effectively improve the well-being of OVCs and their families. The methods and related challenges are described and guidance is offered for future research on OVC programs, to continue to fill the evidence gap.

1.1 Background and Rationale

In sub-Saharan Africa, the number of children under 18 years of age who have lost one or both parents has drastically increased, largely due to the HIV/AIDS epidemic in the region (United Nations Children's Fund UNICEF, 2016). In addition, several million other children live with chronically ill and dying parents, and others live in dire poverty and food-insecure households. In response, governments, civil society, and international organizations have developed programs to provide protection, care, and support to OVCs and their families. The HIV/AIDS prevalence rate in Zimbabwe is among orphans and vulnerable children (Yeboah, 2018). These children face enormous problems ranging from economic, education, health, nutrition, psychological and emotional effects resulting from the stigma and discrimination organizations to help them meet their needs. Subsequently, Harare South is not spared from these aforementioned challenges as many children in its various locations lack access to quality education due to a lack of resources and inadequate infrastructure (Chikengezha & Thebe, 2022). This limits their opportunities for personal and economic development. The lack of sustainable job opportunities in the area has also led to poverty and social problems such as crime and drug abuse (ibid).

Although interventions are making impacts on the lives of the OVCs, there are still challenges that impede their development to measure efficiency while tailoring implemented projects to

suit their local needs. While guidelines exist, there is little empirical evidence on “what works” to improve the well-being of OVCs and their families. It is against this background that this evaluation study sought to provide a thorough summary of the project impact assessment by Chiedza from October 2020 to September 2023. This information can help program managers and policy-makers make informed decisions in developing and scaling up effective strategies, ultimately reaching larger numbers of OVCs and their families with greater efficiency.

1.1.1 Project Evaluated

Chiedza is in the last project implementing year of a 3-year grant funded by Egmont Trust in Harare South District. The project is titled, “Integrated Continued Access to Education for Orphans and Vulnerable Children in Harare South District.” By September 2023, the project's main goal is to improve the lives of households with children it supports in Harare South, 275 OVC through the layering of education and child protection services for continued access to primary and secondary education, and 60 young people through the development of vocational skills. Numerous initiatives were carried out, impressive results were attained, significant transformation stories were documented, lessons were learned, and unavoidably, some challenges arose.

Project Objectives

The project was designed to achieve the following strategic objectives:

1. To facilitate access to vocational training for 60 young people by September 2023.
2. To provide continued access to education for 175 primary and 100 secondary orphaned and vulnerable, out-of-school learners aged between 9 and 18 years by September 2023.
3. To provide child protection services to 275 orphans and vulnerable children and 60 young people by September 2023.
4. To economically strengthen 2025 caregivers of children supported by the project to cater for their children’s educational needs by September 2023.

To achieve the above objectives Chiedza has developed a holistic model premised on four thematic areas that are;

- Child Protection,
- Education,
- Health and Nutrition and
- Economic Strengthening.

The program areas of strength include early childhood education, general education support, non-formal education, vocational training, inclusive education for children with disabilities, Pediatric HIV, sexual reproductive health rights, case management, systems strengthening, child protection, health, nutrition and economic strengthening.

1.2 Evaluation Objectives

ACT Zimbabwe herein was commissioned to do the evaluation that ascertains the following objectives:

1. To assess the adequacy of the project package to produce desired results per planned objectives.
2. To determine the effectiveness of the economic strengthening strategy in ensuring sustainability.
3. To identify gaps and offer recommendations for improvement.

2 METHODOLOGY

2.0 Introduction

This section discusses the research methodology and design that was adopted in the data collection process. In this study, methodology refers to how the research was done and its logical sequence. The evaluation used mixed methods methodology. The evaluation adopted a tripartite approach of collecting objective data from stakeholders, project documents and community structures. The data collection instruments adopted in this research which are interviews, observations, and secondary sources will be explained. This section also articulates how data was presented and analyzed. The consideration of ethical issues is going to be explained also.

2.1 Mixed Methods Research Approach

The main emphasis of the mixed methods research methodology lies in the use of more than one method of data collection which will enhance the validity of data. This evaluation therefore made use of a structured questionnaire, open-ended Focus Group Discussions and Key Informant Interviews. A mixed-methods design offers several benefits to approaching complex research issues as it integrates philosophical frameworks of both post-positivism and interpretivism (Fetters, 2016) interweaving qualitative and quantitative data in such a way that research issues are meaningfully explained. It also offers a logical ground, methodological flexibility and an in-depth understanding of smaller cases (Creswell & Plano, 2018). A mixed-methods design can integrate and synergize multiple data sources which can assist in studying complex problems (Poth & Munce, 2020). Thus, a mixed methodology adopted in this study enhanced the complementarity and triangulation of views and interpretation of data obtained to meet the requirements of the study.

2.2 Research Design

Parahoo (2014), describes a research design as a plan that pronounces how, when and where data are to be collected and analysed. The purpose of research design is to select and define the overall structure and methods of intended research that will enable answering the initial research question effectively and efficiently. This study employed both quantitative and

qualitative research designs. Under quantitative methodology, the study used a descriptive research design in the form of a cross-sectional survey due to its conclusive nature and providing results that can be used in decision-making. On the other hand, in qualitative methodology, a case study research design was used.

2.3 Sample Size

Sample size refers to the number of elements to be included in the study, (Malhotra, 2012). The study adopted the total sample space as the sample frame. The evaluation collected data from 20% of the sample frame as calculated below.

Table 2-1: Sample Size

Type of respondents	Sample Frame	Sample size
Vocational Training students	60	15
Primary School students	175	35
Caregivers of Secondary school students	100	20
Primary caregivers of children supported with economic empowerment	225	45
Total	560	115

2.4 Sampling Methods

Alvi (2016), defined sampling as the process through which a sample is extracted from a population. The major elements of the sample are that it should be representative and generalizable. As this study used a mixed-methods research design, it included the ability to have a sample that produced a meaningful survey, while at the same time also taking just enough participants to allow for in-depth phenomenological inquiry. The study employed a probability and non-probability sampling method. The investigator adopted cluster sampling and purposive sampling for probability and non-probability sampling, respectively.

In cluster sampling, the target population is first divided into mutually exclusive and collectively exhaustive subpopulations or clusters. Then a random sample of clusters is selected, based on a probability sampling technique. For each selected cluster, either all the

elements are included in the sample or a sample of elements is drawn probabilistically. The population was divided into clusters of the level of education (ie. OSSG, Primary, Secondary, Vocational and Caregivers), and from the groups; participants were randomly selected to be in the sample. Utilizing cluster sampling ensured that all groups concerned were fairly represented in the sample.

