



THE UNITED REPUBLIC OF TANZANIA
**MINISTRY OF COMMUNITY DEVELOPMENT,
GENDER, WOMEN AND SPECIAL GROUPS**



STAKEHOLDER PERSPECTIVES ON CONDITIONS FOR IMPLEMENTING SUCCESSFUL PARENTING INTERVENTIONS IN TANZANIA



INTRODUCTION

Despite compelling evidence from recent national surveys and randomized trials in several low- and middle-income countries on the impact of parent support programs, there is limited evidence on the conditions necessary for the successful implementation of effective, sustainable, and scalable parent support interventions. This study, therefore, seeks to determine: **What are the conditions for implementing successful, sustainable, and scalable parenting interventions in Tanzania?**

A total of 16 key informant interviews and focus group discussions were conducted engaging 20 participants. Semi-structured guides were used to encourage key informants to present both their institutional position on the topic of parenting support to prevent violence against children and to contribute their personal perceptions on the topic (Richards, 1996). Data was coded using the Exploration, Preparation, Implementation, Sustainment (EPIS) framework (Moullin, J. C., et. al., 2019) and Mary Daly's "Parenting Support as Policy Field" framework. The literature review was conducted in April 2023, and data collection with stakeholders was undertaken throughout the month of May 2023. Grounded in the academic literature and perceptions of key Tanzanian stakeholders, this analysis:



provides a concise overview of the current landscape



articulates the enabling political and cultural drivers around parent and caregiver support



identifies effective steps - rooted in evidence and stakeholders' experience - for progression.

WHY PARENTING SUPPORT MATTERS

A systematic review on parenting interventions for parents of children and adolescents aged 2–17 years living in 32 different low- and middle-income countries (LMIC) suggests that parenting interventions are effective in reducing child maltreatment and harsh parenting, parenting stress and child behavioural problems as well as improving positive parenting and parental mental health. These effects of parenting interventions are consistent across a wide range of programme types using group-based and individualized formats and a wide range of service systems, including health, educational and social welfare systems as well as NGOs (WHO, 2023).

In 2011, Tanzania released the findings of a Violence against Children survey (VACS) which found that nearly one in three girls and one out of seven boys experience some form of sexual violence before turning 18. Rates of physical and emotional violence are also high: among girls, 72% experience some form of physical violence, while for boys the figure is 71%. Emotional violence affects approximately one quarter of boys and girls. Furthermore, a study on violence and maltreatment in Tanzanian families conducted with 700 Tanzanian secondary school students goes on to say that more than 90% of all students reported exposure to violent discipline by a parent within the past year (Nkuba et al., 2018).

Concurrently, more than 80% of parents acknowledged using violent discipline techniques, namely due to parental stress (Nkuba et al., 2018). The same study states that in Tanzanian families parenting is the responsibility of the society and the majority of children are cared for by extended families, often living temporarily with other caregivers when parents are not available. While corporal punishment may not be considered violence by some, it is important to note that all corporal punishment, however mild or light, carries an inbuilt risk of escalation. Parents who used corporal punishment are at heightened risk of perpetrating severe maltreatment.

Looking at solutions, a study in Tanzania on combining parenting and economic strengthening programmes to reduce violence against children (Lachman, 2020) found that parents and children receiving the combined interventions reported less maltreatment (i.e., parents reported reduced endorsement of corporal punishment and fewer child behaviour problems) and that locating parenting support in existing farmer groups can engage much higher proportions of males than stand-alone parenting programmes.

The literature as well as the stakeholders whose views reported in this policy brief recognize the potential of parenting interventions to strengthen communications and parent-child connectedness, which lead to reductions of violence in the households.

PARENTING POLICIES IN TANZANIA

The Government of Tanzania (GoT) ratified the Convention on the Rights of the Child (CRC) in 1991. In 2009, the GoT enacted the Law of the Child Act No. 21, a landmark national legislation that spelled out standards for protecting and providing for children and set the framework for a child protection system to prevent and respond to abuse, violence, exploitation, and neglect.

