Situation of Women and Children in North Unguja, Zanzibar: Preliminary report from a questionnaire interview in Chaani Masingini

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Introduction

1. Background

This questionnaire interview is part of a broader research project that aims at scrutinizing the paradox of the subsistence ethics and the actual subsistence, focusing on children’s mortality.

The author has been undergoing research on/in deprived regions in Tanzania since 2001. Based on field researches, some focusing on women and female headed households (FHH), researches prevailed subsistence ethics of mutual assistance in deprived regions and among the deprived population, working in times of food shortage and communal work during rituals, funerals, and weddings. However, Under Five Mortality Rates (U5MR) in such regions indicate that it does not necessarily work against sickness and death. According to the 2002 census, Lindi Region (217/1000), Mtwara Region (212), Dodoma Region (191), and North Unguja (170) have the highest U5MR. Such subsistence ethics have been prevalent especially in deprived regions, but how does it influence actual subsistence against child mortality and what are its limits? While previous research concentrate on direct causes of children’s mortality, this research aims at looking into the indirect causes such as social structure. This paper will give a preliminary report on a questionnaire interview which has been undertaken in North Unguja as part of this research.

2. Research Area

As part of the above broader research project, a questionnaire interview has been done in a village in Zanzibar, an island off the coast of Tanzania (See Map 1). While Zanzibar is part of the United Republic of Tanzania, it has an independent Government on its own. Zanzibar consists of Unguja Island on the South and Pemba Island on the North. The research has been done in Chaani Masingini Village (Shehiya), which is located in North Unguja, District A.
Map 2. Chaani Masingini and Research Areas

Key:
① Mtakuja, Pumzikeni
② Mdodombuzi, Mgeni Nani, Kidaazini
③ Stareheni, Mtagoni, Kichungwani, Muhemarini, Bandari Basi, Mbalungini
④ Ketwa
⑤ Msikitini, Mwembe Mzungu, Mambo Si Yenu, Bandani, Kilabu / Kidicho
⑥ Msikitini (kusini), Migombani
⑦ Mahomeni
⑧ Kiamboni, Mikarafuuni
⑨ Njaro, Machatu
⑩ Kikongeni (Tangi la Maji)
⑪ Mwembe kibibi, Tengoni
⑫ Shakini, Sebushari

Note: The lines on the map is the route taken by the interviewees.
The location of ③ is not confirmed on the map, but assumed to be in the vicinity around ① and ②.
Source: Created by the author from GPS log.

The total population is 2,666, and total households within the village are 710, according to the 2012 Census. Many of the people have lived in the village since long time ago. Majority of the population is Islam as in the rest of Zanzibar. The major occupation is farming, with major crops such as rice, cassava, sweet potatoes, yam, and banana. There is a primary school and health center in the village along the main road cutting through the village (See Map 2 for their location). Chaani Masingini has been well documented in previous research.

Table 1. Number of Interviewed Women

<table>
<thead>
<tr>
<th>Sub-villages</th>
<th>MHH</th>
<th>FHH</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>①</td>
<td>5</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>②</td>
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<td>1</td>
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<td>4</td>
<td>7</td>
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<tr>
<td>⑫</td>
<td>2</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>35</strong></td>
<td><strong>45</strong></td>
<td><strong>95</strong></td>
</tr>
</tbody>
</table>

Note: MHH=Women in Male Headed Households; FHH=Women in Female Headed Households.
Source: Created by the author from the interviews.

3. Methodology

The questionnaire interview was based on a comprehensive questionnaire in Swahili. The questions included 72 questions about I the respondents, II education, III marriage and family, IV livelihood and food availability, V money, and VI children. The questions were formulated based on basic understanding of the village during prior visits in 2013 and 2014.

The basic questions are common with the questionnaire interview used in Central and Southeast Tanzania in 2014, but some questions were omitted reflecting the responses, and changes has been made based on comments from native Swahili check. A pilot test through interviewing 5 women was done on 27 July 2015 by a collaborating researcher, and further amendments on the contents and Swahili grammar based on advice from a Swahili expert.

The questions were read or explained in Swahili by the author in Swahili with supplementary questions where necessary; and read in Swahili by the two research assistants during 26-29 August 2015. Research ethics were followed in accordance to the rule and regulations of the Utsunomiya University, such as asking prior approval to interview.

While there are numerous street (mtaa) names in the village, there are 12 sub-village chairpersons...
per constituency covering multiple streets. Therefore, 8 women in each constituency were interviewed based on recommendations from the sub-village chairperson where necessary. In each constituency, 4 married women and 4 women from female headed households were chosen. The 12 constituencies and the sub-villages are located on Map 2, and the actual number of women interviewed are indicated in Table 1. In some sub-villages, women were recommended as either FHH or MHH (Male Headed Household), but we found out otherwise in some cases after interviewing. In addition, it was predicted that there are limited number of FHHs, but it is relatively over-represented in this research due to above process.

The interviewers went to each sub-village, and interviewed the women who were selected and available one by one. About twenty-four women in three sub-villages were interviewed in a day. Out of the 95 selected women, 94 women agreed to respond to the questionnaire interview. Among the 95 selected women, 35 women were in a MHH and 45 were in a FHH (confirmed based on residence of spouse: Questions 38). The responses in the pilot test are also incorporated in the compilation.

In this report, preliminary compilation of the answers to the questions will be reported. Narrative answers and other complicated answers are indicated with an asterisk* which will be tentatively summarized but reported/analyzed in detail in future reports/articles. The questions with ** are questions that will not be reported in order to avoid identification of the interviewees. The question with *** is not reported due to the decision from their responses that I have not been able to capture the actual picture. The original numbering and questions in the previous questionnaires in Dodoma and Lindi are retained to the extent possible. Some questions that were decided not to be asked or some choices of answers without any respondents are omitted where redundant: therefore, some numbers may be missing. Boxes □ are retained to indicate the answers that were prepared to differentiate with answers that were not prepared. Questions where the number are in brackets ( ) were only asked to the relevant respondents based on their answers to the previous question. Total number of responses were indicated as (n=). For multiple (plural) answers (indicated as pl.), number of responses do not match with the number of respondents. Therefore, the percentage total may exceed 100%. Some afterthoughts about the relevance of the questions are noted where the question may have been misunderstood. Future areas of possible analysis are also be identified.