In contrast, a non-probability sampling technique was also employed in this study. The participants for the interviews and FDG were selected using purposive sampling. Purposive or judgemental sampling as defined by Silverman (2000) is a non-representative subset of some larger population and is constructed to serve a very specific need or purpose. According to Oliver (2010), the purposive sample is one in which the researcher identifies certain respondents as being potentially able to provide significant data to the study. In this case, the researchers have chosen twenty caregiver representatives for FDGs and three staff members for key informant interviews.

2.5 Data Collection Methods

Data collection for hybrid studies involves the use of tools that collect statistical as well as qualitative data. In this study, the primary data collection tools include questionnaires, FGDs and interviews. Desktop reviews and case studies were other methods employed by the study.

2.5.1 Structured Questionnaire

A questionnaire is a simple and rapid tool for collecting data in less time and effort. The survey was developed based on a literature review that was conducted concerning OVC programming. This was developed to capture information on the demographics, services received, skills and knowledge acquired, application of the skills and knowledge, the impact of services on beneficiaries' well-being and lives, project processes and outcomes, challenges and other cross-cutting issues. The tool will be administered to randomly selected recipients of the project.

2.5.2 Key Informant Interviews

The research conducted key informant interviews with key informants and stakeholders. An in-depth interview guide will be used to collect data during this process. Key Informant interviews were done with key project staff to have an in-depth understanding of the project's effects on improving lives and shaping knowledge attitudes and practices.

2.5.3 Focus Group Discussion

Focus group discussion is used to gather data, usually in the form of opinions, from a selected group of people on a particular and pre-determined topic, e.g. consumer topic, political topic, educational topic etc. The purpose of the discussion is to introduce the ground realities. During the discussion phase, the researcher encourages free discussion and promotes equal participation of all participants (Yin, 2014). In this evaluation, focus groups all provide a social context within which the OVC and the economic strengthening phenomenon are experienced, and they display how context can shape people's views, showing how data are generated through conversation with others (Ritchie, & Lewis, 2000).

2.5.4 Desk Review

Secondary sources of data were crucial to allow the Peer Evaluation team to tap into the already existing banks of information which has been gathered and, in most cases, already analyzed. The document review fed into a contextual and statistical body of evidence for analyzing the findings of the assignment. Some of the documents consulted include; the log frame document, and progress reports.

2.5.5 Case Studies

Case studies on program components were conducted. They helped to elucidate the details of program operations in terms of its intervention strategies, approaches to working with the community, target population, beneficiary selection process, and services provided. The case studies further provided lessons learned from program implementation including challenges and successes that explain some of the survey findings. Also, the most significant change stories that give a human face to the people who were outstandingly impacted by the project through various innovations were documented. The stories have a human face and quotes with enough text and verbatim highlighting the situation before and after the intervention will be captured.

2.6 Data Analysis and Presentation Procedures

Frequently during the fieldwork, team members conferred as to their observations and perspectives on interviews and site visits; while these discussions helped to identify frequent themes and possible outliers, team members kept in mind that findings in general, and certainly recommendations, must await the end of the data collection.

Survey data was encoded into the KoBo Toolbox. Quantitative data were analyzed using Microsoft Excel 2019. Reports, figures and graphs were generated and fed into the final results of the study. Data analysis involves an examination of what has been collected in the survey making deductions and drawing inferences. Before the analysis of quantitative data, it was checked to ascertain whether it was complete and consistent. The collected data was sorted to make sure it was orderly; it was also edited to discard errors to pinpoint any problem that could have occurred due to the utilization of the questionnaire.

In addition, qualitative methods of analysing data were also adopted since this study was partly qualitative. Denzil and Lincoln (2013) describe qualitative data analysis as working with data, organising it, breaking it into manageable units, synthesising it, searching for patterns, discovering what is important and deciding which could be learned and imparted to others. Qualitative data collected through the FGDs were analyzed manually. The researchers provided narratives based on the results. Braun and Clarke's (2006) thematic data analysis method of analysing data was employed whereby the analysis commenced with a) reading or familiarising with the data obtained from interviews, b) generating codes for the participants for confidentiality purposes, c) searching for themes, reviewing the themes, and then defining and naming them and e) lastly, producing the final report.

2.7 Ethical Considerations

The ethical procedures including protocols for consent, referrals, and confidentiality were also put in place before data collection started. All potential respondents were informed that their participation was voluntary and did not affect their eligibility to receive services from the program, and their verbal consent for participation was obtained. Caregivers provided consent for themselves and teachers assented for the OVC children. Further assent was also acquired from the children themselves, using child-friendly language to support their understanding. If consent was given, the interviewer signed the consent form for the participant. To maintain confidentiality, participants remained anonymous unique numerical identifiers were used. Also, all the enumerators were oriented on the child safeguarding policy and code of conduct for the client organization.

3 EVALUATION FINDINGS

3.0 Introduction

This section focuses on quantitative and qualitative data which was gathered through questionnaires, FGDs and interviews and will be presented, interpreted, and discussed. This section also interprets the data and explains the findings. During the research, various issues were discussed and opinions were provided. During data collection, the researchers found that there were a plethora of recurring themes that were raised in interviews. These were then described and explained based on extracts from participants' statements that explained the meaning of the content generated. On the other hand, the data provided from the questionnaires was equivalent enough to address the objectives of this study.

3.1 Response Rate

Table 3-1: Response Rate

Type of respondents	Sample Size	Response	Rate (%)
Vocational Training students	15	14	93.3
OSSG & Primary School students	35	35	100
Secondary school students	20	20	100
Primary caregivers of children supported with economic empowerment	45	24	53.3
Average	115	93	80.9

Table 3.1 above shows an average response rate of 80.9%. A response rate of 50% is sufficient for analysis and reporting, a rate of 60% is good, and a rate of 75% or more is exceptional, according to Mugenda and Mugenda (2019). This high rate was made possible since interviews were conducted under the researchers' careful observation, making it possible to conclude the evaluation. A large percentage of respondents suggest there is enough information to conclude the adequacy of the project package to produce desired results per planned objectives.