However, in the context of parenting, the Law does not provide a conducive environment for implementation given that corporal punishment is lawful in the home in Tanzania. The Law of the Child Act states that parents should protect children from all forms of violence (section 9), including beatings which cause harm in the definition of child abuse (section 3) and prohibits “torture, or other cruel, inhuman punishment or degrading treatment” (section 13). However, it allows for “justifiable” correction and does not exclude all forms of corporal punishment from such correction.

Nonetheless, a substantial number of policies and strategies exist in Tanzania that are relevant to strengthening national support to parents and caregivers. In June 2023, the National Institute for Medical Research conducted a systematic policy review on “parenting to improve child well-being and prevent violence against children in Tanzania” and identified 32 documents in Kiswahili & English. After screening, 13 documents were included in the detailed review, namely: three laws, two policies, three guidelines and five national plans. Documents that are of significant interest include those below.



National Agenda for Responsible Parenting and Family Care, which was launched by the Government in 2019, with support from partners and UNICEF. Under the three pillars of Care, Protect and Communicate, parents and caregivers were targeted with various messages using interpersonal approaches, multi-media communication materials and parenting handbooks.



The 2016 Five-year National Plan of Action to End Violence Against Women and Children 2017/18-2021/22, launched following the publication of the VACS data, includes the “promotion of positive parent-child relationships and reduction of violent parenting practices” as one of its eight strategies.



The 2010 Tanzania national development plan (MKUKUTA II) which includes goal 3 on: “providing an environment which ensures that all children have a right to basic services including education, food, shelter, and legal protection; and holding parents, teachers, and law enforcers accountable for abuse of children’s rights.”



The 2008 Child Development Policy developed by the Ministry of Community Development, Gender and Children (MCDGC) to protect children from abuse, exploitation and neglect which includes a first goal: “To have families that have prepared themselves to have and look after children in accordance with the childcare, growth and early development of a child procedures.”

Strategies include “starting a formal programme to educate parents and the society in general on childcare, growth and early development of a child (CCGEDC),” and “improve integrated services of the CCGEDC at the community level, to start and promote income-raising programmes in the community.”



The Tanzanian Ministry of Health uses the following policies and strategic plans to support parenting: 1) The National Road Map Strategic Plan to Accelerate Reduction of Maternal, New born and Child Deaths in Tanzania (2008-2015) 2) Social behaviour change and communication strategy (target is 1,000 days of home visits) and 3) the Prevention of mother to child transmission (PMTCT) strategy.



Safari ya Malezi, is a radio programme sponsored by BBC Media. The programme aims to educate parent and caregivers on positive parenting and early childhood development. The programme airs experiences concerning achievements and challenges from various stakeholders and practitioners on positive parenting and family care.

PARENTING PROGRAMS IN TANZANIA

In 2015, UNICEF Tanzania commissioned a country-wide mapping study on parenting support policies and interventions. The mapping analyzed 29 parenting interventions from the following stakeholders: Aga Khan Foundation; Tanzania ECD Network; KIWAKKUKI; C-Sema, Catholic Relief Services; International Rescue Committee; Pamoja Tuwalee (Pact, FHI360, Africare); Plan International; Save the Children; Regional Psychosocial Support Initiative (REPSSI); T-Marc; Parenting Africa Network; International Child Support; Monduli Development Pastoralist Initiative; Children In Crossfire; Caucus for Children’s Rights; Ministry of Community Development, Gender, Women and Special Groups; Ministry of Health; TASAF; UNICEF; USAID; CDC; WHO. The full mapping can be made available upon request to UNICEF Tanzania Country Office.

The mapping indicated that the majority of interventions (21 out of 29), aimed to inform and improve caregivers’ skills, knowledge, and practices for child rearing globally and 16 out of 29 had a focus on child protection or violence prevention. The remaining programs focused on nutrition interventions, health practices, school readiness, HIV, and parenting of adolescents.

