

Introduction

In partnership with the Canadian Government, the University of Saskatchewan, Nelson Mandela Institute of Science and Technology, and the local Tanzanian Non-Government Organization, Green Hope, the Mama Kwanza Socio-economic Health Initiative (MKSHI) have provided health and social care to mothers, children, and families throughout the Arusha region of Tanzania since 2012. One of the target populations served by Mama Kwanza are adolescent girls no longer engaged in formal schooling. As a marginalized demographic, these young girls face exclusion from access to essential resources, rights, and power necessary to live at full capacity, and are at risk for early pregnancy, sexual exploitation, and poverty. Social development plays a crucial role to provide a sustainable livelihood and future options for the girls. Collective action is argued to take social development from concept to application by leveraging the strengths and capacities available within the group. Appreciating the social and economic position of the participating girls, this work analyzes the vulnerabilities and capacities of the girls to meet needs and achieve physical, social and motivational goals, and discusses the propensity for collective action among the girls.

Background

On the sunset of the 2015 'Millennium Development Goals' (MDGs), the global community refined development priorities and agenda within the 'Sustainable Development Goals' (SDGs). In a globalized world, the SDGs recognize the imperative for cooperation and partnership on shared challenges and interests across nations while responding to localized development needs. The identified primary goal and greatest challenge for global sustainability is to eliminate poverty in all its forms and dimensions. Pledging to 'leave no one behind' the plan relies and is founded upon global partnerships for sustainability as a collective journey. Global partnerships emphasize a global solidarity through the integration and linking of networks and knowledges in order to fully realize the benefits of the SDGs and secure the health of the planet.

The SDG Agenda 2030 identifies social development as an equal pillar to economic, political, and environmental development toward global sustainability. Social development is understood as both an objective and a process to ensure health and wellbeing of all people and the planet (Sachs, 2015). The objectives of inclusion, empowerment, and gender equality are the leading avenues for social development and alternative economic models. As a process, social development involves the fair distribution of opportunities and resources to ensure social justice with full inclusion and participation in social, economic and political processes for individuals to direct their own futures and pathways. Economist Karl Polanyi (1944) posited that the market demands are simply not sustainable, arguing that people will inevitably mobilize to protect themselves from market shocks, insecurities, and inefficiencies within the structure. Increasing the investment and promotion of collective action can support the development of the large number who make up the informal sector. A strong social foundation is dependent on a revival of the informal and social economy, providing an avenue for traditional societies and communities not served nor represented by the formal capitalist market economy to participate in economic and political processes, leveraging social capital and rebuilding local economies.

Collective Action

The question of whether those engaged in collective action are able to exhibit some measure of influence over their circumstances is important (Ostrom, 2014). The strength, nature and interdependence of agents is central to exchange and collective action (Adger, 2003). The underlying success of adopting cooperative social norms strongly depends on the capacity for individuals to identify with one another. Thus, contextual variables that enhance the knowledge about each other are key aspects to include in future efforts to explain the origin of collective action (Ostrom, 1999). Although Ostrom (2014) argues that the success of collective action largely

depends on individuals identifying with one another, collectivity implicitly contains a shared understanding of the problem's elements and possible solutions for mutual benefit. Adger (2003) argues that the limitations of an individual actor are dependent upon their capacity to act collectively with others. After capturing the essence of the individuals, and the characteristics and dynamics within the group, the question arises why some individuals overcome challenges to working collectively, and others do not.

Revealing shared understanding or 'common knowledge' is intrinsically inscribed into people's non-cognitive awareness and habitual activities is critical for social action (Taylor, 1995). And, as such, understandings and analyses cannot be fully understood without reference to social and historical production. This level of analysis leads to understanding of how institutional, cultural, and physical contexts affect the types of individuals who either pursue or disregard cooperative or collective action opportunities. Theoretical and empirical factors that potentially affect the likelihood of groups overcoming individual and social dilemmas and contributing to the success of collective action, include: the size and heterogeneity of the group, the dependence of the group on each other, the scarcity of resources, total collective benefit, temptation to free ride, degree of social capital, past experiences, and norms of reciprocity strong leadership (Olson, 1965; Schmaus, 1995; Ostrom, 1990; Janvry, McCarthy, and Sadoulet, 1998;). However, social scientists attest that "people are characterized by an instinct of self-organization which pushed them into collective action in order to achieve common goals" (Czech, 2016).