3.2 Socio-demographics

The characteristics of the sampled caregivers, OVCs and vocational beneficiaries were as follows:

Table 3-2: Caregivers

Variables	Categories	Frequency n = 24	Frequency (%)
Sex	Female	22	91.7
	Male	2	8.3
Age (in years)	25-35	7	29.2
	36-45	10	41.7
	46-55	7	29.2
Marital Status	Married	11	45.8
	Divorced or Separated	5	20.8
	Widowed	5	20.8
	Cohabiting (but not married)	2	8.3
	Never Married	1	4.2
Highest Level of Education	Ordinary Level	14	58.3
	ZJC	1	4.2
	Primary	9	37.5

Table 3-3: OVC Children

Variables	Categories	Frequency n = 61	Frequency (%)
Sex	Male	23	37.7
	Female	38	62.3
Age (in years)	6-10	11	18.0
	11-15	35	37.4
	16-20	14	23.0
	20+	1	1.6
Level at School	OSSG	28	45.9
	Primary	24	39.3
	Secondary	9	14.8
OSSG	Level 1	14	58.3
	Level 2	7	4.2
	Level 3	7	37.5
Primary	Grade 6	7	11.5
	Grade 7	2	3.3
Secondary	Form 1	5	8.2
	Form 2	5	8.2
	Form 3	5	8.2

	Form 4	5	8.2
	Form 5	1	1.6
	Form 6	3	4.9

Table 3-4: Vocational Beneficiaries

Variables	Categories	Frequency n = 14	Frequency (%)
Sex	Male	0	0.0
	Female	14	100.0
Age (in years)	16-20	2	14.3
	21-25	10	71.4
	26-30	2	14.3
Vocational Training Skills Received	Nurse Aide	4	28.6
	Hotel & Catering	2	14.3
	Pre School Educator	1	7.1
	Cutting and designing	3	21.4
	Business Management	1	7.1
	Interior Décor	2	21.4

3.3 Key Informants Profiling

The study selected 3 key informants as in-depth interview participants. The respondents included three officers at Chiedza. For anonymity, they were coded from KI 1 to KI 3.

3.4 Adequacy of the project package

3.4.1 OVC Support

This section describes the support received by OVC and caregivers on specific services outside of their families; including education, health, rights and protection, psychosocial support and livelihood opportunities. It discusses the types of support and specific support received on education support including the provision of direct material support, school supplies, food, and free health services for children. Table 3.5 provides an overview of services beneficiaries reported receiving from the program within the year preceding the survey.

Table 3-5: OVC Support Services

Value	Frequency N=61	Percentage (%)
Are you receiving meals from Chiedza	60	98.36
Received clothes	59	96.72
Received bursary, tuition, school fees, or fee exemption	53	86.89
Received school uniform, books, or other materials	50	81.97
Received Medication	41	67.21
A session with a Chiedza child protection officer	29	47.54
Received regular assistance/support with homework (e.g., homework club participation)	29	47.54
Age-appropriate HIV treatment literacy for children living with HIV	29	47.54
Completed a referral for or was facilitated to obtain substance abuse support by a trained provider	27	44.26
Age-appropriate counselling and HIV disclosure support	23	37.7
Regularly participated in a market-linked economic strengthening activity	19	31.15
Evidence-based intervention in preventing HIV and violence, and in reducing and avoiding sexual risk	18	29.51
Received birth registration support	7	11.48

These services received satisfied the beneficiaries in various ways and this was supported by narratives from the OVCs, and caregivers as quoted below:

“Mwana wangu akauya paChiedza asingatombogone kuverenga kana kunyora. Asi ikozvino ave shasha chaiyo (My child was unable to read until he was enrolled at Chiedza. Now he is literate and can read and write well).” Caregiver 6.

“I am an orphan. I was not attending school. We heard that someone can find help at Chiedza. Help in terms of payment of school fees. I started my level one last year. I then became comfortable, we received meals and medication. I now feel happy because I am now receiving full lectures at Chiedza. I am now better and I feel happy.” OVC.

When key informants were asked if the project influenced the access to essential services such as education, healthcare, and psychosocial support, they expressed that:

“There is improved numeracy and literacy skills for OVC... This is achieved by providing qualified facilitators who provide education to the OVCs and counselling...There is marked improvement in the behaviour of OVCs benefiting from the project through access to education, self-esteem has been raised.” KI1

“They learnt to associate freely, they learnt to express themselves. For some of them, it was not easy when they came, they were not trying to come out but the school wanted everybody to participate, It helped many of them to come out of their shell, and speak out and also their reading, the verbal communication of some of them greatly improved..... and even their written communication too as far as the class work of some of them is concerned, it is good.” KI2

“We render mostly the issuance of birth certificates to them because we discovered that it is one of the major instruments we need to help defend these OVCs in case they run into problems of cases or issues concerning inheritance. So, we discovered that the birth certificate will be of help to them because of the obvious advantage it carries, the certificate is such that without it as they grow up there will be difficulty with securing admission to certain schools, the difficulty of securing jobs.” KI3

Also, the study made evident the positive influence of children’s possession of basic school supplies on children’s psychosocial outcomes. The results showed a positive association between possessing a higher number of these items and several child psychosocial outcomes, such as better child self-esteem and lower perceived discrimination concerning orphans and families affected by HIV and AIDS. Therefore, findings illustrate that the distribution of school materials may have impacts beyond educational outcomes and indirectly serve to enhance children’s psychosocial well-being.

The OVCs were further asked if they missed four or more days of school in the last school month. They responded as follows:

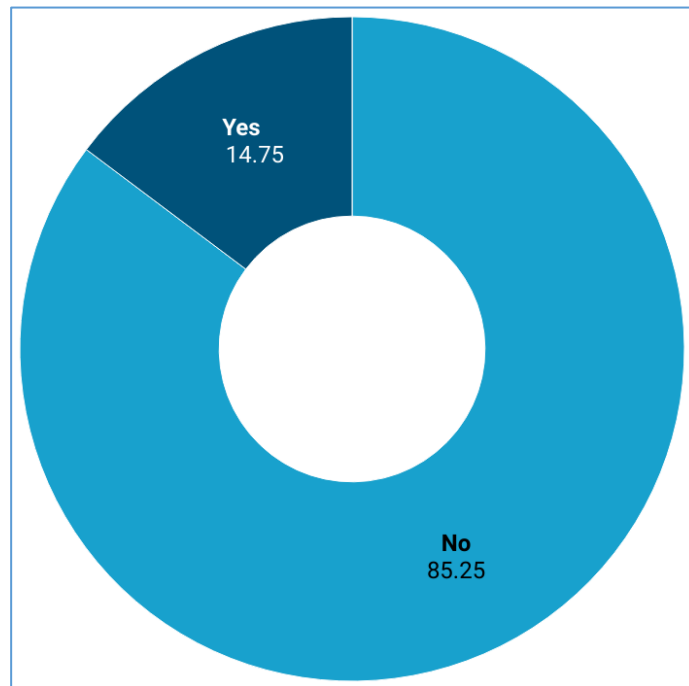


Figure 3-1: Missing School Days

Figure 3.1 above shows that only 14.75% reported that they have missed school whilst 85.25% of the interviewed OVC expressed they did not miss more than four school days. This is a good indicator towards the success and performance of the students as missing school days can result in falling behind in class, reduced academic performance, difficulty in understanding new concepts, and reduced confidence and self-esteem.