Today, eight years later, as to the authors knowledge cutoff in September 2023, four evidence-based programs are being implemented in Tanzania aimed at supporting and educating parents to prevent violence against children and two additional programs are being implemented but have not yet published study results for Tanzania.

Name	Aims of the program	Age of children (years)	Setting & Delivery Method	Number of sessions & duration	Study
The Skilful Parenting and Agribusiness - ICS	ICS educates local field trainers, who in turn provide training for parents and teachers. For a duration of twelve months, parents get together weekly and, in group context, work on seven different modules on parenting. Parents generate new knowledge, reflect on their role in the upbringing of their child, share their experiences with each other and discuss the daily challenges of childrearing	0-18	Community / in person	12 months	Lachman J <i>et al.</i> , 2020
Whole School Approach (WSA)	The WSA, implemented by ICS, is a complex intervention that uses an individual and group dynamics behaviour-change strategy to address school-based violence prevention. The WSA's five components include: (1) school leadership support and training, (2) teacher and support staff training and skills development, (3) life skills and values education for learners, (4) parent and caregiver engagement and training and (5) community partnerships and child protection mechanisms.	10-18	School and Community / in person	13 sessions / 10 months	Wangamati, CK <i>et al.</i> , 2022

The Happy Toto game	A mobile learning game to prevent child sexual abuse	6-36 months	Community / digital	not specified	Malamsh a <i>et al.</i> , 2016
Furaha Teens (local name for Parenting for Lifelong Health program for parents and adolescents)	To reduce adolescent exposure to violence in the home and community by improving positive parenting and parent-child communication, while reducing familial conflict, harsh discipline, parenting stress, adolescent conduct problems, risky behavior, and mental ill health	9-14	Community / in person / mobile	14 sessions / 3 months	Martin M <i>et al.</i> , 2021
The Families Matter Program (FMP)	To promote positive parenting and effective parent-child communication about sexuality and sexual abuse risk reduction.	9-12	Community / in person	6 sessions / 6 months	Shaw <i>et al.</i> , 2021
Child Survival and Development Program (CSDP)	CSDP is a comprehensive program focused on improving child survival and development outcomes in Tanzania. It includes various components, such as maternal and child health services, nutrition support, early childhood education, and parenting education (study results currently unavailable for Tanzania).				
The Faithful House (TFH).	TFH is a 3-day faith-based skills-building curriculum which aims to increase household resilience by strengthening families. TFH draws on improved communication and conflict resolution skill building and the individual's faith-values as a catalyst for transformation in attitudes regarding gender roles in care giving and the use of violence in the home (study results current unavailable for Tanzania).				

Since 2022, the Ministry of Community Development, Gender, Women and Special Groups, with support from UNICEF, has worked on the development of a National Parenting Framework (Agenda). One of the products has been the National Guide to Responsible Parenting in Tanzania (Familia Bora, Taifa Imara) – the outcome of efforts that brought together stakeholders across government, development organizations and communities including parents/caregivers, religious leaders, influential peoples and the media.

TANZANIAN CULTURE OF FAMILY AND CHILDREARING

As noted from the above-mentioned studies, for Tanzanian children physical violence, emotional violence and neglect is widespread across high-, middle- and low-income households. According to the literature, frequently reported reasons for violent forms of behaviour management by parents and caregivers is that it helps parents to save time and to immediately stop misbehavior or that it is impossible to teach children good behavior without a stick. Violent discipline may occur for a variety of reasons, and parents or caretakers often do not intend to endanger the children but may be not aware of the potential negative consequences of their behavior.

Given the above, little has been done to understand the nature of parent-child connectedness. One ethnographic study demonstrated that the structural factors with greatest influence on connectedness were economic circumstances, gender, and social status. Economic circumstances impact on parent-child connectedness by the parents' ability to provide for their children's material needs and the time being dedicated to their children. Appropriate parent-child interactions are also shaped by gender norms and by social status in the form of obedience shaping the affection of parents (Wamoyi & Wight, 2014).