Capacity and Vulnerability Analysis

Anderson and Woodrow's (1989/1999) Capacity and Vulnerability Analysis (CVA) is a gendered-based analysis framework used to understand the common experiences among adolescent girls in Tanzania; including patterns of behaviour and limiting constraints for the girls towards collective action and participation in social development. With gender as a factor of social exclusion worldwide, understanding and addressing gender-based exclusion requires an analysis of the dominant ideologies and social norms that dictate gender practices. Understanding the gender dynamics of this context "reveals factors that may perpetuate diminished self-esteem, limited socio-economic opportunities, and a lack of social protection" (Hobbs and Rice, 2013). The CVA was originally developed for the purpose of assessing gendered roles, responsibilities, and power dynamics by using a participatory approach to facilitate a detailed and focused analysis of a situation at its root (March, 1999). Participation is an essential component of data collection, and the CVA approach itself is a "powerful way to help them [*sic*] increase their understanding of their own situation, and therefore their capacities to effect desired change" (Anderson and Woodrow 1998:21). As such, the CVA analytical framework supports participatory research methods which recognize that people already 'know' their situation to some capacity but may not have the skills or space for reflection of what they understand. The method of data collection is, in itself, a capacity building exercise. Emphasis on identifying root causes, assessing the capacity for people to organize, direct observation, and methods of cross-checking verbal information are the foundation of analysis in the CVA framework.

As a participatory approach that identifies immediate needs and build on existing strengths to support long term sustainable development, participants are not regarded as passive recipients of aid, but also have resources and abilities to support themselves and guide intervention efforts (Birks, Powell & Hatfield, 2017). Individuals and communities are understood as active agents with collective resources that can be utilized to orient efforts and guide change (Anderson & Woodrow, 1999). The foundational concept of the CVA is that existing strengths (capacities) and weaknesses (vulnerabilities) determine the outcome and sustainability of an intervention. Capacities refer to material, physical, social organizational resources, and general attitudes. Vulnerabilities, such as poverty, literacy, family structure, education, and exclusions remain factors which weaken people's ability to cope with their unmet needs and may require/request strategic, long-term development efforts and supports. In the effort to secure and promote

sustainable livelihoods, the CVA framework recognizes the significance of factors related to protecting and reducing vulnerabilities, while strengthening local access and capacity to initiate change (Anderson & Woodrow, 1999).

Context of Development

The Republic of Tanzania ranks 154/189 on the Global Development Index (UNDP, 2018). Development in Tanzania reveals the consequences of decades of exclusion and underdevelopment in Africa, exacerbating chronic poverty, gender inequality, lack of infrastructure, governance deficiencies, global policy failure, and a crisis of public social and health service provisions of unfathomable need/demand. This reality, however, cannot be accepted simply as community collective failings, but also largely stemming from the legacy of colonialism, challenges of independence, the politics of globalization, and structural adjustment programs. Upon independence in 1967, the president of Tanzania, Julius Nyerere, implemented the Arusha Declaration, which was the central policy for the ambitious initiative of the Ujamaa (*'familyhood'*) project. With its main objective to address marginality and inequality among the people through "equal opportunity to all men and women irrespective of race, religion or status" (Nyerere, 1968:15), Nyerere impressed the need for self-reliance (*'kujitegemea'*) stating that "our motto for the coming year must be self-reliance" (Nyerere, 1973:4) where "self-reliance is a positive affirmation that for our own development, we shall depend upon our own resources" (Nyerere, 1968: 319). However, faced with crippling economic difficulties in the mid-1970s, Tanzania became heavily indebted, which began to lead to the liberalization of the national economy, the devaluation of the national currency, the lifting of price control, and cuts in government expenditures as a condition for further loans. These loans weakened Tanzania on the global stage, and the country was further challenged in its ability to develop their own social, political, economic, and cultural spheres. The *'Ujamaa'* rhetoric has been replaced with debates surrounding liberal democracy and international market demands. The country began to transition by adopting political and economic liberalization policies. International development agencies and non-government agencies exist though out the country, and international capital and aid has been widely extended. What remains an issue of debate, however, is the influence and legacy of *Ujamaa* as a development strategy and the foundation for collective action.