3.4.2 Vocational Support Services

Vocational training beneficiaries were asked how they are benefiting from the vocational skills acquired through the assistance of Chiedza.

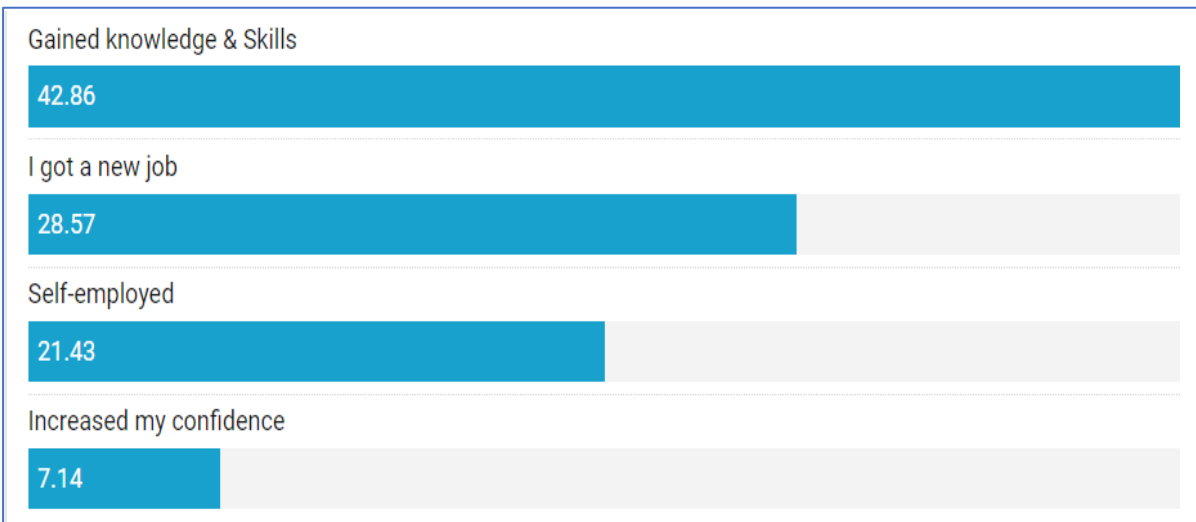


Figure 3-2: Main benefits from skills acquired

From Figure 3.2 it was established that 42.86% confirmed that they obtained knowledge and skills, thanks to Chiedza. 28.57% of sampled participants who received vocational training reported that they got a new job. Also, 21.43% of the respondents reported that they were self-employed. Also, 7.14% have alluded that they had gained confidence through these vocational skills.

Vocational training beneficiaries were also asked if their monthly income has increased as a result of job-related training. The results were as follows:

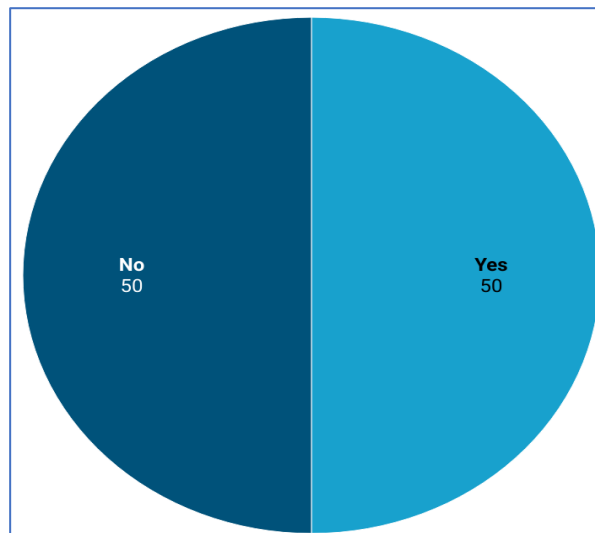


Figure 3-3: Increased Monthly Income

Of the sampled respondents that received vocational skills 50% of them reported an increase in their income. The 50% that confirmed that they did not realise increased income consisted

mainly of vocational students who have received nurse aide training. For those that reported receiving an increase in income, 28.57% reported receiving \$26 to \$50 per month and 71.43% affirmed that they are receiving a \$50 and above per month increase.

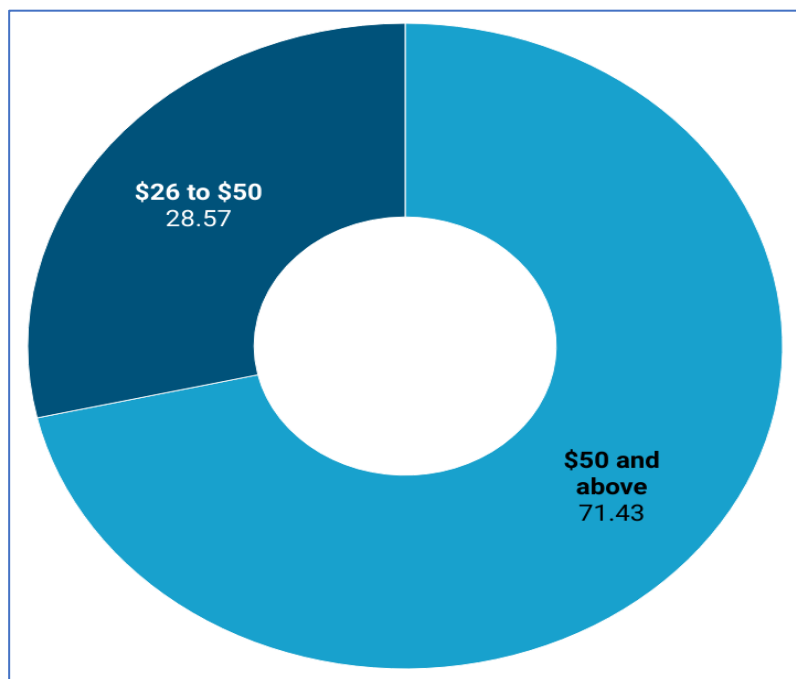


Figure 3-4: Monthly Earnings

None of the respondents were either not satisfied or not satisfied at all. This shows that the services provided by Chiedza were highly appreciated by the beneficiaries. This was captured by vocational students when they were asked to make additional comments in their interviews: respondent said:

“It has changed my life educationally and technically. It has made us to be focused. We can now stand boldly and speak. It has given us hope and assurance and we now know there is a brighter future. The advice has made me to abstain from sexual intercourse and to avoid its consequences.” Vocational Student.