Three possible child-related rationales for providing parenting support include the following:

- Relating to children's rights that every child has a safe and fulfilling life
- Relating to risk, as an antidote to later anti-social behaviour of children
- Relating to childhood development, for optimizing children's development.

The majority of the stakeholders highlighted the risks for anti-social behaviour later in life as an essential rationale for providing parent and caregiver support.

"For the children who are below 14, for instance, those who are still at the primary school level, they will be punished by sticks. Yes. But for those who are above 15, they normally use other disciplinary actions. Like you can deny them food. And you can also punish them by giving some work, which is a bit the heavy works which will be treated as a punishment."

"When you say parenting in the community, they know that that's the role of women. The men are responsible mostly on providing the basic needs, and then they are done."

"From the government side, we also see a lot of change because now the government is recognizing that we have a problem, we have challenges on how our children are being raised. If these people are not raised well, it will have impact when they become adults"

"From the presidential level she's talking very much about good parenting. You have to make sure that you parent well your kids to be a good citizen. Of course, some of the programs have contributed to this."

OVERVIEW OF COORDINATION

The Prime Minister's Office leads the parenting programmes in Tanzania: managing MoCDGWSGs and the line ministries of the President's Office, Regional Administration and Local Government Tanzania (PO –RALG), health and education. Linkages are made with communities through the Region/ District/ Ward/Village Executive Officers.

You first need to understand how the government operates in Tanzania, because the government is a very big machine. And the way it is structured, it has impact even in the coordination matters and issues of authority. The central government is more responsible on policy matters, on issues of approving national plans and budget. But implementation is mandated to the local government by PORALG.

STAKEHOLDER VIEWS ON WHAT WORKS AND WHAT IS NEEDED

ENABLING FACTORS	STAKEHOLDER PERCEPTIONS	WHY THIS FACTOR IS IMPORTANT	LESSONS FOR ACTION <i>Scaling up parenting support in Tanzania would require:</i>
National framework	<i>Now we are working with Government to develop communication tools for the National Parenting Agenda. Once that is finished, it is going to be the national guidelines which will guide all the interventions in the country.</i>	While the Tanzania National Parenting Framework (Agenda) and the National Guide to Responsible Parenting in Tanzania (Familia Bora, Taifa Imara) are essential to guide interventions – it will be important for organizations to continue implementing, innovating, scaling-up and evaluating their programs in order to ensure significant geographical coverage.	Updating the mapping on who is doing what, where, why, when, and how to ensure maximum geographical coverage of parenting support interventions.
Political Commitment	<i>There is political will from the father of the nation today, you could see that there are ministries responsible with family and child welfare.</i>	Although there is sufficient research showing the effectiveness of evidence-based parenting programs, these are not yet widely available at a population level	Highlighting the policy imperative to adequately support the use of these supports as a way to address high priority mental

		and many parents are unable to access support. Policies are needed to increase the reach and impact of evidence-based parenting support.	health, physical health, and social problems.
Resourcing	<p><i>Even when there are allocated budgets at the ministry level, when it goes down to the local government at the district, they can be used for other purposes. Most of these interventions are donor funded programs.</i></p> <p><i>So, I think it's more of the commitment of the government in allocating the budget to support the implementation instead of just having the documents. They also have to allocate some resources because they have the resource persons.</i></p>	With no clearly defined line items in government budgets, and with limited fund allocations, it is impossible to know whether funding for parenting support is improving, stable, or decreasing. Policy makers and donors therefore need to ensure that they are directing funding to evidence-based parenting interventions in a transparent way that promotes accountability.	Allocating national budgets to implementation of government led, culturally sensitive parenting programs, in partnership with local organizations that have already tested their interventions.
Collaboration	<p><i>It's a multi-sectoral program - implementers are the local civil society organizations because they are the ones working at the community level. They have developed some strategies to work into the health sector, for instance, looking at how to integrate within the health facilities. It also cuts across the protection of children, which goes through the social welfare department.</i></p>	Scaling up a national effort requires a favourable policy environment, skills resources, and effective collaboration across sectors – namely the line ministries responsible for children, education and health.	Integrating parenting support into existing services such as health and nutrition interventions, sexual reproductive health interventions and child protection and development services.
Gender	<p><i>Starting from the day when the woman gets pregnant it's just your business. Going to the antenatal clinic, taking care of the child, making sure that everything is okay. It's more of the women issues. Men</i></p>	Despite the many gains that Tanzania has registered, it remains a patriarchal society– a social system where men hold primary power and authority, and women are often marginalized.	Scaling up male engagement in parenting interventions, in combination with income and economic strengthening interventions.