I. About the respondents

1 Name: ** (n=95)
2 Ethnic group (kabila): (n=95)
   □ 1, Yes   60
      Mtumbatu, Tumbatu 47
      Tumbatu, Ukwede(1), Mtumbatu (+Kigoma) (1)
     Islam 2
     Others (1 each) 8
      Baalawi, Mbatu, Mbabwini, Mmatemwe,
      Mpashia, Mpemba, Mzanzibari, Swahili (normal)
   □ 2, No 29
     Don’t know 3
      Just Swahili? (1)
     n.a. (no answer) 3
   □ 2, No 29
     Don’t know 3
      Just Swahili? (1)
     n.a. (no answer) 3
   □ 2, No 29
     Don’t know 3
      Just Swahili? (1)
     n.a. (no answer) 3

(2.1) Ethnic group (kabila) from: (n=84, pl.)
   □ 1, Father 43
   □ 2, Mother 41
3 Clan (ukoo): (n=95)
   □ 1, Yes 58
      Mtumbatu, Tumbatu, Kitumbatu 9
      they are in Tumbatu (1)
      Pemba (Tumbatu). My ancestors all died (1)
      haven’t stayed in Utumbatu (1)
      Matemwe 3
      Chaani 2
   □ Other places within the village 5
      Ketwa, Bandari Basi, Njaro, Kongoo, here, (1 each)
   □ Other locations, names (1 each) 5
      Donge, Ng’ambo, Kibeni, Mpashia, Inland (Dar)
      Mohamedi, Mahamudu 2
      Specific full names of people 5
      Including grandfather (1)
      Others explanation of relation 5
They all died, lost 2
Don’t know 8
n.a. 12
□ 2, No 30
Don’t know 3
They/my father and mother all died. 2
No answer 7

(4) Clan (ukoo) from (n=65, pl.)
□ 1, Father 36
□ 2, Mother 28
□ 3, Don’t know 1

6 When were you born?
Summarized by age: (n=95)
20s 16
30s 17
40s 14
50s 13
60s 20
70s 5
80s 4
? 6

7 Where were you born? (n=95)
□ 1, This village 57
Chaani Mtagoni, Chaani Ketwa, Ketwa
□ 2, Town: where? _______________ 2
Mwembe Tanga
□ 3, Other village 33
Pemba 3
Mkwajuni 2
Mwange 2
Donge (Kaskazini B), Mnazi Mmoja Hospital,
Ketwa (kijiji cha baba), Kilimani Tazaro, Matemwe,
Tengoni, Tumbatu Gomani (1 each)
No answer 3

8 Your religion? (n=95)
□ 1, Islam 94
□ 2, Christian 0
No answer 1

Question 2 asks about their kabila, translated as ethnic group, although it is not as static nor clear-cut as the word “ethnic group” connotes. The major ethnic group is Tumbatu, reaching almost half of the responses. The significant characteristic of the answers is that 38 out of 95 (40%) answered that they don’t have or don’t know their ethnic group. A few also answered “Swahili” or “Islam” as their kabila.

Almost half each answered that their kabila comes from their father (43, 45%) or mother (41, 43%). There were also answers that both mother and father has the same ethnic group (Question 3).

The responses to Question 3 on their clan (ukoo) further indicated that it is not an essential identification for all. Even among the 36 (38%) that answered their a clan name, their understanding of “clan (ukoo)” was various. Twelve answered their ethnic groups, 7 answered locations in the village, 5 answered other locations, 2 answered “Mohamed”, 5 answered specific full names of relatives or ancestors, and 5 answered a specific relationship within the family. Over one third (30, 32%) answered that they did not have a clan, and 8 answered that they have a clan but did not know the name. Four explained that their clan have all died and they have lost their clan, indicating the understanding of “clan” as close to ancestors. Relatively more answered that their clan is inherited from their father (36, 38%), in comparison to their mother (28, 29%, Q4).

The ages of women interviewed ranges from their 20s to their 80s, with weight on women in the 60s (Q6). Majority of them were born in this village (57, 60%), but about one third (33, 35%) were born in other villages such as Pemba, Mkwajuni, and Mwange. All of the respondents are Islam (Q8)

II. Education

Questions on puberty rite (unyago), education, and other advice were asked in order to understand their contribution to reproductive health and children’s health.

1. Education and puberty rite

9 Have you participated in puberty rite (unyago)? (n=95)
□ 1, Yes 0
As informed prior to the interviews, no one participated in unyago (puberty rite, Q9). Those with no answer are assumed that the research assistants from the village did not want to ask the questions knowing their answers. Over half of the respondents went to school (52, 55%), including secondary school (25, 26%) and madras (16, 17%, Q25). The other half (41, 43%) did not go to school.

2. About menstruation, giving birth, nutrition, health, and bringing up children

Questions related to menstruation, giving birth, nutrition, health, and bringing up children were asked: where they learned about it and how.

26 Where did you learn about menstruation from?  
(n=101, pl.)

☐ 2, Elders e.g. mother, grandmother, etc. 80
   Grandmother (5: mother’s side 1), aunt (6: father’s side 3, mother’s younger sister 1, mother’s older sister 1), older sister (3), of clan (1)

☐ 3, School 4

☐ 5, Other 8
   Wife of my older sister (sister-in-law)
   Sent for aunt (mother’s younger sister) who had a role as a *kungwi*
   [Specific name] older sister of clan
   [Specific name]
   Specialist (fundi: *wari*)
   God (*mwezi mungu*)
   Myself
   Here here. Never again.