The Mama Kwanza program is a development aid project funded by the Canadian government to provide health care and social services to a range of clients. Staff members provide health care, family planning, training, skill building, and English language training. The program is a capacity building initiative that provides the opportunity to ask those most at risk of poverty within the global system -- the true poverty experts -- about concerns, needs, and desires; required and available supports; and options for action to meet identified needs and goals. The *'Girls Group'* is a cohort of adolescent girls no longer engaged in formal schooling established through Mama Kwanza for capacity building purposes. The *'Girl's Group'* participants serve as the research participants for this research, engaging in a series of participatory mapping and group discussion activities that shared stories, identified priorities and challenges, and discussed mutual help and support. Stakeholder interviews discussed the goals and objectives of the Mama Kwanza initiative and garnered a broader understanding to the vulnerabilities and capacities of the *'Girl's Group'* participants. Ethnographic observations and field notes contextualize the discussion within a gender-based analysis of agency and capacity, as well as limitations and vulnerabilities of the group. The analysis examines the needs and goals of the girls and discusses the capability toward collective action to address the desired futures and sustainable development for the participants.

Methodology

The research was conducted between 2012 and 2018, including four field visits that supported data collection and validation. Ethnographic field notes, observations, and contextual data collection began during the first field visit in 2012 and continued throughout the subsequent three site visits. Using a qualitative approach, participatory mapping, group discussions, personal interviews, and ethnographic field notes were used as data collection methods in the field visit of 2016. During the second data collection field visit, six girls were recruited from the fourth cohort Mama Kwanza Girl's Group. The Girl's Group participants engaged in data collection exercises and data interpretation. In 2017, four stakeholders were interviewed and asked to review the findings from the data analysis. These findings are written from the researcher's view with reference to diaries, field notes, data from participants, and photographs collected during site visits. Excerpts, antidotes, and images are included to support findings and conclusions. The research was guided by an Indigenous methodology in the effort to integrate the multiple ways of knowing to data interpretation and analysis, including a field visit designed specifically for data validation and final follow-up in 2018. Interviewed stakeholders, two of the 'Girl's Group' participants, and multiple broader community members validated the data and the researcher's interpretation through meaningful conversation.

Analysis and findings

The tables 1-3 show the results of the CVA framework, which identify the capacities and vulnerabilities of the Mama Kwanza girls. The spheres (1) physical, (2) social and organizational, (3) attitudinal and motivational grouped data into themes. Themes were then refined into sub-sections to distinguish strengths, opportunities, weaknesses, and threats relating to the girls' qualitative experiences in each of the three spheres, categorized in terms of capacities and vulnerabilities. The findings highlight the vulnerabilities facing the girls and how they describe their own unmet needs and identified priorities. Evidence of the Mama Kwanza development and capacity building programming to meet the needs and expectations of the girls, and the potential for collective action and the opportunities within the informal sector for the group is discussed.

Physical capacities and vulnerabilities

The girls of the Mama Kwanza Girls Group are typical adolescent girls. With access to technology and mobile phones and have 'selfies' down to an art. The girls were always well groomed and clean, and individual expression is seen not only in material style, but also in the range of interests and natural skills. The girls are urban based and unmarried. None have children. They are no longer in school and are now required to make adult decisions about providing for their basic needs and 'getting a job'.

The girls are all trying to meet basic needs, including food security and housing. The living situations were discussed as 'for now' by all the girls, and all were working to meet immediate concerns. The girls are physically dependent on others to help provide for their basic needs and will live with family or relatives until they either go away to school, get married, or 'shift' to live with other family or friends. Time and work demand of household tasks are even more so for the girls who are living with relatives, where they contribute substantially to household tasks, "taking care for cousins", to "go get things", or many other expectations and demands for their stay. Ultimately, the girls can and do hard laborious work which keeps them busy. Moreover, the time burdens of transportation and long walks between points on difficult terrain of stone, dirt, debris, and the overall time it takes to move through space with limited infrastructure. Either by foot or by car, only so many tasks can be accomplished in a day. Things do not happen quickly, and patience and perseverance are essential.

The immediate vulnerability facing the girls is the limited resources, including having no income nor opportunities for employment. Further, there are limited government resources and services, and the girls identified that they did not know of any, nor use any government supports.