“As a graduate, I now apply the things they taught us and I still share the training with my friends..... I am learning computer graphics now hoping that when I graduate, I will look for a vacant place and work.” Vocational student

One key informant agreed with this as she noted that:

“Young people now have better chances of being employed after vocational training”
KII

These sentiments were shared by many beneficiaries who expressed gratitude for the services they are receiving.

3.5 Effectiveness of Economic Strengthening

This section discusses the access and participation of caregivers to Chiedza’s project services mainly in income-generating activities (IGA) through the savings and internal lending communities (SILC) scheme towards enabling them to better take care of their families and strengthen their livelihood. The table below has a list of services read out to caregivers and they had to confirm if their household has received or accessed any of these items or services in the last 12 months from Chiedza.

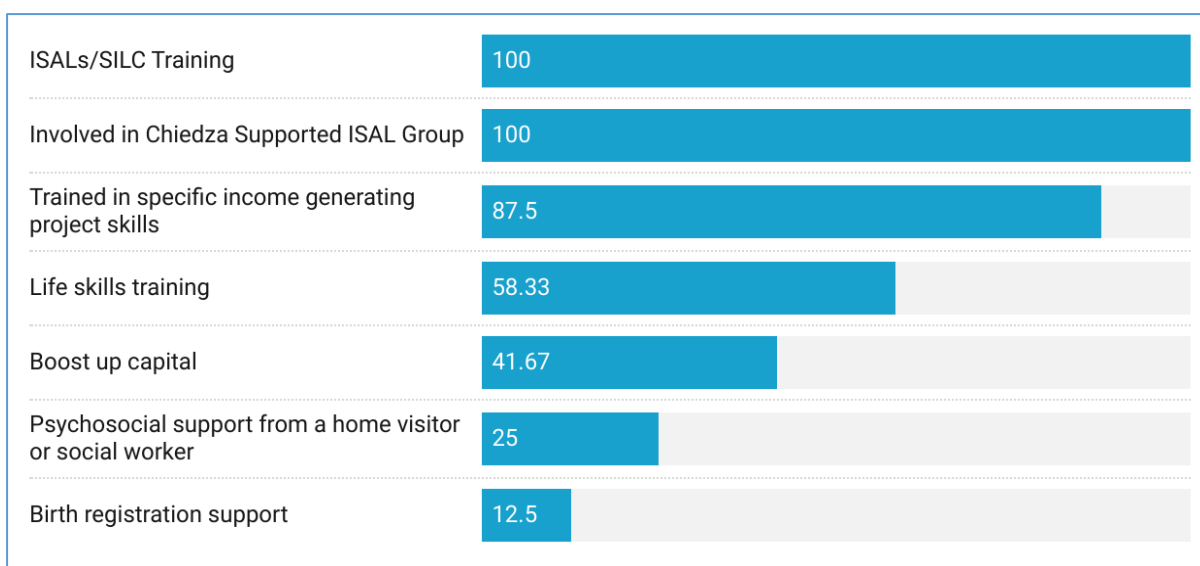


Figure 3-5: Services received by caregivers and their families

Figure 3.5 shows that 100% of caregivers in the sampled population were trained on SILC/ISAL and they were involved in Chiedza-supported groups. 87.5% of the caregivers in the study confirmed that they had received training in specific income-generating project skills. The stated income-generating skills received included: detergent and vaseline making. Also, Chiedza offered life skills to caregivers and 58.33% of the caregivers sampled established that they had received these skills. Of the caregivers who were involved in income-generating activities, 41.67% reported that they have received boost-up capital from Chiedza

25% of the caregivers also reported receiving psychosocial support from a Chiedza social worker. Birth registration support was provided to 12.5% of caregivers in this research. However, the majority of the caregivers cited that they had already acquired their children's birth certificates before enrolling at Chiedza.

The evaluation also tracked how the respondents rated the quality of services. We asked the respondents how they rated their experience was your experience of using these services. The caregivers asked about their experiences of using services provided by Chiedza and they responded as follows:

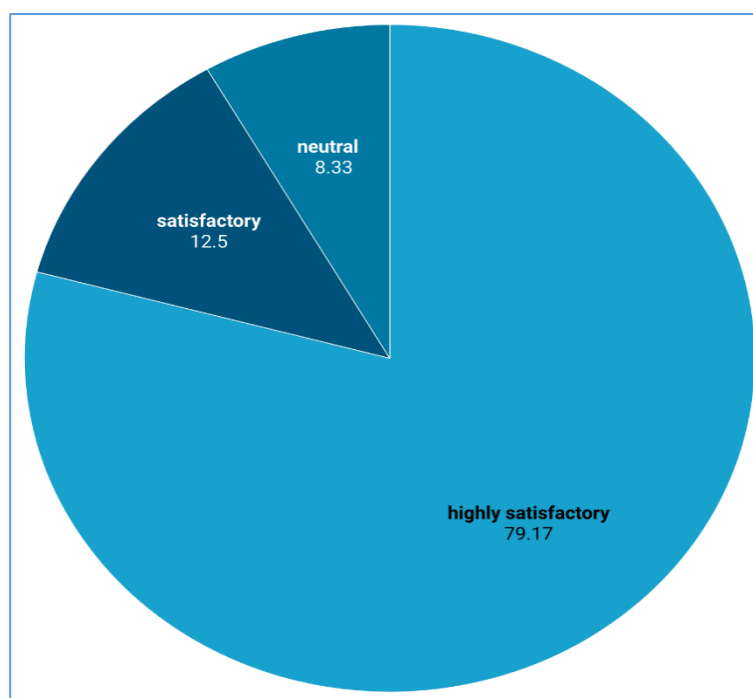


Figure 3-6: Caregivers' Satisfaction Level

From Figure 3.6 above 79.17% reported that the services received were highly satisfactory, whilst 12.5% agreed that the services were satisfactory and 8.33% remained neutral. The respondents who answered neutral consisted of individuals that have just joined the SILC groups. This mirrors the qualitative data that showed that the SILC is a model of IGA that is geared towards enhancing the livelihoods of families. Substantial successes were reported based on the FGD and KII conducted among caregivers and other stakeholders. Members reported multiple uses of the loan received to improve their livelihoods such as setting up their businesses on short to mid-term bases, payment of children's school fees, food for the

household and other family needs. Quotes from the participants share more light on the general opinions about the SILC as below:

“We are well organized. We have set our rules and we save regularly. SILC help us to save money and the savings will be of great use when we run into problems. We give loans with 10% interest.... I started business with the loan.... I contribute \$3 weekly to our savings groups. From this one dollar is for school fees while the other \$2 is for savings. This has meant that every term I can pay \$10 for school feesWe can now take care of our families...” Caregiver 2.