	<p><i>provide the money. But parenting is not about providing just bringing food at home. It's about being part of the child's life.</i></p>		
<p>Program content and delivery</p>	<p><i>The Ministries, who have been asked by the prime minister, are not implementing directly. The one who should be implementing directly is PORALG. So, there is a gap between the PORALG and these ministries.</i></p> <p><i>Everyone in the community has the role to contribute to the communicating parenting messages, but who can reach these parents? We can reach them through media, through the religious leaders, through the community health workers.</i></p>	<p>Evidence and experience suggest that programmes to support parents and caregivers are more likely to have the intended impact when:</p> <ul style="list-style-type: none"> - they address different families' needs - they are based on a solid theory of change - focus on age-appropriate <i>positive parenting</i> principles including <i>positive discipline</i> and improving parent-child communication - parents have the opportunity to practice new skills and receive feedback through role-playing, observation and/or non-judgmental coaching - implementation considers ways to support relationships between adults in the family - sources of severe stress are addressed by linking families to relevant services - Integrate income and economic interventions - Planners address barriers to parent participation 	<p>Fostering community engagement so that the requests come from the community to PORALG (bottom up) as well as from the Ministries to PORALG (top down).</p>

<p>Capacity</p>	<p><i>If we reach to the community level and the ward level, I think that will be the very best thing.</i></p> <p><i>We taught community development and social welfare to become district facilitators. After having received those trainings, they went to the community and organized different meetings on the issue of parenting skills.</i></p> <p><i>They need some lunch and transport to go to the villages. They also need airtime to communicate messages.</i></p>	<p>As with every policy commitment, it is essential for the government and non-government personnel to receive sufficient and ongoing training, supervision, and support.</p>	<p>Training community leaders and facilitators to implement parenting programs.</p>
<p>Norms Change</p>	<p><i>In every community there's a proportion of people who are on the radical side and they will not accept anything that they think is going to try to change them. They don't want to be told what to do.</i></p> <p><i>However, if it is painted as something positive, a lot of people will want to join. Like doing sports.</i></p>	<p>Norms guide behaviour by suggesting what other group members do in a given situation. Norms can excuse violent punishment as a necessary part of child-rearing and/or accept inequitable gender (that accept power over women and children) thereby discouraging both girls and boys from disclosing violence or seeking help. Recognizing and addressing these social rewards and sanctions is a crucial part of norms-change efforts.</p>	<p>Increasing awareness on the importance of parenting in terms of impact on child/ adolescent learning, health and productivity outcomes.</p> <p>Working with the faith and inter-faith communities.</p> <p>Working with the Tanzania communication regulatory authorities (TCRA).</p>

CONCLUSIONS AND NEXT STEPS

The basic conditions for implementing successful, sustainable, and scalable parenting interventions in Tanzania are becoming available. The National Parenting Agenda and the Guidelines gives a “road map” for what makes for a successful intervention – its main limitation being that there are no operational plans and implementation frameworks with clearly defined indicators and targets to measure progress and impact. So long as it is resourced to make the shift from policy aspiration to fully funded and capacitated practical implementation, the current approach will inform the design of a parenting model to support implementation and scale-up across Tanzania for all parents who need or want it.