However, there is a diverse and vast range of NGOs providing independent programs and services, some targeting adolescent girls. “Mama Kwanza” and “organizations” were identified as places the girls go when in need. These service groups are a channel for resources, skill and capacity building for the population. NGOs play an important role within the local context and are key players for a foreseeable future. Linking and informing youth of the services available is an important gap that requires attention. The Mama Kwanza program provided training and education on healthy choices and practices, including reproductive services, personal hygiene, and nutrition. This knowledge is critical for these adolescent girls, who demonstrated very limited knowledge about the reproductive system, in turn, leaving them at high risk for contracting sexually transmittable infections, early pregnancy and related complications. Moreover, malnutrition is commonplace and diverse diets were not a concern nor priority to the girls. However, knowledge and training about these basic health determinants were impactful for girls. In terms of physical vulnerabilities, such as health, training, employment options, and knowledge, the Mama Kwanza program offers support services and resources, including conversations of other ways to do things, and safer, alternative choices.

Social and organization capacities and vulnerabilities

The social sphere is the most predominant feature of Tanzanian society. The fabric is structured on strong family-based relations, where people are referred to in terms of the relationship to each other. Women’s names are replaced with her husband’s or referred to as the mother of her children (‘Mama Robert’- Mother of Robert, ‘Mama Jane’ – Mother of Jane), and others are greeted as ‘brother’, ‘sister’, or ‘mama’. People’s lives are socially dense and social interactions are constant. The loyalty and responsibility for your extended family is all-encompassing and remaining within that safety net is crucial. When asked “where do you go for help”, every girl said “family”.

Ridged social status system determined by norms, roles, gender, position, prestige, networks and relationships persists. Simply by their social position as females, the girls have little decision-making power, high dependency, and are not taught nor encouraged to think independently, but to be quiet, subservient, unquestioning, and compliant. Strict gender roles devalue girls and provide preferential treatment towards boys. However, the girls never speak about it. Indeed, there is an increase in advocacy groups and awareness campaigns for women and sexual rights throughout the country, but the girls never speak or refer to their position in relation to the boys – i.e. what the boys are allowed, they are not. The girls speak of their struggles and difficulties as a common reality among them. However, the discussions, even if gently probed, do not turn towards unequal power or gender relations. Gender roles are normalized and engrained with the girls where men and women are understood as simply different and therefore, receive different treatment and benefits. These gender roles were not questioned nor challenged by the girls. Subservient behavior is expected, critical thinking is not encouraged, and the status quo is enforced through disciplinary measures, demanding expectations, and limited individual decision making and agency among the girls.

The social expectation for marriage and children is clear. All of the girls wanted children and they all wanted marriage. Children are valued in society, and having children is very much desired. The area of most interest and engagement for the girls was around sexual health knowledge, learning when and how you can become pregnant. This topic and type of knowledge translation is typically left up to the ‘aunty’ to provide to girls, and in traditional groups, initiation ceremonies deliver the teachings of sexual relations. None of the girls gave the impression that they intended to wait to have children, and the sentiment appeared to be more of an acceptance of what happens. The social risk of adolescent girls becoming pregnant can lead to isolation and increased vulnerability. There is a difficult connection between the desire and expectation for children, limited knowledge of sexual health, and undesired adolescent pregnancies. The best

option for unmarried girls is abstinence. However, this choice can be difficult during adolescent years, and particularly in a male dominated society.

The religious and moral grounding of the Tanzanian culture creates the framework and fabric for social norms and behaviors. Religious regulation and spiritual connection are important aspects of social organization, deeply engrained and entrenched. The girls of the Girls Group openly express that they “love God” and are “grateful to God”. Maintaining ‘God’ and considering religious protocols as part of development programs and projects is an important consideration. Religious and community leaders are essential to social organization and change. With the ability to override science, these (typically) male leaders are in a very strong position of control and influence.

The girls, and the social organization of the society in general, rely on daily sustenance living patterns, rather than continued living demonstrated by saving and planning behaviors. “In the future” conversations were difficult to have. A future orientation did not seem to be a priority in thinking and discussions. Even with the goal of “starting a business”, there was limited understanding of what a business requires in order to be sustainable, such as saving money or ensuring that profits are sufficient for living and maintaining the business. Businesses can quickly end once the merchandise is gone. Having a business was desirable but requires long term planning that was not easily understood. One girl, who claimed that she wished to be a nurse, later expressed that she also wanted a business. Starting a business, any business, seems to be the most practical and possible avenue to acquire resources for survival for the girls. However, to meet this identified interest, the Mama Kwanza initiative offered options for participants in the Girls Group for micro business development, training and mutual support.