No answer 9

? 4

27 Where did you learn about giving birth from?  
(n=104, pl.)

☐ 2, Elders e.g. mother, grandmother, etc. 69
   Grandmother (8: 2 paternal), mother (3), parents (1)

☐ 3, School 5

☐ 4, Dispensary 12

☐ 5, Other 9
   Our midwife, god (1), here (1), older sister of the clan (1)

No answer 9

What did you understand?*

28 Where did you learn about nutrition from?  
(n=100, pl.)

☐ 2, Elders e.g. mother, grandmother, etc. 40
   Grandmother (3), father/mother (1)

☐ 3, School 6

☐ 4, Dispensary 34
   Hospital (5), clinic (1)

☐ 5, Other 7
   Father of child (husband) (1), father of children (1), myself, in town
   I don’t know (4), I didn’t understand well (1), none (1), none. I didn’t understand (1)

No answer 13

What did you understand?*

29 Where did you learn about women and children’s health from?  
(n=98, pl.)

☐ 2, Elders e.g. mother, grandmother, etc. 37
   Grandmother (2), mother (1)

☐ 3, School 4

☐ 4, Dispensary 40
   Hospital (5), clinic (1)

☐ 5, Other 3
   Here (2), husband (1)
   Don’t know (5), none (1)

No answer 14

What did you understand it?*
30 Where did you learn about bringing up children from? (n=99, pl.)

☐ 2, Elders e.g. mother, grandmother, etc. 52  
   Grandmother (4), mother (3), elders (1)
☐ 3, School 2
☐ 4, Dispensary 26
☐ 5, Other 7  
   Here (2), village (1), through marriage (1), family.  
   My own thinking (1) myself (1)
No answer* 12  
   None (1), ? (2)

What did you understand?*

In summary, women learned about menstruation (80, 84%, Q26), giving birth (69, 73%, Q27), bringing up children (52, 55%, Q30), and nutrition (40, 42%, Q28) from elders. While elders also have their part as well, many women learned about children’s health (40, 42%, Q29) and also nutrition (34, 36%, Q28) from the dispensary, health clinic, or hospital.

In terms of what they learned about menstruation from elders, many women talked about wearing a cloth, and hiding is so that others can’t see (Q26). Some explained that it is a sign of maturity or becoming an adult woman, and that they need to bath and keep clean. One woman in her 50s explained that there is belief to sit 7 days in the house.

What many woman learned about giving birth mostly from elders was about the birth pain as a signal or timing for birth (Q27). One women in her 60s explained that when she gave birth, she stayed in bed, and underneath, there was a small fire, and the hurt healed. It took 7 days.

What many women learned both from elders and the clinic is to give a good mixture of food to the child (Q28). Some of the ingredients mentioned from elders are cassava, maize, banana, vegetables, and papaya. Ingredients mentioned from the clinic was sorghum and beans. A woman in her 40s learned from the hospital that children can’t get food until 8 months. Another woman in her 50s explained that she understood from elders to cultivate because house grown food has more benefits, and that buying from shops should be limited.

Relatively more woman (40) learned about women and children’s health from the dispensary, clinic, or hospital (Q29). They learned about exclusive breastfeeding until 6 moths and to continue up to 2 years. They also learned that children’s weight is to be measured at the hospital at a certain date. Women also learned from elders (37) about giving rice or cassava porridges, to be clean, planned birth, and to give what medicine when.

Majority of women learn from their elders (52, 55%) about bringing up children (Q30). Some examples are to carry children when small, have a better place to sleep, bath them and wash their clothes to keep clean, sit with children, and follow the growth of a child. One woman in her 50s indicated that she brings up her children and her neighbors’ children. What women indicated that she learned from the dispensary was good environment and about planned birth (rest for 3 years).

III. Marriage and family

Questions regarding their marriage, husband, bridewealth, and household structure were asked in order to understand about their marriage and family.

32 Have you ever been married?  (n=95)
☐ 1, Yes 93
☐ 2, No 1
☐ No answer 1

Which year:

Don’t know 5  
Before 1964  (5)
1960s after 1964 3 (11)
1970s 5 (21)
1980s 5 (15)
1990s 4 (14)
2000s 2 (17)
2010s 10 (15)

(In brackets are the year which has been calculated based on the average of marriage: 20)

☐ 2, No 1
☐ No answer 1

(33) Is your husband from....?  (n=149, pl.)
☐ 1, the same village 43  
   Banda Maji, sick person, Chaani Kubwa & Ndogo,
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Chaani Masingini

2, same ethnic group 33

Tumbatu × Tumbatu (1), Islam (2), Swahili/Islam (1), Swahili (1)

3, friend of parent 4

4, relative: 37

1, same clan 11

2, father’s clan 15

3, mother’s clan 4

5, Other 8

Chaani Kubwa, Chaani Mchezashauni, relative, neighbor, another village, town (1 each)

6, No relationship 24

(34) Who decided about your marriage first? (n=95)

1, Parents 78

Paternal uncle (2)

2, Myself 15

1&2 1

No answer 1

(35) Did your family receive bridewealth? (n=95)

1, Yes 91

Received myself because I have no father / mother

2, No 0

No answer 4

(36) What did you receive as bridewealth? (n=100, pl.)

1, money: TSh* 93

TSh4 (1), 30 (2), 40 (1), 45 (1), 50 (1)

200 (2), 300 (1), 400 (3), 600 (3), 700 (1), 900 (1)

1,000 (1), 1,500 (1), 2,000 (2), 3,000 (2), 4,000 (1), 5,000 (1), 6,000 (1), 8,000 (1)

10,000 (1), 15,000 (1), less than 50,000 (1)

60,000 (1), 71,000 (1)

200,000 (2), 250,000 (1), 350,000 (5), 400,000 (2), 500,000 (2), 600,000 (1)

? (49), n.a (3)

2, livestock 7

No answer 2

37 How is your marriage now? (n=122, pl.)

1, Unmarried 26

2, Married 48

3, Divorced 14

4, Separated 1

Stays 2 days and leaves

5, Widowed 16

6, Husband has other wives (polygyny) 17

2 wives 12

3 wives 2

38 Are you living with your husband or partner? (n=95)

1, No 55

2, Yes 40

39 Who do you live with at home? Table 2 (total, children, grandchildren)

a) How many in total?

b) How many women?

d) How many men?

<table>
<thead>
<tr>
<th>Number</th>
<th>Total</th>
<th>Children</th>
<th>Grandchildren</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>94</td>
<td>69</td>
<td>24</td>
</tr>
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</table>

Note: Formulated by the author from Question 39.

In spite of the fact that MHH and FHH were sampled equally, almost all (93, 98%) of the women had an experience of being married (Q32). The year of marriage ranges from around the 1950s to the 2015.