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REFERENCES

Abramsky T, Kapinga I, Mshana G, et al. Couples data from north-western Tanzania: Insights from a survey of male partners of women enrolled in the MAISHA cluster randomized trial of an intimate partner violence prevention intervention. *PLOS ONE* 2020; 15: e0240112.

Bastien S, Kajula L, Muhwezi W. A review of studies of parent-child communication about sexuality and HIV/AIDS in sub-Saharan Africa. *Reprod Health* 2011; 8: 25.

Baumgartner, J. N., Kaaya, S., Karungula, H., Kaale, A., Headley, J., & Tolley, E. (2015). Domestic violence among adolescents in HIV prevention research in Tanzania: participant experiences and measurement issues. *Maternal and child health journal*, 19, 33-39.

Burke K, Brennan L, Cann W. Promoting protective factors for young adolescents: ABCD Parenting Young Adolescents Program randomized controlled trial. *J Adolesc* 2012; 35: 1315-1328.

Family and Childhood Development: the Next Generation ('Kizazi Kijacho') Impact Evaluation Study of The Faithful House Programme on Violence Reduction in Families

Edwards KM, Kumar M, Waterman EA, et al. Programs to Prevent Violence Against Children in Sub-Saharan Africa: A Systematic Review. *Trauma Violence Abuse* 2023; 15248380231160742.

Falb KL, Tanner S, Ward L, et al. Creating opportunities through mentorship, parental involvement, and safe spaces (COMPASS) program: Multi-country study protocol to protect girls from violence in humanitarian settings. *BMC Public Health* 2016; 16: 1-10. Hakielimu. The State of Violence Against School Children in Tanzania Mainland. Hakielimu, <https://www.end-violence.org/sites/default/files/paragraphs/download/The%20State%20of%20Violence%20Against%20School%20Children%20in%20Tanzania%20Mainland.pdf> (2020).

Hillis S, Mercy J, Amobi A, et al. Global Prevalence of Past-year Violence Against Children: A Systematic Review and Minimum Estimates. *Pediatrics* 2016; 137: e20154079.

Kajula, L. J., Sheon, N., De Vries, H., Kaaya, S. F., & Aarø, L. E. (2014). Dynamics of parent-adolescent communication on sexual health and HIV/AIDS in Tanzania. *AIDS and behavior*, 18 Suppl 1, S69-S74.

Kamala BA, Rosecrans KD, Shoo TA, Al-Alawy HZ, Berrier F, Bwogi DF, Miller KS. Evaluation of the Families Matter! Program in Tanzania: An Intervention to Promote Effective Parent-Child Communication About Sex, Sexuality, and Sexual Risk Reduction. *AIDS Educ Prev*. 2017 Apr;29(2):105-120. doi: 10.1521/aeap.2017.29.2.105. PMID: 28467161.

Kamangu, A. A., John, M. R., & Nyakoki, S. J. (2017). Barriers to parent-child communication on sexual and reproductive health issues in East Africa: A review of qualitative research in four countries. *Journal of African Studies and Development*, 9(4), 45-50.

Knerr W, Gardner F, Cluver L. Improving Positive Parenting Skills and Reducing Harsh and Abusive Parenting in Low- and Middle-Income Countries: A Systematic Review. *Prev Sci* 2013; 14: 352-363.

Lachman, J., Wamoyi, J., Spreckelsen, T., Wight, D., Maganga, J., & Gardner, F. (2020). Combining parenting and economic strengthening programmes to reduce violence against children: a cluster randomised controlled trial with predominantly male caregivers in rural Tanzania. *BMJ global health*, 5(7), e002349.