“The groups are sharing their contributions yearly and more people from the community have seen the improvement for those who have participated are coming to join them. Some have said their small businesses have improved. They were able to set up their businesses on a long-term basis, Before, they would do and stop but they knew that there were funds there, and when it was exhausted, they could always go back... Caregivers can contribute towards the provision of household basic needs...” KI 2.

“Chiedza yarerutsa mutoro wangu waisindikurira vana vangu vave nani, ndavekutarisira zvakawanda muneramangwan ravo” (Chiedza has lessened my burden, my children are in a better condition. I am now expecting so many good things from them in future)” Caregiver 3.

The economic strengthening activities seek to achieve an improved household income and self-sustenance. The evaluation confirmed that there has been an improvement in the household income. The pie chart below shows the percentage of caregivers who have established an income-generating activity as a result of Chiedza’s training. The majority of caregivers have a source of income that they have created.

“Ndakadzidza zvakawanda chokwadi paChiedza zvinosanganisira kubika Petroleum Jelly nemimwe mibato yemaoko yakawanda. Nekuda kwemikando izvozvi vana vakukwanisa kuenda kuchikoro vane zvinovakwanira (At Chiedza I have learnt a lot of things including mixing detergents like Vaseline and other IGAs. Also with SILC, I can afford to send my kids to school...” Caregiver 14

Another unintended favourable outcome from the SILC groups was noted:

“Kuuya kwatinoita tichitandara nekutaura kumikando tinozorodza pfungwa dzedu kubva kumifungo yakawanda. Uye vamwe vedu tiripamishonga yeHIV, saka tinenge tichitokuridzana kunwa mushonga. (When we come here for our SILC group meetings, we discuss a lot of issues. It relaxes and refreshes our minds. Some of us are on HIV treatment. We find the chance to encourage each other on adherence.” Caregiver 16.

The research also sought to understand whether the caregivers now can contribute towards the cost of education for their children. This strategy has improved the capacity of caregivers to contribute to the education expenses of their children. Income from other income and SILC earnings are the most common sources of income for education, food and medical expenses. This shows the importance of Chiedza’s income-generating activities. The other sources of income include Husband, loan and ACT through its school fees assistance.

3.6 Challenges and Suggestions

Despite some of the positive outcomes of this OVC project in Harare South, the initiative is flouted with some challenges. This section goes beyond outcome results to present other issues that emerged from the evaluation process.

3.6.1 Re-engagement of scholars

From the FGDs, it was noted that the caregivers reiterated that Chiedza offered high-quality education to their children. However, upon graduating to secondary school level students are reintegrated to other schools in the area. One caregiver noted that:

“My child was at Chiedza and all was fine. He was brilliant. But when he was reintegrated to other schools, his standards lowered.” Caregiver 8.

The respondents suggested that, if possible Chiedza should expand and offer education up to the secondary level.

3.6.2 Unavailability of Market Linkages

The unavailability of market linkages had significant negative impacts on the caregiver’s small businesses. Market linkages refer to the connections that exist between producers and the markets where they sell goods. The caregivers reported that their market linkages are weak

and it is difficult for them to get their products to ready markets which results in lost income and wasted resources.

“Chiedza has taught me to mix detergents. I have started making my detergents for sale. However, the local market is not forthcoming. I am selling an average of two items in two weeks.” Caregiver 7.

It was suggested that Chiedza if funds permit should also incorporate a component of market linkages that is mainly focused on IGAs that its beneficiaries are engaged in.

3.6.3 Liquidity Challenges

Other caregivers focused on the liquidity challenges in Zimbabwe and how such problems are impacting household income-generating activity. The ability of the individual to pay back the loan borrowed from the savings group depends on individual income-generating activities. With liquidity challenges, the viability of income-generating activities is at a crossroads. As explained by one caregiver:

“... People in Harare South do not have money. My buying and selling business has suffered and sales are low compared to the past. Some of my clients are unable to pay cash and I am forced to sell on credit. I have a list of people who borrowed me six months ago who are yet to even pay a cent... This is too bad because I am unable to service the loan that I took from my group.” Caregiver 12.

The caregivers suggested that if the project could expand and offer sustainable start-up capital that could give them a better chance to quench this liquidity crisis.

3.7 Case Studies

3.7.1 Chiedza; A Beacon Of Hope!

"Seven years ago, if you had told me I would be a qualified preschool educator, I would not have believed it. I was a vendor then, with no hope, crushed dreams, and a school dropout, but Chiedza came to my rescue." Talent Madume said gratefully.

Unlike many children, she was unfortunate. The story of her childhood is not pleasant. It's a story of misfortunes, hardships, poverty, and tears.

Her parents divorced when she was in grade six. That was the last time she ever saw her father. As he was the breadwinner or provider of the family, his absence came with many

challenges; they had no means of surviving. Her mother had to step in, but since she had no qualifications or education, she resorted to the only job she could do, vending. But the money was never enough to pay for rent, buy food, buy clothes, and pay school fees for her and her siblings.

So she dropped out of school and became a vendor so that she could help her mother pay the bills. It wasn't an easy road; She would cry and pray day and night, asking God for a destiny helper. She never thought it would come in the form of Chiedza.

"It was on September 2, 2016, that I enrolled at Chiedza. Chiedza went above and beyond to support me during my time with them. They provided me with basic necessities like food, clothes, and shoes. They even helped me with birth registration, ensuring that I had the necessary legal documents. This support was not just financial; they also provided me with emotional support, mentoring, and educational resources. Their dedicated staff members helped me catch up on the education I missed out on and prepared me for my future career as a preschool educator." She narrated.

Chiedza not only provided her with material support, but they also played a crucial role in her personal development. Through their guidance and mentorship, she gained confidence in her abilities and discovered her passion for early childhood education. Chiedza not only gave her a chance at a better future, but they also helped her discover her purpose and provided her with the tools to achieve it. She graduated in 2020, and she is now employed, and able to take care of herself and her siblings since her mother died last year.

"I still replay the scenarios of my life in my head; what if Chiedza didn't intervene? I wouldn't have any qualifications, and maybe I should be into prostitution by now, or maybe I would be someone's wife. I owe what I am now to Chiedza." Talent said.

Chiedza 's impact extends far beyond her own story. They have been a beacon of hope for countless children and families in the community. Through their comprehensive support programs, they have lifted individuals out of poverty, provided education to those who may not have otherwise had access, and empowered people to create better futures for themselves. The ripple effect of Chiedza 's work can be seen in the transformed lives of not only the children they directly support but also in the positive changes experienced by their families

and the wider community. Their dedication and commitment to changing lives are truly remarkable.