Almost half (43, 45%) of the women married a man from the same village, and one third (37, 39%) a relative, and another one third (33, 35%) from the same “ethnic group” (Q33). Most (78, 82%) of the women married based on parents decision, whereas only 15 women decided their marriage on their own. Almost all of the women’s family or themselves received bridewealth (91, 96%, Q35) in cash (93, 98%, Q36). Many women (52) did not know the price of their bridewealth since it went to the parents. Amongst those who knew their brideprice, it ranged from TSh4 to TSh600,000. TSh4 is estimated to be a marriage in the 1970s, and TSh600,000 is a marriage in 2014. The
bride price seems to be increasing over the years along with inflation, but would need a more detail analysis.

As intentionally sampled, almost half of the women are married (48, 51%), 26 (27%) are unmarried, 16 (17%) are widowed, 14 (15%) are divorced, and one is separated (Q37). Among the 48 married women, 17 women's husbands have more than two wives. Over half (55, 58%) of the women are not living with their husbands, and less than half (40, 42%) are (Q38) as intentionally sampled.

According to Question 39 (Table 2), number of family members range from 1 to 13: maximum number of women 8 and men 9. The maximum number of children is 9, and grandchildren is 7.

IV. Your livelihood and food

In this section, information on the respondent’s occupation, farmland, crops, food (major food, usage, and availability), and livestock are asked. Furthermore, accessibility of food for pregnant women, lactating women and children are questioned.

40 What is your work? (n=95)

- □ 1, Farmer 55
- □ 2, Business: what kind?___ 4
  - Shop, coconuts
  - Saw basket and mats (2)
  - Sell biscuits and kebab at school (1)
- □ 3, Other ______________ 26
  - Tailor (1), educate children: teacher at a nursery class (1), secretary of women and children (1), has another work (1), housewife (1),
  - No work (18), no work. Farmer long time ago (1),
  - Sick (1), I cannot (1)

1+2 3

1+3 2

To bring up children
Raise animals

No answer 5

41 Do you have farmland? (n=95)

- □ 1, Yes 51
- □ 2, No 27
- No answer 17

42 Whose farm do you cultivate, with whom?

- □ 1, I don’t farm 22
  - Children
- □ 2, Ours with husband 23
- □ 3, Mine (alone) 29
  - Farmland for every wife 1
  - Clan. Every person (wife) 1
- □ 4, Family 11
  - Father (1), children (1)
- □ 6, Group 2
- □ 7, Lent 1
  - Make mounds for money
- □ 9, Other 6
  - Neighbor (1), beg from others (1), don’t reach (1)

No answer 9

43 What is your major crop? (n=120, pl.)

- □ 1, Maize 0
- □ 2, Rice 44
- □ 3, Sorghum 0
- □ 4, Cassava 62
  - only (1)
- □ 5, ______________ 14
  - banana (6), (sweet) potatoes / yam (4), (sweet) potatoes / yam, together with cassava (1), (sweet) potatoes / yam and banana (1), orange, coconuts (1),
    - various vegetables (1)

No answer 23

44 What is your major food? (n=120, pl.)

- □ 1, Maize 4
- □ 2, Rice 86
- □ 3, Sorghum 0
- □ 4, Cassava 20
- □ 5, ______________ 5
  - Banana (4), wheat-donuts(1), yam, banana, sweet potatoes (1)

No answer 4

45 Who decides about the major usage of your crop? (n=95, pl.)

- □ 1, Myself/mother (only women) 37
  - Older sister (1), every person (wife) (1)
  - Eat only/all. Don’t sell (2)
- □ 2, Husband/father (only men) 16
- □ 3, Women and men 30
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46 Do you have sufficient food for the whole year these days? (n=95)

- Yes: 38
- No: 55
- No answer: 2

12 No answer
1 No food

(47) Which periods do you not have enough food?***

(48) If food is insufficient, who eats first? (n=100, pl.)

- Children: 86
  - Small children: 19
  - Bigger children: 3
- Adults: 8
  - Men: 0
  - Women: 0
  - Pregnant women: 1
  - Lactating women: 0
- No answer: 6

49 Did you have enough food when you were pregnant? (n=95)

- Yes: 72
- No: 21
- No answer: 2

50 Do you have livestock? (n=94)

- Yes: 38
- No: 56
- No answer: 1

In this section, information on the respondent’s occupation, farmland, crops, food (major food, usage, and availability), and livestock are asked. Furthermore, accessibility of food for pregnant women, lactating women and children are questioned.

According to Question 40, majority (55, 58%) of them are farmers, but not a few indicated that they have no work. Some indicated that they are a housewife, or is a farmer and also bring up children. A few indicated that they have small business such as shops or tailor, and others indicated other work such as to educate children or a secretary.

Majority (51, 54%) have farmland, while not a few do not (27, 28%), and 17 did not answer mainly because they do not farm (Q41). According to Question 42, 23% (22) did not farm. Amongst those who farm, 29 have a farm alone, some specifically indicated that every wife has a farm. Twenty three shared a farmland with their husband, 11 with family and 2 from a group. Others made mounds for money, or begged farmland from others.

Major crop is cassava (62, 65%) followed by rice (44, 46%, Q43). Bananas, sweet potatoes, and yam were also seen. Major food is rice (87, 92%), though not a few eat cassava (20, 21%), some eat maize (4), or bananas (Q 44). In reference to detail previous research on food in Chaani8, it is likely that they answered the main preferred food for dinner.

One third (37, 39%) of the women decided about the usage of the crops on their own, and another third (30, 32%) with men. Only 16 (17%) women answered that only men decided (Q45).

While less than half (38, 40%) of the women had enough food, majority (55, 58%) did not have enough food for the whole year (Q46). However, Question 47 which asked the period without enough food did not received a straight answer. One of the reason is indicated in their narrative that food “Depends on the day. I don’t know by month”.

A few explanations indicated about the “Harsh sun”: “Bananas died. Sunny days are a problem.”, “A lot of sun. Not enough [rain] and banana died.”, “A lot of food became bad (because of harsh sun). I did not have to go to the shop only at the harvest time”.

Another perspective was that even if they don’t have enough food, they leave some seed for next year: “Not enough but I leave for seeds”. In terms of recent changes, one woman indicated that: “There were enough long time ago, but not recently”. Without the capacity to cultivate a farm, another woman indicated that: “I cook when I receive”.