Mannell, J., Lowe, H., Brown, L., Mukerji, R., Devakumar, D., Gram, L., ... & Vyas, S. (2022). Risk factors for violence against women in high-prevalence settings: a mixed-methods systematic review and meta-synthesis. *BMJ global health*, 7(3), e007704.

Martin, M., Lachman, J., Wamoyi, J., Shenderovich, Y., Wambura, M., Mgunga, S., ... & Manjengenja, N. (2021). A mixed methods evaluation of the large-scale implementation of a school-and community-based parenting program to reduce violence against children in Tanzania: a study protocol. *Implementation science communications*, 2(1), 1-13.

Meinck F, Cluver LD, Boyes ME, et al. Risk and protective factors for physical and sexual abuse of children and adolescents in Africa: a review and implications for practice. *Trauma Violence Abuse* 2015; 16: 81-107.

Morello L, Caputi M, Scaini S, et al. Parenting Programs to Reduce Recurrence of Child Maltreatment in the Family Environment: A Systematic Review. *Int J Environ Res Public Health* 2022; 19: 13283.

Nkuba, M., Hermenau, K., & Hecker, T. (2018). Violence and maltreatment in Tanzanian families—Findings from a nationally representative sample of secondary school students and their parents. *Child Abuse & Neglect*, 77, 110-120.

Nkuba, M., Hermenau, K., Goessmann, K., & Hecker, T. (2018). Mental health problems and their association to violence and maltreatment in a nationally representative sample of Tanzanian secondary school students. *Social psychiatry and psychiatric epidemiology*, 53, 699-707.

Nkuba, M., Hermenau, K., & Hecker, T. (2019). The association of maltreatment and socially deviant behavior—Findings from a national study with adolescent students and their parents. *Mental Health and Prevention*, 13, 159-168.

Optimising engagement in a digital parenting intervention to prevent violence against adolescents in Tanzania: a cluster randomised factorial trial

Peterson, R. S., & Giles, M. J. (2016). Children of Tanzania: culturally specific resilience and vulnerability. *International handbook of psychological well-being in children and adolescents: bridging the gaps between theory, research, and practice*, 221–246.

Scharpf F, Kirika A, Masath FB, et al. Reducing physical and emotional violence by teachers using the intervention Interaction Competencies with Children – for Teachers (ICC-T): study protocol of a multi-country cluster randomized controlled trial in Ghana, Tanzania, and Uganda. *BMC Public Health*; 21. Epub ahead of print 2021. DOI: 10.1186/s12889-021-11950-y.

Solís-Cordero K, Duarte LS, Fujimori E. Effectiveness of Remotely Delivered Parenting Programs on Caregiver-child Interaction and Child Development: a Systematic Review. *J Child Fam Stud* 2022; 31: 3026–3036.

Vyas, S. (2022). Exploring the Roles of Familial and Dating Relationship Violence and Sexual Assault on Adolescent Girls and Young Women’s Risk of Partner Violence in Tanzania. *Violence against women*, 28(5), 1124–1138.

Wamoyi, J., Fenwick, A., Urassa, M., Zaba, B., & Stones, W. (2010). Parent-child communication about sexual and reproductive health in rural Tanzania: Implications for young people’s sexual health interventions. *Reproductive health*, 7, 6.

Wamoyi J, Fenwick A, Urassa M, Zaba B, Stones (2013). W. Socio-economic change and parent-child relationships: implications for parental control and HIV prevention among young people in rural North Western Tanzania. *Cult Health Sex*. 2011 Jun;13(6):615–28.

Wamoyi J, Wight D. (2014). 'Mum never loved me.' How structural factors influence adolescent sexual and reproductive health through parent-child connectedness: a qualitative study in rural Tanzania. *Afr J AIDS Res*. 2014;13(2):169–78.

Wangamati CK, Mdala I, Ogutu B, et al. Assessment of whole school approach intervention to reduce violence affecting children in and around schools in Kenya and Tanzania: protocol for a before-and-after, mixed-methods pilot study. *BMJ Open* 2022; 12: e055231.



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