3.7.2 Title: A Journey of Transformation: Hannah Nhire's Story of Change

In the small town of Chitungwiza, a young girl named Hannah Nhire faced a life-altering challenge after her beloved father passed away. Hannah's mother, struggling to make ends meet, found it difficult to afford her daughter's school fees, let alone rentals and food for the family. Their relatives from the father's side abandoned them, not helping the widow and the children left behind by the deceased. As a result, Hannah was forced to miss school for one and a half years, leaving her dreams of education and a better future hanging in the balance. However, fate had a different plan in store for Hannah, as a ray of hope emerged in the form of Chiedza, an organization that would completely transform her life.

For Hannah, the absence from school was a time filled with uncertainty and frustration. Each day, as her friends carried on with their studies, she felt the weight of missed opportunities pressing down on her. She yearned for a chance to continue her education, but the financial burden seemed insurmountable. She yearned to help her mother out because she saw daily that the pain of looking after the family was too heavy for her to carry alone, but being a child, there was no immediate way to assist her mother. Despite the challenges, Hannah remained determined to overcome the obstacles and create a brighter future for herself and her family.

Hannah's life took an unexpected turn when she was introduced to Chiedza, a renowned organization dedicated to empowering underprivileged children. With their assistance, Hannah was given a lifeline to reclaim her dreams. Recognizing her potential, the organization made it possible for Hannah to enrol in a vocational school specializing in hotel and catering.

As Hannah stepped into the world of vocational education training in hotel and catering, her passion and dedication shone through. She embraced the opportunity with open arms, immersing herself in the world of the culinary arts. Through hard work and determination, Hannah not only excelled in her studies but also emerged as the best student in her class.

With her skills honed to perfection, Hannah graduated from the vocational school with flying colours. Armed with her newfound knowledge and qualifications, she was now equipped to pursue a career in the hospitality industry. Hannah's transformation was not limited to her academic achievements alone, as she blossomed into a confident and independent young woman.

Today, Hannah stands as a beacon of hope and inspiration, not only for herself but also for her mother. With a stable job secured in a reputable hotel, Hannah is not only able to support herself but also contribute to her family's well-being. The financial burden that once plagued her family has been lifted, thanks to Hannah's unwavering determination and the support she received from Chiedza.

Hannah Nhire's story of change is a testament to the power of resilience and the impact of Chiedza. From the depths of despair and missed opportunities, Hannah rose above her circumstances, transforming her life through education and vocational training. Today, she stands as a shining example of how one's life can be completely transformed with the right support and determination. Hannah's journey serves as an inspiration to all, reminding us that change is possible, and dreams can indeed become a reality.

4 DISCUSSION

The first objective of the project was to facilitate access to vocational training for 60 young people by September 2023. This objective was typically designed to provide individuals with the skills and resources they need to enter the workforce and build a career. The project achieved several aspects in this regard. This project component has increased the employability of beneficiaries. From the research, 28.57% and 21.43% of the respondents reported that they got a new job and are now self-employed respectively. This implies that the vocational assistance component has helped individuals develop the skills and experience they need to be competitive in the job market, which has increased their chances of finding employment. The project provided individuals with ongoing support and resources to help them succeed in their jobs, such as mentoring, coaching, and access to training and development opportunities. Also, of the vocational beneficiaries that reported an increase in their monthly income, 71.43% stated that they are receiving \$50 and above monthly as a result of job-related skills acquired from vocational training. This explains that vocational training has helped individuals develop the skills and experience needed to qualify for higher-paying jobs, which can improve their overall financial stability. Of the benefits acquired from the vocational training, 7.14% reported that they have increased their confidence. This means that vocational assistance provides individuals with a sense of purpose and direction, as well as the skills and resources they need to achieve their career goals. This helped improve their self-esteem and confidence, which can have positive impacts on their overall well-being. Overall, the project has helped individuals achieve economic independence and improve their overall well-being. By increasing employability, improving job retention, increasing wages, boosting self-esteem and confidence, and fostering economic growth, the project has made a positive impact on individuals, communities, and the economy as a whole in the Harare South District.

The second objective of this OVC project sought to provide continued access to education for 175 primary and 100 secondary orphaned and vulnerable, out-of-school learners aged between 9 and 18 years by September 2023. In this regard, the project was designed to improve the well-being of children who have lost one or both parents, or who face other forms of vulnerability such as poverty, illness, or discrimination. The project has seen an improvement in the access to education for OVCs which is provided through financial support for school fees, uniforms, and other materials, as well as addressing barriers to education. Of the

interviewed 61 OVCs, 86.89% reported receiving school fees, or fee exemption from Chiedza Childcare Centre and 81.97% noted that they received school uniforms, books, or other materials. Also, OVCs are often at increased risk of poor health outcomes due to factors such as malnutrition, inadequate healthcare, and exposure to disease. As evidenced by the findings, this project provided health services such as medication provision, nutrition support, and counselling services to ensure that children are healthy and able to thrive. This helped improve the well-being of vulnerable children by addressing a range of needs and challenges they may face. The results showed a positive association between possessing enough school materials and child psychosocial outcomes, such as better child self-esteem and lower perceived discrimination concerning orphans and families affected by HIV and AIDS. Therefore, findings illustrate that the distribution of school materials may have impacts beyond educational outcomes and indirectly serve to enhance children's psychosocial well-being.

The third objective sought to provide child protection services to 275 orphans vulnerable children and 60 young people by September 2023. OVCs are also at risk of exploitation, abuse, and neglect. This OVC project provides protection services such as social support, counselling, and advocacy to ensure that children are safe and their rights are protected. This was reflected by OVCs that established that they had sessions with the Chiedza child protection officer, received age-appropriate HIV treatment literacy for children living with HIV, completed a referral for or was facilitated to obtain substance abuse support by a trained provider and evidence-based intervention on preventing HIV and violence, and in reducing and avoiding sexual risk. OVCs may face significant economic challenges due to their circumstances. This project provided economic empowerment services through vocational training to improve OVCs' economic prospects and self-sufficiency. Of the OVCs in primary and secondary schools from the research, 31.15% of them alluded that they regularly participated in a market-linked economic strengthening activity.

Lastly, the fourth objective was to economically strengthen 225 caregivers of children supported by the project to cater for their children's educational needs by September 2023. This was mainly addressed with the SILC component which was designed to promote financial inclusion and empower OVC families living in poverty to build long-term financial stability. From the FGDs, the SILC element included financial literacy modules that teach participants about basic financial concepts such as budgeting, saving, and investing. By increasing financial literacy, participants can make more informed decisions about their

money and build better financial habits. The project provided a platform of savings that encouraged participants to save regularly and build up a financial safety net. By building savings, participants can better weather financial shocks and plan for long-term goals such as education. The projects offered income-generating activities such as detergent mixing that helped participants increase their income and improve their economic prospects. These initiatives provided cost-effective and viable economic opportunities to guardians, inevitably building their capacity to care for themselves and their children. The organization's SILC component involved building social networks and community support systems that can help participants access resources and build social capital. However, the caregivers reiterated that they lacked sustainable boost-up capital and market linkages to empower individuals and families living in poverty to build long-term financial stability and improve their economic prospects.