Majority of the women (86, 91%) answered that children ate first when food is insufficient, with emphasis on small children (19, 20%, Q48). Majority of women (72, 76%) answered that they had enough food when they were pregnant (Q49). Most of the women (56, 59%) did not have livestock.
V. Money

Usage, decision making, breadwinners and remittance were asked in this section. Questions 53, 55, 57, and 59 regarding the amount of money were not asked in this questionnaire since it has been difficult to get a straight answer.

51 What is/are your important usage of your income? (n=122, pl.)

- □ 1, Food 89
  - Rice (1), rice, small fish, oil (1), sugar, bread (1)
- □ 2, Clothes 8
- □ 3, Education 9
- □ 4, Health 6
- □ 5, Farm 2
- □ 6, Other 7
  - Soap (3), oil, soap (1), kanga (clothes) (1), bed, clothes (1), build house (1)
- No answer 1

52 Who decides about the usage of money? (n=95, pl.)

- □ 1, Myself/mother (only women) 41
  - Everyone has their own money (1), mother (1), divide (1)
- □ 2, Husband/father (only men) 20
  - Child 1
- □ 3, Women and men 29
- No answer 5
  - No money (2), no money. We divide (1)

54 Does your work bring you money? (n=95)

- □ 1, Yes 23
  - A little (3), TSh 30,000/month (1), banana (1), potatoes/yam (1)
- □ 2, No 69
  - Food (1), rain (1), no answer (3)

56 Is/are there others in your family that work? (n=95)

- □ 1, Yes: 37
  - Who (relationship)?
    - Child (16), husband (15), relative/family (4), father (1), child of my older sister (1), elders (1)
- □ 2, No 54
- No answer 4

58 Do you have family that bring money from outside the village? (n=95)

- □ 1, Yes: 10
  - Who (relationship)?
    - Child (5), child of my older sister (1), older sister (1), relative (2), elders (1), there is a person who gives me (sometimes for oil) (1), not easy, sometimes (1)
- □ 2, No 83
- No answer 2

For the majority of women (89, 94%), food is the most important usage of money (Q51). Other usages are education (9), clothes (8), and health (6). Soap (3) was also identified as necessity one needs to buy.

According to question 52, almost majority of women (41, 43%) decided about the usage of money, followed by men and women (29, 31%), then men (20, 21%, Q52).

Most women (69, 73%) answered that their work does not bring them money (Q54). Nearly half (37, 39%) answered that there is someone in their family that works (such as child, husband), but majority (54, 57%) answered that there is no (Q56). Only a few (10, 11%) answered that there is someone (such as a child) that sends money from outside the village (Q58).

VI. Children

Questions related to giving birth, bringing up children, nutrition, and health of children are asked in order to understand the situation of children, their care and mother’s and society’s understanding.

1. To give birth to children

Various questions regarding giving birth and children’s health were asked to capture the situation of children’s health. Experience of giving birth, number of children, place of giving birth, helped received when giving birth and health of children are asked.

60 Did you give birth to children? (n=95)

- □ 1, Yes: 91
  - How many?
    - 1 child 10
    - 2 children 6
    - 3 7
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Other</th>
<th>Not Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>61 Where did you give birth? (n=112, pl.)</td>
<td></td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Hospital, Kibunge</td>
<td>55</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home</td>
<td>53</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ketwa, male twin</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1&amp;2 (15)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kibunge 8 and house 2, hospital 2 &amp; house 7,</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hospital 2 &amp; house 2, hospital 2 &amp; house 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>62 Who helped to give birth? (n=105, pl.)</td>
<td></td>
<td></td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Doctor of the hospital</td>
<td>42</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nurse of the hospital</td>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Traditional birth attendants</td>
<td>37</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. trained</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. untrained</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4, Relative (who?)</td>
<td>15</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>mother (→ 3, elder) (4), grandmother (2),</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>aunt (mother’s younger sister) (1), mother-in-law (1), parent in-law (1),</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>aunt (father’s sister) (1), father of my children (1),</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>grandmother, father, aunt (father’s sister),</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>alone (1), older sister (1), sister in-law (1),</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>forgot (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5, Other</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Neighbor (1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>63 Did you give birth safely? (n=127, pl.)</td>
<td></td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>All of them were born safely</td>
<td>82</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2, I lost child(ren):</td>
<td></td>
<td></td>
<td></td>
<td>19</td>
</tr>
<tr>
<td>How many?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 child</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 children</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>?</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>65 Presently, how old is your first child? (n=76 in numbers, 95 responses)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>26.8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum</td>
<td>60</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>66 How old is your last child? (n=77 in number, 95 responses)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average</td>
<td>12.78</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minimum</td>
<td>0.42</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Maximum</td>
<td>43</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>67 Have you lost any children up to now? (n=95)</td>
<td></td>
<td></td>
<td></td>
<td>52</td>
</tr>
<tr>
<td>1, Yes:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>How many?</td>
<td></td>
<td></td>
<td></td>
<td>21</td>
</tr>
<tr>
<td>1 child</td>
<td>21</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 children</td>
<td>18</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2, No</td>
<td></td>
<td></td>
<td></td>
<td>38</td>
</tr>
<tr>
<td>68 How old was s/he? (n=53)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>69 What was the reason for his/her death?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
According to Question 60, most of the women (91, 96%) gave birth. Half of the women (55, 58%) gave birth at the clinic or hospital, and the other half (53, 56%) gave birth at home. Among them, 15 gave birth both at the clinic/hospital and home (Q61).

Many (42, 44%) were helped by a doctor of the hospital, followed by traditional birth attendants (37, 39%). Few (15, 16%) were helped by a relative such as her mother or grandmother, and 11 (12%) were helped by a nurse (Q62). Majority (82, 86%) answered that they gave birth safely. However, not a few (22, 23%) answered they had complication, and 19 (20%) answered that they lost their child(ren) (Q63).

According to Question 65, average age of the first child is 26.8, minimum age 2 and maximum 60. Some did not know their children’s age, but indicated that they are already an adult with a child. The average age of the last child is 12.78, minimum 5 months, and maximum 43 (Q66).