Connected though a shared history and worldview, mutual support is intrinsic in the population and within the socio-political structures. Rooted in the Ujamaa policy for over 50 years, the fabric of the society is one of socialism and mutual support. This shared reality is fertile ground for cooperative, collaborative, and socially inclusive approaches to sustainable development. The expressions of support and endearment is a striking characteristic of the Tanzanian people. Touch is freely shared, men hold hands, hugs last a long time, smiles and special handshakes are greetings, relationships are honored. Connecting to others physically and emotionally as a basis of social organization is an important component. Although tribally and religiously diverse, the girls did have a shared history and foundational worldview.

Motivational and attitudinal capacities and vulnerabilities

Personal histories and struggles made it difficult for some of the girls to engage in the planning and skill building offerings of Mama Kwanza. Personal trauma affects the emotional and mental health of individuals, and many of the adolescents served by Mama Kwanza have struggled personally, emotionally, and physically. These underlying circumstances hindered the effectiveness of the programming to meet the desired objectives of the ‘Girls Group’. Coming to Mama Kwanza with unmet immediate needs made it difficult to impress the importance of skill building and proactive planning. Planning for the future is conceptual and a complex process. The drive to meet immediate needs keeps the orientation of conversation and motivation for action to the ‘here and now’. The future is unknown and abstract. The present is demanding and difficult, requiring immediate reaction and response. As a result, many of the participants in the Mama Kwanza programming expressed unmet expectations when offered skill building sessions requiring investment over a significant period of time. Some participants were not retained, and few met the ‘objectives’ of the initiative to build sufficient capacities to support transformational development. Most who came to Mama Kwanza were looking for work and ways to earn money, or for sponsorship and charity.

The girl’s worldviews are largely shaped by relational and social expectations to create families and have children, take care of the elderly and the household. The demands on the girls

are many. Waking at 4:00 am (or earlier) to arrive at Mama Kwanza by 9:00 am is a norm among the girls. Duties of the “house girl” or “home chores” are expected from the girls before they leave and continue when they get home. The level of demand and devaluation of this effort maintains daily tasks and is encompassed in meeting daily needs and continuous living patterns. The girls are not able to provide a livelihood on their own and therefore, are in a state of dependency. As such, it is difficult for the girls to make autonomous choices and influence change.

Capacity for Collective Action

The contextual variables proposed by Ostrom (2000) to indicate if demonstrated behaviors are conducive or detrimental for collective action are examined within three spheres of analysis: 1) the features and structure of the group; 2) flow patterns of social resources and economic conditions; 3) attributes of the participating individuals. Examining the qualities of the individuals, the dynamics of the group, and the overall social structure of the Girls Group informed the capacity of the girls to work collectively to support shared vulnerabilities. The findings also support the question of relevancy of the Mama Kwanza development project, specifically, and the global sustainable development approach more generally.

Group structure and institutional setting

The Girls Group was a small and fairly homogenous group, with tribal lineage as the greatest difference between the girls. All were without formal education, looking towards the next steps into adulthood, and seeking a “good life” which includes their own home and family. The material contribution of each girl was limited in terms of economic resources, but with much potential in terms of social support available within a collective group. However, capacity building programming within the Girls Group was largely initiated by program directors. The girls participated in all mandatory activities, some demonstrating natural inclinations and abilities, and others with clear disinterest. However, engagement stopped after the activities ended and evidence of personal agency to continue with the initiatives was limited. It was through much effort and encouragement from outside agents, such as Mama Kwanza staff, to continue with projects that were set up as capacity development initiatives.

Resource flow patterns and economic circumstances

The Mama Kwanza programming did fill a need for the participants. The incentive to work with the group and collectively meet shared needs was evident, however, the outcome and impacts of the programming was limited and constraints faced by the girls were numerous. The girls are in a position of dependency and risk, with a reliance on family members and non-governmental programs to support their basic needs. However, the resources available, even within informal training and programming, is limited. The limited resources for essential needs and services creates an immediate need in the participants for survival and creates challenges in planning for the future. Moreover, the risk of participating in collective enterprises may be too great when sustenance demands daily attention.