5 EVALUATION CONCLUSIONS, LESSONS LEARNED & RECOMMENDATIONS

5.1 Conclusions

This evaluation examined whether OVC had increased access to services such as education, health, psychosocial support, rights and protection, and whether the livelihood of families improved as a result of exposure to, and involvement in the SILC income-generating activities. This quantitative and qualitative evaluation has found that Chiedza has successfully helped a generation of orphaned and vulnerable children to overcome the loss of protection and the resultant emotional and material devastation that comes especially with parental death. The OVC program has improved the health, education and personal well-being of orphaned and vulnerable children and their families. It also has contributed directly to their interpersonal and functional capacity as well as project staff. The following conclusions were reached based on the findings of this evaluation:

- There was increased access to quality education for OVC who participated in this evaluation. The project benefited the OVC by providing avenues for accessing school materials and facilities. It is important to note that most OVC and caregivers rated the educational services received as very satisfactory/satisfactory. The majority of OVCs reported the best educational condition which included being enrolled in a school/training.
- Results showed that most OVC had improved access to health services and treatments. With this project in place, OVC was able to access all types of medication. Most OVC rated the services received as very satisfactory and satisfactory. Most OVC who participated in this evaluation were in the best condition of health care which included receiving all or almost all health care treatment and preventive services. Results of this evaluation showed that OVC had increased knowledge about HIV/AIDS compared to their counterparts in earlier years. As OVC confirmed receiving age-appropriate HIV treatment literacy for children living with HIV, age-appropriate counselling and HIV disclosure support.
- OVC reported receiving child rights and protection services with some of them indicating they have obtained birth certificates through this project's initiative.
- The process improved the livelihood of OVC as the majority reported the best conditions attainable on education, health, psychosocial support, and rights and

protection issues. Also, the majority of OVCs aged 13-17 reported high and average well-being.

- Results on the grant and SILC strategy were positive on beneficiaries and were rated as satisfactory. There is a need to scale up these successful strategies in future programming efforts.
- SILC has improved the status of women in the community. Whereas, in the past, women were largely confined within the household sphere, participation in community-wide events, owing to SILC, improved the status of women. This finding supports Harelimana's (2018) observation in Rwanda that SILC/ISALS have improved not only women's livelihoods but also "financially educated and improved the community." Elsewhere in Zambia, Kesanta and Andre (2015) found as women's sources of income improve, the respect women earn from men in the community increases
- All aspects of project performance characteristics including management structure, timeliness in meeting targets, active volunteerism, internal collaboration, technical competence, and timeliness of reporting among others were rated very satisfactory/satisfactory except sustainability. There is a need to examine ways to make the project more sustainable in the future by providing reasonable start-up capital, extensive IGA training and support, and provision of market linkages among other initiatives. This will demand extra funding.
- In general, the project was rated very satisfactory/satisfactory by the majority of beneficiaries and project staff, who attested to the fact that the project made a considerable positive impact in the lives of OVC, OVC families and other people in their communities.

5.2 Lessons Learned

Some key lessons learnt based on stakeholders' experience and those of the evaluation team are presented below:

- OVC like other children can live a normal life and take advantage of opportunities available to them. The findings of this study showed that a considerable number of

OVCs graduated from school/vocational training and some took up the responsibility of training and taking care of other needs of their siblings and other OVCs in their community.

- Caregivers can become empowered through small beginnings helping themselves. It was amazing to know (in an FGD) that a SILC group that started reluctantly with little or nothing was able to accumulate within their first year.
- Effective stakeholder involvement in OVC service provision ensures continuous service provision to key services like food and nutrition, educational support and health care support beyond the project period.

5.3 Recommendations

The key recommendations provided below are based on the key findings of this study. Overarching recommendations for enhancing program implementation, monitoring, and future evaluations are described below:

5.3.1 Project scaling up

The services provided by the project have made a substantial difference in the lives of the Harare South community they served and should be continued. It may be necessary for future programming to include OVCs who have graduated from the program to take care of other OVCs in their community. For those who have done vocational training, there should be funding for establishing them and a well-planned arrangement for them to train other OVCs. Also, an aspect of programming should focus on enabling those who have exceptional performance at the senior secondary school level to benefit from a higher level of education.

5.3.2 Project Sustainability

The evaluation notes that there should be efforts to obtain other sources of funding and efforts should also be made to diversify portfolios to engage in economic ventures such as mechanised farming, poultry farms, and the like. At the beneficiaries' level, more caregivers, and older OVCs should be encouraged to engage in IGA right from the beginning of the project life. This will help to reduce dependency syndrome and empower people to take charge

of their own daily lives. Also, if possible, the project can offer sustainable startup capital that funds long-term beneficiaries IGAs.

5.3.3 Incorporating Gender Norms Transformation Sessions

The focus group discussions established that the women attending IGA activities regarded their spouses as uncooperative, sometimes abusive and misusing family income and savings. It is therefore recommended that the project should incorporate activities that target the spouses to achieve gender norms transformation.

5.3.4 Increased rigour in future evaluations is needed.

This evaluation contributes to a scarce body of evidence concerning best practices for serving OVC in Zimbabwe. While this study provided expedient data to inform OVC programming, the post-test study design makes it difficult for the outcomes to be directly attributed to program exposure. In addition, interventions serving OVC are long-term and the strategies employed, as well as child and family needs, may evolve. Therefore, to ascertain evidence of program impact better, the next stage of evaluations should include experimental and longitudinal designs. While these studies require an increased investment of time and money, the data yielded will better inform effective programming and efficient use of limited resources. Ultimately, programmatic decisions grounded in a strong evidence base will better serve children in need.

5.3.5 A follow-up survey among these same samples is needed.

In some cases, children and caregivers who participated in this study had been exposed to the program for only a short period. Other impacts may arise among this sample as a result of both extended duration of program involvement as well as from intervention improvements stemming from these evaluation findings. Conducting surveys among these samples in two to three years would enhance understanding of program impacts. In particular, the current data of those unexposed to the intervention could serve as a baseline, and follow-up data among them would allow for assessments of changes over time that could be definitively attributed to the program. Repeating surveys even among those within this sample who reported exposure to the intervention strategies would provide insight into the added benefit of extended program engagement. These data and the willingness of many respondents to

participate again present a fruitful opportunity for the expansion of the knowledge base concerning the impact of OVC programs.

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