Majority of women (52, 55%) experienced losing their children (Q67). Many lost one (21), followed by 2 (18), but the maximum number of children lost is 6. The age and reasons for children’s death is indicated in Table 3 (Q68, 69).

Majority of death (34) took place before the age of one, and an additional 16 between the ages of one to five. While fever is the most common reason for death, most women who lost their children before the age of one did not know why the child died. Some indicated that “the time has come. God wrote it down”.

### Table 3. Age and Reason of Children’s Death

<table>
<thead>
<tr>
<th>Child’s age</th>
<th>Year</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 0 -3 months pregnant</td>
<td>7</td>
<td>Fever</td>
</tr>
<tr>
<td>2 0 -3 months pregnant</td>
<td>7</td>
<td>Just small bugs</td>
</tr>
<tr>
<td>2 0 on birth</td>
<td>2004</td>
<td>Died on birth</td>
</tr>
<tr>
<td>1 0 on birth</td>
<td>7</td>
<td>I don’t know. God’s work. The time has come.</td>
</tr>
<tr>
<td>1 0 after birth</td>
<td></td>
<td>[15 answers without identified reason.]</td>
</tr>
<tr>
<td>3 0 baby</td>
<td></td>
<td>The time came.</td>
</tr>
<tr>
<td>3 0 baby</td>
<td></td>
<td>Just like this</td>
</tr>
<tr>
<td>4 0 others breastfeeding</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>1 0.005 1 day</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>2 0.005 2 days</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>2 0.005 3 days</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>3 0.005 3 days</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>4 0.011 3 days</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>1 0.016 5 days</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>2 0.019 1 week</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>1 0.033 3 weeks</td>
<td>1979</td>
<td>Febrile fever: tetanus</td>
</tr>
<tr>
<td>2 0.034 3 weeks</td>
<td></td>
<td>Died because of belly button</td>
</tr>
<tr>
<td>2 0.06 3 weeks</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>1 0.08 1 month</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>2 0.08 1 month</td>
<td></td>
<td>Sick</td>
</tr>
<tr>
<td>3 0.23 3 months</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>3 0.25 3 months</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>1 0.25 3 months</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>2 0.33 4 months</td>
<td></td>
<td>Fever</td>
</tr>
<tr>
<td>2 0.33 4 months</td>
<td></td>
<td>Just sick. The time has come, and died again.</td>
</tr>
<tr>
<td>4 0.42 5 months</td>
<td></td>
<td>Diarrhea</td>
</tr>
<tr>
<td>2 0.58 7 months</td>
<td></td>
<td>God wrote down the time.</td>
</tr>
<tr>
<td>2 0.58 7 months</td>
<td></td>
<td>God wrote down the time.</td>
</tr>
<tr>
<td>2 0.67 8 months</td>
<td></td>
<td>Children’s fever (not malaria)</td>
</tr>
<tr>
<td>2 0.67 8 months</td>
<td></td>
<td>Tetanus</td>
</tr>
<tr>
<td>2 0.7 1 year</td>
<td></td>
<td>Fever</td>
</tr>
</tbody>
</table>

Source: Formulated by the author from questions 68 and 69.
Situation of Women and Children in North Unguja, Zanzibar

71 Did the father of your children participate in bringing up children?  
(n=95)

☐ 1, Yes 68
   They are all grown up

☐ 2, No: Why? 18
   Because they are divorced (6), divorce, taking care of children (1), only when married. None after divorce when the child was small (1), divorce/death (1), died (1), don’t know the reason (1), didn’t want to (1), Men’s cultivation work (1)

1+2 1

1st marriage: no child, 2nd, died, 3rd Yes

No answer 8

(72) What did he contribute in bringing up children?  
(n=86, pl.)

☐ 1, Money 64

☐ 2, Other 22
   Food 11
   Various needs 10
   Necessities (soap, salt), lives, services, everything, normal, like this
   Health related 8
   Watch when sick, better health, hospital, medicine
   Clothes 6
   School, education 5
   Bed 1

73 Were there other people who helped in bringing up/looking after you?  
(n=95)

☐ 1, Yes 51

☐ 2, No 39

No answer 5

(74) Who?

☐ 1, Mother 16
☐ 2, Grandmother 14
☐ 3, Other children 7
☐ 4, Sister 4
☐ 8, Aunt (younger sister of mother) 2
☐ 9, Aung (paternal) 2
☐ 10, Sister in-law 2
☐ 17, Father 5
☐ 18, Brother 4
☐ 16, Other________ 8

According to Question 70, most of the respondents (90, 95%) brought up children. Some also brought up relatives’ children. The number of children brought up ranges from 1 to 15. However, some answers seemed to be based on misunderstanding of one of the interviewees that the question was about the children presently bringing up. Therefore, the responses may be underestimated in comparison to the reality.

Majority of the women (68, 72%) answered that the father of the children participated in bringing up their children, but not a few (18) answered that he did not (Q71). The major reason was divorce (9) and death (2). Some answered that “they don’t know the reason” or that he “didn’t want to”.

Amongst the contribution of the father of the child, majority (64, 67%) answered money (Q72). Other contributions were food (11), various needs (10), health related (8), clothes (6), and education (5). Also a majority (51) answered that there were other people that helped bring up the children (Q73). They were their mother (16), grandmother (14), other children (6), sister (4), brother (4), and other relatives (Q74).

3. About nutrition of children

Breastfeeding, children’s food and nutrition, and possible support from others are questioned in this section.