Individual attributes of participants

The girls openly showed affection and supported each other emotionally during the difficult teaching and learning moments of Mama Kwanza programming. However, coming together to develop a shared enterprise was not well received by the girls. When asked if they would be interested in working collectively with the other girls, they replied with “Yes”. Yet, discussions surrounding business start-ups, which each of the girls expressed a desire, every girl wanted their own business but not one was not interested in working jointly with another. Even with financial incentives to enter into a joint enterprise with other girls, each maintained individual goals and objectives for their own business. In fact, in the three previous rounds of Mama Kwanza Girls

Group capacity building programming, none of the groups were able to develop a shared or collaborative enterprise.

Although cooperation and mutual support is as part of the communal mindset and political philosophy embedded in 'Ujamaa' policies and practices, individualistic thinking trumped decision making in terms of business or managing finances with others. In general, the girls displayed limited self-efficacy and accept their ascribed status. Little evidence was found in the belief in the ability to create change or achieve self-determination and autonomy of choice. The key constraint of the Mama Kwanza programming seems to be the uptake of the incentives by the participants. A shared frustration among participants that nothing was being done for them and personal situations remained unchanged, while Mama Kwanza staff could see possibilities, but action from within the group was without momentum.

Conclusions and further work

Understanding social and practical opportunities harnessed through collective agency is understood as crucial for sustainable development (Sachs, 2015). However, the findings are clear that while the girls openly support each other on social and emotional levels, the willingness to work together towards a collective shared goal was not strong. The conflict between the uptake of services provided by Mama Kwanza and the lack of interest in collective action highlights the expressed dissatisfaction with the lack of opportunity in personal situations. Immediate, unmet needs were clearly a priority over long term vision and planning. Rooted in cultural, social norms and gender roles, the girls are socially connected with shared needs, but vulnerable to limited ascribed capacity. The necessity to invest in applicable and transferable skills within the informal sector is a practical and desired pathway for the girls. The Mama Kwanza capacity building initiative included skill building programming to help the girls develop marketable skillsets that could be leveraged for employment or business start-up. Although the girls were challenged to imagine what might be considered in establishing and the planning required to maintain the business, the discussion itself was clearly a knowledge exchange and 'capacity building' exercise. Investing in strengthening the opportunities for training and experiential learning within the informal sector will build practical skills and applicable learning. Appropriate contextualized and gendered-based business and skill development approaches are necessary for further research and development work in this area. With partnerships leading the SDG development approaches, programs oriented by the experiences of target populations best identify the challenges and practical solutions to complex problems groups face.

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Tables 1-3: CVA matrix of adolescent girls not in school in Arusha, Tanzania – May 2018

Table 1: Physical Resources <i>(includes land, climate, environment, where people live, housing, hazards, infrastructure, access to technology, finance, food and water security, access to resources and capital, skills, labor, assets, physical health)</i>			
Capacities		Vulnerabilities	
<p>Strengths: Demographic – Youthful, approaching adulthood, single with no children</p> <p>Skill development - Primary level education, skills development program, access to micro loans</p> <p>Communication - Access to technology/ internet, and mobile phone</p> <p>Health services - reproductive health information, primary health care, support services/NGOs</p> <p>Location - Urban based, housed with family</p> <p>Social fabric - human capital, social capital</p>	<p>Opportunities: Monetary - Micro lending for business development</p> <p>Professional development - Skills training and support; access to tools/goods/information</p> <p>Supports: Shared labor and skills; Support services</p> <p>Teachings: learning about reproductive health and sexual rights; business development; literacy</p>	<p>Weaknesses: Housing - Unstable / transitioning housing, over-crowding, walk long distances</p> <p>Infrastructure - Limited electricity, limited and hazardous infrastructure</p> <p>Social role - Detachment from parental figures, mentors, and role models, over labored (home chores, care giving, food preparation, etc.) manual, repetitive tasks</p> <p>Economic insecurity - employment scarcity, no income sources,</p> <p>Employability - Limited education, illiteracy (reading, digital, health), limited refined marketable skills, limited English, developing skillsets</p> <p>Health & nutrition- No family planning practices, chronic health concerns, food insecurity,</p> <p>Advocacy - Limited political representation</p>	<p>Threats: Health - Conditions requiring medical services, malnutrition</p> <p>Sexual health - Early pregnancy and complications, FGM</p> <p>Dependency: Economic- Sporadic/ no income sources, perpetuation of poverty</p> <p>Protection - Long distances travelled alone, physical safety and security, Gender based violence</p> <p>Poor education - Poor cognition, Physically hard work</p> <p>Instability - ‘Shifts’ in housing; marginalization</p>

Table 2: Social and Organizational Resources <i>(relations and organization among people, social fabric of society, formal cultural and political structures, and informal norms and practices, decision making, establish leadership, organization of social and economic activities, getting things done, division of labor and assets, decision making and agency capacity, prejudice, conflict, social divisions, segregation, stratification, social coping systems and supports, family and community systems, government and organizational services)</i>			
Capacities		Vulnerabilities	
<p>Strengths: Socialist roots -Ujamaa basis, minimal social stratification</p> <p>Relational based society - Relations based social structure, proximity to others, family-based loyalty, preservation of the familial unit, social supports</p> <p>Oral tradition - knowledge, expressive culture, tradition and shared histories</p> <p>Religious and moral foundations - time honored norms and practices, Protection and value of children, Physical touch and connection, terms of endearment</p> <p>Education – informal skills among men and women), receptivity to other ways of knowing and doing</p> <p>Access to human and women’s rights advocacy across sectors, maternal and child health supports, diverse NGOs and CBOs</p>	<p>Opportunities: Social participation and engagement, social connections and networks, shared realities, cohort grouping, trust systems</p> <p>Access to resources and information, Targeted programs</p> <p>Delayed pregnancies</p> <p>Gender Equity laws</p>	<p>Weaknesses: Expectation/desire for marriage and many children</p> <p>Limited life choices, rigid social and cultural practices, high dependency compliant and subservient, devalued work, sheltered worldview, survival mode existence, extended family demands, demanding expectations</p> <p>Strict gender-based roles, male dominated, preferential treatment of boys/men</p> <p>Unquestioning /naivety, silenced voices disciplinary measures</p> <p>Limited planning or long-term decision-making frameworks, without future planning/ orientation</p> <p>Gender based violence, FGM and sexual rights violations</p> <p>Property laws, education laws, human rights law, inaccessible government services</p>	<p>Threats: Challenge to status quo</p> <p>Change of practices and norms</p> <p>Social isolation, alienation, exclusion</p> <p>Conflict and gender-based violence</p>

<p align="center">Table 3: Attitudinal and Motivational Resources <i>(cultural and psychological factors, religion, morals, dependency, histories, life experiences, teachings, learnings, expectations, survival strategies, resiliency, ideologies, beliefs, experiences of collaboration, views on ability to create change, sense of agency, sense of purpose, feelings of empowerment, autonomy, self determination)</i></p>			
Capacities		Vulnerabilities	
<p>Strengths: Strong moral compass, foundation of hope and faith</p> <p>Greetings and expressive culture, joy in life, contentment</p> <p>Community conscious, families and extended relationships are tightly knit High degree of respect and protection of culture and tradition</p> <p>Women’s rights increasingly understood as human rights, Increased discussions about women and sexual rights Education and training programs established</p> <p>Perseverance, Resilience</p> <p>Collective society/global mindset, deep care for one another, foundation of mutual support and cooperation, cluster together in groups, social inclusion and networks</p>	<p>Opportunities: Opportunities with NGOs and CBOs through supportive funding</p> <p>Traditional care structures within the culture and in the social fabric, natural groupings and gathering, availability of peers with shared realities and a common purpose,</p> <p>Cooperation and mutual support embedded in the political and social cultures,</p>	<p>Weaknesses: Expectation for many children, sexual rights</p> <p>Inferiority of women, ascribed status Devalue of contribution and role, gender-based violence</p> <p>Limitations on - drive and aspiration, future orientation or planning (continuous living), resources (scarcity), aspiration for change</p> <p>Focus on daily living, survival coping individualistic greed, crisis driven, reactive (not proactive)</p> <p>Not decision makers, Passive/ complacent, futility, poorly informed, limited questioning of practices or critical thinking skills</p> <p>Limited developed self-efficacy, High dependency</p> <p>Property and inheritance laws</p>	<p>Threats: Narrowly regarded and defined by reproductive capacity</p> <p>At risk for early pregnancy and disease</p> <p>Limited belief in change, non-inspired</p>