77 Did breastfeeding seem to have been enough?  
(n=95)

☐ 1, Yes 78

☐ 2, No 12
Cup (1), powder (1)

No answer 5

78 When you were breastfeeding, was your food enough? (n=95)

□ 1, Yes 69

When father was alive (1)

□ 2, No 18

Have been full (1), morning: mandazi donuts, evening: ‘mapembe’(bad) rice only (1)

No answer 8

79 At how many months did your children start eating? (n=95)

Not yet 1

Small (no milk) 1

1, 2 months 2 (1 each)

3, 4, 5 6 (2 each)

6 75

12 1

18 1

When the baby started to want to eat sand 1

Don’t know 2

No answer 5

79.2 Up to how many months did you breastfeed up to? (n=95)

Not yet 1

8 1

12 2

16 1

18 7

24 75

36 1

60 1

Don’t know 1

No answer 5

80 What did your children eat first? (n=103)

□ 1, porridge of ____________, 82

□ 1, Maize 35

maize meal (4), whole maize flour (dona) (1)

□ 2, Rice 13

□ 3, Sorghum 42

□ 4, Cassava 32

□ 5, ____________ 7

Mixture (nutrition) (flour) [3&4, 1&3&4, 3&5] (4),

flour (2), beans (1), milk (1), coconuts (1)

□ 2, ____________ 15

Rice (4), available food /do not choose: cassava, maize (meal), rice, ugali, banana (1), Milk and mix of other food if available (1), milk, cassava, banana (1), vegetable, cassava (1), banana (1), banana, tea (1), tea and honey (1), seleraku-kopu (father obtains from shop) (1)

No answer 6

83 Did it seem to be enough? (n=95)

□ 1, Yes 76

□ 2, No 12

No answer 7

84) Do you have relatives or friend that helped when food is not enough for children? (n=95)

□ 1, Yes: 42

Who?

Relative (6), relative of family (1), relative (uncle, younger brother of father) (1), elders (5)

Mother (2), father and mother (1), father of the house (1), our grandfather (1), grandmother (1), in-law (1), in-law, older sister (1), uncle (older brother of father) (1), our uncle (maternal) (1), brother (1)

Children, older brother(1), children (2)

Relative = neighbor (1), neighbor, relative (1), neighbor = father (1), neighbor, paternal aunt (1)

Neighbor (6), other (1)

□ 2, No 43

Not even one (1)

No answer 10

(85) If food is insufficient, is it possible for children to eat outside the household, such as:(n=120)

□ 1, Relative’s house? 49

In-laws 1

□ 2, Neighbor’s house? 33

□ 3, Friend’s house? 14

2=3 1

Long time ago. → Not recently. Only children

□ 4, It is not possible 24

I had enough food 2

No answer 9

According to Question 77, majority (78, 82%) answered that their breastfeeding seemed to have been
enough. Majority (69, 73%) also evaluated that their food was enough when they were breastfeeding (Q78).

Majority (75, 79%) started feeding food to children at 6 months (Q79) and breastfed up to age 2 (Q79.2). Children’s first food were porridge from sorghum (42, 44%), maize (35, 37%), cassava (32, 34%), and rice (13, 14%). A few indicated a porridge made from a mixture of above, and others explained that they gave other kind of food that were available such as rice, banana, cassava or maize meal, or milk (Q80). Again, most (76, 80%) recognized that children’s food was enough (Q83).

About half (42, 44%) of the women had relatives of friends that helped when food is not enough, and another half (43, 45%) who did not (Q83). The relatives were mother, father, children, grandparents, in-laws, uncles, and brothers. Some indicated that their neighbors were relatives, and others indicated simply that neighbors helped (Q84). Relatedly, majority (49, 52%) answered that children can eat at relative’s house when food is not sufficient, and one third (33, 35%) at a neighbor’s house, and 14 a friend’s house. However, not a few (24, 25%) answered that it is not possible for children to eat outside the house.

4. Children’s health

Questions related to children’s sickness, advice, and health services are asked in this section.

86 Did your children get sick when they were small? (n=95)

□ 1, Yes: 72

What?

Fever (23), Small fever (7), High fever (2), Normal fever (3)
Fever → hospital, Fever sometimes, Born with fever, Children’s fever, Fever and stomach (1 each)
Fever, cold (2), Cold (3)
Cold (pneumonia), (1), Fever and pneumonia (2 children) (1), Pneumonia (3)
Malaria fever, Malaria (1 each)
Stomach diarrhea (1)
Disease from insects (1)

□ 2, No 19

No answer 4

87 Did elders of family, neighbors, or village give any advice about health? (n=95)

□ 1, Yes: 58

What? (n=50)

Hospital (32), food (3), elders/grandmother (3), traditional medicine (1), other (14)

□ 2, No 33

Don’t know 1

No answer 3

88 Do you know about any medicine from the forest (dawa ya porini)? (n=95)

□ 1, Yes: 38

For example: (n=37 plants, 40 disease including duplication)*

□ 2, No 53

No answer 4

89 For what problems do you go to traditional healers (mganga wa jadi)? (n=95)

□ 1, _______________ 16

Fever (3), Fever, dizziness (1), If sick, for medicine (1), If a child (1), If a child gets asthma (1), If a child has a headache (1), If a child has fever, and it doesn’t go down, or the hospital doesn’t help (1), If a child is scared (not so much) (1)
First go to the hospital, then go to the traditional healer (1), If hospital fails (1)
Problems that can’t be dealt with in the hospital (1)
Devil, Swahili disease that hospital cannot cure (1), Devil (1).
These days, god says no (1)

□ 2, I don’t go 77

No answer 2

92 For what problems do you go to the clinic? (n=95)

□ 1, _______________ 94

Fever (74), stomach (10), cold (9), head (4), malaria (1), eyes (1)

□ 2, I don’t go 0

No answer 1

95 Who decides to send children where when your children is sick? (n=90, pl.)

□ 1, Myself/mother (only women) 35

□ 2, Husband/father (only men) 14

□ 3, Women and men 41

No answer 8
Questions related to children’s sickness, advice, and health services are asked in this section.

According to Question 86, majority of women (72, 76%) experienced children’s sickness. The most frequent sickness was various fever, but other sickness such as cold, pneumonia, and malaria was also mentioned.

Majority of women (58, 61%) indicated that elders of family, neighbors, or village gave some kind of advice (Q87). Most of the advice was to go to the hospital or clinic (32). There were a few that mentioned about helping about food (3) or traditional medicine.

Over one third (38, 40%) of the women indicated that they knew about medicine from the forest (Q88). Among them 37 plants were indicated and 40 disease were indicated (including duplication).

A few (16) indicated that they go to traditional healers for fever and other sickness (5), for a child (5), and if hospital failed (3), and for the problem of devils (2, Q89). On the other hand, almost all (94, 99%) went to the clinic or the hospital, mostly for fever (74), and for some stomach (10), cold (9), head (4), malaria, and eyes (Q92).

Almost half of the women (41, 43%) decided about children’s health commonly between men and women, the other half only by women (35, 37%). A few (14, 15%) women indicated that men decide (Q93).

5. About helping each other to bring up children

Questions on how people help each other in bringing up their children are asked in this section.

97 Do you help others to bring up their children? (n=95)

- Yes: 68
  - 1, to give birth children 2
  - 2, to watch children 18
  - 3, to nourish children 10
  - 4, for children’s health 12
    Sending children to the hospital, medicine, persuade immunization
  - 5, to give advice to bring up children 17

- No: 23
  - Don’t know 1
  - No answer 3

98 Who did you help (relationship)? (n=67)

- Neighbors (29), Relatives and neighbors (4), Relatives (4), Children (9), Elders (2), Father (2)
- Children and sister, Older sister and brother, Grandchildren, Grandfather, grandmother, My child and others, My grandchildren, My mother, Sister in-law, Sister in-law, children of my younger sibling (1 each)

99 In total, what do others help to bring up children? (n=107, pl.)

- 1, To give birth to children 2
- 2, To watch children 26
- 3, For children’s nutrition 25
  Cassava
- 4, For children’s health 6
  Send to the hospital
- 5, For children’s education 2
- 6, To advice to bring up children 25
  Our father
- 8, There is no 16
  Destitution (nyonge)
- 9, Other 5
  In every situation (1), bring up (1), Just talking (mtaani). Ask about the situation but no oil (1), clothes (1), clothes, ask the situation (1), buy clothes and shoes (1)

No answer 6

100 For what do others help by chipping in (changia) in relation to children? (n=104, pl.)

- Food for children 41
  Rice, salt, coconuts (1), bread (1)
- 4, To send to the clinic/hospital 27
- 5, To by medicine: 6
  - from the shop 1
  - of traditional 1
- 6, To send to a traditional healer 0
  Traditional healers left (1)
- 7, Tuition for education 2
□ 8, Nothing 19
□ 9, Other 3
  Clothes (2), children: money for rice (1)
No answer 6
  Destitution (1), can’t answer (1)

101 In total, which advice or education helped most in giving birth and bringing up children safely? From: (n=106, pl.)
□ 1, Education from school 3
□ 3, Advice from elders 47
  House (grandmother and husband) (3), grandmother (2), here (our place) (2), mother (1), parents (1), elders (1)
□ 4, Dispensary 50
  Hospital (7), health center (1), Long time ago, Dr. came by the house. Recently, not so (1)
□ 5, Other 3
  Myself (2), doctor (1), city (Mambeladu) (1)
No answer 3

102 Would you give advice to young girls who is to give birth and to bring up children? (n=95)
□ 1, Yes: 82
  What will you say?
    Go to the hospital (67), advice (7), nutrition related (3), god related (3), cleanliness (1)
□ 2, No 10
  Don’t know 1
No answer 2

Majority (68, 72%) answered that they help others bring up their children, by watching them (18), giving advice (17), sending them to the hospital (12) and nourishing them (10, Q97). About one third helped neighbors (33), and others helped relatives such as children, elders, father and others (Q98). In total, others helped to watch children (26, 27%), for children’s nutrition (25, 26%) and giving advice (25, 26%, Q99). People help financially for children’s food (41, 43%), and to send to the clinic/hospital (27, 28%, Q100). However, not a few answer that other do not get help (16, Q99), especially financially (19, Q100).

In total, advice from the dispensary or hospital helped the most in giving birth safely (50, 53%), followed by advice from elders (47, 49%, Q101).

Majority (82, 86%) answered that they will give advice to young girls, especially about going to the hospital (67).

Summary and Future Analysis

This compilation of the questionnaire interview provided general understanding about the respondents, their education, marriage status, their livelihood, income, and the situation of children. According to the responses, over half (52, 55%, Q67) of the women experience losing their child(ren) and most (72, 76%, Q86) of their children experienced some kind of sickness when small.

While the situation of children’s death and sickness is in a similar situation with Central and Southeast Tanzania\(^9\), some preliminary differences were prevalent in the case of Northern Unguja. Firstly, the identity of ethnic group nor clan was not strong amongst the women interviewed, and none of them participated in the unyago puberty rite. Secondly, in spite of the fact that the sampling method was common, all of the women experienced marriage, indicating the weight on marriage.

Thirdly, in terms of livelihoods, being a farmer has not been emphasized in comparison to inland, and the notion of seasonal harvesting was not visible. Furthermore, people cultivated cassava and rice, but preferred to eat rice, and gave children sorghum for their first porridge.

Fourthly, in comparison to the cases in inland, people seemed to help each other in bringing up children. Fifthly, relatively more people had knowledge of traditional medicine, but most of their advice to pregnant women and children were going to the hospital. These preliminary observations are to be corrected based on a closer comparative analysis between the three case studies.

Based on the analysis on the correlation between children’s mortality and morbidity in the two villages in Central and Southeast Tanzania, situation of children improved over time, and place/help for birth and knowledge had statistically significant differences with mortality and/or morbidity in both villages\(^10\). Furthermore, monetary consumption patterns on food,
husband’s presence, and mutual support for care were also statistically significant but differently between the two villages\textsuperscript{11}. Analysis of the case of Chaani Masingini on correlation with children’s mortality will allow us to indicated common trends in the three locations, and unique characteristics based on social structures and backgrounds.

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Situation of Women and Children in North Unguja, Zanzibar: Preliminary report from a questionnaire interview in Chaani Masingini

Sakamoto Kumiko

Abstract

This is a preliminary report on a questionnaire interview in North Unguja, Zanzibar, which has one of the highest infant/child mortality rates. In the research, 95 women were interviewed in Chaani Masingini Village in Swahili based on a questionnaire. It included questions on women themselves, education including puberty rites, marriage and family structure, livelihood and food, income and about children (birth, raising children, nutrition, sickness, and mutual help). According to the results, 55% of the women experienced losing children, and 76% experienced children’s sickness. Majority of the women experienced helping each other in raising children, but the out standing advices were to go to the hospital. These results will be analyzed in combination with changes over time, people’s local knowledge, social structure, and other qualitative answers in the future.

(2015年11月2日受理)